



Child Care and Development Fund (CCDF) Plan

for

State/Territory [HAWAII](#)

FFY 2016-2018

This Plan describes the CCDF program to be administered by the State/Territory for the period 6/1/2016– 9/30/2018. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

Public reporting burden for this collection of information is estimated to average 162.5 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.

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Introduction and How to Approach Plan Development

Access to stable, high quality child care and early learning experiences improves the odds of success for two generations – parents and children - wholly on child care across the country. The Child Care and Development Fund (CCDF) provides resources to State, Territory, and Tribal grantees that enable low-income parents to work or pursue education and training so that they may better support their families while at the same time promoting the learning and development of their children. The CCDF also provides funding to enhance the quality of child care for all children.

On November 19, 2014, President Obama signed the bipartisan-supported Child Care and Development Block Grant (CCDBG) Act of 2014 into law (Pub.L. 113-186) (https://www.acf.hhs.gov/sites/default/files/occ/child_care_and_development_block_grant_mark_up.pdf). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for State and Territory grantees. The law establishes minimum child care assistance eligibility periods, health and safety standards and training requirements for providers, monitoring, consumer information and other components that when fully implemented will strengthen child care in this country and support child and family success.

States and Territories must comply with the provisions of the Child Care and Development Block Grant (CCDBG) Act, as revised by reauthorization. The Office of Child Care (OCC) has provided interpretive guidance on the new requirements of the law through Program Instructions or responses to Frequently Asked Questions, which are available at: <http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization>. Pending the issuance of implementing regulations, States and Territories are to comply with the law based on their reasonable interpretation of the requirements in the revised CCDBG statute. Further Federal clarification through guidance and regulation is forthcoming. Once final rules are issued, any States and Territories that do not fully meet the requirements of the regulations will need to revise their policies and procedures to come into compliance, and file appropriate Plan amendments related to those changes.

CCDF Plan Overview. The Administration for Children and Families (ACF) re-designed the CCDF Plan to assist State and Territory grantees to plan for full implementation of the law. We recognize that the CCDBG Act of 2014 includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years. The level of effort needed for implementation will vary across the country depending on the number of changes a State or Territory needs to make. We encourage all States and Territories to take time to think systematically and consider large-scale changes to advance a coherent vision for their child care programs and achieve the goals of the reauthorization – that is, to improve the health, safety, and quality of child care and to improve low-income working families' access to child care assistance and care that promotes child development. Some States and Territories will need time to enact changes through their legislatures or rulemaking processes. In addition, some requirements will take time to fully operationalize. ACF will work with States and Territories to ensure that adoption

and implementation of these important changes are done in a thoughtful and comprehensive manner.

The Plan process continues to be the primary mechanism by which ACF will determine State and Territory compliance with requirements in the new law. The CCDBG Act of 2014 changed the Plan cycle from a biennial to a triennial Plan period; thus, this Plan will cover a 3-year period.(658E(b)) States and Territories are required to submit their FY 2016-2018 CCDF Plans by March 1, 2016, and approved Plans will become effective June 1, 2016. This Pre-Print will provide a tool for States and Territories to describe to ACF their implementation plans to:

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

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

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The State/Territory acknowledges its responsibility to adhere to them regardless of these modifications. The Plan contains definitions where provided by law. For terminology not defined in the law, some illustrative examples may be provided. These should only be considered examples, and not requirements, for purposes of responding. If no definitions are provided, States/Territories should respond based on their own definitions for those terms.

CCDBG Implementation Deadlines. In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission (March 1, 2016), the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s). The implementation plan must provide sufficient information to support approval of the Plan for funding.

Specifically, as part of its implementation plan, States/Territories will be asked to describe:

- Overall target completion date (no later than appropriate effective date deadline)
- Current **overall** status for ~~any requirement in~~ this section (not yet started, partially implemented, substantially implemented, other) including describing progress to date for any requirements already implemented and listing any unmet requirements that are not yet fully implemented
- Specific steps (activities) you will take to complete implementation of the unmet requirement(s) (e.g., secure legislative or rule changes, modify agreements with coordinating agencies, etc.)
- Timeline for implementation including projected start date and end date for each step
- Agency/entity responsible for completing implementation of the goal/objective, and partners who will work with the responsible agency to complete implementation of the goal/objective.

We recognize that it will take multiple steps and interim activities toward complete implementation of the requirement. We have included spaces to allow respondents to outline those interim steps and associated timelines (projected start and end dates) for those interim steps to be outlined. A comprehensive summary of the topical implementation plans across sections will be generated electronically to facilitate monitoring of progress towards completion.

ACF will work with States and Territories to monitor progress towards achievement of these requirements and will conduct ongoing reviews of implementation plans until fulfillment of the requirement. ~~As part of the ongoing reviews, States and Territories will be asked to complete regular updates to the implementation plan through the e-submission site.~~ Upon completion of the implementation plan, the State/Territory will submit a Plan amendment to certify fulfillment of the requirement(s). These updates and amendments can be submitted at any time prior to the effective date of the requirement. For example, States and Territories may, and are encouraged to, submit amendments to certify compliance with requirements upon completion, but no later than the effective date of the requirements (refer to the Program Instruction on Effective Dates for these deadlines <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02> and corresponding timeline of effective dates <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02-attachment-timeline-of-effective-dates-for-States-and-Territories-ccdbg-act-of-2014>).

