

CHILD CARE AND DEVELOPMENT FUND PLAN

FOR STATE OF OREGON

FFY 2008-2009

This Plan describes the CCDF program to be conducted by the State for the period 10/1/07 - 9/30/09. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 165 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114)

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AMENDMENTS LOG

Child Care and Development Services Plan for For the period: 10/1/07 – 9/30/09

SECTION	EFFECTIVE/	DATE	DATE APPROVED
AMENDED	PROPOSED	SUBMITTED TO	BY ACF
THYILITYDED	EFFECTIVE DATE	ACF	
	EITECTIVE BITTE	7101	

Instructions:

- Lead Agency completes the first 3 columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) <u>and</u> the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the <u>same</u> Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

Page 4- Oregon Effective Date: October 1, 2007
Amended Effective: ____

PART 1 ADMINISTRATION

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 Lead Agency Information (as designated by State chief executive officer)

Name of Lead Agency: Employment Department, Child Care Division Address of Lead Agency: P.O. Box 14050, Salem, OR 97309-4050

Name and Title of the Lead Agency's

Chief Executive Officer: Laurie Warner, Director

Phone Number: 503-947-1477 Fax Number: 503-947-1472

E-Mail Address: laurie.a.warner@state.or.us

Web Address for Lead Agency (if any): www.oregon.gov/EMPLOY/CCD/index.shtml

1.2 State Child Care (CCDF) Contact Information (day-to-day contact)

Name of the State Child Care Contact (CCDF): Tom Olsen

Title of State Child Care Contact: Administrator Address: P.O. Box 14050, Salem OR 97309-4050

Phone Number: 503-947-1409 Fax Number: 503-947-1428

E-Mail Address: tom.l.olsen@state.or.us

Phone Number for child care subsidy program information (for the public) (if any):

503-945-6108

Web Address for child care subsidy program information (for the public) (if any):

http://www.oregon.gov/DHS/children/childcare/main.shtml

1.3 Estimated Funding

The Lead Agency <u>estimates</u> that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2007 through September 30, 2008. (§98.13(a))

CCDF: \$ 60,936,249

Federal TANF Transfer to CCDF: \$0

Direct Federal TANF Spending on Child Care: \$7,000,000 State CCDF Maintenance of Effort Funds: \$11,714,966

State Matching Funds: \$12,359,200 Total Funds Available: \$92,010,415

1.4 Estimated Administration Cost

The Lead Agency <u>estimates</u> that the following amount (and percentage) of Federal CCDF and State Matching Funds will be used to administer the program (not to exceed 5 percent): \$3,046,812 (5 %). (658E(c) (3), §§98.13(a), 98.52)

1.5 Administration of the Program

	ne Lead Agency directly administer and implement <u>all</u> services, programs and
activiti	les funded under the CCDF Act, <u>including</u> those described in Part 5.1 – Activities
& Serv	rices to Improve the Quality and Availability of Child Care, Quality Earmarks and
Set-As	ide?
	Yes.
	No. If no, use the table below to identify the name and type of agency that
	delivers services and activities. (If the Lead Agency performs the task, mark
	"n/a" in the box under "Agency." If more than one agency performs the task,
	identify all agencies in the box under "Agency," and indicate in the box to the

right whether each is a non-government entity.)

Service/Activity	Agency	Non-Government Entity (see Guidance for definition)
Determines individual		
eligibility:		
a) TANF families	Dept of Human Services (DHS)	Yes No
b) Non-TANF families	Child Care Division (CCD)	Yes No
Assists parents in locating care	Child Care Resource/Referral	⊠ Yes □ No
Makes the provider payment	DHS and CCD	Yes No
Quality activities	Numerous agencies	⊠ Yes ⊠ No
Other:		Yes No

If the Lead Agency uses outside agencies to deliver services and activities, describe how the Lead Agency maintains overall control.

The Lead Agency, through the approval of the Childhood Care and Education Coordinating Council (CCECC), sets the state-level priorities for spending on child care services and activities. As the Lead Agency, the Child Care Division (CCD) administers contracted payments to organizations and providers serving children in high risk populations.

The CCD maintains overall control by monitoring performance-based contracts for compliance with federal regulations and negotiated performance benchmarks. Contractors are required to submit quarterly or semi-annual performance reports.

Beginning July 1, 2007, the Oregon Commission for Child Care will be responsible for performance-based <u>reporting out</u> by all contracted agencies and organizations in addition to performance-based contracts held by the CCD. Contracts with agencies and organizations are negotiated to provide specific services funded under the CCDF Act as follows:

- Oregon Department of Human Services (DHS): administers the Integrated Child
 Care Program for children of low-income working families. DHS also contracts with
 Head Start programs to provide full-day/full-year care for children from low-income
 working families. DHS administers payments to providers caring for children of
 low-income working families through the Direct Pay Unit under and integrated child
 care subsidy program. See Attachment 1.5a for administrative rules regarding
 eligibility of children and child care providers under the subsidy program.
 PATT 2.2, 2.6, 3.1 to 3.4, 4.2, 4.3, 4.5, 5.6, 6.5
- <u>Center for Career Development in Childhood Care and Education</u>: administers early childhood and school-age care training curriculum development and monitors career development for child care providers and others in the child development field through the professional development system, The Oregon Registry and Oregon Registry Trainer System.

PATT 2.3, 2.5, 2.7

• <u>Department of Education</u>: administers grants to school districts to improve quality in child development and teen parent programs.

PATT 3.4, 3.5, 4.2, 4.5, 5.6

• Oregon Child Care Resource & Referral Network: a non-profit organization, administers contracts with local child care resource and referral agencies statewide to provide resource and referral information for parents and employers; deliver training to child care providers, and provide critical supply and demand data to state agencies and policymakers.

PATT 2.1 TO 2.3, 2.5, 2.7, 4.1, 4.3, 4.4, 5.4, 5.5, 6.1, 7.2, 7.3, 7.8

- Oregon Commission on Children and Families (OCCF): administers local grants to improve the quality of child care including infant and toddler, before and afterschool, non-traditional, sick, and special needs. These grants are guided by 36 county comprehensive plans, which include strategies for services and supports in the above mentioned areas.
 - Funds are allocated through a single contract between the Employment Department, Child Care Division, and the state Commission on Children and Families. The state commission requires local commissions in all 36 counties to submit quarterly reports and semi-annual monitoring and outcome reports.
 - O Local commissions lead a comprehensive planning process which maps and analyzes data, analyzes available services and supports, and identifies priorities and strategies needed to meet the needs of children 0 -18 years of age and their families. The local comprehensive plan is organized around 19 High Level Outcomes, one of which is to 'increase child care availability as measured by the number of child care slots available for every 100 children under age 13."

- O While the CCECC sets and approves the state-level priorities for the expenditures of CCDF quality dollars, local commissions have the flexibility to change the order of priorities based on the local planning process and community needs. Approved guidelines for the use of CCDF dollars by the counties are in **Attachment 1.5b.**
- o The state Commission on Children and Families reviews priorities selected by local commissions submitted as part of the Coordinated Comprehensive Plan and Updates for compliance with federal CCDF guidelines (45 CFR Parts 98 and 99), Oregon's CCDF State Plan for 2008-2209, and the priorities of the CCECC. The state commission shares summarized information with the CCD and the Oregon Commission for Child Care through the regular contract reporting process, to ensure the Lead Agency maintains overall responsibility of the CCDF dollars.

PATT 2.4, 4.3, 5.2, 4.5, 7.2, 7.3, 7.6, 7.8

- <u>High-Risk, Targeted Population contractors:</u> the Child Care Division enters into agreements with and makes payments to public and non-profit providers of child care services to migrant and seasonal farmworkers, teen parents, parents in substance abuse treatment, and children with special needs or disabilities.

 PATT 3.2, 3.3
- Oregon Council on Developmental Disabilities: the Child Care Division contracts with this Council which provides child care services for children with disabilities. The council emphasizes child care services for children that are inclusive, meaning child care placements that provide environments where children can regularly interact with their peers and participate in as many activities as possible. The Council also provides training to child care providers to increase their skills, abilities, and confidence levels in the care of children with disabilities, thereby increasing the availability statewide of this type of care.

PATT 3.3, 4.2 to 4.5

1.6 Use of Private Donated Funds

Will the Lead Agency use private funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2)?

\boxtimes	Yes.	If yes, are those funds:
		□ Donated directly to the State?

		Donated to a separate entity or entities designated to receive private donated funds?		
		How many entities are designated to receive private donated fund?		
		Provide information below for <u>each entity</u> : Name: Address: Contact: Type:		
		No.		
<u>1.7</u>	Use o	f State Pre-Kindergarten (Pre-K) Expenditures for CCDF-Eligible Children		
	1.7.1	During this plan period, will State expenditures for Pre-K programs be used to meet <u>any</u> of the CCDF maintenance of effort (MOE) requirement?		
		∑ Yes, and:		
		(X) The State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to $\$98.53(h)(1)$.		
		($20\ \%$) Estimated percentage of the MOE requirement that will be met with pre-K expenditures.(Not to exceed 20% .)		
		If the State uses Pre-K expenditures to meet more than 10% of the MOE requirement, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):		
	The Child Care Division and Department of Human Services collaborate with the Pre-K programs to provide full-day and full-year child care for children of low-income working families. CCDF funds are used to match Pre-K expansion grants awarded for full-day and full-year child care for working families. PATT 5.6			
		☐ No.		
	1.7.2	During this plan period, will State expenditures for Pre-K programs be used to meet <u>any</u> of the CCDF Matching Fund requirement? (§98.53(h))		
		Yes, and		

(30 %) Estimated percentage of the Matching Fund requirement that will be met with pre-K expenditures. (Not to exceed 30%.)

If the State uses Pre-K expenditures to meet more than 10% of the Matching Fund requirement, the following **describes** how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)):

The Child Care Division and Department of Human Services collaborate with the Pre-K programs to provide full-day and full-year child care for children of low-income working families. CCDF funds are used to match Pre-K expansion grants awarded for full-day and full-year child care for working families.

No.

1.7.3 If the State answered yes to 1.7.1 or 1.7.2, the following describes State efforts to ensure that pre-K programs meet the needs of working parents: (§98.53(h)(2))

The State provides CCDF funding for children eligible for the Employment Related Day Care program who also attend Head Start/Pre-K programs. This allows working families to have full-day and year-round child care.

1.8 Improper Payments

1.8.1 How does the Lead Agency define improper payments?

An improper payment occurs when a payment is made for care that was not provided, payment is made to an ineligible provider, or payment is made on behalf of a client who is not eligible for the amount of reimbursement that was paid.

1.8.2	Has your State implemented strategies to prevent, measure, identify, reduce
	and/or collect improper payments? (§98.60(i), §98.65, §98.67)

Yes, and these strategies are:

Approximately 200 billing forms are randomly selected each month for a desk audit. Providers send in their attendance logs, which are checked against the amount billed and client care record information. This has resulted in the discovery of overpayments, but the department of Human Services believes the main value is preventative since providers know they may be audited.

Provider records are matched monthly with TANF, Food Stamp, Medicaid and Child Care Subsidy client records to identify ineligible providers as well as questionable child care payments.

No. If no, are there plans underway to determine and implement s strategies?	uc
Yes, and these planned strategies are:	
No.	

PART 2 DEVELOPING THE CHILD CARE PROGRAM

2.1 Consultation and Coordination

Page 12- Oregon

2.1.1 Lead Agencies are required to *consult* with appropriate agencies and *coordinate* with other Federal, State, local, tribal (if applicable) and private agencies providing child care and early childhood development services (§98.12, §98.14(a),(b), §98.16(d)). Indicate the entities with which the Lead Agency has consulted or coordinated (as defined below), by checking the appropriate box(es) in the following table.

Consultation involves the meeting with or otherwise obtaining input from an appropriate agency in the <u>development of the State Plan</u>. At a minimum, Lead Agencies must consult with representatives of general purpose local governments (noted by the asterisk in the chart below).

Coordination involves the coordination of child care and early childhood development service delivery, including efforts to coordinate across multiple entities, both public and private (for instance, in connection with a State Early Childhood Comprehensive System (SECCS) grant or infant-toddler initiative). At a minimum, Lead Agencies must coordinate with (1) other Federal, State, local, Tribal (if applicable), and/or private agencies responsible for providing child care and early childhood development services, (2) public health (including the agency responsible for immunizations and programs that promote children's emotional and mental health), (3) employment services / workforce development, (4) public education, (5) Temporary Assistance for Needy Families (TANF), and (6) any Indian Tribes in the State receiving CCDF funds (noted by the asterisks in the chart below).

	Consultation in Development	Coordination with Service
Other Federal, State, local, Tribal (if applicable), and private agencies providing child care and early childhood development services.	of the Plan	Delivery
Public health	\boxtimes	⊠ *
Employment services / workforce development	\boxtimes	*
Public education		*
TANF	\boxtimes	*

Effective Date: October 1, 2007	
Amended Effective:	

	Consultation in Development of the Plan	Coordination with Service Delivery
Indian Tribes/Tribal Organizations, when such entities exist within the boundaries of the State		
Representatives of local government	*	
State/Tribal agency (agencies) responsible for		\boxtimes
State pre-kindergarten programs		
Head Start programs		\boxtimes
Programs that promote inclusion for children with special needs		
Emergency preparedness°		\boxtimes
Other (See guidance):		

^{*} Required.

For each box checked above, (a) identify the agency providing the service and (b) describe the consultation and coordination efforts. Descriptions must be provided for any consultation or coordination required by statute or regulation. If you have prepared an emergency preparedness plan related to your child care and early childhood development services, attach it as Attachment 2.1.1.

Development of Oregon's CCDF Plan is guided by the state's Childhood Care and Education Coordinating Council (CCECC). The Council is a collaborative, ad hoc partnership working to create a balanced system of care that supports and empowers working families and promotes safe, healthy, child development. The Council's role is to advise the Child Care Division (CCD) and other member agencies and organizations on:

- development of the federal CCDF plan;
- building the state's child care system infrastructure;
- coordination of programs and service delivery; and
- creation and prioritization of funding for new projects.

The CCECC is chaired by the Administrator of the Child Care Division. Meetings are open to all interested persons and are held bi-monthly. Membership includes representatives of the following agencies, organizations, and constituency groups:

Department of Human Services (DHS)/Child Care
Oregon Child Care Resource & Referral Network
Oregon Commission for Child Care
Oregon Family Child Care Network
Oregon Department of Education (ODE) – Head Start
Collaboration Project
ODE – Child Nutrition Programs

DHS – Child Protective Services
DHS – Family Health Services
Oregon Commission on Children and Families
Child Care Resource & Referral agencies
Center for Career Development in Childhood
Care and Education/Portland State Univ.
Assoc. for the Education of Young Children

ODE – Early Childhood Education
Oregon Student Assistance Commission
Provider Resource Organizations
Oregon Head Start Association
OregonASK (Afterschool for Kids)
Oregon Child Development Coalition
Parent Voice Project (6)
Early Intervention and Early Childhood
Special Education

Assoc. of Community Development Orgs.
Employment Department, Child Care Division
Oregon Council on Developmental Disabilities
Oregon State Library
Oregon Association of Child Care Directors
DHS – Drug and Alcohol Prevention
Oregon Child Care Research Partnership
Oregon Community Foundation

The CCD consults with the Oregon Commission for Child Care, an 18-member body appointed by the Governor and Legislative leadership. The Commission provides a biennial report to the Governor and Legislative Assembly on the 'state of child care in Oregon' in odd number years during the legislative session. Recommendations on child care issues from this report are incorporated into the state CCDF Plan. The Commission also shares an accountability role with the CCD, through reports to the Commission from CCDF funded agencies and programs.

The CCD also consults with the state Commission on Children and Families, consisting of members appointed by the Governor and Legislative leadership. State commission staff support the membership and the work of the local commissions in each of the 36 counties. This statewide system focuses on prevention-based services and support for children 0 -18 years of age and their families. The state and local commissions are designated in statute as the lead conveners of the Coordinated Comprehensive Plan which includes planning for early childhood care and education.

Each of Oregon's nine federally recognized Tribes are provided copies of the draft plan and are encouraged to comment.

To achieve the widest involvement possible in the CCDF planning process, the Council provided the draft plan through the networks of each partner agency and organization. The draft plan was available for comment on the Child Care Division website for over 60 days. Additionally, a logic model developed in 2005 was updated in February 2007 and used for services gap analysis in the development of this plan (Attachment 2.1.1A). **PATT 5.1 to 5.3, 6.1 to 6.4, 6.6, 7.4 to 7.8**

2.1.2	State Plan for Early Childhood Program Coordination. <i>Good Start, Grow Smart</i> encourages States to develop a plan for coordination across early childhood programs. Indicate which of the following best describes the current status of the State's efforts in this area. Note: Check only ONE.					
		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 is expected to support early language, literacy, pre-reading and early math concepts.				
		Developing. A plan is being drafted. The draft is included as Attachment 2.1.2 .				

Developed . A plan has been written but has not yet been implemented.
The plan is included as Attachment 2.1.2 .
Implementing . A plan has been written and is now in the process of
being implemented. The plan is included as Attachment 2.1.2 .
Other (describe):

Please see Attachment 2.1.2 for a more comprehensive description of Oregon's work on Early Childhood Foundations.

Describe the progress made by the State planning for coordination across early childhood programs since the date of submission of the 2006-2007 State Plan.

Oregon's Early Childhood Systems Plan was developed through a strategic two-year process that engaged numerous and diverse stakeholders – organizations, agencies, and individuals – throughout the state. The Plan builds on previous work and existing strengths, and promotes the combined efforts of parents and multiple partners to achieve positive outcomes for young children and their families.

The Early Childhood Systems Plan was developed with specific child and family outcomes clearly in mind. They are imbedded in our vision, and they include crucial Oregon benchmarks as well as previously endorsed shared outcomes that reflect the goals of Oregon's legislatively supported early childhood system.

Indicate whether there is an entity that is responsible for ensuring that such coordination occurs. Indicate the four or more early childhood programs and/or funding streams that are coordinated and describe the nature of the coordination.

The statewide Partners for Children and Families (PCF) is the lead coordination entity for the early childhood system in Oregon. By statute, the Oregon Commission for Children and Families is the lead agency and staffs the PCF, committees, and workgroups.

PATT 5.2, 5.4, 7.2, 7.3

Describe the results or expected results of this coordination. Discuss how these results relate to the development and implementation of the State's early learning guidelines, plans for professional development, and outcomes for children.

The Plan is designed to facilitate the following outcomes:

Children are healthy, safe and thriving

More children will show appropriate patterns of growth and development More Oregonians, including children, will have access to affordable health insurance

More two-year-olds will be adequately immunized

More parents and children will have access to alcohol/drug treatment and mental health services

Fewer infants will have mothers who used alcohol and/or tobacco during pregnancy

More women will access early prenatal care

More pregnant women with chemical dependency issues will access treatment

The number of quality child care settings will increase

The rate of child abuse and neglect in Oregon will decline

Fewer children will need to be removed from their homes

Infant mortality rates will drop

Children live in nurturing families and caring communities

Families will gain increased skills in parenting their children More parents will read to their children regularly

Children have services, supports, resources, and relationships needed to reach their full potential

Quality child care will be available and accessible for more families who need it

A greater number of children with identified conditions and special needs will receive appropriate services in community-based settings

More children with special needs will receive care appropriate to their needs A greater percentage of children will enter school ready to learn

Develop A Professional, Culturally Proficient Workforce

Promote the development and retention of a professional, culturally proficient, and developmentally informed workforce across all early childhood services and supports.

Identify core knowledge and skill competencies needed by all providers who touch the lives of young children and families.

Incorporate core competency training into cross-system, component-specific, and specialty discipline pre-service, professional development, and continuing education offerings.

Strengthen and expand early childhood training opportunities across disciplines, based on mapping of needs and opportunities.

Promote the implementation of minimum qualifications and standards for early childhood providers whose disciplines do not currently offer licensing or credentialing.

Develop a cross-agency early childhood training plan.

Promote supports and incentives to encourage professional development (including but not limited to articulation, transfers, tiered reimbursement, and tuition subsidies).

Develop mechanisms to recruit and retain sufficient numbers of providers to meet community needs (including but not limited to early childhood dental and mental health providers).

Improve telemedicine capacity to compensate for rural provider shortages. Develop mechanisms to identify and disseminate evidence-based practice information to providers throughout the system.

Support livable wages and adequate benefits for the early childhood workforce.

Describe how the State's plan supports or will support continued coordination among the programs. Are changes anticipated in the plan?

Oregon's Child Care and Development Fund plan provides the foundation for planning and funding for child care regulation, professional development, referral and resources for parents and providers, and subsidies for low-income working parents and those transitioning from public assistance. Child care is a key component of the early childhood system.

2.2 Public Hearing Process

Describe the Statewide 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 must provide:

Date(s) of statewide notice of public hearing: May 29, 2007

Manner of notifying the public about the statewide hearing: Hearing notices were posted on the Lead Agency website and made available to interested parties, state and local agencies, organizations, and Tribal governments. Notice of Hearing was printed in several statewide newspapers of general circulation at least 20 days before the scheduled hearing. A transcript of the public hearing is on file at the Lead Agency office. A copy of the hearing notice is included in **Attachment 2.2a.**

Date(s) of public hearing(s): June 26, 2007

Hearing site(s): Roth's West Salem, Doaks Ferry Room, Salem, Oregon. How the content of the plan was made available to the public in advance of the public hearing(s): The content of the plan was made available to the general public and statewide constituency groups through the members and committees of the Childhood Care and Education Coordinating Council. The plan was also posted on the Lead Agency website www.childcareinoregon.org for over 60 days with an electronic submissions form and made available to all local child care resource and referral agencies and local Commissions on Children and Families. Notification of the website posting was sent to all members of the Childhood Care and Education Coordinating Council (30+), all CCECC Committees and members, Oregon Tribes, and 36 local Commissions on Children and Families.

A brief summary of both electronic and mailed public comments from this process is included in **Attachment 2.2b.**

2.3 Public-Private Partnerships

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?

- Yes. If yes, **describe** these activities or planned activities, including the results or expected results.
- 1) Oregon Commission for Child Care: The commission is comprised of 18 members appointed by the Governor, Speaker of the House and President of the Senate. The commission includes legislators, business members, parents, and advocates. It reports to the Governor and Legislative Assembly, advises the Lead Agency on child care policy, and has a leadership role in holding child care partners accountable for their use of Child Care and Development Funds.

Result: Extensive public input to child care policy through statewide hearings on child care issues. This information is used to develop legislation and advocacy to improve the child care system. While the Lead Agency contracts CCDF dollars through performance based contracts, actual reporting on the use of those funds is made to the Commission. This reporting mechanism combines the role of the Commission on setting child care policy with ensuring those policies are implemented within the overall child care system.

PATT 6.1, 7.2, 7.3, 7.5, 7.6

2) Childhood Care and Education Coordinating Council (CCECC): The Council is comprised of representatives from state and private non-profit agencies, advocates, and consumers. It is responsible for development of the federal child care plan, coordination of activities of agencies and partners to develop new programs and avoid duplication of effort, and making recommendations on funding.

<u>Result</u>: Coordination, communication, and dissemination of information throughout Oregon's child care community; elimination of duplication of effort. **PATT 3.5, 5.1 to 5.3, 6.1 to 6.4, 7.4 to 7.8**

- 3) Child Care Quality Indicators Project is a public/private partnership of the Child Care Division, a local Commission on Children and Families, the Oregon Child Care Resource and Referral Network, and private funders. The project has developed an information system about the quality of local child care to disperse to the public in Multnomah County with plans to expand statewide. The project collects data from child care centers to establish the levels on seven research based indicators. The project focuses on structural indicators of child care quality that research has demonstrated to be associated with child outcomes:
 - Ratio of children per adult
 - Group size
 - Education or specialized training of teachers/caregivers
 - Teacher compensation level
 - Staff turnover or stability in caregiver-child relationships
 - Accreditation
 - Substantiated complaints

Effective Date: October 1, 2007	
Amended Effective:	

Result: Parents have more information to select child care. They are able to use quality indicator reports to compare different characteristics that are important to them and their child's development. Child care providers are able to compare themselves to other providers on these quality indicators. They identify areas in which they are outstanding and others in which they want to improve. Quality Indicators are a strategic planning, marketing and fundraising tool. Community members and funders have increased levels of accountability as areas in need of investment will be clearer, and impacts of investments can be measured. The community will invest in child care centers with increased confidence that outcomes will improve.

PATT 2.1, 2.3

4) Child Care Health Consultation Program is a partnership between Oregon's child care partners, Department of Human Services/Office of Family Health Services, Oregon Pediatric Society, local Commissions on Children and Families, and local health providers. The program aimed at developing a state-wide system of physical and mental health consultation to providers. Each program site works to provide relevant information to child care providers, increase access to health services, and improve collaborations within the local community. Consultation regarding children's social-emotional development and behavior in child care is strengthened with consultation methods learned through the Promoting First Relationships training. A mental health specialist and/or early childhood educator is also included on each core team.

<u>Result</u>: Improvement of children's physical and mental health through provider health education and consultation services, particularly for children that may lack access to those services.