Lead Agencies can access a variety of federal technical assistance resources to support implementation of the new requirements at: <https://childcareta.acf.hhs.gov/ccdf-reauthorization>. In addition to these materials, States and Territories will continue to receive support through the Office of Child Care's Technical Assistance Network (CCTAN) to assist with implementation of the new law. ACF recommends reviewing these resources prior to starting and completing each section of the Plan.

CCDF Plan Submission. States and Territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in

the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions in the ACF-118 site may be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities (see <http://www.section508.gov/> for more information). Until the final draft is approved, States and Territories may use the draft CCDF Plan preprint templates as they work to implement the new law. In responding to questions, States and Territories are asked to provide brief, specific summary text and/or bullet points only. Do not use tables or copy and paste charts, attachments or manuals into the Plan.

All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing CCDBG compliance monitoring efforts. In cases where the CCDBG Act of 2014 did not change CCDF regulatory requirements (e.g., Public Hearing requirements), the CCDF regulations are still in effect and relevant questions are included in this Plan.

The CCDF Plan does not contain the Quality Performance Report (QPR) appendix included in previous Plans. The CCDBG Act of 2014 requires ongoing collection of some information that was included in the QPR. ACF will issue a separate information collection tool for public comment and approval linked to the CCDF Plan and updated based on the new requirements in the law.

1 Define CCDF Leadership and Coordination with Relevant Systems

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

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

other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1))

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

Identify the Lead Agency or joint inter-agency office designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals, and disallowance notifications to the designated contact identified here. (658D(a))

Name of Lead Agency [State of Hawaii Department of Human Services](#)

Address of Lead Agency [1390 Miller Street, #209, Honolulu, HI 96813](#)

Name and Title of the Lead Agency Official [Rachael Wong, DrPH, Director](#)

Phone Number [\(808\) 586-4997](#)

E-Mail Address dhs@dhs.hawaii.gov

Web Address for Lead Agency (if any) <http://humanservices.hawaii.gov/>

1.1.2 Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator [Scott Nakasone](#)

Title of CCDF Administrator [Benefit, Employment, and Support Services Division Acting Administrator](#)

Address of CCDF Administrator [820 Mililani Street, #606, Honolulu, HI 96813](#)

Phone Number [\(808\) 586-7083](#)

E-Mail Address snakasone2@dhs.hawaii.gov

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

Name of CCDF Co-Administrator [Dana Balansag](#)

Title of CCDF Co-Administrator [Child Care Program Administrator](#)

Phone Number [\(808\) 586-7188](#)

E-Mail Address dbalansag@dhs.hawaii.gov

Description of the role of the Co-Administrator

[The Child Care Program Administrator drafts, submits, and implements the CCDF State Plan. Also, the Child Care Program Administrator has oversight of the child care subsidy, child care licensing, and child care quality improvement programs.](#)

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any) [\(808\) 586-5735](#)

Web Address for CCDF program (for the public) (if any)
<http://humanservices.hawaii.gov/bessd/child-care-program/>

Web Address for CCDF program policy manual (if any) [N/A](#)

Web Address for CCDF program administrative rules (if any)
<http://humanservices.hawaii.gov/admin-rules-2/admin-rules-for-programs/>

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

- ☐ Outreach and Consumer Education (section 2):
 - Agency/Department/Entity [Hawai'i Dept. of Human Services](#)
 - Name of Lead Contact [Dana Balansag](#)
- ☐ Subsidy/Financial Assistance (section 3 and section 4)
 - Agency/Department/Entity [Hawai'i Dept. of Human Services](#)
 - Name of Lead Contact [Dana Balansag](#)
- ☐ Licensing/Monitoring (section 5):
 - Agency/Department/Entity [Hawai'i Dept. of Human Services](#)
 - Name of Lead Contact [Dana Balansag](#)
- ☐ Child Care Workforce (section 6):
 - Agency/Department/Entity [Hawai'i Dept. of Human Services](#)
 - Name of Lead Contact [Dana Balansag](#)
- ☐ Quality Improvement (section 7):
 - Agency/Department/Entity [Hawai'i Dept. of Human Services](#)
 - Name of Lead Contact [Dana Balansag](#)
- ☐ Grantee Accountability/Program Integrity (section 8):

- Agency/Department/Entity [Hawai'i Dept. of Human Services](#)
- Name of Lead Contact [Dana Balansag](#)

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b))

- 1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level? In other words, identify whether CCDF program rules and policies are established by the State or Territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

☒ All program rules and policies are set or established at the State/Territory level.

☐ Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

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

☒ State/Territory

☐ County. If checked, describe the type of eligibility policies the county can set_____

☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set_____

☐ Other. Describe_____

☒ Sliding fee scale is set by the:

☒ State/Territory

☐ County. If checked, describe the type of sliding fee scale policies the county can set_____

☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set_____

☐ Other. Describe_____

☒ Payment rates are set by the:

☒ State/Territory

☐ County. If checked, describe the type of payment rate policies the county can set _____

☐ Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set _____

☐ Other. Describe _____

☐ Other. List and describe (e.g., quality improvement systems, payment practices) _____

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

a) Who determines eligibility?