PATT 4.3, 4.5

5) **Inclusive Child Care Program** is a partnership between state agencies and advocates for children with special needs. The program is aimed at giving child care providers the information, training, and support they need to care for children with special needs, and developing subsidies for families based on the needs of the child.

Result: Inclusion of children with special needs in normal child care settings.

PATT 3.3, 4.2 to 4.5

6) Partnership in Inclusive Child Care (PICC) is a training project to increase the number of regulated child care providers caring for children who have special needs. Individuals are trained to provide the Teaching Research Assistance to Childcare providers (TRAC) inclusion curriculum developed at Western Oregon University. The TRAC curriculum is designed to give providers information and skills to increase their ability to serve children with special needs. Participants in the local trainings are linked to other community resources that support inclusive child care. Examples of linked resources include consultation, mentoring, technical assistance and financial assistance. An additional cohort group of eight trainers

will be funded in 2008-2009 along with trainer support services for the original two cohort groups.

<u>Result</u>: Increase the skills, abilities, and confidence levels of child care providers to provide care for children with disabilities.

PATT 4.4

Project, through an agreement with a participant community colleges, enables child care providers enrolled on The Oregon Registry to receive college credit for community-based education and training. The project also enables providers that do not have access to community college services in their community to receive education and training credit through on-line enrollment in accredited courses. With overall project completion anticipated in late 2007 or early 2008, this program will establish a two-year Associates Degree in Early Childhood Education that is more accessible to child care providers. One community college, Southwestern Oregon Community College, has provided their entire ECE two-year degree program on-line. Several other community colleges are moving to more online class offerings.

Result: Access to higher education in early childhood development for child care providers that 1) have not felt they could attend college, and 2) have not had access to post-secondary educational opportunities, 3) have extensive backgrounds and hours in community-based education and training but do not have college credit. Seven of 17 Oregon community colleges articulate Step 7 of The Oregon Registry into community college credit applicable to a two-year ECE degree.

PATT 5.5

8) Infant/Toddler Mental Health Certificate Program is a graduate level Certificate of Completion opportunity offered by Portland State University. This distance learning program offers multidisciplinary professionals working with children age 0 to 36 months old and their families opportunities to increase their knowledge about current research and interventions in infant mental health. A partner organization, Oregon Community Foundation, has subsidized several positions for child care providers to participate.

<u>Result:</u> Enhanced child care provider understanding of early childhood mental health needs and interventions; increased number of early childhood professionals with infant mental health expertise.

PATT 4.2 to 4.5

9) Child Care Resource and Referral System Task Force: This task force comprised of 16 volunteers from both public and private entities was appointed by the Oregon Child Care Resource and Referral Network Board. The task force engaged in an nine month process to develop and approve recommendations on how the statewide child care resource and referral system does business. The assessment included a reevaluation of structure, assessing and prioritizing services, and recommendations for systems change.

Results: The final recommendations will be reviewed and approved by the OCCRRN Board in June 2007 and will serve as a tool to guide the developed of a detailed implementation plan for changes and improvements in the overall CCR&R system. Implementation will occur in 2008 and 2009.

10) Early Childhood System – State and Local Teams: The State Early Childhood Team (ECT) with members from many state and local entities was established to address systemic issues relating to early childhood in Oregon. Oregon law provides the vision, goals and requirements of the Oregon Early Childhood System for children zero to eight years of age and their families. The ECT charter defines the scope of their work within the parameters of the statutes.

Oregon law also established local ECTs in every county to work at achieving outcomes at a community level. Early intervention, early childhood special education, education service districts, Head Start, Healthy Start, child care resource and referral agencies among other interested partners are represented in the planning.

Results: The state team has crafted quality assurance standards for early childhood and has identified benchmarks (high level outcomes) and intermediate outcomes to measure systemic progress in early childhood. The state team is working to further develop and connect the major components (childcare and early education, healthcare, mental health, parent education, and family support) of the early childhood system, and to provide training, technical assistance and other resources to local ECTs. County comprehensive plans for children and families demonstrate what is being accomplished through local ECTs to improve early childhood systems at the local level.

PATT 5.2, 5.4, 7.2, 7.3, 7.6, 7.8

11) Oregon Child Care Research and Data Capacity Project conducts research related to child care policy at the state level; research that is also relevant at the national level. The Project brings together university-based researchers, state agency child care staff, and the Oregon Child Care Resource and Referral Network under the leadership of the state Child Care Administrator. The Partnership facilitates data sharing, coordinates program evaluation to ensure that Oregon is building a shared body of knowledge about program effectiveness and impact, and supports the Child Care Administrator's child care system accountability efforts.

<u>Results:</u> Increased accountability for core components of the Oregon child care system through performance measurement and program evaluation. Increased knowledge of the effectiveness and impact of child care system investments.

PATT 7.1

12) Child Care Contribution Tax Credit - Child Care Enhancement Project (CCEP) and Child Care Community Fund (3CF) are two local programs that address child care affordability, provider compensation, and quality environments. Individuals and businesses receive state tax credits for contributions to the Child Care Fund. Contributions funds are used to simultaneously address the

fundamental child care issues: lack of affordability, provider compensation, and quality environments. The project is remarkable because of its funding, a first in the nation child care contribution tax credit, and because it addresses the three core issues simultaneously. Evaluation results from the CCEP project showed very positive achievement of the original legislative intent. Those results were used to slightly modify the second 3CF project. The sunset date for this tax credit was extended to 2012 by the 2007 Legislative Assembly.

<u>Results:</u> In addition to achieving affordable, high quality child care with caregivers being compensated more commensurate with their education and training, the project will document cost and the effectiveness of the contribution tax credit. **PATT 7.1**

13) **Oregon Child Care Online Training Calendar** provides statewide access to community based early childhood, school age, and required training for licensing. Training in alternate languages is also listed, for example: Spanish, Russian, Vietnamese, and Chinese. The calendar provides information by county, training category and core knowledge areas. Conferences of interest to providers are also listed. Future enhancements to the calendar include video-based training, review and reflects, and other training alternatives. The calendar can be accessed at: www.oregonchildcaretraining.org

<u>Results:</u> Child care providers, school age practitioners, early childhood educators and the general public can access training information 24/7. Over 500 training events are listed at any time. Family and center-based providers can access training for licensing requirements outside of their county if nothing is available locally.

PATT	2.7, 5.4, 5.5
	No.

PART 3 CHILD CARE SERVICES OFFERED

3.1 Description of Child Care Services

PATT 3.3, 3.2, 3.3, 3.4, 4.3, 4.5, 5.6, 6.5,

3.1.1 Certificate Payment System

Describe the overall child care certificate process, including, at a minimum: (1) a description of the form of the certificate (98.16(k));

Parents receive a 'certificate of eligibility' in the form of a computer-generated notice when eligibility is determined.

(2) a description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to choice of the provider; (658E(c)(2)(A)(iii), 658P(2), 98.2, 98.30(c)(4) & (e)(1) & (2)) and

Typically, a family has already chosen a provider by the time it applies for the child care subsidy. If not, consumer education services are provided that emphasize the right of parental choice and how to choose providers who understand and employ appropriate health, safety and quality program practices. Once eligibility is established, a child rebilling form is issued to the provider chosen by the family

(3) if the Lead Agency is also providing child care services through grants and contracts, estimate the <u>proportion of §98.50 services available through certificates versus grants/contracts</u>, and explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (98.30(a) & (b)) This may be expressed in terms of dollars, number of slots, or percentages of services.

Attach a copy of your eligibility worker's manual, policy handbook, or other printed guidelines for administering the child care subsidy program as **Attachment 3.1.1.** If these materials are available on the web, the State may provide the appropriate Web site address in lieu of attaching hard copies to the Plan.

Note: Eligibility worker's manuals, policy handbooks, or other printed guidelines for administering a child care subsidy program will be used for reference purposes only. Documents provided by Lead Agencies pursuant to this section will not be uniformly or comprehensively reviewed and will not be considered part of the Plan. All information required to be part of the Plan must continue to be set forth in the Plan.

At the time of application and intake, parents are informed they may choose the option of a certificate (voucher) to purchase child care. If a parent selects this option, the Lead Agency enters into contracts with the provider of choice. The Department of Human Services requires the provider of choice to become listed and issues payments directly to the provider. The majority of parents choose the certificate program. In FFY 2006, the certificate and/or cash option was selected by parents for child care services for approximately 46,230 children, almost 95 percent of all child care services funded by the CCDF in Oregon.

CCDF in Oregon.					
3.1.2	In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?				
		Yes, and the following describes the types of child care services, the process for accessing grants or contracts, and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))			
contract the pro a) pare high so	cts with oviders lents eng chool co	fied for targeted, high risk services have access to child care through community based programs. These contracts do not pay for slots; rather, bill the lead agency for services provided. Targeted populations include: aged in migrant and seasonal farm worker jobs; b) teen parents enrolled in empletion programs; c) parents participating in state-approved substance int; and, d) children with disabilities who need access to child care.			
child c	are is d lity doe	or services is processed by intake workers at program sites. Eligibility for etermined immediately upon parent admission. Point of entry to point of s not exceed five working days. Parents requesting their own choice of ive a certificate to purchase another option.			
for ful	l-day, fı	cy also provides CCDF funds through the Department of Human Services all-year Head Start slots. These slots are available in a full range of child including centers and family child care homes.			
		No.			
3.1.3		ead Agency must allow for in-home care but may limit its use. Does ead Agency limit the use of in-home care in any way?			
		Yes, and the limits and the reasons for those limits are: ($\$\$98.16(g)(2)$, $98.30(e)(1)(iv)$)			
	\boxtimes	No.			
3.1.4		nild care services provided through certificates, grants and/or contracts d throughout the State? $(658E(a), \S98.16(g)(3))$			

	Yes.
	No, and the following are the localities (political subdivisions) and the services that are not offered:
3.2	Payment Rates for the Provision of Child Care
	The statute at 658E(c)(4) and the regulations at §98.43(b)(1) require the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care.
	These rates are provided as Attachment 3.2A.
	The attached payment rates were or will be effective as of October 1, 2007 .
	Provide a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:
	• The month and year when the local market rate survey(s) was completed: <u>June 2006</u> . (§98.43(b)(2))
	• A copy of the Market Rate Survey instrument and a <u>summary of the results</u> of the survey are provided as Attachment 3.2B . At a minimum, this summary should include a description of the sample population, data source, the type of methodology used, response rate, description of analyses, and key findings (See Guidance for additional information.)
	• Does the Lead Agency use its <u>current</u> Market Rate Survey (a survey completed within the allowable time period -10/1/05 -9/30/07) to set payment rates?
	Yes.
	☐ No.
	At what percentile of the <u>current</u> Market Rate Survey is the State rate ceiling set? If you do not use your current Market Rate Survey to set your rate ceilings or your percentile varies across categories of care (e.g., type of setting, region, age of children), describe and provide the range of variation in relation to your current survey. (See Guidance for additional information.)
	Oregon's ceiling rate varies depending on rate areas and types of care, but the average is approximately at the 75 th percentile.

• How the payment rates are adequate to ensure equal access to the full range of providers based on the results of the above noted local market rate survey (i.e., describe the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

Effective October 1, 2007, Oregon's maximum payment rates equal the 75th percentile of market rates observed in the 2006 Oregon Child Care Market Rate Study. Also, the ERDC income limit has increased from 150% of the Federal Poverty Level (FPL) to 185% FPL, and co-payments have been reduced by an average of 20%. The 2007-2009 budget also includes additional funding through the current child care training system to help license-exempt family, friends and neighbor child care providers meet DHS enhanced rate requirements.

In addition.

- Oregon has invested more heavily in the Child Care Resource and Referral system than many other states. For the 2007-2009 biennium, the subsidy program will pay \$1.8 million to CCR&Rs for enhanced services to DHS clients and providers who participate in the subsidy system. Many CCR&R staff specialize in helping subsidy parents find care, including hard to find care such as infant and odd hour care. Also, CCR&R staff help providers serving subsidy clients by offering technical assistance with subsidy questions, troubleshooting payment problems, and advocating with the client and caseworker on behalf of the provider. As a result, 88 percent of centers and 87 percent of family providers in the CCR&R database from which the Market Rate study results are drawn report they are willing to serve subsidy clients.
- Oregon has a reliable provider payment system. Once a provider is entered on the provider pay system, payments are typically received within a week after the provider bills DHS for the care they provided. Billing forms are sent to the provider in advance of the care being provided and the provider can be certain they will be paid for the authorized care they provide. Providers, particularly in low-income areas, report that an advantage to caring for children on the subsidy is that they can count on at least the subsidy portion of the child care bill being paid. They can't always do that with families who are not receiving the subsidy. Oregon DHS will have Direct Deposit available to child care providers by January 2008.
- Subsidy program enhancements have increased access to some types of care that are generally difficult to find. For children with especially high needs, payment up to approximately 300 percent of the maximum rate can be authorized based on an individual assessment of the additional care a child requires in a child care setting. Parents who require more than the typical number of child care hours can receive up to 150 percent of the maximum rate. This includes parents who work an overnight shift and require child care for both work and sleep time and parents who need two providers to cover both weekday and weekend care.
- Does the Lead Agency consider any additional facts to determine that its payment rates ensure equal access? (§98.43(d))

Effective Date: October 1, 2007	
Amended Effective:	_

		\boxtimes	Yes. If, yes, describe.
	encour		orts a strong child care resource and referral system that educates and amilies to make informed choices and helps them access child care that eds.
			No.
	•	center	the State have a tiered reimbursement system (higher rates for child care s and family child care homes that achieve one or more levels of quality d basic licensing requirements)?
			Yes. If yes, describe :
		\boxtimes	No.
3.3	Eligib	ility Cr	riteria for Child Care
	3.3.1	Age E	ligibility
	3.3.1	Does to but be (Physical Physical Physi	the Lead Agency allow CCDF-funded child care for children above age 13 low age 19 who are physically and/or mentally incapable of self-care? ical and mental incapacity must then be defined in Appendix 2.) (c)(3)(B), 658P(3), §98.20(a)(1)(ii))
	3.3.1	Does to but be (Physical Physical Physi	the Lead Agency allow CCDF-funded child care for children above age 13 low age 19 who are physically and/or mentally incapable of self-care? cal and mental incapacity must then be defined in Appendix 2.)
	3.3.1	Does to but be (Physical (658E)	the Lead Agency allow CCDF-funded child care for children above age 13 low age 19 who are physically and/or mentally incapable of self-care? cal and mental incapacity must then be defined in Appendix 2.) (c)(3)(B), 658P(3), §98.20(a)(1)(ii))
	3.3.1	Does to but be (Physic (658E) Does to but be	the Lead Agency allow CCDF-funded child care for children above age 13 low age 19 who are physically and/or mentally incapable of self-care? ical and mental incapacity must then be defined in Appendix 2.) (c)(3)(B), 658P(3), §98.20(a)(1)(ii)) Yes, and the upper age is 17.
	3.3.1	Does to but be (Physic (658E) Does to but be	the Lead Agency allow CCDF-funded child care for children above age 13 low age 19 who are physically and/or mentally incapable of self-care? ical and mental incapacity must then be defined in Appendix 2.) (c)(3)(B), 658P(3), §98.20(a)(1)(ii)) Yes, and the upper age is17 No. the Lead Agency allow CCDF-funded child care for children above age 13 low age 19 who are under court supervision? (658P(3), 658E(c)(3)(B),

3.3.2 Income Eligibility

<u>Complete columns (a) and (b) in the matrix below.</u> Complete Columns (c) and (d) <u>ONLY IF</u> the Lead Agency is using income eligibility limits <u>lower</u> than 85% of the SMI.

			IF A	PPLICABLE
Family	(a) 100% of State Median	(b) 85% of State Median Income	Income Level, lower than 85% SMI, if used to limit eligibility	
Size	Income (SMI) (\$/month)	(SMI) (\$/month) [Multiply (a) by 0.85]	(c) \$/month	(d) % of SMI [Divide (c) by (a), multiply by 100]
1			n/a	n/a
2	\$3,471	\$2,950	\$2,111	61%
3	\$4,288	\$3,644	\$2,648	62%
4	\$5,104	\$4,339	\$3,184	62%
5	\$5,921	\$5,033	\$3,721	63%

If the Lead Agency does not use the SMI from the most current year, **indicate** the year used: FFY 2007

If applicable, indicate the date on which the eligibility limits detailed in column (c) became or will become effective: October 1, 2007 (185% of federal poverty level)

How does the Lead Agency define "income" for the purposes of eligibility? Describe and/or include information as **Attachment** N/A. (§§98.16(g)(5), 98.20(b))

Countable income includes all income received by immediate family members living in the household except transfer income or earned income of children. There are no income deductions.

• Is any income deducted or excluded from total family income (for instance, medical expenses; child support paid to, or received from, other households Supplemental Security Income (SSI) payments)?		spenses; child support paid to, or received from, other households;
		Yes. If yes, describe what type of income is deducted or excluded from total family income.
	\boxtimes	No.

• Is the income of all family members included?

	\boxtimes	Yes.
		No. If no, describe whose income is excluded for purposes of eligibility determination.
3.3.3	Eligib	ility Based Upon Receiving or Needing to Receive Protective Services
		he State choose to provide child care to children in protective services, as d in Appendix 2? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))
		Yes.
		No.
becom	e availa	ng levels do not allow services to this population. If additional funds able, Oregon would serve this population if the statewide Childhood Care a Coordinating Council approved funding for this population as a priority.
	income receive	e Lead Agency elected to waive, on a case-by-case basis, the fee and e eligibility requirements for cases in which children receive, or need to e, protective services, as defined in Appendix 2? (658E(c)(3)(B), 3)(C)(ii), §98.20(a)(3)(ii)(A))
		Yes.
		No.
		Not applicable. CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.
	care w	he State choose to provide CCDF-funded child care to children in foster hose foster care parents are <u>not</u> working, or who are <u>not</u> in ion/training activities? (§§98.20(a)(3)(ii), 98.16(f)(7))
		Yes. (NOTE : This means that for CCDF purposes the State considers these children to be in protective services.)
		No; however, the State of Oregon chooses to provide child care to children in foster care whose foster parents are working, or who are in education/training activities.

Payments to working foster care parents are allowed under Oregon's definition, but current funding levels do not allow services to this population. If additional funds become available, Oregon would serve this population if the statewide Childhood Care and Education Coordinating Council approved funding this population as a priority.

Has the Lead Agency established additional eligibility conditions? (658E(c)(3)(B), §98.16(g)(5), §98.20(b)) ☐ Yes, and the additional eligibility conditions are: (<u>Terms must be defined in Appendix 2</u>) No.

3.4 Priorities for Serving Children and Families

3.3.4 Additional Eligibility Conditions

3.4.1 Complete the table below regarding eligibility conditions and priority rules. For columns (a) through (d), check box if reply is "Yes". Leave blank if "No". Complete column (e) if you check column (d).

Eligibility Category Children with	(a) Guarantee subsidy eligibility	(b) Give priority over other CCDF- eligible families	(c) Same priority as other CCDF- eligible families	(d) Is there a time limit on guarantee or priority?	(e) How long is time limit?
special needs					
Children in families with very low incomes					
Families receiving Temporary Assistance for Needy Families (TANF)					
Families transitioning from TANF					
Families at risk of becoming dependent on TANF	\boxtimes				

3.4.2 Describe how the State prioritizes service for the following CCDF-eligible children: (a) children with special needs and (b) children in families with very low incomes. Terms must be defined in Appendix 2. (658E(c)(3)(B))

Children eligible for services are listed and defined in **Appendix 2.** Targeted high-risk populations served by the Lead Agency include children of teen parents, children of migrant and seasonal farm workers, children of parents in alcohol and drug treatment programs, children with special needs.

The Department of Human Services subsidy program serves children from incomeeligible families (families with very low incomes). Additionally, children with special needs can receive supplemental reimbursement based on an individual needs assessment.

3.4.3 Describe how CCDF funds will be used to meet the needs of: (a) families receiving Temporary Assistance for Needy Families (TANF), (b) those attempting to transition off TANF through work activities, and (c) 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))

CCDF subsidies are used to meet the needs of families by helping them achieve self-sufficiency through safe, dependable child care that is necessary for employment and participation in other activities. Child care is available through the subsidy agency for families who:

- a) Receive TANF benefits and become employed, both while they remain on TANF and as a transition benefit when they are no longer eligible for TANF;
- b) are participating in JOBS activities to become self-sufficient; or
- c) are at risk of becoming dependent on TANF benefits.

3.4.4	Has the Lead Agency established additional priority rules that are not reflected in the table completed for Section 3.4.1? $(658E(c)(3)(B), \$98.16(g)(5), \$98.20(b))$			
		Yes, and the additional priority rules are: (<u>Terms must be defined in Appendix 2</u>)		
		No.		
3.4.5	Does the Lead Agency serve all eligible families that apply?			
	\boxtimes	Yes.		
		No.		

	3.4.6	Does the Lead Agency maintain a waiting list?				
		Yes. If yes, for what populations? Is the waiting list maintained at the State level? Are certain populations given priority for services, and if so, which populations? What methods are employed to keep the list current?				
		No.				
3.5	Slidin	g Fee Scale for Child Care Services				
	3.5.1	A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on income and the size of the family A copy of this sliding fee scale for child care services and an explanation of how it works is provided as Attachment 3.5.1.				
		The attached fee scale was or will be effective as of October 1, 2007 .				
		Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))				
		Yes, and the following describes any additional factors that will be used:				
		⊠ No.				
	3.5.2	Is the sliding fee scale provided in the attachment in response to question 3.5.1 used in <u>all</u> parts of the State? $(658E(c)(3)(B))$				
		⊠ Yes.				
		No, and other scale(s) and their effective date(s) are provided as Attachment 3.5.2 .				
	3.5.3	The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, ($\S98.42(c)$), and the poverty level used by the Lead Agency for a family of 3 is: \S 2,648.				
		The Lead Agency must select ONE of these options:				
		 □ ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. □ ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee. □ 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 following describes these families: 				

- High risk targeted populations
 - o Migrant and seasonal farmworkers
 - Teen parents
 - o Children with a parent(s) in an alcohol or drug program
 - o Children with disabilities
- o families receiving TANF benefits
- o JOBS participants, and
- o families receiving child care as a part of Head Start services.

3.5.4	Does the State allow providers to charge parents the difference between the
	maximum reimbursement rate and their private pay rate?

Yes. Under Targeted High Risk Populations only, providers are not allowed to charge parents the difference between maximum reimbursement rates and their private pay rate, or a one-time registration fee as these parents are in the 'high risk' population category and could not afford to pay the difference and stay in the
program. The only 'fee' the parent is responsible to pay is the co-payment, if applicable.
□ No.

3.5.5 The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) were determined to be affordable: (§98.43(b)(3))

The sliding fee scale is based on income and size of the family. Co-payments are waived for families enrolled in the TANF program who require child care subsidy to participate in employment or JOBS program activities. Families eligible for the Employment Related Day Care program and earning less than 100 percent of Federal Poverty Level (for their family size) are responsible for a co-payment that is ten percent or less of their incomes. Those families earning more than 100 percent of Federal Poverty Level are responsible for a co-payment that is 7.5 percent of their income.

Teen parents in high school completion programs and parents in state-approved alcohol and drug treatment programs who are at or below poverty levels are exempt from the copayment and thus are eligible for fully subsidized care.

PART 4 PARENTAL RIGHTS AND RESPONSIBILITIES

4.1 Application Process / Parental Choice

- 4.1.1 Describe the process for a family to apply for and receive child care services $(658D(b)(1)(A), 658E(c)(2)(D) \& (3)(B), \S\S98.16(k), 98.30(a)$ through (e)). At minimum, the description should include:
 - How parents are informed of the availability of child care services and about child care options
 - Where/how applications are made
 - What documentation parents must provide
 - How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4
 - Length of eligibility period including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs
 - Any steps the State has taken to reduce barriers to initial and continuing eligibility for child care subsidies

Attach a copy of your parent application for the child care subsidy program. If the application is available on the web, provide the appropriate Web site address (application must still be attached to Plan):

http://www.oregon.gov/DHS/children/childcare/main.shtml

The subsidy agency contracts with the Child Care Resource and Referral (CCR&R) agencies throughout the State to provide consumer information and education about Oregon's child care programs. The CCR&Rs also help child care providers with equipment costs to come into compliance with health and safety requirements. Families who may be eligible for a child care subsidy are referred to Department of Human Services field offices. Applications may be requested by phone and are also accepted by mail. When a complete application is received, eligibility is usually determined within five to ten days. Eligibility must be determined within 45 days from the date of request for assistance.

A family's eligibility, once approved, begins with the month in which assistance was requested. Parents receive assistance in selecting a child care provider if they do not already have one. A provider listing form is given to the parent(s) to be completed by the provider of choice. If the provider meets initial health and safety requirements, he/she is listed on the subsidy agency's provider payment system, and a criminal and child abuse records check is completed. The payment system issues the initial and subsequent billing forms directly to the provider.

Parents who receive TANF benefits are informed about the exception as described in 4.4 below.

The length of client eligibility varies depending on the benefit program and stability of family income. Redetermination of client eligibility is required periodically, generally every three to six months. The client must provide verification of earned income from the past two months, changes in unearned income and other questionable information if needed to determine eligibility. If the child is enrolled in a contracted Head Start collaboration program, eligibility may extend to the end of the Head Start program year.

<u>Targeted Services</u>: Parents involved in a high risk population program are informed of the availability of child care through designated programs and assisted by program staff in determining the type of care most appropriate for their situation. The application for child care is available to parents participating in targeted programs described in Section 3.4 and processed on-site by an intake worker.

The length of eligibility varies depending on the targeted population program and stability of family income. Re-determination of eligibility is required every 12 months or as determined due to changes to the eligible family unit.

PATT 2.2, 3.3, 3.4, 4.1, 4.3, 4.55.6, 6.5

4.1.2	Is the application	process different	for families	receiving	TANF?

\boxtimes	Yes.	If yes,	describe	how the	process	is different
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For TANF, the client is required to have a face-to-face interview. For Employment Related Day Care (subsidy), the interview can be done over the phone if a face-to-face is not practical.

No.

4.1.3 The following is a detailed description of how the State ensures parental choice by making sure that parents are informed about their ability to choose from among family and group home care, center-based care and in-home care including faith-based providers in each of these categories.

The subsidy agency contracts with the Child Care Resource and Referral (CCR&R) agencies throughout the State to provide consumer information and education about Oregon's child care programs and listings of providers available in the community. Information about subsidized child care for targeted and high risk populations is provided through the CCR&R agencies, the Lead Agency, and the subsidy agency, for the community(ies) in general, which includes all providers in addition to those that are faith-based.

PATT 2.1 to 2.3, 2.5 to 2.7

4.1.4	Does the State conduct activities aimed at families with limited English
	proficiency to promote access to child care subsidies and reduce barriers to
	receiving subsidies and accessing child care services?

Yes. If yes, **describe** these activities, including how the State overcomes language barriers with families and providers.

The Department of Human Services has bilingual staff and interpreters available. Program applications and information is printed in other languages and alternate formats for people with disabilities. Child care resource and referral agencies have bilingual staff in most service delivery areas. Many provider training sessions are offered in other languages and interpreters are available if needed. The Oregon Child Care Training Calendar also offers alternate websites in Spanish, Russian, Vietnamese, and Chinese. www.oregonchildcaretraining.org

Migrant and Seasonal Farm Worker program requirements are to present written and verbal communication about program services in a language understood by applicants and providers; MSFW program forms are available in both English and Spanish in Oregon.

PATT	2.7	
		No.

4.2 Records of Parental Complaints

The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. $(658E(c)(2)(C), \S 98.32))$

The Lead Agency investigates all serious complaints received against child care providers. Subject to confidentiality laws, complaint dispositions are open public records. The Lead Agency maintains a file of program and provider complaint information that is available to the public upon request.

4.3 Unlimited Access to Children in Child Care Settings

The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. $(658E(c)(2)(B), \S98.31))$

Parental access provisions are included in all Lead Agency provider agreements and subsidy agency listing agreements. Licensure laws for providers ensure that parents have unlimited access to their children.

4.4 Criteria or Definitions Applied by TANF Agency to Determine Inability to Obtain Child Care

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.

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, Oregon Department of Human Services, not the Child Care 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. The TANF agency that established these criteria or definitions is:

_____·

- "appropriate child care": (a) both the provider and the place where care is provided meet the subsidy agency's health and safety and provider requirements defined in administrative rules; (b) the care accommodates the parent's work schedule; and (c) the care meets the specific needs of the child, such as age and special needs requirements.
- "reasonable distance": the parent's total travel time from home to the child care provider and the workplace or JOBS activity will be no more than one hour either way unless a longer commute time is customary in the community.
- "unsuitability of informal child care": the Department of Human Services uses the same standards for informal care as for regulated care. Care that does not meet the criteria in "appropriate child care" would be considered unsuitable.
- "affordable child care arrangements": are those where the expense to the parent is less than ten percent of family income.

PART 5 ACTIVITIES & SERVICES TO IMPROVE THE QUALITY AND AVAILABILITY OF CHILD CARE

5.1 Quality Earmarks and Set-Asides

5.1.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities. The following describes the activities; identifies the entities providing the activities; describes the expected results of the activities and, if the activities have been ongoing, the actual results of the activities. For the infant and toddler earmark, the State must note in its description of the activities what is the maximum age of a child who may be served with such earmarked funds (not to exceed 36 months).

The Child Care Division and other child care partners follow the Department of Human Services, Oregon Administration Rule (OAR) 000-155-0150, where the following definitions apply for child care rates:

- Infant: a child aged birth through 12 months
- Toddler: a child aged one year through 30 months
- Preschool child: a child aged 31 months through 5 years
- School age child: a child aged 6 years or older

Each of the described activities address the following Oregon Benchmarks:

- #12 Percent of Family Child Care serving special needs children: Target for 2007: **20%.** 2000 data: 15%
- #13 Percent of child care slots that can be purchased at current state maximum payment rate. Target for 2007: 65% 2006 data: 26%
- #14 Number of child care slots available per 100 children. Target for 2007: 25/100. 2005 data: 18/100.
- #15 Percent of providers willing to care for infants. Target for 2007: 65%. 2004 data: 63%.

School-age Child Care:

The child care system has made a significant investment in school age care professional development, program standards, and youth worker core competencies through the establishment of a statewide after school network – OregonASK (After School for Kids). Oregon is the recipient of a Charles Steward Mott Foundation grant to establish a statewide network. Funding for this grant is supported by CCDF matching funds. OregonASK is comprised of over 25 public and private partners who represent education, youth development, child care and education programs.

The Center for Career Development in Childhood Care and Education (OCCD) at Portland State University is a member of OregonASK and provides a foundation for school age professional development recognition, standards development, and national accreditation. Linkages between The Oregon Registry and training provided by school age practitioners are currently being developed as the school age care arena does not have statewide standards or competencies in place.

Expected results: 1) increased access to information on core competencies, standards, program development, funding/stabilization strategies by providers of family and center-based school age child and mixed age care; 2) increased coordination and cooperation between local after school and out of school time programs with the child care community, and 3) increased connections to school-based or school-linked after school and community school programs.

PATT 2.3, 3.4

Infant/Toddler, Odd Hour and Other Hard to Find Care

Increasing the supply of hard-to-find child care through specialized recruitment and training activities is a high priority for Oregon's CCR&R system. A large share of this effort is directed toward training in infant/toddler care. Local child care resource and referral agencies offer providers First by Five Infant and Toddler training on emotional, social and cognitive development of infants and toddlers.

<u>Expected results:</u> increase the supply of hard-to-find child care, particularly infant and toddler care.

Child Care Resource and Referral Network (OCCRRN): administers a provider mentoring program to strengthen the infrastructure of support to providers caring for infants and toddlers.

<u>Expected results:</u> provider/mentees increase their skill at and confidence in providing care for infants and toddlers through one-to-one mentoring.

Portland State University: The Center for Career Development in Childhood Care and Education provides supportive and refresher training services to trainers of the First Connections training. The Center also developed an Early Brain curriculum in 2004 that stressed the importance of early brain and social/emotional development.

<u>Expected results:</u> increased knowledge and skill of qualified trainers in early brain and social/emotional development, particularly for infants and toddlers; increased knowledge and skills of providers who take early brain and social/emotional development training.

Commission on Children and Families: The Oregon Commission on Children and Families funds strategies based on best practice components that will improve the retention and quality of care for infants and toddlers. At least 20 percent (20%) of the funds received by the counties are directed to increasing quality care or availability of infant and toddler care. Strategies include scholarships and materials for child care

training based on best practice and research for infants and toddlers, and other eligible activities as they relate to infants and toddlers.

Expected results: increased access to early brain and social/emotional development training for child care providers by reducing the cost of training; increased knowledge of child care providers, which will increase confidence levels in the care of infants and toddlers – increased recruitment and retention of this type of care.

Child Care Division: The Lead Agency is responsible for activities related to issues of licensing and registration of providers caring for infants and toddlers.

Expected results: increased knowledge of infant and toddler care by Child Care Licensing Specialists.

PATT 2.1 to 2.7, 4.4

Resource and referral services:

Oregon Child Care Resource and Referral Network (OCCRRN): Provides technical assistance, training and coordination services for the continued development and improvement of Oregon's local resource and referral organizations.

Child Care and Development Funds are contracted to the OCCRRN to use for delivery of core services to parents, providers, communities, and employers. Parents receive consumer education designed to help them select and manage quality child care arrangements. The local CCR&R agencies help improve the availability and quality of child care through recruitment, training, technical assistance, and professional development support of child care providers. The OCCRRN is responsible for matching data on supply, demand, and quality that is collected by local child care resource and referral agencies and works with state partners on projects involving child care data.

The OCCRRN is responsible for coordination of the Statewide Mentoring Program which is implemented through the local child care resource and referral agencies.

Expected results: increased access on child care provider information to parents, which will result in better informed decision-making on the types and quality of care. Improvement in the quality of care through increased training and technical assistance to child care providers. Increase the quantity and quality of child care data for program development and policymaking decisions. Increase the confidence, professionalism, and business development activities of child care providers through mentoring by experts in the field of early childhood development, small business development, and training.

PATT 2.1 TO 2.3, 2.6, 2.7, 4.3, 4.4, 5.4, 5.5, 6.2, 7.1,

5.1.2 The law requires that not less than 4% of the CCDF be set aside for quality activities. (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51) The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds) during the 1-year period: October 1, 2007 through September 30, 2008:

\$ 3,148,207 (5.45 % of \$ 57,762,183)

5.1.3 Check each activity the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658D(b)(1)(D), 658E(c)(3)(B), §§98.13(a), 98.16(h))

Activity	Check if undertaking/will undertake	Name and type of entity providing activity	Check if this entity is a non-governmental entity?
Comprehensive consumer education	\boxtimes	Below	\boxtimes
Grants or loans to providers to assist in meeting State and local standards	\boxtimes	Below	\boxtimes
Monitoring compliance with licensing and regulatory requirements	\boxtimes	Below	
Professional development, including training, education, and technical assistance		Below	\boxtimes
Improving salaries and other compensation for child care providers	\boxtimes	Below	
Activities in support of early language, literacy, pre-reading, and early math concepts development		Below	
Activities to promote inclusive child care	\boxtimes	Below	
Healthy Child Care America and other health activities including those designed to promote the social and emotional development of children		Below	
Activities that increase parental choice	\boxtimes	Below	
Other activities that improve the quality of child care (describe below).	\boxtimes	Below	
Other activities that improve the availability of child care (describe below).		Below	
(§98.51(a)(1) and (2))			

5.1.4 For each activity checked, describe the expected results of the activity. If you have conducted an evaluation of this activity, describe. If you have not conducted an evaluation, describe how you will evaluate the activities.

Comprehensive Consumer Education

In FFY 2006 more than 44,000 families received consumer education services in Oregon. Direct services were provided through a statewide system of child care resource and referral sites and through the subsidy agency, Department of Human Services, field offices. In addition, other agencies, including the Oregon Commission on Children and Families, Oregon Department of Education, Oregon Health Division, and Oregon State Library, were instrumental in the development and distribution of consumer education materials statewide through their local constituent agencies and other networks (e.g., Healthy Start programs and pediatricians). These materials included parent resources on the importance of quality care and how to find it as well as how to promote healthy early brain development.

During this plan period, the child care resource and referral system will continue to deliver comprehensive consumer education services. Families receiving services will be offered information about categories of care, rates for care, what to look for in selecting quality care, names and locations of providers, histories of inspections and licensing, and educational consultations and referrals. Other agencies (e.g., those listed above) will continue to develop and disseminate informational materials. In addition, a new public information campaign has been developed focusing on informing employers about the importance of child care to the workforce and how Oregon's employer tax credits can help offset expenses.

Expected results: A majority of Oregon parents with child care needs have enough information to make informed choices about the quality, location, and cost of child care. Evaluation: Every child care resource and referral agency undergoes a comprehensive monitoring visit and review every two years. Questionnaires are provided to parents and child care providers with the service delivery area and questions on availability of both written materials and one-to-one services are asked.

PATT 2.1 to 2.3

Grants for Improving Standards and Supply

a) The Oregon Commission on Children and Families receives CCDF funds to increase the quality and availability of child care through grants to counties, thereby meeting local and statewide standards for child care availability. Allocations to the 36 county commissions are based on 0-12 population with a minimum allocation available to all areas.

While the overall goal is to increase the quality and stability of care, considerable flexibility is given to meet local needs as long as the emphasis focuses on low income working and student parents. Allowable uses of federal funds are outlined in the Guidelines for the use of CCDF funds in **Attachment 1.5b**. Funds to purchase child care slots is not allowed.

The emphasis of grants to counties is placed on infant and toddler, school age, non-traditional care, sick child, specials needs, and extended care linked with Head Start or Oregon Pre-K. Counties are required to use funds to address quality in these areas unless their plans demonstrate that these needs are adequately addressed and that a greater need exists for other child care programs.

Counties will further demonstrate efforts to make quality child care accessible to various income levels, as well as to ethnically and culturally diverse groups, and to families with children who have special needs. In developing fund plans, counties must collaborate with child care system partners, including child care resource and referral agencies, Head Start, Pre-K programs, family and center-based child care providers, school districts, community colleges, and extension services. Joint or linked proposals between counties within the same child care resource and referral agency service area are encouraged.

Expected results: stabilize and/or improve the quality child care with an emphasis on low-income and student parents; increased consumer information and child care referrals; increased professional assistance to providers starting up their own child care business.

<u>Evaluation</u>: An evaluation of the use of CCDF funds within the commission system has never been undertaken by the Lead Agency. The state commission office does have all 36 local commissions report outcomes on a quarterly basis.

PATT 4.1, 5.2, 5.4, 7.3, 7.8

b) The Department of Education receives CCDF monies to assist school districts in starting on-campus child development centers for preschool children and for centers serving the children of teen parents. On-campus centers will help increase the availability of child care supply in communities and serve as training sites for modeling appropriate child care. Campus-based child development centers must demonstrate the need for child care though consultation with the local child care resource and referral agency and are designed to accommodate the needs of low income working parents and student parents. Use of CCDF monies to purchase child care slots is not allowed.

<u>Expected results</u>: increase in the number of on-campus child care for preschool children and centers serving teen parents; increase the availability of child care for this target population; improved quality of child care environments that model appropriate child care.

<u>Evaluation</u>: Monitoring of on-campus programs is done by the Oregon Department of Education. Additionally, although school-based programs in Oregon are exempt from licensing, all campus-based programs must be licensed by June 2008. Out of 14 schools, all but two have become licensed.

PATT 3.2

Regulation

The Child Care Division uses CCDF funds to improve compliance with state licensing and registration laws. Responsibilities include: certification and registration activities,

on-site review of all providers, investigation of all serious complaints, technical assistance to providers in meeting standards, improvement of infant/toddler care, and work on collaborative projects to build awareness and commitment to quality child care.

<u>Expected results</u>: increase the number of child care providers that move toward quality child care; increase the number of providers that are certified (increased health and safety inspections and monitoring); lead development of projects or programs that improve quality, affordability, and accessibility of child care.

<u>Evaluation</u>: The Child Care Division completed an extensive survey of center-based providers in June 2007. A comprehensive survey will be completed in November 2007 of family-based child care providers. These surveys are done every three years for performance and service evaluation purposes.

PATT 1.1 to 1.6, 2.1 to 2.4, 5.3, 5.4

Training, Education and Technical Assistance

The Center for Career Development in Childhood Care and Education (Center) at Portland State University receives CCDF monies for training, education, and career development services. The Center provides training materials and "train the trainers" for the Child Care Health and Safety and Child Care Social and Emotional training programs. The Center also maintains The Oregon Registry and The Oregon Registry Trainer Program.

The OCCRRN receives funds for training delivery to child care providers which is coordinated through the local child care resource and referral system.

Expected results: increase the amount and quality of training and education to promote career development in early childhood education; increase the professionalism of the child care field through quality, higher level training and education for providers. Evaluation: Evaluations of all training sessions conducted through both the Center and the OCCRRN. A compilation of evaluations is provided to the Child Care Division on a quarterly basis as required by contracts with both these agencies.

PATT 2.3, 2.5,

Salaries and Compensation for Providers

Oregon is committed to building a quality child care system which includes appropriate compensation for providers and affordability to parents. Market rates will be adjusted as funds are available to reflect the most recent survey data in order to maintain stability of the system and accessibility to care. Current reimbursement rates to providers are identified in **Attachment 3.2A.** The subsidy agency has developed a tiered reimbursement system to compensate informal providers for obtaining the same training required of registered providers.

Expected results: increase the quality of care by providing monetary incentives to providers that participate in additional training hours equal to registered providers. Evaluation: At this time, no evaluation has been done for the tiered reimbursement system. The Department of Human Services did receive additional training funds for exempt providers in their 2007-09 budget. Evaluation of expected results is a component of this program option package.

PATT 2.6, 3.1 to 3.4, 6.1, 6.2, 6.4

Support of Early Language, Literacy, Pre-reading, and Early Math Concepts

Early language, literacy, pre-reading and numeracy components are included in the First
Connections/Infant and Toddler and Child Care Social and Emotional training, as well as,
the Statewide Mentoring program for child care providers. Guidelines for these
activities as part of the Good Start, Grow Smart initiative are still in development.

<u>Expected results</u>: increase the knowledge level of child care providers in early brain development and the importance of literacy, pre-reading and numeracy in early childhood education; increase the quality of child care by increasing the knowledge level of child care providers in these areas.

<u>Evaluation</u>: Individual training sessions include evaluation of the training and the trainer and are provided in quarterly reports for both the Center and the OCCRRN. The Statewide Mentoring Program was completely revamped in Spring 2007 and will be evaluated through a third party consultant after one year of implementation. Results of that evaluation will be used to improve the program and develop monitoring tools.

PATT 2.3 to 2.7, 3.4, 3.5, 4.3, 4.4, 5.4, 7.2 to 7.6

Promote Inclusive Child Care

The Inclusive Child Care work group is a partnership between state agencies and advocates for children with special needs. Activities are aimed at giving child care providers the information, training, and support they need to care for children with special needs, and developing subsidies for families based on the needs of the child.

Partnership in Inclusive Child Care (PICC) is a training program to increase the number of regulated child care providers caring for children who have special needs. In 2005, eight individuals from five Oregon Communities were trained to provide the Teaching Research Assistance to Childcare providers (TRAC) inclusion curriculum developed at Western Oregon University. An additional eight trainers were sponsored in the second cohort group in 2006. Additional cohort groups are planned for 2007 and 2008 with the goal of providing trainers statewide within four years. The TRAC curriculum is designed to give providers information and skills to increase their ability to serve children with special needs.

Participants in the local trainings are linked to other community resources that support inclusive child care. Examples of linked resources include consultation, mentoring, technical assistance and financial assistance.

<u>Expected results:</u> increase the supply of child care providers that have the skills, abilities, and confidence to care for children with special needs; increase the number of special needs trainers in rural and small communities where this type of training is not easily accessible.

<u>Evaluation</u>: Funds for a comprehensive evaluation of this program were not available in 2005-07. Additional funding from the Oregon Department of Education will be used in 2008 to complete a comprehensive evaluation of this program which is completing its first full program year after two pilot years.

PATT 3.3, 4.2 to 4.5,

Health Activities/Promote the Social and Emotional Development of Children Child Care Health Consultation Program is a partnership between Oregon's child care partners and the Oregon Pediatric Society aimed at developing a state-wide system of health and mental health consultation to providers. Expansion of this program statewide is contingent upon additional funding, but core funding has been secured to ensure supports for the original pilot counties with expansion to at least five more counties in 2008 and 2009. More comprehensive data collection for evaluation is also a primary goal for the next two years.

<u>Expected results</u>: develop a cadre of health/mental health consultants statewide that focus on and work directly with child care providers; increase the access of providers to these types of services.

<u>Evaluation</u>: Complete evaluation of this program has been conducted each year for the first three years of the pilot project. Now that this is a fully-funded program, annual evaluation is built into the program and budget.

PATT 4.3 to 4.5

Other Quality Activities

- In 2003, CCDF monies were used to revise this state-developed child care provider training curriculum. The first module, Child Care Health and Safety, will continue to be offered statewide to child care providers and other child care practitioners. The second module, Building Blocks: Child Care Social and Emotional Development, was offered statewide starting July 1, 2005. Curriculums are offered statewide in English, Spanish and Russian. Vietnamese will be available pending funding in 2008 or 2009.
 - <u>Expected results</u>: increase the basic knowledge level of all child care providers statewide in Child Care Health and Safety and Social Emotional Development.
 - Evaluation: Overall evaluation of Child Care Health and Safety was conducted in Fall 2006. Updates to the training manuals were minor and fact sheets were sent to all child care providers that have attended this training. Evaluation of Building Blocks: Child Care Social & Emotional Development will not be done until 2008.

PATT 1.3, 1.4, 5.4

- Quality Indicators Project
 - O Expected results: Parents will have more information to select child care. They will be able to use quality indicator reports to compare different characteristics that are important to them and their child's development. Child care providers will be able to compare themselves to others on these quality indicators. They will identify areas in which they are outstanding and others in which they want to improve. As such, the indicators are a strategic planning, marketing and fundraising tool. Community members and funders will have increased levels of accountability. Areas in need of investment will be clearer, and impacts of investments can be measured. The community will invest in child care centers with increased confidence that outcomes will improve.

 Evaluation: This project is still in the implementation stages and is a pilot in three counties. Evaluation of the project will consist of continuous improvement meetings conducted between the Oregon Child Care Research Program and Child Care Division licensing specialists.

PATT 2.1, 2.3

- Economic Impact of Child Care in Oregon 22 page comprehensive publication on the impact of the child care industry on Oregon's economy (July 2005). The report has been widely distributed and used by policy and funding decision-makers in both the private and public sector. Statistics were used extensively in the 2007 Legislative session regarding the importance of child care in workforce and economic development. Although this project is not currently funded by CCDF, an update to this report is expected in FFY 2008 for use in the 2009 Legislative session.
 - Expected results: increased support by the Governor's Office for child care
 policies that affect funding levels for child care support in Oregon; increased
 public and private business awareness of the importance of child care for
 workforce support and development.
 - o Evaluation: No evaluation was or will be conducted.
- Supporting Children's Social/Emotional Health: A Customized Oregon System's Approach -
 - Oregon's "Blueprint for Action," the results of *An Oregon Summit: Children's Emotional Health at Risk*, October 2003, clearly articulated the need and action steps to begin work on the development of a statewide prevention system of services and supports for children's social, emotional, and behavioral health. The primary goal of this project was to develop a model and implementation plan to bring to life section action items identified through the Blueprint for Action:
 - o Mount a public information campaign.
 - o Build a system of services and supports.
 - o Increase training opportunities.
 - o Institute use of on-site consultation, assessment and intervention.
 - o Make policy modifications.
 - o Provide financial support.
 - o Ensure planning and documentation.

Primary partners included Community Action Agencies; Head Start Association; Child Care Division; Child Care Resource and Referral Network; Department of Human Services, Offices of Mental Health & Addiction and Family Health; Commission on Children and Families; and, representatives from the legislature, Governor's Office, and Department of Education.

- o <u>Results:</u> Solid foundation for the Good Start, Grow Smart Early Childhood Foundations guidelines which were completed in January 2006.
- o <u>Evaluation</u>: No plans for evaluation at this time as ECF is still in early implementation.

5.2 Good Start, Grow Smart Planning and Development

This section of the Plan relates to the President's *Good Start, Grow Smart* initiative which is envisioned as a Federal-State partnership that creates linkages between CCDF, including funds set-aside for quality, and State public and private efforts to promote early learning. In this section, each Lead Agency is asked to assess its State's progress toward developing voluntary guidelines on language, literacy, pre-reading, and early math concepts and a plan for the education and training of child care providers. The third component of the President's *Good Start, Grow Smart* initiative, planning for coordination across at least four early childhood programs and funding streams, was addressed in Section 2.1.2.

5.2.1 Status of Voluntary Early Learning Guidelines. Indicate which of the following best describes the current status of the State's efforts to develop, implement, or revise research-based early learning guidelines (content standards) for three to five year-olds. NOTE: Check only one box to best describe the status of your State's three-to-five-year-old guidelines.

Planning. The State is planning for the development of early learning
guidelines. Expected date of plan completion:
Developing. The State is in the process of developing early learning
guidelines. Expected date of completion:
Developed. The State has approved the early learning guidelines, but
has not yet developed or initiated an implementation plan. The early
learning guidelines are included as Attachment 5.2.1.
Implementing. In addition to having developed early learning
guidelines, the State has embarked on implementation efforts which may
include dissemination, training or embedding guidelines in the professional
development system. The guidelines are included as Attachment 5.2.1.
Revising. The State has previously developed early learning
guidelines and is now revising those guidelines. The guidelines are included
as Attachment 5.2.1.
Other (describe):

Describe the progress made by the State in developing, implementing, or revising early learning guidelines since the date of submission of the 2006-2007 State Plan.