☒ CCDF Lead Agency

☐ TANF agency. Describe. _____

☐ Other State/Territory agency. Describe. _____

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

☐ Child care resource and referral agencies. Describe. _____

☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

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

☒ CCDF Lead Agency

☒ TANF agency. Describe.

The TANF agency provides supportive services to families receiving TANF assistance and participate in the TANF Work Participation program. Supportive services include child care subsidies if needed. The TANF Work Participation program agency staff and contract staff assist TANF families in locating child care or refer the families to the statewide child care resource and referral agency.

☐ Other State/Territory agency. Describe. _____

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

☒ Child care resource and referral agencies. Describe.

The Hawai'i Department of Human Services contracts with one statewide child care resource and referral agency to provide resource and referral services to the public, including families receiving CCDF assistance.

☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

c) Who issues payments?

☒ CCDF Lead Agency

☒ TANF agency. Describe.

For families receiving TANF assistance, the TANF agency's TANF Work Participation program staff issue child care assistance as a work support service to participating families.

☐ Other State/Territory agency. Describe. _____

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

☐ Child care resource and referral agencies. Describe. _____

☐ Community-based organizations. Describe. _____

☐ Other. Describe. _____

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government.

(658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf

The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

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

- ☐ ☒ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns. Describe
[Child care subsidy services and child care licensing services are state administered in Hawai'i. Community stakeholders from the counties are invited to attend the Department's quarterly child care advisory committee meetings. The Department is a member of the Early Learning Advisory Board and representatives from the Hawai'i Council of Mayors also are members of the Early Learning Advisory Board.](#)
- ☐ ☒ [REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe
[The Early Learning Advisory Board is the State Advisory Council on Early Childhood Education and Care](#)
 - ☐ If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?
 - ☐ ☒ Yes
 - ☐ No.
 - ☐ If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy _____
- ☐ ☒ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with [the statewide Hawaiian medium early learning provider for Native Hawaiian children](#). Check N/A if no Indian Tribes and/or Tribal organizations in the State ☐
- ☐ ☒ State/Territory agency responsible for public education. Describe
[The Hawai'i Department of Education has representation on the Early Learning Advisory Board.](#)
- ☐ ☒ State/Territory agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe

-
- The Hawai'i Department of Education and Health have representation on the Early Learning Advisory Board.
- ☐ ☒ State/Territory institutions for higher education, including community colleges. Describe
The University of Hawai'i, including its community colleges, has a representative on the Early Learning Advisory Board.
- ☐ ☒ State/Territory agency responsible for child care licensing. Describe
The Hawai'i Department of Human Services which is the lead CCDF agency is responsible for child care licensing.
- ☐ State/Territory office/director for Head Start State collaboration. Describe
The position for the director for the Head Start State collaboration has not been filled since 11/2014.
- ☐ State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe
There are no public State/local agencies with Early Head Start-Child Care Partnership grants. The Early Head Start-Child Care Partnership grantee for Hawai'i is a private community-based Early Head Start provider.
- ☐ ☒ State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe
The Hawai'i Department of Education has representation on the Early Learning Advisory Board.
- ☐ ☒ State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe
The Hawai'i Department of Health has representation on the Early Learning Advisory Board.
- ☐ Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe _____
- ☐ ☒ State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe
The Hawai'i Department of Health has representation on the Early Learning Advisory Board.
- ☐ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe _____
- ☐ McKinney-Vento State coordinators for Homeless Education. Describe _____
- ☐ ☒ State/Territory agency responsible for public health. Describe
The Hawai'i Department of Health has representation on the Early Learning Advisory Board.
- ☐ ☒ State/Territory agency responsible for mental health. Describe
The Hawai'i Department of Health has representation on the Early Learning Advisory Board.

- ☐ State/Territory agency responsible for child welfare. Describe _____
- ☐ State/Territory liaison for military child care programs. Describe _____
- ☐ State/Territory agency responsible for employment services/workforce development. Describe _____

- ☒ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe _____

[The Hawai'i Department of Human Services which is the lead CCDF agency is responsible for Temporary Assistance for Needy Families \(TANF\).](#)

- ☐ State/community agencies serving refugee or immigrant families. Describe _____
- ☐ Child care resource and referral agencies. Describe _____
- ☐ Provider groups or associations. Describe _____
- ☐ ~~Labor~~Worker organizations. Describe _____
- ☐ Parent groups or organizations. Describe _____
- ☐ Other. Describe _____

1.3.2 Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)). Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

- a) Date(s) of notice of public hearing [February 1, 2016](#) **Reminder** - Must be at least 20 calendar days prior to the date of the public hearing.
- b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice. [Newspaper, email, and internet posting.](#)
- c) Date(s) of public hearing(s) [February 22, 2016](#) **Reminder** - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.
- d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed [Benefit, Employment & Support Services Division/Child Care Program Office \(820 Mililani Street, #606, Honolulu, HI\), and through video conference call for other islands at offices located at Central Hilo Office \(1990 Kinoole Street, #109\), North Kona II Office \(75-5722 Hanama Place, #1105\), Central Maui Unit \(270 Waiehu Beach Road, #107\), and South Unit \(4473 Pahee Street, Suite G\).](#)
- e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) [Available via the internet, and hard copies provided upon request.](#)
- f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?