Oregon is somewhere between the "Developed" and "Implementation" status as described above. Oregon has developed early learning guidelines for children ages birth to five and is in the beginning stages of implementation through the development of a two hour training module and training manuals.

The work in Oregon is being guided by the Early Childhood Foundations Implementation Advisory Committee, facilitated by the Head Start Collaboration Director. Membership includes the following:

- Child Care Division Director
- CCRRN Director

- OAEYC Executive Director
- Center for Career Development

- Commission for Children and Families
- DHS Office of Family Health/Office of ODE EI/ECSE and PreK Specialists Mental Health and Addiction Services
- DHS Child Care Team Administrator

This committee was formed after the original advisory committee and domain panels completed their work on the development of the Early Childhood Foundations. The following are recommendations of this committee regarding publishing and implementing the Early Childhood Foundations.

PATT 1.3, 1.4, 4.2, 4.3, 4.5, 5.6,

Web Postings

Oregon's Early Childhood Foundations (early learning guidelines) consists of two documents: Birth to Three and Three to Five. The same format is used consistently for both documents. A consistent logo will also be used for both documents and is yet to be developed. The Three to Five ECF has been posted to the ODE web site. The Birth to Three ECF was posted to the ODE web site on May 1, 2007. A summary of both documents will also be posted to the ODE web site by June 2007.

Training Module

The Oregon Center for Career Development is taking the lead in developing training modules that can be adapted for a variety of audiences. The purpose of the modules is to introduce the ECF and will provide general information about the ECF describing what they are, how they link and how they can be used within the early childhood infrastructure. The training modules will be integrated into the professional development system. They will be used in existing trainings such as required child care trainings, CCRR trainings, EI/ECSE trainings, Confederation of School Administrators (COSA) conferences for public schools, Head Start Coordinator trainings, OAEYC conferences, and conferences of community colleges and higher education institutions.

Training Manuals

ODE is taking the lead in developing two training manuals for children ages birth to five. One manual will address center-based (classroom) environments and the other manual will address home-based (family home environments). Both manuals will provide ECF and teaching strategies for children ages birth to three and three to five. The purpose of the training manuals is to provide "hands-on" training to early childhood providers/teachers on how to apply the Early Childhood Foundations and appropriate teaching strategies in their classrooms and home environments. The training manuals will align the ECF with early childhood learning centers for center-based environments and activities in home-based environments.

The "Oregon Early Childhood Foundations Guide to Best Teaching Practices in Early Childhood" is in the process of being developed through a contract with Portland State University and is scheduled for completion by fall, 2007. The guide will be adapted from the document, "Learning Through the Eyes of a Child" based on work from the Idaho Department of Education and North Carolina Department of Public Instruction, as well as documents from the Missouri Department of Elementary and Secondary Education, Early

Childhood Section. The training manuals will be posted to the ODE web with discs developed to hand out during training sessions.

Alignment with Oregon Registry, Core Body of Knowledge

The Center for Career Development is taking the lead in aligning the ECF with the Oregon Registry's core knowledge categories in the Core Body of Knowledge and the DEC standards.

DEC standards.
If developed, are the guidelines aligned with K-12 content standards or other standards (e.g., Head Start Child Outcomes, State Performance Standards)?
Yes. If yes, name standards.
The "Oregon Early Childhood Foundations" are aligned with the Kindergarten Foundations, the grade three public schools content standards and the Head Start Child Outcomes Framework. The Kindergarten Foundations address all but four of the domain areas: art, physical education and health, approaches to learning, social/emotional development. Grade three content areas address all but two domain areas: approaches to learning and social/emotional development. The Head Start Child Outcomes Framework addresses all the domain areas.
□ No.
If developed, are the guidelines aligned with early childhood curricula?
The Early Childhood Foundations are aligned with the following curriculum-based assessments: Hawaii Early Learning Profile (HELP), Assessment, Evaluation and Programming System (AEPS), Carolina, Creative Curriculum and Galileo. Although these assessments are not early childhood curricula, they are developmentally appropriate and curriculum-based.
No.
Have guidelines been developed for children in the following age groups (check if guidelines have been developed):
 □ Birth to three. Guidelines are included as Attachment 5.2.1 □ Birth to five. Guidelines are included as Attachment 5.2.1 □ Five years or older. Guidelines are included as Attachment 5.2.1
Efforts to develop early learning guidelines for children that may differ from those addressed in <i>Good Start</i> , <i>Grow Smart</i> (i.e., children birth to three or older than five)

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may be described here.

Oregon's early childhood content standards referred to as, Early Childhood Foundations, consists of two documents: Birth to Three and Three to Five. See previous section 5.2.1 for details.

If any of your guidelines are available on the web, provide the appropriate Web site address (guidelines must still be attached to Plan):

Front I Ready Early (Page: So for Sch Childho	te.or.us uperintendent Priorities nool ood Foundation Overview ood Foundations
childre		ins of Voluntary Early Learning Guidelines. Do the guidelines for e-to-five-years-old address language, literacy, pre-reading, and early ts?
		Yes.
		No.
	specifi	e guidelines for children three-to-five-years-old address domains not ically included in <i>Good Start, Grow Smart</i> , such as social/emotional, ive, physical, health, creative arts, or other domains?
		Yes. If yes, describe.
	areas: Social	regon Early Childhood Foundations address eight domains or foundation (1) Language and Literacy, (2) Mathematics, (3) The Arts, (4) Science, (5) Science, (6) Physical Education and Health, (7) Social/Emotional and (8) aches to Learning.
		No.
5.2.3	_	mentation of Voluntary Early Learning Guidelines. Indicate the gies the State used or expects to use in implementing its early learning ines.
		ction 5.2.1 for details. The Early Childhood Foundations are voluntary, not ited or required.
		call that apply: Disseminating materials to practitioners and families Developing training curricula Partnering with other training entities to deliver training

Aligning early learning guideli and/or quality rating systemsOther. Describe:	nes with licensing, core competencies,
Indicate the stakeholders that are (or	Indicate the programs that mandate or
expect to be) actively supporting the	require the use of early learning
implementation of early learning	guidelines.
guidelines.	
Publicly funded (or subsidized) child	Publicly funded (or subsidized) child
care	care
Head Start	Head Start
Education/Public pre-k	Education/Public pre-k
□ Early Intervention	Early Intervention
Child Care Resource and Referral	Child Care Resource and Referral
☐ Higher Education	Higher Education
Parent Associations	Parent Associations
Other. Describe:	Other. Describe:

How are (or will) cultural, linguistic and individual variations (be) acknowledged in implementation?

The Oregon Cultural Competency Committee reviewed the Early Childhood Foundations and provided input into the language of the document. Their input was integrated into the final document. As of June 2007, training manuals are under development. However, no specific implementation plans have been made. The Early Childhood Foundations Implementation Advisory Committee will continue to work with the Cultural Competency Committee to ensure cultural, linguistic and individual variations are acknowledged as implementation plans are developed.

How are (or will) the diversity of child care settings (be) acknowledged in implementation?

ODE is taking the lead in developing two training manuals for children ages birth to five. One training manual will address center-based or classroom environments and the other manual will address home-based or family home environments. Both manuals will provide Early Childhood Foundations and teaching strategies for children ages birth to three and three to five. Training will address center-based Head Start, child care, and preschool environments, and home-based family child care environments including home environments for children in family, friend and neighbor care, Head Start Home-Based models and Early Intervention/Early Childhood Special Education services. All early childhood care and education providers will be included in implementation activities.

Materials developed to support implementation of the guidelines are included as Attachment 5.2.3. If these are available on the web, provide the appropriate Web site address:

See section 5.2.1 for overview of implementation. Training modules are under development and training manuals are scheduled to be completed by fall, 2007.

- 5.2.4 Assessment of Voluntary Early Learning Guidelines. As applicable, describe the State's plan for:
 - (a) Validating the content of the early learning guidelines
 - (b) Assessing the effectiveness and/or implementation of the guidelines
 - (c) Assessing the progress of children using measures aligned with the guidelines
 - (d) Aligning the guidelines with accountability initiatives

In 2001, the Oregon State Legislature requested the development of a method to measure the impact of early childhood special education programs in the state. ODE determined the best method of measurement would be to include all early childhood programs in a common assessment process. These programs included Early Intervention (EI) and Early Childhood Special Education (ECSE), Head Start/Oregon PreKindergarten Programs (OPK). In 2004, ODE contracted with Portland State University (PSU) and the University of Oregon (U of O) to develop and pilot the Early Childhood (EC) Assessment. These contractors developed test items, an administration manual, data collection forms, report formats, training materials, and an on-line data entry system.

The system was piloted in April through June 2006 with children from Early Intervention/Early Childhood Special Education Programs (EI/ECSE), OPK programs and community preschools and childcare settings. This assessment system will be used to measure outcomes of children enrolled in the various settings. These child-outcome data, in addition to other data, will be used to answer questions from state policy makers and the Oregon legislature regarding child progress and to inform program improvement. The assessment contains items in the areas of literacy, language development, math, science, social emotional development, approaches to learning, physical education, creative arts, and health.

In 2004-2005, four hundred and eighty seven children, between the ages of birth to 72 months, participated in the pilot study. This included 140 children from EI/ECSE programs, 108 from OPK programs, and 239 from childcare programs. The data from the pilot study indicated that children made progress (i.e., scores on independent performance of assessment items increased) from a pre-assessment to a post-assessment.

The results indicated 79 percent of children in EI/ECSE programs, 83 percent of children in Child Care programs, and 89 percent of children in OPK programs made progress in the four months between pre- and post-assessment. A correlation coefficient was calculated for the childcare participants that indicated a significant correlation (r = .80, p<.01) between the children's total score on all developmental items and their chronological age in months. This finding demonstrated the validity of the instrument to measure changes in developmental levels of the children. An internal consistency

reliability study was also conducted with a subset of the participants (n = 422). This study found the reliability to be strong at a correlation coefficient of .94.

Written reports of these efforts are included as Attachment 5.2.4. If these are available on the web, provide the appropriate Web site address (reports must still be attached to Plan): http://www.ode.state.or.us/search/page/?id=870

5.2.5	best d profes the pr Check	Plans for Professional Development. Indicate which of the following escribes the current status of the State's efforts to develop a ssional development plan for early childhood providers that includes all imary sectors: child care, Head Start, and public education. NOTE: a ONLY ONE box to best describe the status of your State's ssional development plan.
		Planning . Indicate whether steps are under way to develop a plan. If so, describe the entities involved in the planning process, time frames for completion and/or implementation, the steps anticipated, and how the plan is expected to support early language, literacy, pre-reading and early math
		concepts. Developing . A plan is being drafted. The draft or planning documents
		are included. Developed . A plan has been written but has not yet been implemented.
		Implementing . A plan has been written and is now in the process of being implemented, or has been implemented. Attachment 5.2.5 .
		Revising. The State previously developed a professional development plan and is now revising that plan, or has revised it since submitting the 06-07 State Plan. The revisions or the revised plan are included as
		Other (describe):
The St	tate Plai	n for Professional Development is aligned with the Professional

The State Plan for Professional Development is aligned with the Professional Development System Components as outlined and identified by The National Child Care Information Center (NCCIC) "Elements of a Professional Development System for Early Care and Education: A Simplified Framework"

A professional development system planning document "Current STATUS and Future NEED of the Components of the State Professional Development System in Oregon " was developed for 05-07, has been updated for completion or revision of activities, has been updated for goals and activities for 07-09, and is provided as **Attachment 5.2.5.**

The document is being utilized as a long term planning guide for the development and implementation of the various system components.

PATT 2.3 to 2.5, 2.6, 4.4, 5.1, 5.4, 7.4

Describe the progress made by the State in planning, developing, implementing, or revising the professional development plan since the date of submission of the 2006-2007 State Plan.

Attachment 5.2.5 indicates completion, revision and continuation of goals, activities and events listed in the original state plan for 05-07.

If your State has developed a plan for professional development, does the plan include (Check EITHER yes or no for each item):

,	Yes	No
Specific goals or desired outcomes		
A link to Early Learning Guidelines	\boxtimes	
Continuum of training and education to form a career path	\boxtimes	
Articulation from one type of training to the next	\boxtimes	
Quality assurance through approval of trainers	\boxtimes	
Quality assurance through approval of training content	\boxtimes	
A system to track practitioners' training	\boxtimes	
Assessment or evaluation of training effectiveness	\boxtimes	
State Credentials – State for which roles (e.g. infant and toddler credential, directors' credential, etc.)		
Specialized strategies to reach family, friend and neighbor caregivers		

For each **Yes** response, **reference** the page(s) in the plan and briefly **describe**.

Specific goals or desired outcomes

The entire plan includes individual goals and specific activities to be completed in the coming plan year (FFY 2007). Goals and activities are detailed in accordance with the five main components of professional development systems as established by National Child Care Information Center (NCCIC): core professional knowledge, qualifications and credential, quality assurances, access and outreach, and funding

Link to Early Learning Guidelines

Section #1 CORE PROFESSIONAL KNOWLEDGE

The planned objective is to Work with ODE to link the Core Body of Knowledge, core knowledge categories, key knowledge concepts, and supporting explanations to the Early Childhood Foundations (early learning standards)

Work accomplished so far includes the development of outlines for three training sessions linking Oregon's Early Childhood Foundations with Professional Knowledge Standards, Program Standards and Assessment, and Child Assessment

Continuum of training and education to form a career path

Section #1 CORE PROFESSIONAL KNOWLEDGE

10 core knowledge categories have been defined in terms of knowledge required and practice desired, the standards of knowledge, key knowledge concepts, supporting explanations, and examples of topics for training in each of the 10 core knowledge categories

A twelve (fifteen) step Oregon Registry Steps has been created, which uses the Oregon Core Body of Knowledge core knowledge categories and standards, and focuses on training/education requirements. The Oregon Registry Steps is developed for a broad spectrum of professionals in childhood care and education showing two distinct professional development pathways: degreed /certificated and community based training/credit courses

The Oregon Registry Professional Enhancements have been developed to recognize professional experience, professional and personal attributes, and commitment to a professional code of ethics.

Articulation from one type of training to the next

Section #2 QUALIFICATIONS AND CREDENTIALS

The Oregon Registry Steps is inclusive of all appropriate professional credentials, degrees, and community based training. It provides for movement forward from one Step to another, and also movement laterally from one type of training to another.

Articulation agreements exist between some community colleges and 4-year institutions, and between CDA credentials and some community colleges

Articulation agreements exist between some community colleges and high schools, to articulate the professional development steps of the Oregon Registry into the high school certificate completion and the community college formal degree credit.

Some Community Colleges have developed credits tied to a series of Oregon Registry Standardized training sessions

The Virtual Degree Project is in development and planning and will create a statewide on-line degree, and will facilitate the transition of child care providers from community-based training to community college credit training through articulation of the Oregon Registry Step 7 to college credit.

Quality assurance through approval of trainers

Section #3 QUALITY ASSURANCES

An Oregon Registry Trainer Program is in place with trainer standards, review, approval, database, and registry to increase provider knowledge through certified trainers with knowledge of and adherence to the standards established in the Core Body of Knowledge and the Oregon Registry Steps

A database and registry is of all approved trainers and all specialized trainers for the State system is maintained and available on-line.

Quality assurance through approval of training content

Section #3 QUALITY ASSURANCES

An Oregon Registry Trainer Program is in place with training session standards, review, approval, database, and registry to increase knowledge through certified training session that adhere to the standards established in the Core Body of Knowledge and the Oregon Registry Steps

A database and registry of all approved and certified Oregon Registry Trainer standards-based training sessions is maintained and available on-line.

System to track practitioners' training

Section #1 CORE PROFESSIONAL KNOWLEDGE

The Oregon Registry has been developed as a review and approval process to document the acquisition of the Core Body of Knowledge through the steps of the Oregon Registry Steps. Child Care practitioners apply to a step in the Oregon Registry that represents their documented training and education. Practitioners are encouraged to continue professional development activities and advance along the continuum of development.

Initial steps have been taken to establish a state level training and education database that would provide documented verified data to identified partners and programs

Assessment or evaluation of training effectiveness

Section #3. QUALITY ASSURANCES

Each Oregon Registry Trainer Program standardized, community, master and training of trainers session includes an evaluation component.

In the coming year, these evaluations will become objectives based, and standards based, reflecting acquisition of the knowledge standards within the Core Body of Knowledge.

<u>State Credentials – State for which roles (e.g. infant and toddler credential, directors' credential, etc.)</u>

Section #2. QUALIFICATIONS AND CREDENTIALS

A Director Certificate program of 20 trainings sessions for 60 hours of training linked to Oregon Registry and Oregon Registry Trainer program standards has been developed, piloted, revised, and is available.

The core coursework for an infant toddler certificate has been developed and is available as 21 training sessions for 62 hours of training.

Coursework for a schoolage certificate has been developed or brought to Oregon and is available through the <u>AfterWords: Launching Lifelong Readers from Afterschool</u>

<u>Programs, In the Mix: Including School Agers with Younger Children in Your Family Child Care</u>, and <u>Opening Doors to Inclusive After School Programs</u> training curricula

These will become core training and education opportunities to meet future credential requirements

A basic infrastructure was developed by the Professional Development Standards Subcommittee of the TQC for placement in Oregon Registry Step and Path of a Director Credential, infant toddler Credential, School age credential, and Adult education credential.

Specialized strategies to reach family, friend and neighbor caregivers

A Family, Friends, and Neighbors Workgroup has been established within the Training and Quality Committee to conduct planning for outreach and services to care givers that are not licensed by the Child Care Division (exempt care). Child care resource & referral agencies offer voluntary orientation training sessions to Department of Human Services listed exempt providers.

Family, Friend and Neighbor Toolkits have been developed and will be distributed beginning in July 2007. The toolkits contain materials on health, safety, child development and literacy will be distributed by resource & referral agencies in collaboration with the federal Child and Adult Food Care Program and other partners.

For each No response, indicate whether the Lead Agency intends to incorporate these components.

For each **No** response, **indicate** any plans the Lead Agency has to incorporate these components.

Are the professional development opportunities described in the plan available:

Note: Check either yes or no for each item):

	Yes	No
Statewide		
To Center-based Child Care Providers		
To Group Home Providers		
To Family Home Providers		
To In-Home Providers		
Other (describe):		

The professional development system and plan is designed to include broadly defined profession including but not limited to 10 constituent groups: family child care, center based care, school age before and after school care, head start, programs, K-3 programs, early intervention/early childhood special education programs, teen parent programs, resource and referral programs, Community Colleges, and Universities. Outreach and recruitment has been primarily targeted for family child care, center based care, school age before and after school care, head start, programs.

Describe how the plan addresses early language, literacy, pre-reading, and early math concepts development.

Early language, literacy, pre-reading, and early math concepts development are included in the early learning standards (early childhood foundations) document. During the next year, it will be linked to the Core Body of Knowledge, core knowledge categories, key knowledge concepts, and supporting explanations.

There is an identified private partner that promotes the support of early language and literacy development professional development efforts. Individual grants are awarded to communities to enhance or expand programs that nurture literacy and language development in children birth through 5 through the education and support of parents, guardians, and caregivers.

There are developed standardized curricula that meet the Oregon Registry Trainer Program standards (Child Care Plus, Early Words, Early Words Series 2, Early Brain Development Research and Implications, Rating Scales - ITERS and FDCRS, which address early language and literacy development.

Are program or provider-level incentives offered to encourage provider training and

Yes. If yes, describe , including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts.
No. If no, describe any plans to offer incentives to encourage provider training and education, including any connections between the incentives and training relating to early language, literacy, pre-reading and early math concepts?

Scholarships are available for family child care and center based care providers working toward professional goals through increased training and education such as: Registry Certification, Child Development Associate (CDA) credentialing, Professional Accreditation (NAFCC, NAA, NAEYC), credit coursework, and degree completion. Scholarships pay for tuition, assessments and accreditation fees, application fees, etc. This support is made available through an identified private partnership.

The tiered reimbursement system to subsidy providers (Enhanced Rate Program) is incorporated within the Oregon Registry Steps and provides enhanced subsidy for documented training and education. Child care providers become eligible to received increased pay rates by meeting specific training and education standards in the Oregon Registry.

The statewide mentoring program is in place as a system for established and recognized professionals to provide guidance and support to those new to the field who want to work on professional goals.

Oregon CARES (Compensation and Retention Equal Stability) programs linked to achievement of Steps on the Oregon Registry were available in seven counties. CARES initiatives provided scholarship support and wage stipends to support the professional development and retention of child care providers. Plans are to seek continuing funding for the Oregon Cares initiative which provides wage stipends for completing meeting retraining and education requirements for Steps in the Oregon Registry.

Provider training and education is encouraged through the Child Care Enhancement Project in Lane County. This project provides Wage enhancements as incentives to professionals achieving Step 5 or higher on the Oregon Registry.

The achievement of Steps in the Oregon Registry includes completion of training and education in 10 core knowledge categories which includes both Human Growth & Development, and Learning Environments & Curriculum, both of which incorporate principles of early literacy and numeracy.

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education?

As applicable, does the State assess the effectiveness of its professional development plan, including the achievement of any specified goals or desired outcomes? \boxtimes Yes. If yes, **describe** how the professional development plan's effectiveness/goal is assessed. The state Child Care System Accountability Committee has developed a Logic Model with state and program level outcomes, strategies and activities, gaps, and priorities. This logic model includes items related to high quality child care, and specifically addresses provider's knowledge, practice, training and education levels, and the training system. This State logic model is being developed and transformed into the Performance and Accountability Tracking Tool (PATT) to establish system accountability measures and an accountability process for all implemented components of the professional development system and all components of the state CCDF plan. There is an established state infrastructure plan with strategies, outcomes and performance measures regarding childhood care and education services which are linked to the four child care related Oregon Benchmarks. Of the 16 child care division performance measures, four (4) pertain to quality. Of those four, one specifically looks at the number of child are providers participating in the Oregon Registry The Child Care Quality Indicators collects data from child care centers to measure seven research-based structural indicators including the education and specialized training of teachers and other caregivers. The main data source for the training and education information will be the training and education data warehouse and participation in the Oregon Registry. No. If no, **describe** any plans to include assessments of the professional development plan's effectiveness/goal achievement. Does the State assess the effectiveness of specific professional development initiatives or components? \boxtimes Yes. If yes, **describe** how specific professional development initiatives or components' effectiveness is assessed. Under the child care system's Training and Quality Committee (TQC), the Professional Development Standards (PDS) Subcommittee provided guidance for completion of a review and evaluation process for the Oregon Registry. The purpose is to determine

A report compiled by OCCD at PSU included Short and Sweet Summary, Executive Summary, PowerPoint Presentation, Data Summary, and Oregon Registry in Context. The executive summary analyzed the work planned, accomplishments, barriers, and the

effectiveness of the program in reaching providers, being responsive to needs, and increasing the participation of the workforce in the professional development system.

future work. The Data Summary included provider, participant, and partner surveys as well as detailed participation and demographic data.

The PDS Committee also provided guidance for completion of a data review and analysis of the data pertaining to the Oregon Registry Trainer Program. Data regarding trainer participation, trainer demographics, and training session and curricula development was compiled and analyzed by OCCD at PSU. Data reports on participation in both the Oregon Registry and the Oregon Registry Trainer program are provided quarterly to the PDS Subcommittee.

The Oregon Registry maintains awareness of and works to follow national registry standards established through The National Registry Alliance to achieve high-quality, coordinated, documented, and accessible state career development systems for a well-trained, supported, and adequately compensated work force. Standards include:

- The National Registry Alliance <u>Best Practices for Registry Systems</u> which covers twelve categories specific to the effective development and implementation of registries.
- The National Registry Alliance <u>Registry Assessment Tool</u> that was developed using the National Registry Alliance's standards and best practices for registries
- The National Registry Alliance <u>Core Data Elements</u>, and the <u>Data 4 Project</u>, which are establishing core data elements and subsequent standards for collection, verification, and entry to begin the process of creating an accurate and current national dataset of early childhood and school-age/after-school workforce and trainer data.

Various subcommittees of the TQC develop activities and report on workplan goals each year:

- Training Review Subcommittee: reports on accomplishment of activities related to updates to the established standardized training curricula such as Child Care Health and Safety, Building Blocks: Social and Emotional Development, Recognizing and Reporting Child Abuse and Neglect, and other standardized training.
- Training Gaps Subcommittee: develops activities and reports on establishment of diverse training opportunities for all core knowledge categories, languages, regions, care ages and care settings
- PDS Subcommittee: develops and reports on the structure and process for the state level shared training and education warehouse database.
- Articulation Subcommittee: is developing the state level on-line virtual degree program and the articulation of the Oregon Registry Step 7 to community college credit.
- Evaluation Subcommittee: reviews and reports on the effectiveness of the communication regarding the professional development system in meeting the needs of and achieving participation of the diverse community of providers.
- Family, Friends and Neighbors Subcommittee: works on strategies to reach family, friends and neighbors that provide care. These providers are not part of

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	censing structure (exempt), do not consider themselves 'child care ders', but do want access to information on how to provide better care.			
	No. If no, describe any plans to include assessments of specific professional development initiatives or components' effectiveness.			
	As applicable, does (or will) the State use assessment to help shape or revise its professional development plan?			
	Yes. If yes, describe how assessment informs the professional development plan.			
OCCD at PSU implemented a full assessment of The Oregon Registry/Oregon Registry Trainer system in 2006. Results of that assessment were shared with TQC, CCECC and the Commission for Child Care. Recommendations were developed and are being implemented in FFY 2007 as part of the professional development plan.				
	No. If no, describe any plans to include assessment to inform the professional development plan			

PART 6 HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(Only the 50 States and the District of Columbia complete Part 6.)

PATT 1.1 to 1.6,

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: http://nrc.uchsc.edu/.

6.1	Health and Safety Requirements for Center-Based Providers (658E(c)(2)(F)
	§§98.41, §98.16(j))

6.1.1	Are all <u>center-based</u> providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation?		
	Yes. Answer 6.1.2, skip 6.1.3, and go to 6.2.		
	No. If no, describe which center-based providers are exempt from licensing under State law and answer 6.1.2 and 6.1.3.		
Exclud	ded facilities are those which:		
	 (a) Are primarily educational and provide care to children 36 months old or older but not yet attending kindergarten for less than four hours a day; (b) Are primarily supervised, child-focused training in a specific subject, including, but not limited to, dancing, drama, music, or religion. This exclusion applies only to the time children are involved in training; (c) Are primarily an incident of group athletic or social activities sponsored by or under the supervision of an organized club or hobby group. This exclusion applie only to the time engaged in the group athletic or social activities and if the children can come and go as they please. (d) Are operated by a school district, political subdivision of this state, or a government agency; (e) Are operated on an occasional basis by a person, sponsor, or organization not ordinarily engaged in providing child care; (f) Operate as a parent cooperative for no more than four hours a day; or (g) Provide care while the child's parent remains on the premises and is engaged in an activity offered by the facility or in other nonwork activity. 		

6.1.2 Have center licensing requirements as they relate to staff-child ratios, group size, or staff training been modified since approval of the last State Plan?

 $(\S98.41(a)(2)\&(3))$

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		Yes. If yes, describe the changes.
		⊠ No.
	6.1.3	For center-based care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
	•	The prevention and control of infectious disease (including age-appropriate immunizations)
		Center-based providers deliver child care through standards that are comparable to certified centers. Providers must comply with state health requirements for age appropriate immunizations and follow control procedures in the event of a communicable disease outbreak.
	•	Building and physical premises safety
		Facility standards are similar to certified center care and must be in compliance with state and local safety codes. See listing rules in Attachment 3.2a.
	•	Health and safety training
		To become eligible for a higher reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing and Reporting Child Abuse and Neglect training. All providers are also encouraged to participate in First Connections infant and toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are checked through the State Police law enforcement data system (LEDS) and child protective services records.
5.2	Healtl 98.16(h and Safety Requirements for Group Home Providers (658E(c)(2)(F), §§98.41
	90.10(
	6.2.1	Are all group home providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:
		Yes. Answer 6.2.2, skip 6.2.3, and go to 6.3.
		No. If no, describe which group home providers are exempt from licensing under State law and answer 6.2.2 and 6.2.3.

	6.2.2	Have group home licensing requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))	
		Yes. If yes, describe the changes.	
		Oregon passed legislation in the 2005 session that amends Oregon Revised Statutes 657a.280(2)(3) and .440(4) to increase the number of children that may be cared for in a Certified Family Child Care home from 12 to 16.	
		☐ No.	
	6.2.3	For group home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:	
		There are no exempt group homes in Oregon.	
6.3	Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))		
	6.3.1	Are all <u>family</u> child care providers paid with CCDF funds subject to licensing under State law that is indicated in the NRCHSCC's compilation? If:	
		Yes. Answer 6.3.2, skip 6.3.3, and go to 6.4.	
		No. If no, describe which family child care providers are exempt from licensing under State law and answer 6.3.2 and 6.3.3.	
		In Oregon, family child care providers are exempt if the care is provided:	
		a) To three or fewer children, not including the provider's own children;b) To children from one family, not including the provider's own children;c) On an occasional basis by a person not ordinarily engaged in providing child care;	
		d) By a person related to the child care children by blood, marriage, or adoption; or	
		e) By a person who is a member of the child's extended family, as determined by the division on a case-by-case basis.	
	6.3.2	Have family child care provider requirements that relate to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))	
		Yes. If yes, describe the changes.	

	⊠ No.			
6.3.3	For family care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:			
•	The prevention and control of infectious disease (including age-appropriate immunizations)			
	Oregon Administrative Rules (OAR) govern requirements for listed providers. This is further referenced in Attachment 3.2a. Effective July 1, 1999 the Department of Human Services requires families applying for subsidized child care to meet immunization requirements (OAR 461-135-0400).			
•	Building and physical premises safety See Attachment 3.2a.			
•	• Health and safety training See Attachment 3.2a			
	Exempt care providers are not required to participate in health and safety training.			
	To become eligible for a higher reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing and Reporting Child Abuse and Neglect training. All providers are also encouraged to participate in First Connections infant and toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are checked through the State Police law enforcement data system (LEDS) and child protective services records.			
	n and Safety Requirements for In-Home Providers (658E(c)(2)(F), §§98.41,			
98.16(J <i>))</i>			
6.4.1	Are all <u>in-home</u> child care providers paid with CCDF funds subject to licensing under the State law reflected in the NRCHSCC's compilation referenced above?			
	Yes. Answer 6.4.2, skip 6.4.3, and go to 6.5.			

In Oregon, an in-home provider is exempt from regulation if care is provided:

a) To three or fewer children, not including the provider's own children;

licensing under State law and answer 6.4.2 and 6.4.3.

No. If no, describe which in-home child care providers are exempt from

b) To children from one family, not including the provider's own children;

Effective Date: October 1, 2007 Amended Effective:

6.4

- c) On an occasional basis by a person not ordinarily engaged in providing child care:
- d) By a person related to the child care children by blood, marriage, or adoption; or
- e) By a person who is a member of the child's extended family, as determined by the division on a case-by-case basis.

6.4.2	Have in-home health and safety requirements that relate to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))		
		Yes. If yes, describe the changes.	
		No.	

- 6.4.3 For in-home care that is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:
 - The prevention and control of infectious disease (including age-appropriate immunizations)

See **Attachment 3.2a.** Effective July 1, 1999 the Department of Human Services requires families applying for subsidized child care to meet immunization requirements (OAR 461-135-0400).

- Building and physical premises safety See Attachment 3.2a.
- Health and safety training: See **Attachment 3.2a.**

Exempt care providers are not required to participate in health and safety training.

To become eligible for a higher reimbursement rate and more flexible billing practices, exempt providers are required to participate in Child Care Health and Safety and Recognizing and Reporting Child Abuse and Neglect training. All providers are also encouraged to participate in First Connections infant and toddler training. All providers, substitute caregivers, and persons having unsupervised access to children are checked through the State Police law enforcement data system (LEDS) and child protective services records.

6.5 Exemptions to Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings (who live in a separate residence from the child in care) may be

	exempted from health and safety requirements. (658P(4)(B), §98.41(a)(1)(ii)(A)) Indicate the Lead Agency's policy regarding these relative providers:			
		section	lative providers are subject to the same requirements as described in ns 6.1 - 6.4 above, as appropriate; there are no exemptions for relatives or	
		All rel Some requir	ent requirements for them. lative providers are exempt from <u>all</u> health and safety requirements. or all relative providers are subject to <u>different</u> health and safety ements from those described in sections 6.1 - 6.4. The following describes requirements and identifies the relatives they apply to:	
6.6	Enfor	cement	t of Health and Safety Requirements	
	Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively enforced:			
	•		nild care providers subject to <u>routine</u> unannounced visits (i.e., not ically for the purpose of complaint investigation or issuance/renewal of a e)?	
			Yes. If yes, indicate which providers are subject to routine unannounced visits and the frequency of those visits:	
		visits.	r and Certified Family Child Care homes are subject to annual unannounced Family child care providers receive unannounced visits to investigate s complaints.	
			No.	
	•	Are ch	nild care providers subject to background checks?	
			Yes. If yes, indicate which types of providers are subject to background checks and when such checks are conducted:	
			gistered, certified, and subsidized providers are subject to background s prior to state approval.	
			No.	
	•	while	the State require that child care providers report serious injuries that occur a child is in care? (Serious injuries are defined as injuries requiring medical tent by a doctor, nurse, dentist, or other medical professional.)	

		Yes. If yes, describe the State's reporting requirements and how such injuries are tracked (if applicable):	
	a	l injuries that occur in regulated child care that require third party medical ention must be reported to the Child Care Division. The Child Care Divisio intains a database to track the number and nature of the injuries.	n
		No.	
	e 1 e n p o s	her methods used to ensure that health and safety requirements are effective forced: All persons who wish to work in licensed child care in Oregon must first be rolled in the Criminal History Registry. In order to be enrolled, an individual st pass a background check that includes state criminal history and child effective services check. FBI checks are required for applicants who have lived to state during the previous 18 months, or whose state check indicates a mate offender. Registry Enrollment must be renewed every two years. The states police records on a quarterly basis for any additional convictions by the ovider or household members.	e al ed ulti- ate
		Center-based care – local zoning regulations, local Health Department, nitation inspection, occupancy, and building codes apply.	
		Certified family homes - Oregon Department of Environmental Health nitation rules apply; non-occupied same as center rules/regulations.	
<u>6.7</u>	Exempti	ns from Immunization Requirements	
	immuniz incorpor	assures that children receiving services under the CCDF are age-appropriated, and that the health and safety provisions regarding immunizations e (by reference or otherwise) the latest recommendations for childhood tions of the State public health agency. (§98.41(a)(1))	ely
The State exempts the		exempts the following children from immunization (check all that apply):	
		ildren who are cared for by relatives (defined as grandparents, great indparents, siblings (if living in a separate residence), aunts and uncles). ildren who receive care in their own homes. ildren whose parents object to immunization on religious grounds. ildren whose medical condition contraindicates immunization.	

APPENDIX 1 PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- (1) upon approval, it will have in effect a program that complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d))
- that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))
- (7) that CCDF Discretionary funds are used to supplement, not supplant, State general revenue funds for child care assistance for low-income families. (P.L. 109-149)

The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))

- it 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)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) 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))
- (6) 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))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

APPENDIX 2 ELIGIBILITY AND PRIORITY TERMINOLOGY

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must **define** the following *italicized* terms. (658P, 658E(c)(3)(B))

- attending (a job training or educational program; include minimum hours if applicable) Satisfactory participation in a job training or educational program that requires absence from
 the child on a part-time or full-time basis. Authorized child care will be for reasonable hours
 of care needed to support participation in the program, including meal and commute time.
 Care may be authorized for gaps up to two weeks between or before scheduled program or
 activities, if necessary to keep the provider.
- *in loco parentis* In place of the parent; may include, but is not limited to, a step-parent, guardian, or legal guardian.
- *job training and educational program* A job training program is one that includes technical or vocational courses leading to an occupation or employment, and other job training activities which lead to employment. An educational program is an accredited program which leads to an academic diploma, degree or certificate and has reasonable employment opportunity. A licensed substance abuse program shall be considered an educational program for eligibility purposes.
- *physical or mental incapacity* (if the Lead Agency provides such services to children age 13 and older) See special needs definition (#7).
- *protective services* Children who have either experienced abuse or neglect or are at risk of abuse or neglect as a result of their parent/primary caregiver's use and/or abuse of alcohol or other drugs. CCDF funds are not used for children in protective services or under the care of the Department of Human Services, Children's Services Division.
- residing with Children shall reside with a parent, who is the person responsible for the care, control and supervision of the child. Parent means a parent by blood, marriage or adoption, legal guardian, or other person standing in loco parentis.
- *special needs child* a child or youth under age 18 who may require a level of care above the norm for his/her age due to disabilities, emotional or behavioral disorders, or special health care needs.
- *very low income* 150 percent of Federal Poverty Level.

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• working (include minimum hours if applicable) – Employment in an occupation which provides earned income and requires periodic absence from, or an inability to care for a dependent child. Earned income includes (a) compensation for services performed, (b) income from on-the-job training, or other paid work experience, (c) in-kind income in

exchange for work performed, (d) income from self-employment, (e) flexible benefits that the employee has the option of taking in cash.

- Additional terminology related to conditions of eligibility or priority established by the Lead Agency:
 - Child of a teen parent child care for parents under the age of 20 who are actively participating in a high school diploma or high school equivalency program.
 - Child of a parent in substance abuse treatment child care for parents who are
 participating in state approved substance abuse treatment prior to reentry to the work
 force. The treatment service must include a recognized women's program.
 - o Child of a parent in farm work child care for parents employed in migrant and/or seasonal agriculture as defined by Oregon Administrative Rules.
 - Child of a post-secondary student parent child care for parents enrolled full-time in vocational schools, community colleges, or institutions of higher education. Studentparents must demonstrate passing grades to maintain eligibility.

Page 74- Oregon Effective Date: October 1, 2007
Amended Effective: ____

ATTACHMENT 1.5a

Oregon Administrative Rule 461-135-0400 Effective 01/01/07 Department of Human Services Specific Requirements; ERDC

The Department makes payments for child care, including care covered by the ERDC program, subject to the provisions of division 165 of this chapter of rules. To be eligible for ERDC, a filing group (see OAR 461-110-0350) must meet the following requirements:

- (1) For a filing group to be eligible for the ERDC-BAS program:
 - (a) At least one caretaker (see OAR 461-001-0000) must receive income from employment, including employment through a work study program. For clients who are in the start-up phase of self-employment, working on commission, or participating in job-related training that is a condition of employment, the requirement to have earned income may be waived for three months; and
 - (b) A child who needs child care must meet the citizenship or alien status requirements of OAR 461-120-0110.

(2) In the ERDC-SBG program:

- (a) At least one caretaker must be an undergraduate student without a bachelor's degree. The student must have been admitted to a two- or four-year post-secondary institution that is eligible for federal financial aid and must be registered for at least twelve quarter hours -- or an equivalent number of credit hours in an institution that does not use the quarter system -- that count toward graduation.
- (b) In addition to meeting the requirements of subsection (a) of this section, a student who applies for the ERDC-SBG program on or after July 1, 2005 must have been admitted to a two- or four-year non-profit, generally accredited institution of higher education located in Oregon, including community colleges, that is eligible for federal financial aid.
- (c) A caretaker who meets the requirements of subsection (a) of this section must attend school for at least:
 - (A) Three out of four school quarters per or two semesters each academic year; or
 - (B) In an institution that does not use the quarter or semester system, a portion of the academic year equivalent to the portion required by paragraph (A) of this subsection.
- (d) A student may use ERDC-SBG benefits for child care needed in order to work during an absence from school or to attend school during a term in which the student is attending school less than 12 credit hours if:

- (A) The student intends to attend school at least 12 credit hours the following term; and
- (B) The absence or part-time status does not exceed:
 - (i) One out of four school quarters for students on the quarter system.
 - (ii) The summer break period for students in the semester system.
 - (iii) In an institution that does not use the quarter or semester system, a portion of the academic year equivalent to the portion allowed by subparagraph (i) or (ii) of this paragraph.
- (e) Students must maintain good standing according to the standards of the institution they are attending.
- (f) Students must complete at least 36 quarter hours -- or the equivalent in an institution that does not use the quarter system -- that count toward graduation each academic year.
- (g) Participation in the student child care program is limited to a total of six years.
- (3) The family must have an allowable child care need as described in OAR 461-160-0040. If in the filing group there are two adults who are required to be in the filing group, and if one of the adults is unemployed, the unemployed adult is considered available to provide child care, making the group ineligible, except in the following situations:
 - (a) The unemployed adult is physically or mentally unable to provide adequate child care.
 - (b) The unemployed adult is unavailable to provide care while participating in requirements of a case plan (see OAR 461-001-0020 and 461-001-0025) other than requirements associated with post-secondary education. In the ERDC-SBG program only, the unemployed adult meets the requirements of section (2) of this rule.
- (4) The caretaker must use a child care provider who meets the requirements in OAR 461-165-0160 and 461-165-0180.
- (5) A client is not eligible for a child care payment in the ERDC program for more than six calendar months if the client is unwilling to obtain for the child a Certificate of Immunization Status.
- (6) It is a requirement for eligibility in the ERDC-BAS program that child care is necessary to enable the caretaker to remain employed.

Stat. Auth.: ORS 411.060

Stats. Implemented: ORS 411.060

Oregon Administrative Rule 461-165-0180 Effective 07/01/04 Department of Human Services

Eligibility of Child Care Providers

To be eligible for child care payment from the Department, a provider must meet all of the requirements in sections (1), (2), (3), (4) and (5) of this rule.

- (1) The provider must submit a completed Department listing form to the Department. If information available to the Department provides no basis for denial, the Department will approve the provider to receive payment for child care from the Department unless:
- (a) The provider was previously found ineligible for payment and was not subsequently determined to be eligible; or
- (b) The Department determines, following completion of Criminal History (CH) and Child Protective Service (CPS) records checks, that the provider, or other subject person, is not eligible for payment.
- (2) The provider must:
- (a) Allow the Department to inspect the site of care while child care is provided.
- (b) Keep daily attendance records that show the arrival and departure times each day for each child in care and billing records for each child receiving child care benefits from the Department. The provider must keep the records for 12 months and provide them to Department staff on request.
- (c) Be the person who actually provides the child care. The provider must notify the Department before using someone else to supervise children on a temporary basis.
- (d) Not be in the same filing group as the child cared for and must not be the child's parent.
- (e) Provide evidence of compliance with the Department's administrative rules, upon request of Department staff.
- (f) Not bill a Department client for an amount collected by the Department to recover an overpayment or an amount paid by the Department to a creditor of the provider because of a lien, garnishment, or other legal process.
- (3) The provider must provide child care in a manner that does not involve a substantial risk to the health or safety of children in the provider's care. This determination is based on a review of CH and CPS records, an investigation of complaints, if any, and information provided by another agency.
- (4) Each provider must meet the requirements of either subsection (a) or (b) of this section:
- (a) A provider subject to OAR 414-205-0000 to 414-205-0170, 414-300-0000 to 414-300-0440, or 414-350-0000 to 414-350-0250 must be currently certified or registered with the Child Care Division (CCD) of the Employment Department and be in compliance with the applicable rules.
- (b) A provider exempt from the rules specified in subsection (a) of this section must:
- (A) Submit names of the following persons together with their authorizations for a record check through the CH record system maintained by the Oregon State Police and the CPS record system maintained by the Department:
- (i) The provider and each person the provider uses to supervise children in his or her absence.
- (ii) In the case of a provider who provides care for children in the provider's home:
- (I) Each person 16 years of age or older who lives in the provider's home; and

- (II) Each person who frequently visits the home of the provider during the hours care is provided and may have unsupervised access to a child there.
- (iii) The site director of a child care facility exempt from the requirement to be certified by CCD, and each employee of the facility who may have unsupervised access to children in the facility.
- (B) Comply with the requirements of OAR 461-165-0400.
- (C) Meet the following requirements:
- (i) Be in such physical and mental health as will not adversely affect his or ability to care for a child in care and either:
- I. Be 18 years of age or older, or
- II. Be 16 or 17 years of age and listed with the Department in active status before May 1, 2004. When a provider under the age of 18 applies to be listed, a responsible adult must also sign the application and must jointly assume all the responsibilities of the minor provider, including the obligation to repay an overpayment. An adult whose child is cared for by the minor provider may not serve as the responsible adult if the Department makes a payment for that care.
- (ii) Report to the Department, with respect to any person covered by paragraph (3)(b)(A) of this rule, any arrest and any involvement with CPS or any other agency that provides child protective services.
- (iii) Report to the Department any change to his or her name or address and the addition of any person to the household within 10 days of occurrence.
- (iv) Report suspected child abuse of any child in his or her care to CPS or a law enforcement agency.
- (v) Supervise each child in care at all times.
- (vi) Prevent persons who have demonstrated behavior that may have a detrimental effect on a child from having access to the children in his or her care.
- (vii) Allow custodial parents of children in his or her care to have immediate access to their children at all times.
- (viii) Inform parents of the need to obtain immunizations for their children.
- (ix) Take reasonable steps to protect children in his or her care from the spread of infectious diseases.
- (x) Provide information, in a manner specified by the Department, required to conduct CH and CPS records checks or determine whether the provider meets health and safety requirements.
- (D) Ensure that the facility where care is provided meets the following standards, unless the care is provided in the home of the child. A provider who provides care where the child lives must meet only the requirements of subparagraph (iii) of this paragraph.
- (i) The facility has safe drinking water.
- (ii) The facility has a working smoke detector on each floor level and in any area where children nap.
- (iii) All floor levels used by children have two usable exits to the outdoors (a sliding door or window that can be used to evacuate children is considered a usable exit), or, if a second floor is used for child care, the provider has a written plan for evacuating children in an emergency.
- (iv) Fireplaces, space heaters, electrical outlets, wood stoves, stairways and other hazards have barriers to protect children.
- (v) Firearms, ammunition, and other dangerous items such as medicine, drugs, cleaning supplies, paints, plastic bags, and poisonous and toxic materials are kept in a secure place out of children's reach.
- (vi) The building, grounds, toys, equipment and furniture are maintained in a clean, sanitary and hazard-free condition.

- (vii) The facility has a telephone in operating condition.
- (5) A provider is not eligible to receive a child care payment if the Department has referred an overpayment against the provider to a collection agency and the claim is unsatisfied.

Stat. Auth.: ORS 181.537 & ORS 411.060

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Stats. Implemented: ORS 181.537, ORS 411.060 & ORS 411.122

ATTACHMENT 1.5b

OCCF Guidelines for Use of Child Care and Development Funds (CCDF)

(Consistent with Interagency Agreement with Child Care Division, OAR Guidelines 423-010-0024 (2), Federal Regulations under 45 CFR Parts 98 and 99 and FFY 2008-2209 State Child Care and Development Fund Plan)

Purpose of Federal Child Care and Development Funds (CCDF): CCDF dollars are composed of two categories: subsidies and quality. Subsidy dollars are administered by the Child Care Division and contracted to the Department of Human Services. Quality dollars are the most flexible funds states have and the Child Care Division has wide latitude in how they are spent. These funds provide a way for communities to extend the reach of CCDF beyond families that are eligible for subsidies.

The majority of quality funds are contracted to a wide variety of organizations in the child care system that provide training, technical assistance, child care networks, recruitment and retention services, child care workforce professional development, compensation initiatives, or other quality enhancements. Coordination and collaboration between child care system partners and their programs is extremely important to meet the needs of children of working families, maximize resources, and avoid duplication of services.

Planning: Local Commissions on Children and Families are designated in Oregon statute (417.705 to 417.777) to lead and coordinate planning across the continuum of services for children, youth and their families. Planning for early childhood systems will include local resource and referral agencies, school age practitioners, and child care providers.

Eligibility: Children served with CCDF funds must:

- 1. be under the age of 13, or under 19 if physically or mentally incapable of self-care, or under court supervision;
- 2. reside with a family who's income does not exceed 85 percent of the State Median Income (SMI) for a family of the same size (to be eligible to receive DHS subsidy); and
- 3. have a parent(s) who is (are) working or attending a job training or educational program, or receive or need to receive protective services.

Programs and Services contracted by a local Commission on Children and Families (LCCF):

- Activities shall support Oregon's child care infrastructure and promote outcomes identified
 in the local coordinated comprehensive plan. Outcomes shall be consistent with the State
 CCDF plan and priorities identified by the Childhood Care and Education Coordinating
 Council. Strategies include:
 - a. Increase the availability and quality of hard-to-find child care including infant/toddler¹, school-age, non-traditional hours, sick, and/or children with special needs²;

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¹ Infant and Toddler Earmark: at least twenty percent (20%) of LCCF funds shall be for activities to improve the availability of quality child care for infants and toddlers and/or support activities that inform the child care workforce and the public about the impact of quality care and education during the earliest years of a child's life on later success in life

- b. Improve child care quality through provider-focused efforts, including recruitment and retention strategies, training and professional development, and compensation initiatives.
- c. Improve child care quality through the development and/or enhancement of the local early childhood system, focusing on the childhood care and education component.
- 2. Activities shall support the following state approved performance measures:
 - Number 4 Number of providers in the Oregon Registry at Level One or higher.
 - Number 12 Percent of providers serving children with special needs.
 - Number 15 Percent of child care providers willing to care for infants and toddlers.
 - Number 16 Percent of providers willing to provide child care in non-traditional hours.
- 3. Activities must be research-based and described in the local coordinated comprehensive plan. Counties shall further demonstrate efforts to make child care equally available to children of all abilities, as well as ethnically and culturally diverse groups and their families.