Comments made by the public relative to service deliveries will be reviewed and considered. Minor amendments may be immediately completed, however other substantive amendments to the plan may need further review, as considerations may be needed for available funding, changes to administrative rules, and discussions with Department's child care advisory committee as well as the Early Learning Advisory Board, Hawai'i's State Advisory Council.

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

☐ ☒ Working with advisory committees. Describe

Worked with Hawai'i's State Advisory Council, the Early Learning Advisory Board, and the Department's Child Care Advisory Committee were emailed the notice of the public hearing and the website link for the State CCDF Plan.

☐ ☒ Working with child care resource and referral agencies. Describe

Worked with Hawai'i's contracted statewide child care resource and referral agency to email the notice of the public hearing and the website link for the State CCDF Plan to its listserv members.

☐ Providing translation in other languages. Describe

The notice of the public hearing indicates that persons needing interpreter services may receive such service without charge, including oral interpretation of the State CCDF Plan.

☐ ☒ Making available on the Lead Agency website. List the

website <http://humanservices.hawaii.gov/bessd/child-care-program/>

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

☐ ☒ Providing notification to stakeholders (e.g., provider groups, parent groups). Describe

The Department's Child Care Advisory Committee, which includes stakeholder members representing provider groups and parents, and the chair of the Early Learning Advisory Board, Hawai'i's State Advisory Council, were emailed the notice of the public hearing and the website link for the State CCDF Plan for stakeholder distribution.

☐ Other. Describe _____

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/Territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the Federal, State/Territory, and local levels for children in the programs listed below.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families.(658E(c)(2)(O))Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

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

The Hawai'i Department of Human Service's Child Care Advisory Committee includes stakeholder members representing preschool programs such as Head Start, Early Head Start, private preschools, and the Department of Education, and the Department continues to collaborate with the stakeholder members regarding enhancing and aligning quality of child care services and supporting outreach to licensed and registered child care providers about available comprehensive services for children in the community.

The Department is also a member of the Early Learning Advisory Board, Hawai'i's State Advisory Council, which advises the Executive Office on Early Learning in its administration of the State's public Pre-Kindergarten program on twenty-one public school campuses statewide. The Department of Human Services is part of the strategic planning team for the Executive Office on Early Learning in the Office's planning efforts for scaling up with the State's public Pre-Kindergarten program in public schools.

- ☒ [REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribe(s) coordinating with

The Hawai'i Department of Human Services is coordinating with tribal CCDF grantee for Hawai'i which is a member of the Department's Child Care Advisory Committee. This relationship has led to discussions about the use of funding to prevent duplication of resources and a maximization of available funding. The Department will continue to discuss with the tribal CCDF grantee about the process of monitoring that has already been set up under the tribal CCDF program of exempt child care providers caring for subsidy children in hopes of gaining insights to best practices for the Department's implementation of monitoring of exempt child care providers caring for State's CCDF subsidy children.

Hawaii is a state to officially recognize two languages English and Hawaiian. Consequently there is a statewide system of Hawaiian medium early learning centers. Children from these centers are prepared to enter public schools where Hawaiian is the medium of instruction. There are 19 such schools that are located throughout state on every island except Lānaʻi. In addition, the Native American Languages Act of 1990 (NALA), a landmark legislation addresses generations of federally imposed suppression of Native American languages, provides that it is the policy of the United States to preserve, protect, and promote the rights of Native peoples to use, practice and develop Native languages, including the Hawaiian language, specifically in education, tribal affairs and public proceedings.

The Department is also coordinating with Aha Punana Leo, the statewide Hawaiian medium early learning provider for Native Hawaiian children, in the on-going development of three proposed collaborative pilot projects:

1. Between the Department, the statewide Hawaiian medium early learning provider, other Hawaiian medium providers, and the Hawaiʻi State Hawaiian Language College at the University of Hawaiʻi at Hilo in the development of a Hawaiian language domain for Hawaiʻi's Early Learning and Development Standards to recognize the developmental process and progress for children acquiring Hawaiian language skills as their primary language at-home and/or in a program offering Hawaiian language medium curricula.
2. Between the Department, the statewide Hawaiian medium early learning provider, other Hawaiian medium providers, and the Hawaiʻi State Hawaiian Language College at the University of Hawaiʻi at Hilo in the development of a framework detailing the competencies and guidelines for Hawaiian medium early learning workforce that align with the State's early care and development workforce competencies, where applicable, to ensure that the Native Hawaiian culture and language continue to thrive in Hawaiʻi's communities.
3. Between the Department, the statewide Hawaiian medium early learning provider, other Hawaiian medium providers, and the Hawaiʻi State Hawaiian Language College at the University of Hawaiʻi at Hilo in the development of a degree program, courses, professional development opportunities, and/or a Child Development Associate (CDA) - like credential equivalent established through the Hawaiʻi State Hawaiian Language College and recognized by the Department for staff qualifications for the Hawaiian medium early learning workforce and to provide a career pathway for the Hawaiian medium early learning workforce to ensure that the Native Hawaiian culture and language continue to thrive in Hawaiʻi's communities.

The statewide Hawaiian medium early learning provider will continue to partner with the Department in promoting healthy and safe environments through licensure by the Department for all *keiki* (children) in its programs and ensure School Readiness for *keiki* who continue their Hawaiian medium education into kindergarten and beyond.

The statewide Hawaiian medium early learning provider will continue to engage with the Department's Healthy Child Care Hawaiʻi contracted training services provided in

partnership by University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the Hawai'i chapter of American Academy of Pediatrics, and the Department of Health, that promote and support healthy child development in child care settings.

- ☐ Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.
- ☒ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe

The Hawai'i Department of Human Services, Child Care Program Office, serves as a member of the Hawaii Early Intervention Coordinating Council which meets quarterly. The Departments will continue to collaborate on strategies to improve coordination of services for children whose families are receiving child care subsidies in seeking referrals for additional screening for Early Intervention Services.

Hawai'i Department of Human Services will collaborate with Department of Health, including the Early Intervention Services Section, the University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the Hawai'i chapter of American Academy of Pediatrics, and stakeholders to develop a pilot project to improve young children's social and emotional development through training and technical assistance and, in some locations, mental health/behavioral consultation to child care providers. There will be four levels that will be addressed through the pilot project:

- Developing guidelines and resources to support child care provider's ability to promote children's optimal social and emotional development.
- Training and technical assistance will be available to licensed and registered child care providers (those who work with young children) to increase their knowledge and skills to encourage good mental health and social emotional wellness and to manage children's challenging behaviors.
- Preventing the occurrence or escalation of mental health problems and minimizing children's social emotional development risk will be done through referrals to community based resources and access to a mental health/behavioral health consultant who will work with child care providers (and/or families) to support the child's developmental needs.
- Children who may have a developmental concern need to be properly identified and referred to treatment to support positive developmental progress. Services are available through: Department of Health's Early Intervention Section (IDEA Part C agency) for those children birth – 3 years old; and through Department of Education's Preschool Special Education (IDEA Part B, 619) for those 3-5 years old. The use of valid screening and assessment procedures to identify concerns and delays is an essential part of children's development.

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

The Hawai'i Department of Human Services is the lead CCDF agency, and the Benefit, Employment and Support Services Division, which houses the CCDF administrators, will collaborate with the Department's Homeless Program Office, which is the statewide agency in the same Division overseeing state and federally funded contracts for homeless services throughout Hawaii, on strategies to improve coordination of services for homeless children whose families may be eligible for child care subsidies and other early childhood services which may be needed to meet the needs of homeless children. The Homeless Program Office will collaborate and help support the Department's outreach efforts to the contracted homeless service providers regarding early childhood services available to homeless families with young children.

The Department's Child Care Advisory Committee includes stakeholder members representing preschool programs such as Head Start, Early Head Start, private preschools, and the Department of Education, and the Department will collaborate with these stakeholder members regarding improving coordination of services for homeless children whose families may be eligible for child care subsidies and other early childhood services that may be needed to meet the needs of homeless children in these settings.

- ☐ **X** [REQUIRED] Early childhood programs serving children in foster care. Describe

The Hawai'i Department of Human Services is the lead CCDF agency, and the Benefit, Employment and Support Services Division, which houses the CCDF administrators, will collaborate with the Department's Social Services Division, which is the agency serving children in foster care, on strategies to improve coordination of services for foster children whose families are receiving child care subsidies and early childhood services to meet the needs of foster children.

- ☐ **X** State/Territory agency responsible for child care licensing. Describe

The Hawai'i Department of Human Services is the lead CCDF agency, and the Benefit, Employment and Support Services Division, which houses the CCDF administrators, is responsible for child care licensing. The Child Care Program Office has oversight of the child care subsidy, child care licensing, and child care quality improvement programs.

- ☐ **X** State/Territory agency with Head Start State collaboration grant. Describe

The Head Start State collaboration director position that oversees the grant has been established under the Executive Office of Early Learning. The Department of Human Services is a member of the Early Learning Advisory Board, Hawai'i's State Advisory Council, which advises the Executive Office on Early Learning. The Department is also part of the strategic planning team for the Executive Office on Early Learning in the Office's long-term planning efforts for the coordination of the State's comprehensive early childhood system.

- ☐ **X** State Advisory Council authorized by the Head Start Act. Describe

The Hawai'i Department of Human Services is a member of the Early Learning Advisory Board, Hawai'i's State Advisory Council, and will continue to gather feedback and guidance from the Early Learning Advisory Board regarding the implementation of the Child Care and Development Block Grant requirements to efficiently coordinate child care services with the

following programs to expand accessibility and continuity of care, and assist children enrolled in child care programs to receive child care services that meet the needs of working families. Continued discussions would focus on enhancing and aligning accessibility and quality of child care services for families receiving child care subsidies and coordinating comprehensive services to children in child care settings.

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

- ☒ McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe

The Hawai'i Department of Human Services will collaborate with the Department of Education on strategies to improve coordination of services for homeless families with children who are attending public schools and need child care subsidies for out-of-school time or who may have younger children not yet in school and who may need child care subsidies, as well as partnering to support children's transitions from child care to school settings in the Department of Education.