Allowable use of funds:

- 1. Child Care and Development Funds (CCDF) may be used for activities to improve child care quality and availability. These activities are identified in 45 CFR Parts 98 and 99, Oregon's Child Care and Development Fund Plan for FFY 2008-2009, and by the Childhood Care and Education Coordinating Council. These activities include:
 - a. Child care provider compensation initiatives, which include enhanced support of child care providers who are participating in professional development;
 - b. Professional development, including training, education, and technical assistance to support child care providers for underserved populations, as determined by the local comprehensive plan, for:
 - 1) Infant and toddler care (CCDF Quality Earmark)
 - 2) School-age or out-of-school time care
 - 3) Children with special needs
 - 4) Non-traditional hours
 - 5) Sick children;
 - c. Improvement of child care facilities to meet state licensing health and safety regulations and access for children with special needs;
 - d. Environmental improvements of child care facilities such as use of environmental rating scales, mini-grants for toys and educational equipment, and financial and/or technical assistance for program accreditation.
 - e. Enhance local resource and referral agencies core services:

² Definition of a Child with Special Needs: A child with disabilities under age 18 and who may require a level of care over and above the norm for his/her age due to a physical, developmental, mental behavioral, or medical disability such as mental retardation, cerebral palsy, Down Syndrome, autism, serious emotional and behavioral disorders, attention deficit hyperactivity disorder, mental health disorders, hearing impairment, vision impairment, physical or mobility disabilities, serious chronic illness, brain injury and other disabilities. The higher level of care may include, but is not limited to, additional staffing, special medical procedures, adaptive equipment, structural or other types of accommodation. The disability must be verified by one of the following: 1) documentation by a physician, nurse practitioner, licensed/certified psychologist or clinical social worker; 2) eligibility for Early Intervention/Early Childhood Special Education services or school-age special education services; or 3) eligibility for Supplemental Security Income (SSI).

- 1) Provide referrals and education to parents,
- 2) Recruit and educate new providers,
- 3) Provide assistance to businesses on work/life initiatives,
- 4) Maintain a database of child care supply
- f. Health/mental health consultation services to child care providers that link with existing child care initiatives.
- g. Enhancements to improve the quality of afterschool or out of school time programs for children ages 5-12, particularity those from low-income families, communities of color, and those with special needs.
 - 1) staff training and development tied to compensation initiatives;
 - 2) compliance with or maintenance of licensing requirements;
 - 3) National Afterschool Accreditation (NAA);
 - 4) contracted services from guest trainers;
 - 5) culturally relevant/anti-bias materials;
 - 6) adaptive play equipment;
 - 7) field trip costs and associated transportation;
 - 8) service-learning projects;
 - 9) academic enrichment activities;
 - 10) age-appropriate furniture;
 - 11) portable storage equipment;
 - 12) computers and educational software;
 - 13) parent involvement activities;
 - 14) food, as long as it is part of an enrichment activity such as a cooking class, not for food that is part of regularly offered snacks.

Non-allowable use of funds includes the following:

- 1. Any purposes not directly related to child care quality.
- 2. Supplantation of general fund or other dollars that pay for staff or operating costs of preschool, out-of-school time, afterschool programs, Head Start (including wrap-around care), Oregon pre-kindergarten, or half-day preschool.
- 3. Administrative costs as described in 45 CFR Part 98.52 (a), which includes operating costs.
- 4. Purchase of child care slots or scholarships to pay for child care. This includes support of targeted populations that are already funded by or eligible to receive funds from the Child Care Division:
- a. Migrant and seasonal farm workers;
- b. Inclusive child care for children with disabilities;
- c. Teen parent programs; and
- d. Parents in alcohol or drug treatment programs.
- 5. Respite care, drop in child care programs, or short term child care associated with group sessions and meetings.
- 6. Child care for the homeless, children in foster care, or relief nurseries.
- 7. Afterschool programs: staff salaries, student scholarships, rent, regular food costs, remodeling, renovation, operational costs or capital outlays such as permanent fixtures, built in cabinets, wiring for computers, or playground equipment.
- 8. Purchase of real estate, building new, or remodeling existing facilities (except to bring them in compliance with state licensing health and safety requirements).
- 9. LCCF planning activities not directly related to child care.

10. Duplication of services provided by other programs funded with CCDF dollars.

Criteria for child care providers to access CCDF funds:

- 1. Providers must be a center-based, family child care, or in-home care receiving compensation for services. Provider must:
 - a. be licensed under applicable state law OR be listed as an exempt provider under Department of Human services eligibility guidelines;
 - b. satisfy state and local requirements, including health and safety requirements, applicable to the child care services provided;
 - c. be 18 years of age or older.
- 2. Out of school time program providers must participate in quality improvement activities in order to receive CCDF funds. **Note:** Licensing requirements and clear definitions for these providers are under development and may result in required licensing of programs in the future.

Resources for LCCF comprehensive planning purposes:

- 1. *Oregon Administrative Rule 423-010-0024(2)*, can be downloaded from the OCCF web site: http://www.oregon.gov/OCCF/Mandate/malaws.shtml
- 2. U.S. Department of Health and Human Services, Administration for Children and Families, 45 CFR Parts 98 and 99, RIN 0970-AB74, Child Care and Development Fund, Federal Register: July 24, 1998 (Volume 63, Number 142). Parts 98 and 99 are the official regulations for the Child Care and Development Fund and can be downloaded from the ACF web site: http://www.acf.hhs.gov/programs/ccb/policy1/current/finalrul/fr072498.doc
- 3. Oregon State Child Care and Development Fund Plan for FFY 2008-2009, developed by the Oregon Childhood Care and Education Coordinating Council. Lead Agency: Oregon Employment Department, Child Care Division. The complete plan for Oregon's use of federal CCDF funds for October1, 2008 through September 30, 2009 is available at: www.childcareinoregon.org

ATTACHMENT 2.1.1A

OREGON'S CHILD CARE SYSTEM LOGIC MODEL

Can be found at:

http://www.employment.oregon.gov/EMPLOY/CCD/docs/Logi c_Model_0212.pdf

Amended Effective: _

ATTACHMENT 2.1.2 State Plan for Early Childhood Program Coordination

Oregon's Early Childhood Systems Plan and Executive Summary can be found at:

http://www.oregon.gov/DHS/ph/ofhs

ATTACHMENT 2.2a

NOTICE OF PUBLIC HEARING

From: Craig C SPIVEY

Albany Democrat Herald; Argus Observer; Ashland Daily Tidings; Associated Press; Baker City Herald; Burns Times Herald; Capital Press; Catholic Sentinel; Central Oregonian; Clackamas County Review; Clatskanie Chief; Confederated Umatilla Journal; Coquille Valley Sentinel; Corvallis Gazette Times; Curry County Reporter; Deschutes Source; East County News; East Oregonian; El Centinela de los Hispanos; El Hispanic News; Elise Hamner; Eugene Weekly; Forrest Grove Times; Frazier, Joe; Gresham Outlook; Headlight Herald; Hells Canyon Journal; Herald & News; Hillsboro Argus; Hood River News; Jennifer Sargent; Just Out; Keizertimes; Klamath County Report; LaGrande Observer; Lake County Examiner; Latin News; Lebanon Express; Lerten, Barney; Linfield Review; Mail Tribune; Mckenzie River Reflections; Multnomah Village Post; Myrtle Point Herald; Newport News Times; News Register; Port Orford News; Portland Family Magazine; Portland Tribune; Portland Tribune; Record Courier; Reuters News Service; Rogue River Press; Salem News.com; Sandy Post; Seaside Signal; Skagit Valley Herald; Skidmore, Sarah; South Lincoln County News; Spokesman; Springfield News; St. Johns Review; The Bend Bulletin; The Bridge; The Business Journal; The Canby Herald; The Chronicle; The Curry Coastal Pilot; The Daily Astorian; The Daily Courier; The Daily Emerald; The Daily Journal of Commerce; The Dalles Chronicle; The Douglas County Mail; The Eastern Voice; The Heppner Gazette; The Hermiston Herald; The Jewish Review; The Madras Pioneer; The Mollala Pioneer; The New Era; The Newberg Graphic; The News Guard; The News Review; The Nugget; The Oregon Metro East; The Oregonian; The Oregonian; The Oregonian; The Oregonian; The Oregonian West Metro; The Pioneer Log; The Portland Mercury News; The Portland Observer; The Portland Tribune; The Regal Courier; The Register Guard; The Sellwood Bee; The Silverton Appeal(...)

Date: 5/29/2007 9:48:22 AM **Subject:** Public Notice

FOR IMMEDIATE RELEASE

Child Care Division WorkSource Oregon Employment Department 503-947-1243

Sonja.Svenson@state.or.us PUBLIC NOTICE Notice is hereby given that the Oregon Employment Department, Child Care Division, will hold a hearing for public comment on the 2008-2009 Child Care and Development Fund (CCDF) state plan. The plan was developed in coordination and consultation with state and local child care, early childhood, and school age care agencies and advocates under the provisions of 45 Code of Federal Regulations Parts 98 and 99. Funding from the CCDF program assists with affordability, availability, quality, and safety of child care in Oregon. The hearing will be held on Tuesday, June 26, 2007 from 6 to 7 p.m. at Roth's West Salem, Doaks Ferry Room, Salem, Oregon. A copy of the Final Draft plan may be obtained from Sonja Svenson, Child Care Division, P.O. Box 14050, Salem, Oregon 97309-4050 or by accessing the Child Care Division public website at: www.childcareinoregon.org. -30-

Effective Date: October 1, 2007 Amended Effective:

CONTACT: Sonja Svenson

ATTACHMENT 2.2b

Public Comments on 2008-09 State CCDF Plan

No	comments were	e received or	the State	CCDF	Plan at th	e Public	Hearing on	June 26, 2	2007.
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ATTACHMENT 3.1.1

DEPARTMENT OF HUMAN SERVICES

Worker's manual, policy handbook, or other printed guidelines for administering the child care subsidy program.

http://www.oregon.gov/DHS/children/childcare/main.shtml

ATTACHMENT 3.2A

PAYMENT RATES

461-155-0150

Temp. Eff. 10-1-07 through 3-29-08 Child Care Eligibility Standard, Payment Rates, and Copayments

The following provisions apply to child care in the ERDC, JOBS, JOBS Plus, and TANF programs:

- (1) The following definitions apply to the rules governing child care rates:
 - (a) Infant: A child aged newborn to 1 year.
 - (b) Toddler: A child aged 1 year to 3 years.
 - (c) Preschool: A child aged 3 years to 6 years.
 - (d) School: A child aged 6 years or older.
- (e) Special Needs: A child who meets the age requirement of the program (ERDC or TANF) and who requires a level of care over and above the norm for his or her age due to a physical, behavioral or mental disability. The need for a higher level of care must be determined by the provider and the disability must be verified by one of the following:
 - (A) A physician, nurse practitioner, licensed or certified psychologist or clinical social worker.
 - (B) Eligibility for Early Intervention and Early Childhood Special Education Programs, or school-age Special Education Programs.
 - (C) Eligibility for SSI.
- (2) The following definitions apply to the types of care specified in the child care rate charts:
- (a) The *Standard Family Rate* applies to child care provided in the provider's own home or in the home of the child when the provider does not qualify for the enhanced rate allowed by subsection (b) of this section.
- (b) The *Enhanced Family Rate* applies to child care provided in the provider's own home or in the home of the child when the provider meets the training requirements of the Oregon Registry entry level, established by the Oregon Center for Career Development in Childhood Care and Education.
- (c) The *Registered Family Rate* applies to child care provided in the provider's own home when the provider meets criteria established by the Child Care Division.
- (d) The *Certified Family Rate* applies to child care provided in a residential dwelling that is certified by the Child Care Division as a Certified Family Home. To earn this designation, the facility must be inspected, and both provider and facility are required to meet certain standards not required of a registered family provider.
- (e) The *Standard Center Rate* applies to child care provided in a facility that is not located in a residential dwelling and is exempt from Child Care Division Certification rules (see OAR 414-300-0000).
- (f) The *Enhanced Center Rate* applies to child care provided in an exempt center whose staff meet the training requirements of the Oregon Registry entry level established by the Oregon Center for Career Development in Childhood Care and Education. Eligibility to receive

the enhanced center rate for care provided in an exempt center is subject to the following requirements:

- (A) A minimum of one staff member for every 20 children in care must meet the Oregon Registry entry level training requirements noted in paragraph (2)(b) of this rule.
- (B) New staff must meet the Oregon Registry entry level training requirements within 90 days of hire, if necessary to maintain the trained staff-to-children ratio described in paragraph (A) of this subsection.
- (C) There must be at least one person present where care is provided who has a current certificate in infant and child CPR and a current American Red Cross First Aid card or an equivalent.
- (g) An exempt center is eligible to receive the enhanced rate for a maximum of six months while in the process of meeting the requirements of subsection (2)(f) of this rule if it files a statement of intent to meet the requirements on a form prescribed by the Department.
- (h) An enhanced rate will become effective not later than the second month following the month in which the Department receives verification that the provider has met the requirements of subsection (2)(b), (f), or (g) of this rule.
- (i) The *Certified Center Rate* applies to child care provided in a center that is certified by the Child Care Division.
- (3) Subject to the provisions in section (6) of this rule, the monthly limit for each child's child care payments is the lesser of the amount charged by the provider or providers and the following amounts:
 - (a) The monthly rate provided in section (6) of this rule.
- (b) The product of the hours of care, limited by section (4) of this rule, multiplied by the hourly rate provided in section (6) of this rule.
- (4) The number of payable billable hours for a child is limited as follows:
 - (a) For the ERDC-BAS and TANF programs, the total in a month may not exceed:
 - (A) The number of hours of care necessary for the client to maintain his or her job including, for clients in the JOBS Plus program, the time the client searches for unsubsidized employment and for which the employer pays the client, or to participate in activities included in a *case plan* (see OAR 461-190-0161 and OAR 461-190-0310); or
 - (B) 125 percent of the time the client is at work or participating in an approved activity of the JOBS program.
- (b) For the ERDC-SBG program, the total may not exceed the number of hours of care necessary for the client to maintain his or her education, training or employment. The total may not exceed 125 percent of the sum of 200 percent of class hours and the time the client is at work.
- (c) In the ERDC-BAS and TANF programs, for a client who earns less than state minimum wage or is self-employed, the total may not exceed 125 percent of the anticipated earnings divided by the state minimum wage not to exceed 172 hours (which is full time). The limitation of this subsection is waived for the first three months of the client's employment.
- (5) The following provisions apply to all programs:

- (a) Providers not eligible for the enhanced or licensed rate will be paid at an hourly rate for children in care less than 158 hours per month subject to the maximum full-time monthly rate.
- (b) Providers eligible for the enhanced or licensed rate will be paid at an hourly rate for children in care less than 136 hours a month unless the provider customarily bills all families at a part-time monthly rate subject to the maximum full-time monthly rate.
- (c) At their request, providers eligible for the enhanced or licensed rate may be paid at the part-time monthly rate if they provide 63 or more hours of care in the month and customarily bill all families at a part-time monthly rate.
- (d) Unless required by the circumstances of the client or child, the Department will not pay for care at a monthly rate to more than one provider for the same child for the same month.
- (e) The Department will pay at the hourly rate for less than 63 hours of care in the month subject to the maximum full-time monthly rate.
 - (f) The Department will pay for up to five days each month the child is absent if:
 - (A) The child was scheduled to be in care and the provider bills for the amount of time the child was scheduled to be in care;
 - (B) The absent child's place is not filled by another child; and
 - (C) It is the provider's policy to bill all families for absent days.
- (g) The Department will not pay for more than five consecutive days of scheduled care for which the child is absent.
- (6) The limit in any month for child care payments on behalf of a child whose caretaker has special circumstances, defined in section (7) of this rule, is the lesser of the following:
 - (a) The amount billed by the provider or providers; and
- (b) The monthly rate established in section (8) of this rule multiplied by a factor, limited to 1.5, determined by dividing the number of hours billed by 215.
- (7) The limit allowed by section (6) of this rule is authorized once the Department has determined the client has special circumstances. For the purposes of this rule, a client has special circumstances when it is necessary, in order for the client to perform the requirements of his or her employment or training, to obtain child care for a child in excess of 215 hours in a month.
- (8) The payment available for care of a child who meets the special needs criteria described in subsection (1)(e) of this rule is increased in accordance with OAR 461-155-0151 if:
- (a) The child requires significantly more direct supervision by the child care provider than normal for a child of the same age; and
- (b) The child is enrolled in a local school district Early Intervention or Early Childhood Special Education program or school-age Special Education Program. The enrollment required by this subsection is waived if determined inappropriate by a physician, nurse practitioner, licensed or certified psychologist, clinical social worker, or school district official.
- (9) The following are the child care rates. The rates are based on the type of provider, the location of the provider (shown by zip code), the age of the child, and the type of billing used (that is, hourly or monthly).

(a)

Group Area A

STANDARD RATE MAXIMUMS (Not Licensed)

	Standard Fa	amily Rate	Standard Center Rate			
	1-157	158-215	1-157	158-215		
	Hourly	Monthly	Hourly	Monthly		
Infant	\$2.64	\$493	\$3.53	\$675		
Toddler	\$2.64	\$466	\$3.41	\$671		
Preschool	\$2.64	\$440	\$2.89	\$529		
School	\$2.64	\$436	\$3.23	\$524		
Special Needs	\$2.64	\$493	\$3.53	\$675		

ENHANCED RATE MAXIMUMS (Not Licensed)

	Enhanced	Family Rate	,	Enhanced Center Rate			
	1-62	63-135	136-215	1-62	63-135	136-215	
	Hourly	Part-time	Monthly	Hourly	Part-time	Monthly	
Infant	\$2.85	\$399	\$532	\$3.83	\$574	\$765	
Toddler	\$2.85	\$378	\$504	\$3.65	\$570	\$760	
Preschool	\$2.85	\$356	\$475	\$3.27	\$449	\$599	
School	\$2.85	\$353	\$470	\$3.66	\$445	\$593	
Special Needs	\$2.85	\$399	\$532	\$3.83	\$574	\$765	

LICENSED RATE MAXIMUMS

	Registe	red Family	Rate	Certified Family Rate			Certified Center Rate		
	1-62 63-135 136-215			1-62	63-135	136-215	1-62	63-135	136-215
	Hourly Part-time Monthly H		Hourly	Part- time	Monthly	Hourly	Part-time	Monthly	
Infant	\$3.00	\$420	\$560	\$4.25	\$645	\$860	\$4.50	\$675	\$900
Toddler	\$3.00	\$398	\$530	\$4.00	\$559	\$745	\$3.90	\$671	\$894
Preschool	\$3.00	\$375	\$500	\$4.00	\$516	\$688	\$3.85	\$529	\$705
School	\$3.00	\$371	\$495	\$4.00	\$450	\$600	\$4.30	\$524	\$698
Special	ial \$3.00 \$420 \$560		\$4.25	\$645	\$860	\$4.50	\$675	\$900	
Needs									

Zip Codes for Group Area A:

Page 92- Oregon

Portland, Bend, Eugene, Corvallis, Springfield, Monmouth and Ashland areas

97004	97005	97006	97007	97008	97009	97010	97013	97015	97019	97022	97023
97024	97027	97028	97030	97031	97034	97035	97036	97041	97045	97055	97060
97062	97064	97068	97070	97080	97106	97109	97112	97113	97116	97119	97123
97124	97125	97132	97133	97135	97140	97149	97201	97202	97203	97204	97205
97206	97209	97210	97211	97212	97213	97214	97215	97216	97217	97218	97219
97220	97221	97222	97223	97224	97225	97227	97229	97230	97231	97232	97233
97236	97239	97242	97258	97266	97267	97268	97292	97330	97331	97333	97339
97351	97361	97371	97376	97401	97402	97403	97404	97405	97408	97454	97455
97477	97478	97482	97520	97525	97701	97702	97707	97708	97709		

Effective Date: October 1, 2007

Amended Effective: ____

(b)

Group Area B

STANDARD RATE MAXIMUMS (Not Licensed)

	Standard Fa	amily Rate	Standard Center Rate			
	1-157	158-215	1-157	158-215		
	Hourly	Monthly	Hourly	Monthly		
Infant	\$2.20	\$400	\$2.96	\$473		
Toddler	\$2.20	\$396	\$2.91	\$467		
Preschool	\$2.20	\$374	\$2.34	\$356		
School	\$2.20	\$352	\$2.34	\$345		
Special Needs	\$2.20	\$400	\$2.96	\$473		

ENHANCED RATE MAXIMUMS (Not Licensed)

	Enhanced	Family Rate	,	Enhanced Center Rate			
	1-62	63-135	136-215	1-62	63-135	136-215	
	Hourly	Part-time	Monthly	Hourly	Part-time	Monthly	
Infant	\$2.38	\$324	\$432	\$3.17	\$380	\$506	
Toddler	\$2.38	\$321	\$428	\$3.11	\$375	\$500	
Preschool	\$2.38	\$303	\$404	\$2.65	\$303	\$404	
School	\$2.38	\$285	\$380	\$2.65	\$293	\$391	
Special Needs	\$2.38	\$324	\$432	\$3.17	\$380	\$506	

LICENSED RATE MAXIMUMS

	Registe	red Family	Rate	Certified Family Rate			Certified Center Rate		
	1-62 63-135 136-215			1-62	63-135	136-215	1-62	63-135	136-215
	Hourly Part-time Monthly H		Hourly	Part- time	Monthly	Hourly	Part-time	Monthly	
Infant	\$2.50	\$341	\$455	\$3.00	\$371	\$495	\$3.60	\$446	\$595
Toddler	\$2.50	\$338	\$450	\$3.00	\$345	\$460	\$3.52	\$431	\$575
Preschool	\$2.50	\$319	\$425	\$3.00	\$338	\$450	\$3.12	\$356	\$475
School	\$2.50	\$300	\$400	\$2.65	\$375	\$500	\$3.12	\$345	\$460
Special	cial \$2.50 \$341 \$455		\$3.00	\$371	\$495	\$3.60	\$446	\$595	
Needs									

Zip Codes for Group Area B:

Salem, Medford, Roseburg, Brookings and areas outside the metropolitan areas in Eugene and Portland

97002	97011	97014	97017	97038	97042	97044	97048	97049	97051	97053	97056
97058	97067	97071	97103	97107	97108	97110	97111	97114	97115	97117	97118
97122	97127	97128	97131	97134	97138	97141	97143	97146	97148	97301	97302
97303	97304	97305	97306	97307	97309	97310	97317	97321	97322	97325	97326
97327	97336	97338	97341	97343	97344	97348	97352	97355	97357	97362	97365
97366	97367	97370	97372	97374	97377	97378	97380	97381	97383	97385	97386
97389	97391	97415	97420	97423	97424	97426	97431	97444	97446	97448	97452
97456	97465	97470	97487	97489	97501	97502	97503	97504	97524	97534	97535
97756	97759	97760	97801	97812							

Effective Date: October 1, 2007 Page 93- Oregon Amended Effective: ____

(c)

Group Area C

STANDARD RATE MAXIMUMS (Not Licensed)

	Standard Fa	amily Rate	Standard Center Rate			
	1-157	158-215	1-157	158-215		
	Hourly	Monthly	Hourly	Monthly		
Infant	\$2.20	\$374	\$2.64	\$421		
Toddler	\$1.98	\$352	\$2.28	\$421		
Preschool	\$1.76	\$348	\$1.93	\$312		
School	\$1.76	\$348	\$1.93	\$312		
Special Needs	\$2.20	\$374	\$2.64	\$421		

ENHANCED RATE MAXIMUMS (Not Licensed)

	Enhanced	Family Rate		Enhanced Center Rate			
	1-62	63-135	136-215	1-62	63-135	136-215	
	Hourly	Part-time	Monthly	Hourly	Part-time	Monthly	
Infant	\$2.38	\$303	\$404	\$2.99	\$351	\$468	
Toddler	\$2.14	\$285	\$380	\$2.55	\$344	\$458	
Preschool	\$1.90	\$281	\$375	\$2.13	\$252	\$336	
School	\$1.90	\$281	\$375	\$2.13	\$251	\$334	
Special Needs	\$2.38	\$303	\$404	\$2.99	\$351	\$468	

LICENSED RATE MAXIMUMS

	Registe	red Family	Rate	Certified Family Rate			Certified Center Rate		
	1-62 63-135 136-215			1-62	63-135	136-215	1-62	63-135	136-215
			Hourly	Part- time	Monthly	Hourly	Part-time	Monthly	
Infant	\$2.50	\$319	\$425	\$2.50	\$375	\$500	\$3.52	\$413	\$550
Toddler	\$2.25	\$300	\$400	\$2.50	\$300	\$400	\$3.00	\$404	\$539
Preschool	\$2.00	\$296	\$395	\$2.25	\$300	\$400	\$2.50	\$296	\$395
School	\$2.00	\$296	\$395	\$2.40	\$300	\$400	\$2.50	\$270	\$360
Special	\$2.50	\$319	\$425	\$2.50	\$375	\$500	\$3.52	\$413	\$550
Needs									

Zip Codes for Group Area C: Balance of State, Other State Zips

97001	97016	97018	97020	97021	97026	97029	97032	97033	97037	97039
97040	97050	97054	97057	97063	97065	97101	97102	97121	97130	97136
97137	97144	97145	97147	97324	97329	97335	97342	97345	97346	97347
97350	97358	97360	97364	97368	97369	97375	97384	97388	97390	97392
97394	97396	97406	97407	97409	97410	97411	97412	97413	97414	97416
97417	97419	97425	97427	97428	97429	97430	97432	97434	97435	97436
97437	97438	97439	97441	97442	97443	97447	97449	97450	97451	97453
97457	97458	97459	97461	97462	97463	97464	97466	97467	97469	97472
97473	97476	97479	97480	97481	97484	97486	97488	97490	97491	97492

97493	97494	97495	97496	97497	97498	97499	97522	97523	97526	97527
97530	97531	97532	97533	97536	97537	97538	97539	97540	97541	97543
97544	97601	97603	97604	97620	97621	97622	97623	97624	97625	97626
97627	97630	97632	97633	97634	97635	97636	97637	97638	97639	97640
97641	97710	97711	97712	97720	97721	97722	97730	97731	97732	97733
97734	97735	97736	97737	97738	97739	97741	97750	97751	97752	97753
97754	97758	97761	97810	97813	97814	97817	97818	97819	97820	97823
97824	97825	97826	97827	97828	97830	97833	97834	97835	97836	97837
97838	97839	97840	97841	97842	97843	97844	97845	97846	97848	97850
97856	97857	97859	97861	97862	97864	97865	97867	97868	97869	97870
97873	97874	97875	97876	97877	97880	97882	97883	97884	97885	97886
97901	97902	97903	97904	97905	97906	97907	97908	97909	97910	97911
97913	97914	97918	97920	•	•					

ATTACHMENT 3.2B

Oregon Child Care Market Rate Study – 2006 Complete document is available at:

http://www.oregon.gov/DHS/children/publications/cc/2006marketratestudy.pdf

EXECUTIVE SUMMARY

Starting with the Family Support Act of 1988, "federal funding requirements have stipulated that child care subsidy rates be informed by market rates." In 1990 the federal government began a major investment in child care with the passage of the Child Care and Development Block Grant Act of 1990. Support of parental choice was a key component of this new block grant program that sent new money to states to support child care. Parental choice and state control of policy remained central when the program was expanded in 1996 as a part of welfare reform legislation. At that time, child care funding became known as the Child Care and Development Fund (CCDF).