- ☒ Child care resource and referral agencies. Describe

The Hawai'i Department of Human Services will ensure coordination of services between the child care subsidy eligibility contract staff and the statewide child care resource and referral agency to ensure that subsidy families receive consumer education information about availability of comprehensive services for children in the communities and information about choosing quality child care settings.

- ☒ State/Territory agency responsible for public education. Describe

The Hawai'i Department of Human Services is part of the strategic planning team for the Executive Office on Early Learning, which is administratively attached to the Department of Education, and administers the State's public Pre-Kindergarten program on twenty-one public school campuses statewide.

The Department of Human Services also coordinates with the Department of Education on existing contracts in place for infant and toddler child care services on public school campuses for teen parents completing their high school education. The Departments will continue to collaborate on strategies to improve coordination of services for children whose families are receiving child care subsidies in seeking referrals for additional screening for public Special Education services as well as partnering to support children's transitions to school settings in the Department of Education.

- ☒ State/Territory institutions for higher education, including community colleges. Describe

The Hawai'i Department of Human Service's Child Care Advisory Committee includes stakeholder members representing institutions for higher education, including community colleges, and the Department continues to collaborate with the stakeholder members regarding support for continued education for individuals working in child care settings to obtain early childhood coursework and degrees to promote quality child care services in licensed and registered child care settings. The Department continues to collaborate on

ways to increase on-going professional development opportunities, both credit-based and non-credit-based, supporting career counseling and scholarship funding for those already working in the child care field or planning to enter the field upon completion of their degrees.

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

Describe

The Hawai'i Department of Human Services contracts with the University of Hawai'i to provide nutrition consultation and menu reviews for licensed child care facilities. This contractor has an established relationship with the CACFP to ensure alignment of services with CACFP policies and to recruit new facilities to participate in the program.

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

The Hawai'i Department of Human Services will collaborate with Department of Health, including the WIC and the childhood obesity prevention programs, to coordinate and promote access to the child care subsidies for WIC families and to strategize on initiatives to support licensed and registered child care providers in promoting healthy practices and physical activities that can easily be implemented by the licensed and registered child care providers.

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

The Hawai'i Department of Human Services is a member of several community workgroups that are focused on improving school readiness of children by improving the quality of care provided to children or by increasing access to high quality early learning and care opportunities from birth through age eight years under the Early Childhood Action Strategy (Action Strategy), which is a public-private collaborative focused on systems-building across health, safety, care and education. The Action Strategy collaborative involves over 80 public and private partners and is working to improve healthy and safe births, healthy development, kindergarten readiness, and meeting grade-level requirements at third grade.

- ☐ ☒ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe

The Hawai'i Department of Human Services will collaborate with Department of Health, including the Maternal and Childhood Home Visitation programs, to coordinate and promote access to the child care subsidies for families participating in the home visitation program.

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

- ☐ ☒ State/Territory agency responsible for public health. Describe

The Hawai'i Department of Human Services will collaborate with Department of Health, as describes as above for the various programs administered by the Department of Health, such as Early Intervention Services Section, WIC, Maternal and Childhood Home Visitation

programs, and also the Health Resources Administration, including Communicable Disease & Public Health Nursing Division and Disease Outbreak Control Division in order to support healthy children in licensed and registered child care settings and coordinating public health efforts for the Department's licensed and registered child care providers.

☐ ☒ State/Territory agency responsible for mental health. Describe

The Hawai'i Department of Human Services will collaborate with Department of Health, including the Early Intervention Services Section, the University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the Hawai'i chapter of American Academy of Pediatrics, and stakeholders to develop a pilot project to improve young children's social and emotional development through training and technical assistance and, in some locations, mental health/behavioral consultation to child care providers. There will be four levels that will be addressed through the pilot project:

- Developing guidelines and resources to support child care provider's ability to promote children's optimal social and emotional development.
- Training and technical assistance will be available to licensed and registered child care providers (those who work with young children) to increase their knowledge and skills to encourage good mental health and social emotional wellness and to manage children's challenging behaviors.
- Preventing the occurrence or escalation of mental health problems and minimizing children's social emotional development risk will be done through referrals to community based resources and access to a mental health/behavioral health consultant who will work with child care providers (and/or families) to support the child's developmental needs.
- Children who may have a developmental concern need to be properly identified and referred to treatment to support positive developmental progress. Services are available through: Department of Health's Early Intervention Section (IDEA Part C agency) for those children birth – 3 years old; and through Department of Education's Preschool Special Education (IDEA Part B, 619) for those 3-5 years old. The use of valid screening and assessment procedures to identify concerns and delays is an essential part of children's development.

☐ State/Territory agency responsible for child welfare. Describe

The Hawai'i Department of Human Services is the lead CCDF agency, and the Benefit, Employment and Support Services Division, which houses the CCDF administrators, will collaborate with the Department's Social Services Division, which is the agency serving children in child welfare, on strategies to improve coordination of services for children whose families are involved with child welfare and are receiving child care subsidies and early childhood services to meet the needs of these vulnerable children. The Department also supports the training of foster parents through the Department's contracted training

services to promote knowledge about child development and best practices in working with children ages birth to five years.

- ☐ State/Territory liaison for military child care programs. Describe _____
- ☐ State/Territory agency responsible for employment services/workforce development. Describe _____
- ☒ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe _____

The Hawai'i Department of Human Services houses both the TANF agency and the CCDF agency within the Benefit, Employment and Support Services Division. The CCDF administrator will coordinate with the TANF administrator to support families who are required to participate in work activities to maintain their TANF assistance. Families are provided with information on child care subsidies available, parent education about choosing quality child care providers, and resource and referral services available for licensed and registered child care providers in their area.

- ☐ State/Territory community agencies serving refugee or immigrant families. Describe _____
- ☐ Provider groups or associations. Describe _____
- ☐ Labor/Worker organizations. Describe _____
- ☐ Parent groups or organizations. Describe _____
- ☐ Other. Describe _____

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii)) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide

comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

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

☐ Yes. If yes, describe at a minimum:

- How do you define “combine” _____
- Which funds will you combine _____
- Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations _____
- Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?) _____
- How are the funds tracked and method of oversight _____

☒ No

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

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

The Hawai'i Department of Human Services partners with the Department of Education for inter-departmental contracts for infant and toddler child care services on or near six (6) public high school campuses on 4 islands across the State for teen parents in order for the teen students to complete their high school education. The contract services provide free, quality child care with convenient locations near the high school campuses to participating teens enrolled in the school's parenting program. The Departments will continue to collaborate on strategies to improve coordination of services for other eligible teen families who may not be utilizing the on or near campus child care services to support such teen students access to child care subsidies to support them in completing their high school education.

The Hawai'i Department of Human Services partners with the Executive Office on Early Learning and the Department of Education for the on-going licensure of private child care providers utilizing existing classrooms on public school campuses for preschool services, also called the Pre-Plus Program. The Pre-Plus Program was formerly under the Department of Human Services before it moved to the Executive Office on Early Learning in July 2012, in accordance with Act 178 of Session Laws Hawaii 2012. Started in 2002, Hawai'i's Pre-Plus Program supports the construction and availability of preschool facilities on public school campuses in an attempt to increase access to and community capacity for full-day preschool services for low-income children in select targeted areas. Funding for on-going operation of seventeen (17) Pre-Plus facilities statewide comes from the private preschool providers who compete for contracts with the Executive Office on Early Learning and the Department of Education to operate early childhood programs on these public school campuses. As part of the contract, there are minimal utilities costs that the providers pay, and no lease fee is charged to the private providers to utilize the classroom. Most of the Pre-Plus programs are Head Start grantees, and some of the Pre-Plus classrooms offer inclusion settings for the Department of Education's Special Education children. All of the Pre-Plus providers must be licensed by the Department of Human Services, since the programs are operated by private, community-based providers. Without the Pre-Plus classrooms, there would be a loss of 340 slots for preschool-age children throughout needy communities across the State.

The Hawai'i Department of Human Services through a contract partners with Department of Health, Children with Special Health Needs Branch, the University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the American Academy of Pediatrics- Hawai'i Chapter, on the Healthy Child Care Hawaii collaborative project on the following activities:

- Recruit and train pediatricians and other health professionals to serve as child care health consultants.
- Connect health consultants with licensed and registered child care programs. Health consultants work with licensed and registered child care providers to promote the healthy development of young children in child care, increase access to preventive health services and the importance of the medical home, outreach about available community resources, and ensure a healthy and safe physical environment for children.
- Train pediatric doctors-in-training in recognizing and promoting quality child care. As part of a community rotation, pediatric residents at the University of Hawai'i

visit child care sites, become familiar with national health and safety standards, and learn what constitutes high quality child care.

- Provide information and resource materials to licensed and registered child care providers, DHS child care licensing staff, health consultants, and other agencies/programs on national health and safety performance standards, medical home, and health insurance.
- Work with the Hawai'i Early Childhood Comprehensive System initiative to promote access to medical homes, access to developmental screening, and standards based health and safety practices in child care.

The Healthy Child Care Hawaii project partners are working to develop a pilot project to improve young children's social and emotional development through training and technical assistance and, in some locations, mental health/behavioral consultation to child care providers. There will be four areas that will be addressed through the pilot project:

- Developing guidelines and resources to support child care provider's ability to promote children's optimal social and emotional development.
- Training and technical assistance will be available to licensed and registered child care providers (those who work with young children) to increase their knowledge and skills to encourage good mental health and social emotional wellness and to manage children's challenging behaviors.
- Preventing the occurrence or escalation of mental health problems and minimizing children's social emotional development risk will be done through referrals to community based resources and access to a mental health/behavioral health consultant who will work with child care providers (and/or families) to support the child's developmental needs.
- Children who may have a developmental concern need to be properly identified and referred to treatment to support positive developmental progress. Services are available through: Department of Health's Early Intervention Section (IDEA Part C agency) for those children birth – 3 years old; and through Department of Education's Preschool Special Education (IDEA Part B, 619) for those 3-5 years old. The use of valid screening and assessment procedures to identify concerns and delays is an essential part of children's development.

The Hawai'i Department of Human Services will be coordinating with the Hawaii Community Foundation (HCF), a community foundation that manages a repository of more than 650 charitable funds that have been set up by individuals, families, and businesses across the State to benefit the people of Hawai'i.