The present federal regulatory framework for market rate surveys was made public in the *Federal Register* in August 1998 (45 CFR Parts 98 and 99). As part of this rule, states are required to conduct a child care market rate survey within two years of the effective date of their currently approved CCDF plan.

The purpose of federal policy in having states conduct a market rate survey is to establish maximum child care payment rates high enough to enable subsidy families to enter the child care market in a competitive position to find and afford care. A market rate survey is a tool to be used by states to collect up-to-date information on what providers, within given geographic areas, charge parents for various types of child care. This information is then considered during the state budget process when establishing state subsidy rate policies for providers who serve CCDF eligible families. It should be noted that the federal CCDF

Final Rule is for a survey of the rates or prices charged for child care, not a survey of the cost of child care.

Purpose of the Market Rate Study

The 2006 Market Rate Study identifies child care prices or rates and the geographic distribution of these rates across the state. Rates vary by several factors including the age of child served, type of care (family child care, center, certified family care), the local supply and demand for child care, and providers' perceptions of the capacity of families to pay for care. The 2006 Oregon Market Rate Study examines geographic patterns in the rates charged by providers by age of child served, type of care, and reporting modes (hourly, monthly, etc). This study fulfills the federal requirement that the state complete a market rate survey every two years.

Data Source

Prior studies were completed in 1990, 1992, 1994, 1999, 2000, 2002, and 2004. As in past years, data collected through the local Child Care Resource and Referral (CCR&R) was used as the source of data. The data was created when child care providers report their rates to local CCR&Rs

who, in turn, use rate data to inform parents of provider charges as part of a referral process. The Oregon Child Care Resource and Referral Network (OCCRRN) compiles the data into a single database. In 1999, a sample of providers were pulled from the OCCRRN database and surveyed by phone. In 2006 (as in years other than 1999) the rate data from the OCCRRN database were analyzed. Rates charged by 4,555 family child care providers, 1,079 centers, and 248 certified family providers from every part of the state are included in the database.

Findings

Between 1994 and 2006 statewide rates increased for all ages and types of care. In family child care the hourly rate of toddler care increased 43% since 1994 while in center care the monthly rate increased 59% in the same time period.

Child care markets are local with variation among communities. When rates were analyzed by zip codes across Oregon, patterns around the state appeared. Urban areas and university communities have higher rates than do more rural communities in the state. Some zip codes areas have moved up or down in child care rates over time. As in past studies, however, child care rates fall into three clusters or areas. The map of 2006 Rate Areas graphically depicts how the rates vary across the state (See Map in Appendix E). These three rate areas capture three distinct sets of rates regardless of type of care or age of child served.

Current market rates are substantially higher than the enhanced subsidy rates set by the state of Oregon. The current subsidy rates paid for subsidy eligible children were recently (April 2006) updated with a 2.4% cost of living increase. As authorized by the Oregon Legislature, in 1999 the Department of Human Services (DHS) introduced an enhanced rate for providers who meet the training standards required for licensure by the Child Care Division (CCD). These enhanced rates offer these providers an additional 7% over the standard subsidy rate.

The state enhanced subsidy or payment rate affects parents' access to all types of child care in the community. The study explored access in two ways: (1) percent of slots statewide that can be purchased at the subsidy rate, and (2) percent of provider care by zip code that can be purchased at the subsidy rate. The second measure was created to determine if the amount of access varied by geographic location. Findings include:

- In Oregon, current enhanced rates are adequate to purchase approximately 26% of child care toddler slots statewide (see Table below). One reason for this increase compared to past years is likely due to a recent, April 2006, cost of living boost to all DHS subsidy rates.
- In much of Oregon, however, current enhanced subsidy rates are not adequate to purchase any market child care.

In 38% of Oregon zip code areas that have rates, no care from family child

Effective Date: Octo	ober 1, 2007
Amended Effective:	

care providers can be purchased at the enhanced subsidy rates. In 65% of Oregon zip code areas that have rates, the enhanced subsidy rates are not high enough to purchase any center child care. In about 12% of zip code areas families can purchase over 50% of family child care in the community at the enhanced subsidy rate, and about a fifth of zip code areas families can purchase over 50% of center child care.

The DHS enhanced rate includes both the amount families' pay in copay and the DHS child care subsidy amount. As the following maps show, the value of a child care subsidy, when combined with the family copay, does not fully cover child care rates in the market in most parts of the state. Deeper colors designate geographic areas in which the enhanced subsidy value is enough to cover the rates of few, if any, community child care providers. Examination of the maps indicates that this is a statewide phenomenon rather than one limited to urban areas.

Conclusions

The geographic rate analysis identified three geographic market area boundaries that are generally similar to those identified in the previous market rate studies.

DHS enhanced subsidy rates are adequate to purchase approximately a fourth of market child care slots statewide. In approximately 46 percent of zip code areas the DHS enhanced subsidy rate is not high enough to purchase market child care.

CCR&R data continues to provide a reliable and cost-effective source of data for statewide market rate studies.

Rates should continue to be reported for both child care providers and slots. Analysis should be based on slots since this most accurately represents what families experience when purchasing care.

CCR&Rs should continue to collect rate information in the mode(s) that reflect how providers charge

ATTACHMENT 3.5.1

SLIDING FEE SCALE ERDC COPAY STANDARD OAR 461-155-0150

- (10) This section establishes the ERDC eligibility standard and the client's copayment (copay).
- (a) The ERDC eligibility standard is met for need groups of eight or less if monthly income for the need group is less than 185 percent of the federal poverty level, as described in OAR 461-155-0180(4). The eligibility standard for a need group size of eight applies to any need group larger than eight.
 - (b) The minimum monthly ERDC copay is \$25.
- (c) For families whose income is at or below 50 percent of the 2007 federal poverty level (FPL), the copay is \$25 or 1.5 percent of monthly income, whichever is greater.
- (d) For families whose income is over 50 percent of the 2007 FPL, the copay amount is determined with the following percentage of monthly income:
 - (A) Determine family income as a percent of FPL (rounding to the nearest whole number percentage), subtract 50, and multiply this difference by 0.12.
 - (B) Add 1.5 to the amount in paragraph (A) of this subsection. This sum is the percentage of monthly income to determine the copay amount.
- (11) Effective October 1, 2003, a client's copay is limited to \$25 during the first month the client is eligible for ERDC. This limitation cannot be used in more than one month in any 12 consecutive months.
- (12) The limit in any month for child care payments on behalf of a child whose caretaker is away from the child's home for more than 30 days because the caretaker is a member of a reserve or National Guard unit that is called up for active duty is the lesser of the following:
 - (a) The amount billed by the provider or providers.
 - (b) The monthly rate established in this rule for 215 hours of care.

Stat. Auth.: ORS 411.060, 411.070, 418.100

Stats. Implemented: ORS 411.060, 411.070, 418.100

Co-pay Tab<u>le (10/1/07) Estimator</u>

Family Size									
Income	2	3	4	5	6	7	8		
-	25	25	25	25	25	25	25		
50	25	25	25	25	25	25	25		
100	25	25	25	25	25	25	25		
150	25	25	25	25	25	25	25		
200	25	25	25	25	25	25	25		
250	25	25	25	25	25	25	25		
300	25	25	25	25	25	25	25		
350	25	25	25	25	25	25	25		
400	25	25	25	25	25	25	25		
450	25	25	25	25	25	25	25		
500	25	25	25	25	25	25	25		
550	25	25	25	25	25	25	25		
600	25	25	25	25	25	25	25		
650	25	25	25	25	25	25	25		
700	25	25	25	25	25	25	25		
750	26	25	25	25	25	25	25		
800	31	25	25	25	25	25	25		
850	38	25	25	25	25	25	25		
900	45	28	25	25	25	25	25		
950	52	32	25	25	25	25	25		
1,000	61	39	25	25	25	25	25		
1,050	69	45	30	25	25	25	25		
1,100	77	52	35	25	25	25	25		
1,150	88	59	41	27	25	25	25		
1,200	97	67	47	32	25	25	25		
1,250	109	74	53	37	25	25	25		
1,300	119	83	60	43	30	25	25		
1,350	130	92	66	48	35	25	25		
1,400	144	102	73	55	39	28	25		
1,450	156	110	81	60	44	32	25		
1,500	168	122	89	68	50	37	26		

1,550	183	131	98	73	55	42	31
1,600	197	143	107	82	62	47	36
1,650	213	153	116	88	68	52	39
1,700	227	166	125	97	74	58	44
1,750	243	177	135	104	81	64	49
1,800	260	191	146	113	87	68	53
1,850	276	203	157	121	94	74	59
1,900	295	218	165	129	104	81	65
1,950	312	230	177	139	111	88	71
2,000	330	246	188	148	119	95	76
2,050	351	260	200	159	127	102	82
2,111	374	280	217	171	138	110	90
2,112	OVI	280	217	171	138	113	90
2,150	OVI	290	226	179	143	117	97
2,200	OVI	308	239	189	154	125	102
2,250	OVI	323	252	201	163	134	109
2,300	OVI	341	266	211	173	142	117
2,350	OVI	357	281	224	182	151	125
2,400	OVI	376	292	235	192	160	131
2,450	OVI	392	307	248	201	169	140
2,500	OVI	413	323	260	215	176	149
2,550	OVI	430	338	274	225	185	158
2,600	OVI	451	354	285	236	195	164
2,647	OVI	469	370	300	246	205	173
2,648	OVI	OVI	370	300	246	205	173
2,650	OVI	OVI	370	301	246	205	173
2,700	OVI	OVI	387	313	258	215	183
2,750	OVI	OVI	404	328	272	226	190
2,800	OVI	OVI	422	341	284	237	200
2,850	OVI	OVI	439	357	296	248	210
2,900	OVI	OVI	458	371	308	259	221
2,950	OVI	OVI	473	388	320	271	228
3,000	OVI	OVI	491	401	333	283	239
3,050	OVI	OVI	511	419	350	295	251
3,100	OVI	OVI	530	433	363	307	262

3,150	OVI	OVI	550	452	376	319	270
3,184	OVI	OVI	564	460	384	327	281
3,185	OVI	OVI	OVI	461	384	327	281
3,200	OVI	OVI	OVI	467	390	332	282
3,250	OVI	OVI	OVI	486	404	341	294
3,300	OVI	OVI	OVI	501	418	354	307
3,350	OVI	OVI	OVI	521	436	368	316
3,400	OVI	OVI	OVI	537	451	381	328
3,450	OVI	OVI	OVI	557	466	395	342
3,500	OVI	OVI	OVI	573	481	410	351
3,550	OVI	OVI	OVI	594	496	424	364
3,600	OVI	OVI	OVI	611	512	438	378
3,650	OVI	OVI	OVI	633	532	453	392
3,700	OVI	OVI	OVI	650	548	468	402
3,720	OVI	OVI	OVI	658	556	475	408
3,721	OVI	OVI	OVI	OVI	556	476	409
3,750	OVI	OVI	OVI	OVI	565	484	416
3,800	OVI	OVI	OVI	OVI	581	499	431
3,850	OVI	OVI	OVI	OVI	598	515	446
3,900	OVI	OVI	OVI	OVI	620	531	456
3,950	OVI	OVI	OVI	OVI	638	543	472
4,000	OVI	OVI	OVI	OVI	655	559	487
4,050	OVI	OVI	OVI	OVI	673	576	503
4,100	OVI	OVI	OVI	OVI	691	593	514
4,150	OVI	OVI	OVI	OVI	710	610	530
4,200	OVI	OVI	OVI	OVI	733	627	547
4,250	OVI	OVI	OVI	OVI	752	645	564
4,257	OVI	OVI	OVI	OVI	753	646	564
4,258	OVI	OVI	OVI	OVI	OVI	646	565
4,300	OVI	OVI	OVI	OVI	OVI	663	575
4,350	OVI	OVI	OVI	OVI	OVI	681	592
4,400	OVI	OVI	OVI	OVI	OVI	700	610
4,450	OVI	OVI	OVI	OVI	OVI	718	622
4,500	OVI	OVI	OVI	OVI	OVI	737	640
4,550	OVI	OVI	OVI	OVI	OVI	756	658

i	i		i	i		i	
4,600	OVI	OVI	OVI	OVI	OVI	776	676
4,650	OVI	OVI	OVI	OVI	OVI	790	689
4,700	OVI	OVI	OVI	OVI	OVI	809	708
4,750	OVI	OVI	OVI	OVI	OVI	829	727
4,793	OVI	OVI	OVI	OVI	OVI	848	739
4,794	OVI	OVI	OVI	OVI	OVI	OVI	739
4,800	OVI	OVI	OVI	OVI	OVI	OVI	746
4,850	OVI	OVI	OVI	OVI	OVI	OVI	760
4,900	OVI	OVI	OVI	OVI	OVI	OVI	779
4,950	OVI	OVI	OVI	OVI	OVI	OVI	799
5,000	OVI	OVI	OVI	OVI	OVI	OVI	819
5,050	OVI	OVI	OVI	OVI	OVI	OVI	833
5,100	OVI	OVI	OVI	OVI	OVI	OVI	854
5,150	OVI	OVI	OVI	OVI	OVI	OVI	874
5,200	OVI	OVI	OVI	OVI	OVI	OVI	895
5,250	OVI	OVI	OVI	OVI	OVI	OVI	910
5,300	OVI	OVI	OVI	OVI	OVI	OVI	932
5,331	OVI						

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ATTACHMENT 5.2.1

VOLUNTARY EARLY LEARNING GUIDELINES "BUILDING A SOLID FOUNDATION FOR LEARNING FOR ALL CHILDREN"

Oregon Early Childhood Education Foundations - Introductions

http://www.ode.state.or.us/superintendent/priorities/ready4s chool/introfoundations.pdf

ATTACHMENT 5.2.3

MATERIALS TO SUPPORT VOLUNTARY EARLY LEARNING GUIDELINES

Glossary of Terms

http://www.ode.state.or.us/superintendent/priorities/ready4s chool/glossary.pdf

Oregon Early Childhood Education Foundations – Birth to Three

http://www.ode.state.or.us/search/page/?id=1352

Oregon Early Childhood Education Foundations – Three to Five

http://www.ode.state.or.us/search/page/?id=1286

ATTACHMENT 5.2.4

WRITTEN REPORTS ON VOLUNTARY EARLY LEARNING GUIDELINES

http://www.ode.state.or.us/search/page/?id=870

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ATTACHMENT 5.2.5

PROFESSIONAL DEVELOPMENT PLAN

The 05-07 Professional Development Plan listed below Itemized the *Current STATUS* and the Future NEED of the components of the State Professional Development System in Oregon

Added to this original 05-07 plan are the

Status of previous items as of April 2007 Items for 07-09 Professional Development Plan

1. CORE PROFESSIONAL KNOWLEDGE

- A. Core body of knowledge/core competencies
 - *Implementing:* We have identified the 10 core knowledge categories (CKC).
 - *Implementing:* We have defined the 10 core knowledge categories in terms of knowledge required and practice desired.
 - *Implementing:* We have identified the standards of knowledge, key knowledge concepts, and supporting explanations for each of the 10 core knowledge categories.
 - *Implementing:* We have identified examples of topics for training in each of the 10 core knowledge categories
- Completed- Statewide Summits with powerpoint PPT presentations "Celebrating Professional Development"
 - Disseminate information on the professional development system: linking with the profession, professional development, the state infrastructure, and the federal quality initiatives
- ← Completed- Statewide Summits with PPT presentations "Core Body of Knowledge" and "Oregon Registry Steps"
 - Disseminate information on professional development system foundational documents: Core Body of Knowledge, Oregon Registry Steps
- Completed- Statewide Summits with PPT presentations "Oregon Registry Steps" and "Oregon Registry Trainer Program"
 - Disseminate information on core professional development programs: Oregon Registry, Oregon Registry Trainer Program
 - Move 07-09
 - **Evaluate, Review and revise Core Body of Knowledge**
 - Move to 07-09
 - Disseminate information on any changes broadly to partners and providers
 - Move to 07-09
 - Print Core Body of Knowledge as a bound and more useable document
- ≺ Completed: Provided training through Statewide Summits, Mentor Orientation, CCR&R staff training, CCD staff training
 - Continue work to 07-09

Provide in depth training to mentors, R&R specialists, licensing specialists, professional organization leaders, and certified trainers on Core Body of Knowledge, CKC, key concepts, and standards

- Plan for 07-09
 Mentors will receive a training of trainers and then provide training in "Starting Points" a series of four or five training sessions regarding the Oregon Registry foundational documents and application forms and process
- **≺** Completed: Developed on-line series of professional development system lessons for mentors, trainers, sponsoring organizations
 - Continue work to 07-09
 Develop professional development overview presentation to be broadly disseminated through the above referenced partners
- ✓ Completed:" Make It and Take It: Your Professional Development Tool Kit" training session developed and presented in many venues

 Develop a mini- training session/presentation/hands-on for providers on how to use the Core Body of Knowledge to be broadly disseminated through the above referenced partners
- ← Completed: "How Do Programs Measure Up? Examining National Accreditation Standards (NAEYC, NAA, NAFCC)" training session developed and presented at state and regional conferences
 - Continue work to 07-09
 Develop a presentation regarding the use of the Core Body of Knowledge to support quality practice (link quality practice with knowledge and vice versa) to be broadly disseminated through the above referenced partners
- **≺** Completed: Presented at a variety of state and regional conferences
 - Continue work to 07-09
 Provide the developed presentations at professional conferences
- ✓ In Development: Developed outlines for three training sessions linking Oregon's Early Childhood Foundations with Professional Knowledge Standards, Program Standards and Assessment, and Child Assessment
 - Move remaining work to 07-09
 Work with ODE to link the Core Body of Knowledge, core knowledge categories, key knowledge concepts, and supporting explanations to the Early Childhood Foundations (early learning standards)
- ≪ Revised: Completed a planning document <u>Quality Assurance Standards for Oregon's Childhood Care and Education System</u> listing a variety of Quality Program Standards and tools for assessment, removed focus from single program assessment tool
- ≺ Revised: Moved focus to accreditation systems which are a specific part of the Quality Indicators project and are also supporting by scholarship funds
 - Continue work to 07-09
 Work with OCCF and rating scales core assessors to link the Core Body of Knowledge, core knowledge categories, key knowledge concepts, and supporting explanations to rating scales process indicators and provider practices

- ← Completed: Submitted requested information regarding Core Knowledge Categories, Core
 Body of Knowledge, Oregon Registry Steps, etc. to the National Registry Alliance. Participated
 in initial work with TNRA to establish commonalities.
 - Continue work to 07-09
 Work with the National Child Care Information Center and the National Registry
 Alliance toward common definitions and articulation among states of the Core
 Knowledge Categories

B. Career Lattice

- Implementing: Created a twelve (fifteen) step Oregon Registry Steps, which uses the Oregon Core Body of Knowledge core knowledge categories and standards, and focuses on training/education requirements.
- Implementing: Created the Oregon Registry Professional Enhancements to recognize professional experience, professional and personal attributes, and commitment to a professional code of ethics.
- Implementing: Created the Oregon Registry Steps showing two distinct professional development pathways: degreed/certificated and community based training/credit courses
- Implementing: Created the Oregon Registry Steps for a broad spectrum of professionals in childhood care and education
- Implementing: Created The Oregon registry as a review and approval process to document the acquisition of the Core Body of Knowledge through the steps of the Oregon Registry Steps
- In Development: Initial steps taken to establish a state level training and education database that would provide documented verified data to identified partners and programs
- ✓ Partially Completed: Completed a review and evaluation of the Oregon Registry with a comprehensive report, summary, data review and analysis. Completed a review and analysis of the data pertaining to the Oregon Registry Trainer Program
 - Move remaining work to 07-09
 Evaluate, Review and revise the Oregon Registry Steps, Oregon Registry Program, and Oregon Registry Trainer Program
 - Move to 07-09
 Disseminate information on any changes broadly to partners and providers
- **≺** Completed: Implemented primary elements of both programs through work with Professional Development Standards subcommittee of the TQC

Continue work with the Oregon Registry and the Oregon Registry Trainer Program regarding implementation of TQC directives including:

- evaluation,
- inclusion of writing in training system,
- out of country degrees,
- director credential, infant toddler credential, adult education credential, school age credential,
- articulation of high school coursework,
- time limits,
- links to other parts of the system, and
- Review of use of steps 9 and 10 and availability of credit training.
- Move remaining work to 07-09
- director credential, infant toddler credential, adult education credential, school age credential,

- inclusion of writing in training system,
- ✓ Completed: Submitted requested Core Body of Knowledge, and Oregon Registry Steps to the National Registry Alliance. Participated in initial work with TNRA to establish commonalities. Work with the National Child Care Information Center and the National Registry Alliance toward common requirements and articulation among states of the Registry Lattice

2. QUALIFICATIONS AND CREDENTIALS

- A. Preservice requirements.
 - Implementing: Child care licensing regulations

 Minimal Requirements exist for family child providers and center based care providers and administrators and provide a baseline for children's health and safety.
 - *Implementing: Public School regulations*Requirements exist for K-3 teachers
 - Implementing: Early Childhood Special Education Requirements exist for EI/SE teachers
 - Implementing: Head Start Performance Standards regarding staff
 Requirements exist for Head Start staff
- ✓ Completed: Joint meetings held to review requirements.

 Contact CCD, DHS, ODE, and DHHS and receive above mentioned professional development regulations/requirements
 - Plan for 07-09
 Add any new family friend and neighbor care rules to review
- ✓ Completed: Joint meetings held to review requirements
 Review all requirements for a level of internal consistency to each other and also for external consistency to the changing standards of the profession
- **◄** Completed: Developed a crosswalk for Oregon Registry and CCD licensing standards. Review all requirements for alignment to or variation from the Oregon Registry
- ✓ Completed: Developed a crosswalk for Oregon Registry and CCD licensing standards.

 Developed a crosswalk for Oregon Registry and CDA credential

 Meet with agencies to go over results of review, look at any disparities, suggest actions etc.

B. Continuing education requirements

- Implementing Child care licensing regulations
 Minimal Requirements exist for family child providers and center based care providers and administrators and provide a baseline for children's health and safety
- Implementing Public School regulations Requirements exist for K-3 teachers
- Implementing Early Childhood Special Education Requirements exist for EI/SE teachers
- Implementing Head Start Performance Standards regarding staff Requirements exist for Head Start staff
- **≺** Completed: Joint meetings held to review requirements

Contact CCD, DHS, ODE, and DHHS and receive above mentioned professional development regulations/requirements

- Plan for 07-09
- Add any new family friend and neighbor care rules to review
- ✓ Completed: Joint meetings held to review requirements

 Review all requirements for a level of internal consistency to each other and also for external consistency to the changing standards of the profession
- ✓ Completed: Developed a crosswalk for Oregon Registry and CCD licensing standards. Review all requirements for alignment to or variation form the Oregon Registry
- ✓ Completed: Developed a crosswalk for Oregon Registry and CCD licensing standards.

 Developed a crosswalk for Oregon Registry and CDA credential

 Meet with agencies to go over results of review, look at any disparities, suggest actions etc.

C. Credentials

• Implementing: Director credentials

A director Certificate program of 20 trainings sessions for 60 hours of training linked to Oregon Registry and Oregon Registry Trainer program standards has been developed, piloted, revised, and is available.

Multnomah County is working with the Center in developing a Director Credential linked to the Oregon Registry Steps and the Oregon Registry Trainer Program

- Implementing: Infant-toddler credentials
 - The core coursework for an infant toddler certificate has been developed and is available as 21 training sessions for 62 hours of training.
 - The Center is working with the Infant Toddler Workgroup on developing an infant toddler Credential linked to the Oregon Registry Steps and the Oregon Registry Trainer Program
- Implementing: School-Age credentials
 This work has been moved to the Oregon ASK professional development subcommittee
 Advisory Groups have explored the possibility for school age credentials and school age
 competencies
- Adult education credential

The center has developed over 60 separate hours of training in adult education, development, leadership, that form the basis for an adult education credential to be used for mentors, trainers, R&R specialists and other community leadership positions

- Implementing Certification by Board for Professional Teaching Standards
 K-3 teacher hold state teaching credentials
- Implementing National child care credentials/accreditation
 - The Center has a professional relationship with NAFCC, NAEYC, and NAA (NSACA) as part of the statewide professional development scholarship supports
 - The Center has a professional relationship with National Council or Professional Recognition (CDA) as part of the statewide professional development scholarship supports
 - The CDA is included in the Oregon Registry Steps
- **◄** Partially Completed: Developed basic infrastructure for placement in Oregon Registry Step and Path.
 - Move remaining work to 07-09
 Develop the standards for the infant toddler, adult education, school age, and director credentials within the registry regarding step, hours, and pathway

- ✓ Partially Completed: Developed 62 hours of training for infant and toddler development in <u>First Connections: Infant & Toddler Development & Care</u> Training series. Developed 21 hours of training for school age <u>AfterWords: Launching Lifelong Readers from Afterschool Programs</u> training series and <u>In the Mix: Including Schoolagers with Younger Children in Your Family Child Care</u> training series. Brought <u>Opening Doors to Inclusive Afterschool Programs</u> training series to Oregon with 8 hours of training in inclusion for school age. These will become core training and education to meet future credential requirements
 - Move remaining work to 07-09
 Develop the outlines for accepted standards-based training sessions and education coursework to meet the requirements of the infant toddler, adult education, school age credentials
 - Move remaining work to 07-09
 Work with trainers to develop training sessions that fit into the training and education outlines and standards for the infant toddler, adult education, and school age credentials
- ← Completed: Registration for Director Certificate training opened to practitioners outside of Multnomah County area
 - Move remaining work to 07-09
 Implement the piloted, evaluated, and approved director credential and related courses and training on a statewide basis
- ✓ Partially completed: Developed 62 hours of training for infant and toddler development in <u>First Connections: Infant & Toddler Development & Care</u> Training series which will become the core training and education required for the future credential.

Pilot and evaluate the infant toddler credential and related courses and training

• Move remaining work to 07-09

Pilot and evaluate the adult education credential and related courses and training Revised: Accreditation systems accepted in the professional development system (Oregon Registry, Scholarship, etc.) will follow accreditation accepted into the state Quality indicators project according to the established guidelines

Establish a professional relationship with National Association of Child Care Providers (NACCP) regarding their professional development and credentialing system

D. Pathways leading to qualifications, degrees, and credentials

- Implementing: Articulation agreements among levels of higher education.

 Articulation agreements exist between some community colleges and 4-year institutions. The Center has been working with high schools, community colleges and university to articulate the professional development steps of the Oregon Registry into the high school certificate completion and the community college formal degree credit. Articulation agreements exist between CDA credentials and some community colleges.
- Implementing: Training Registries

The Center maintains a registry of all approved trainers and all specialized trainers for the State system

The database for approved standardized, community and master trainers is available to all online at the Center Website

• Implementing: Credit-bearing workshops and training series
The First by Five training series has been offered for credit at some community college
Revised: First by Five series has ended and will be replaced by the First Connections: Infant &
Toddler Development & Care training series

Linn Benton Community College has developed credit tied to a series of training sessions Rogue Community College has developed credit tied to a series of Oregon Registry Standardized training sessions

In development: The Virtual Degree Project will create a statewide on-line degree and will facilitate the transition of child care providers from community-based training to community college credit training

- Implementing: Credit for prior learning
 Some community colleges and universities provide credit for prior learning options for students
- **≺** Completed: Articulation models established with selected high schools
 - Move remaining work to 07-09
 Continue work on articulation of the Oregon Registry to High School
- ✓ In development: The Virtual Degree Project will facilitate the articulation of child Step 7

 Oregon Registry to community college credit training
 - Move remaining work to 07-09
 Continue work on articulation of the Oregon Registry to Community Colleges
- ✓ In development: The Virtual Degree Project will facilitate the articulation of child Step 7
 Oregon Registry to community college credit training
 - Move remaining work to 07-09
 Continue work on articulation of CDA to community Colleges
- ✓ Completed: Developed complete database on standardized, community and master trainers, contact information, training session status, and standardized curricula and made available on Center website

Disseminate (website, brochures, etc) existing approved, standardized, and certified trainer information to broad childhood care and education partners so Oregon Registry standards-based trainers are used

- **≺** Completed: Outreach conducted to all targeted populations
 - Move remaining work to 07-09
- ✓ Implementing: Work with corporate child care programs, tribal child care programs, and Head Start programs to encourage inclusion of trainers and training sessions into the Oregon Registry Trainer Program
- **◄** In development: Initial discussion with PSU to carry credit for all standardized training sessions and training of trainer sessions
 - Move remaining work to 07-09
 Work with community college sites that are connecting Oregon Registry standards-based training sessions to college credit to disseminate the information broadly through the community college system
 - Move remaining work to 07-09
 Continue work on the Virtual Degree Project to establish a statewide on-line degree.
 and to articulate the Oregon Registry Step 7 to community college credit.
- 3. QUALITY ASSURANCES

A. Approval and Evaluation

- Implementing: Trainer approval (standards and registries and database).
 We have an Oregon Registry Trainer Program with trainer standards, review, approval, database, and registry to increase provider knowledge through certified trainers with knowledge of and adherence to the standards established in the Core Body of Knowledge and the Oregon Registry Steps
- Implementing: Training approval (standards linked to core knowledge/adult learning)
 We have an Oregon Registry Trainer Program with training session standards, review, approval, database, and registry to increase knowledge through certified training session that adhere to the standards established in the Core Body of Knowledge and the Oregon Registry Steps
- Implementing: Evaluation Processes: Built into each element and/or component
 - The State of Oregon has established a state infrastructure plan with strategies, outcomes and benchmarks regarding childhood care and education services
 - The Training Quality Committee (TQC) has established an evaluation process for the major quality and professional development activities including the Oregon Registry, and the Oregon Registry Trainer Program
 - Each Oregon Registry Trainer Program standardized, community, master and training of trainers session includes an evaluation component
 - These evaluations will move to a objectives-based, standards-based format connected to the Core Body of Knowledge standards.
 - The Oregon Research Partnership and the Oregon Commission on Children and Families are developing a Quality Compensation Initiative evaluation tool
 - o The statewide mentoring program has an evaluation component
 - The Oregon Child Care Research Partnership has developed structural indicators for Quality of Care. The structural indicators will be piloted in Multnomah County. The Research Partnership is in the process of developing similar indicators for family child care, with the hopes of a rural pilot.
 - The project has collected a full year of data on child care centers in Multnomah County, and will begin collecting information on family child care providers as well.

С

← Completed: Recruitment process between Center and OCCRRN includes review of trainer languages and locations

Recruit Oregon Registry Trainers from cultural and linguistic groups representative of childhood are and education providers in all regions of the state

- **◄** Partially completed: training matrix established by training gaps subcommittee of the TQC to review language, core knowledge category, age setting
 - Move remaining work to 07-09
 Promote the development of Oregon Registry Trainer Program standards-based training sessions in all core knowledge categories at all steps of the Oregon Registry in core languages in all regions of the state
- ✓ In Development: State logic model developed and transformed into PATT to establish system accountability measures and process
 - Move remaining work to 07-09

Develop state level and program level evaluation process and outcomes for all implemented components of the professional development system

• Move to 07-09

Compile and report on evaluation data from the Oregon Registry Trainer program training sessions

- **≺** Completed: all requested data submitted
- **◄** In Development: Initial steps taken to establish a state level training and education database that would provide documented verified data to identified partners and programs
 - Move remaining work to 07-09
 Continue to work with the Child Care Quality Improvement Project to provide data and information from the Oregon Registry enrollment through step 12 regarding provider professional developments
- ← Completed: Incorporated into workplan of Professional Development Standards subcommittee of the TQC

Continue to work with the Oregon Child Care Resource and Referral Network to evaluate the Mentoring Program Standards

- **≺** Completed: all requested data submitted
- **◄** In Development: Initial steps taken to establish a state level training and education database that would provide documented verified data to identified partners and programs
 - Move remaining work to 07-09
 Continue to work with the Structural indicators project to provide data and information from the Oregon Registry Enrollment through Step 12 regarding provider professional development
- B. Implementing: Oregon has included a Research component

The Oregon Research Partnership has conducted research in many areas including:

- Structural Indicators of Quality
- Market Rate Survey Methodology
- Inclusion of Parents in Policy-Making
- Estimating Supply Methodology
- Duration of Family Participation in Subsidy Programs
- Quality from a Parent's Point of View
- ✓ In Development: State logic model developed and transformed into PATT to establish system accountability measures and process for all implemented components of the professional development system
- ✓ Implementing: The Oregon Registry maintains awareness of and works to follow national registry standards established through The National Registry Alliance
- **≺** Completed: all requested data submitted
- ✓ In Development: Initial steps taken to establish a state level training and education database that would provide documented verified data to identified partners and programs
 Continue to work with the Structural Indicators project to provide data and information from the Oregon Registry Enrollment through Step 12 regarding provider professional development
 - Plan for 07-09
 Work to incorporate into the Oregon Registry the standards of The National Registry
 Alliance <u>Best Practices for Registry Systems</u> which covers twelve categories specific to the
 effective development and implementation of registries.
 - Plan for 07-09

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Amended Effective:	

Work to incorporate into the Oregon Registry the standards of The National Registry Alliance <u>Registry Assessment Tool</u> that was developed using the National Registry Alliance's standards and best practices for registries

Plan for 07-09
Work to incorporate into the developing training and education database the standards of The National Registry Alliance <u>Core Data Elements</u>, and the <u>Data 4 Project</u>, which are establishing core data elements and subsequent standards for collection, verification, and entry to begin the process of creating an accurate and current national dataset of early childhood and school-age/after-school workforce and trainer data.

C. Oregon has included a Quality Practices component

- ✓ All items in this section were Revised: Completed a planning document <u>Quality Assurance Standards for Oregon's Childhood Care and Education System</u> listing a variety of Quality Program Standards and tools for assessment, and removed focus from single program assessment tool
- ✓ All items in this section were Revised: Moved focus to accreditation systems which are a specific part of the Quality Indicators project and are also supported by scholarship funds
- ✓ Removed from state plan: The Oregon Commission on Children and Families has developed a strategy for statewide utilization of the Harms Clifford Rating Scales Process Indicators

≺ Removed from state plan:

Continue to work with the Oregon Commission on Children and Families on developing and maintaining rating scale trainer standards, rating scale assessor standards, rating scale training of trainers' standards, and rating scales training of assessors standards including required reliability levels

≺ Removed from state plan:

Continue to work with the Oregon Commission on Children and Families to provide training of trainers and training of assessors in the Rating Scales ITERs, FDCRs, and ECERS

≺ Removed from state plan:

Continue to work with the Oregon Commission on Children and Families to develop a Discover and Use training session for ECERS comparable to the Discover and Use training session for the ITERs and FDCRS

≺ Removed from state plan:

Continue to work with the Oregon Commission on Children and Families to extend the information and awareness campaign regarding the ITERS, FDCRS, ECERS and their relationship to professional development, acquiring professional knowledge, and providing quality professional practice

4. ACCESS AND OUTREACH

A. Online database of training and education opportunities

- Implementing: Training calendars
 The R&R's have listings and calendars of training sessions offered in their areas
- Implementing: complete database of training sessions offered through the OCCR&R system OAEYC has listings and calendars of state professional development activities

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Amended Effective:	

National organizations have listings of national, regional and state professional development activities

- Implementing: Directory of college degree programs
 - Community College and Workforce Development has information regarding degree programs at the various community colleges
- *Implementing:* Training registries
 - The Center maintains registries of all approved and certified Oregon Registry Trainer standards-based training sessions
- Implementing: Complete database on standardized, community and master trainers, contact information, training session status, and standardized curricula and made available on Center website
- Implementing: Complete database on Sponsoring Organizations as partners in professional development system developed and made available on Center website
- **≺** Completed: Training database available on-line for all OCCRR training sessions, and all training sessions indicate relationship to Core Knowledge Categories and Sets of Knowledge
 - Move remaining work to 07-09
 Work with designated partners to develop the training calendar/clearinghouse component of the professional development system linked to the Oregon Registry and the Oregon Registry Trainer Program
- **≺** Completed: 18 panel display created, updated, and shown at variety of venues
 - Move remaining work to 07-09
 Promote the established professional development partners and training and education activities through the state professional development display unit
- ✓ Completed: Developed complete database on standardized, community and master trainers, contact information, training session status, and standardized curricula and made available on Center website
 - Move remaining work to 07-09
 Disseminate (website, brochures, etc) existing approved, standardized, and certified training session information to broad childhood care and education partners so Oregon Registry standards-based training sessions are known

5. CAREER AND PROFESSIONAL DEVELOPMENT

A.

- Implementing: Career development advising

 Mentors provide career development advising as part of working on mentee professional goals

 Mentors received introductory training in their role as career counselor
- Implementing: Mentoring and coaching

We have a statewide mentoring program as a system for established and recognized professionals to provide guidance and support to those new to the field who want to work on professional goals.

The Child Care Health Consultation Project provides training and consultation on health-related topics (defined broadly)

The pilot mental health consultation projects provide training and consultation on mental health-related topics including challenging behaviors, assessing behaviors, and referral [processes The Center has included on-site training and coaching as part of the Family Child Care Network Professional Development model

The Early Words Language and Literacy Project was developed with on-site mentoring as a follow-up to training sessions as a key component

• Implementing: Peer support groups

OAEYC and OACCD and PRO and OFCCN provide on-going support and development of their membership

The Center has created a replicable model of a family childcare network connected to the career development system and intentional professional development activities

The Child Care Improvement Project at Early Head Start has established several Family Child Care networks

• Implementing: Leadership development

The Center promoted leadership development through the specialized trainings and supports established in the mentoring program

OSU implemented a two-year leadership development project

The Oregon Family Child Care Network established an annual "Leadership Conference" for family child care providers

- **⋖** Completed: review and revision completed within the workplan of the Professional development Standards Subcommittee of the TQC
 - Move remaining work to 07-09
 Evaluate, review, and revise the Mentor standards and maintain consistency with the Oregon Registry, and the Oregon Registry trainer Program
 - Move to 07-09

Work with established health links and mental health links projects to include specialized trainers and specialized training sessions in the Oregon Registry Trainer Program

- Move to 07-09
 - Work with National Council for Professional Recognition to develop and provide Training of Trainers for CDA advisors to increase the availability of CDA advisors in all cultural, linguistic, regional, and child care settings
- Move to 07-09
 - Develop a database for CDA advisors and representatives in Oregon
- Move to 07-09
 - Continue to develop and approved specialized adult education training sessions appropriate for mentors, resource and referral specialists, and other community leaders in mentoring, coaching, career counseling and other supportive systems
- Move to 07-09
 - Work with the Child Care Division and the Oregon Child Care Resource and Referral network to replicate the professional development model of family child care networks
- ← Completed: All primary professional conferences and activities and events of Sponsoring Organizations include information about the Oregon Registry Trainer approved sessions
 - Move remaining work to 07-09
 Continue to work with professional organizations to incorporate the professional development system and core programs of the Oregon Registry and Oregon Registry Trainer Program into membership activities, conferences and training events
- ✓ Completed: Model of community support as a follow up to specialized training in working with children with special needs has been developed for The Partners for Inclusive Child Care training series TRAC

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- ✓ Completed: Model of on site mentoring as a follow up to delivered training has been developed for BBSED, Early Words, and Early Brian development through the Center and the Oregon Community Foundation Ready To Learn mentoring program
 - Move remaining work to 07-09
 Develop a model for including on-site training / coaching as a follow-up to established state standardized training sessions
- ✓ Completed: Model of on site mentoring as a follow up to delivered training has been developed for BBSED, Early Words, and Early Brian development through the Center and the Oregon Community Foundation Ready To Learn mentoring program

Pilot the on-site training and coaching model for selected standardized training sessions

• Plan for 07-09

Work with the Oregon Child Care Resource and Referral network mentor program to replicate the model of on site mentoring as a follow up to delivered training as developed through the Center for BBSED, Early Words, and Early Brian development

B. Multiple professional development delivery methods

- Implementing:
 - There are coordinated statewide basic informational sessions (Overviews, Food Handlers)
 - There are coordinated statewide training initiatives (CCHS, CCSE, RRCAN, FBF)
 - First by Five has been replaced by the 60 hour training series <u>First</u> <u>Connections: Infant & Toddler Development & Care</u> training series
 - CCSE has been renamed BBSED, Building Blocks of Social and Emotional Development
 - There are developed standardized curricula that meet the Oregon Registry Trainer Program standards (Child Care Plus, Early Words, Early Brain Development Research and Implications, Rating Scales ITERS and FDCRS)
 - Additional standardized curricula developed or reviewed to meet Oregon Registry Trainer Program standards include: <u>Early Words Series Two</u>, TRACS, <u>AfterWords: Launching Lifelong Readers from Afterschool</u> <u>Programs</u>, <u>In the Mix</u>, <u>Opening Doors to Inclusive Afterschool Programs</u>, and <u>Is It Ethical</u>?
 - There are standardized curricula that meet the Oregon Registry Trainer Program standards in development or pilot stages (Afterwords, Creating a Climate for Growth, TRACS, Ethics, Rating Scales ECERS)
 - There are other curricula in development or pilot stages creating a Climate for Growth, Dollars and Sense
 - There is a training delivery system through the R&R's
 - There is a training delivery system through the professional organizations
 - o There is a training delivery system through the Head Start programs
 - o There is a training delivery system through the for-profit Child care centers
 - There is a cadre of certified Oregon Registry Trainer Program trainers that work both independently and within the established delivery systems
- Distance learning
 - The Community College consortium is working toward a statewide on-line AA degree program
 - Continue work on the Virtual Degree Project to establish a statewide on-line degree. and to articulate the Oregon Registry Step 7 to community college credit.
 - Some community colleges offer some ECE courses as on-line options

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Amended Effective:	

- On-site delivery
 - Some community colleges have provided on-site delivery of classes to Head Start programs
- **◄** Partially completed: training matrix established by training gaps subcommittee of the TQC to review language, core knowledge category, age setting
 - Move remaining work to 07-09
 Develop core training presentations for all 10 core knowledge categories focusing on standards of Steps 1-7, introductory knowledge
 - Move to 07-09
 Implement the established Early Brain Development research and it's implications as a state funded standardized training session
 - Move to 07-09
 Work with Oregon Community Foundation to provide support for Early Words Language and Literacy training session statewide delivery with professional development partners
- **≺** Completed: Revision completed for Module regarding second language acquisition
- ✓ Completed: Developed Early Words Series 2, a Second set of training sessions developed for six additional hours of training

 Review and revise the Early Words Language and Literacy Curricula in collaboration with development partners to reflect parent education components that have been developed
- **≺** Completed: training of trainers provided in Early Words Series 2 modules
 - Move remaining work to 07-09
 Provide update training of trainer sessions for Oregon Registry Program Standardized
 Early Words trainers in the revised training session and the parent education modules
- **≺** Completed: training of trainers conducted in AfterWords
 - Move remaining work to 07-09
 Implement the evaluated, revised and approved pilot of Afterwords School Age Reading training sessions as a statewide standardized Oregon Registry Trainer Program curricula
 - Move to 07-09
 Work with the Oregon Child Care Resource and Referral network to incorporate the
 Dollars and Sense and the Creating a Climate for Growth trainers and training sessions
 into the Oregon Registry Trainer Program
- **≺** Completed: Training of trainers held as necessary for specific curricula
 - Move remaining work to 07-09
 Work with the Oregon Child Care Resource and Referral network to determine the need for and provide additional training of trainers in any of the standardized curricula.
- **≺** Completed: Survey conducted
 - Move remaining work to 07-09
 Conduct annual survey of standardized trainers.
 - Move remaining work to 07-09
 Conduct annual evaluations of standardized curricula using data collected through the Resource and Referral system.

- ≺ Completed: Determination of necessary translations included in workplan for Training Gaps Subcommittee of the TQC
- ← Completed: Determination of necessary updates included in workplan for Training Review Subcommittee of the TOC
 - Move remaining work to 07-09
 Work with trainers to develop training sessions that fit into the training and education outlines and standards for the infant toddler, adult education, and school age credentials Implement the piloted, evaluated, and approved director credential and related courses and training on a statewide basis
 - Pilot and evaluate the infant toddler credential and related courses and training Pilot and evaluate the adult education credential and related courses and training
 - Plan for 07-09
 Implement the established standardized training sessions (AfterWords, Opening Doors, ethics, Early Words, etc) for delivery through CCR&R system

6. PUBLIC ENGAGEMENT EFFORTS AND INITIATIVES

- Implemented: Oregon has implemented statewide campaigns with consistent messages and identifiable materials
 - o Oregon's Child Everyone's Business
 - o Five Steps to Quality Child Care
 - o Employer of Choice Campaign
 - o Enroll in the Oregon Registry poster, postcard, and bookmark materials and messages
- Move to 07-09
 Work with partners to develop a combined Professional Development /Early Brain Development / Quality Care Campaign
- Move to 07-09
 Develop an information campaign regarding the definitions of the Core Knowledge
 Categories in the Core Body of Knowledge and the links between acquisition of knowledge
 and quality professional practices
- ≪ Revised: Completed a planning document <u>Quality Assurance Standards for Oregon's Childhood Care and Education System</u> listing a variety of Quality Program Standards and tools for assessment, and removed focus from single program assessment tool
- Revised: Moved focus to accreditation systems which are a specific part of the Quality Indicators project and are also supported by scholarship funds

 Continue to work with the Oregon Commission on Children and Families to extend the information and awareness campaign regarding the ITERS, FDCRS, ECERS and their relationship to professional development, acquiring professional knowledge, and providing quality professional practice

7. FUNDING

A. Scholarships for professional development, courses, degrees

 Oregon Community Foundation, through the Center, provides scholarship for family child care and center based care providers working toward professional goals such as: Registry Certification, CDA credentialing, Professional Accreditation (NAFCC, NAA/NSACA,

- NAEYC), credit coursework, and degree completion. Scholarships pay for tuition, assessments and accreditation fees, application fees, etc.
- Oregon Community Foundation, through the Community College Consortium, provides scholarship for ECE degree seeking students for tuition and other related costs.
- Oregon Commission on Children and families, through Oregon Cares may provide scholarship supports.
- Local Commissions on Children and Families may provide scholarship support for provider training.
- Child Care Enhancement Project in Lane County may provide scholarship support
- **◄** Completed: Scholarship expanded to include more professional development opportunities related to end goals in Oregon Registry Steps.
 - Move remaining work to 07-09
 Continue working with Oregon Community Foundation to provide professional development scholarships linked to the Oregon Registry Steps and the Oregon Registry program
- **≺** Completed: Scholarship expanded to include more professional development opportunities and venues related to end goals in Oregon registry steps
 - Move remaining work to 07-09
 Maintain standards regarding acceptable professional development activities and acceptable training sessions and courses within scholarship programs
- **≺** Completed: Coordinate scholarship with local initiatives and Community College scholarships.
 - Move remaining work to 07-09
 Work with partners to make the best use of available scholarship dollars and prevent duplication of effort

B. Compensation/retention initiatives:

- Oregon Commission on Children and families, through Oregon Cares, provides a compensation initiative in several counties
- **≺** .Revised: Oregon Cares on hiatus –no funding allocation
- C. Program quality awards
 - Implementing Tiered reimbursement
 - o Department of Human Services, Children Adults and Families maintains a tiered reimbursement system to subsidy providers
 - o The DHS tiered reimbursement system (Enhanced Rate Program) is incorporated within the Oregon Registry Steps
- **≺** Completed: ERP integral to Oregon Registry Steps
 - Move remaining work to 07-09
 Continue to work with DHS to promote the Enhanced Rate Program and incorporate the Enhanced Rate Program within the structure of the Oregon Registry Steps
 - Tiered quality rewards
- **◄** Revised: Replicable model established with Child Care Enhancement Project in Lane County.
 - Move remaining work to 07-09

Following the end of the Oregon Cares evaluation, work with OCCF and partners to develop a consistent best practice model and plan for implementation of a statewide Oregon Cares

- **≺** Completed: Oregon Registry Steps included in Child Care Enhancement Project.
 - Move remaining work to 07-09

Work with OCCF and CCD to assure the Core Body of Knowledge, Oregon Registry Steps, Oregon Registry, and Oregon Registry Trainer Program are reflected in any standards, process, and regulation promulgated for Oregon Cares