The coordination with HCF will focus initially on increasing outreach to homeless families with young children through communications and meetings with the numerous HCF grantees who are serving homeless families across the State. The Department will focus on getting HCF's partner agencies information about the availability of Department's child care services, including the child care subsidy program and the child care resource and referral services, so that the

community providers are helping the families access these services that are essential to supporting homeless families with young children find and maintain stable employment or secure vocational training or educational opportunities in order for the families to maintain and increase their economic self-sufficiency and to be able to secure and maintain permanent housing for themselves. The goals of the child care subsidy program align with HCF's *HousingASAP* initiative, which began in July 2014, as the initiative focuses on moving families into stable housing faster and maintaining those families in stable housing. The *HousingASAP* initiative has eight (8) partner organizations statewide and has seen an increase in the number of families placed in permanent housing and a decrease in the number of people returning to shelters after placement.

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

States and Territories may use funds to establish or support a system of local or regional child care resource and referral organizations (CCR&R) that is coordinated, to the extent determined by the State/Territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (also see section 7.4). If they do, the law identifies specific requirements for that entity or system receiving CCDF funds. (658E(c)(3)(B)(iii)) These include:

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

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

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

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

Describe the State/Territory's written agreement or contract with the CCR&R, what services are provided through the CCR&R, and any other activities for which the State partners with the CCR&Rs.

The Hawai'i Department of Human Services contracts with a private agency to provide statewide child care resource and referral for families seeking quality child care. The following services are provided by the contracted agency:

- Maintain and update a comprehensive resource database listing of child care services, licensed and registered child care homes and facilities, and assistance and child care subsidy programs in the communities;
- Offer a child care referral service which actively responds to parental request for child care information including children with special needs;
- Provide listing of licensed and registered child care homes and facilities upon request from the general public;
- Document and tabulate the information regarding the supply and demand for child care services in communities;
- Provide information on how to access professional development opportunities, including child care conferences, educational training, classes and workshops in the community, for existing and prospective child care providers as well as parents and other community members;
- Promote public awareness of the importance of child care issues such as availability, affordability and quality of child care services;
- Provide assistance to employers in identifying and meeting the child care needs of employees;
- Provide written materials to support child care resource and referral services to families, child care providers and the community;
- Provide outreach, survey and marketing work to promote any new DHS child care initiatives; and

- Provide and maintaining a website that is available to the public that provides child care resource information for licensed and registered child care homes and facilities.

☐ No. The State/Territory does not fund a CCR&R system and has no plans to establish. Use section 7.4 to describe plans, if any, to establish a CCR&R system.

1.8 Disaster Preparedness and Response Plan

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

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

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

- ☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan _____
- ☒ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016)
June 2017

- ~~Current~~Overall Status – Describe the State/Territory’s overall status toward complete implementation for any this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)

Other – Hawai‘i is Partially Implemented for licensed and registered child care providers and Not Yet Started for legally exempt providers caring for CCDF subsidy children.

- ~~Implementation progress to date~~Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable

Administrative rules for licensing and registration requirements that child care providers have in place written procedures for evacuation, relocation, and practice drills.

- Unmet requirement - Identify the requirement(s) ~~not fully~~to be implemented

An approved Statewide Child Care Disaster Plan that includes:

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

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

1. For licensed and registered child care homes and facilities: Develop language for amendments to the Department’s administrative rules in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for licensing and registration requirements that child care providers have:

-
- a. procedures for shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions; and
 - b. procedures for emergency preparedness training and practice drills.
2. For legally exempt child care providers caring for CCDF subsidy children: Develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject legally exempt providers caring for CCDF subsidy children to minimum health and safety requirements, including initial and on-going training and monitoring inspections.

If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #2 and #3 beyond the timeline specified in the Plan.

3. For license-exempt child care providers caring for CCDF subsidy children: Develop language for amendments to the Department's administrative rules in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for child care subsidy requirements that legally exempt child care providers caring for CCDF subsidy children have:
- a. procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions; and
 - b. procedures for emergency preparedness training and practice drills.
4. For the Department's child care licensing staff: Develop guidelines for temporary operating standards for child care after a disaster for licensed and registered child care providers as well as for legally exempt child care providers caring for CCDF subsidy children.

- Projected start date for each activity
 1. January 2016
 2. January 2016
 3. July 2016
 4. January 2016
- Projected end date for each activity
 1. December 2016
 2. July 2016
 3. June 2017
 4. December 2016
- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with ~~the~~ [State/Territory lead agency](#) to complete implementation of this activity

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12.

The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
 - a) the availability of child care assistance,

- b) the quality of child care providers (if available),
 - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
 - d) Individuals with Disabilities Education Act (IDEA) programs and services,
 - e) Research and best practices in child development, and
 - f) State/Territory policies regarding social- emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.
2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
- a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
 - b) ~~Aggregate annual information~~ Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
 - c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

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

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care assistance services.

(658E(c)(2)(E)(i)(1))

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

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

The Hawai'i Department of Human Services may use aggregated data from its TANF program as well data from the Department of Education regarding public schools that receive Title I funding under the Elementary and Secondary Education Act to identify geographic areas of populations of potentially eligible families.

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

Partners that help with outreach include the contracted statewide child care resource and referral agency, community-based organizations, including licensed and registered child care providers as well as other service providers, other government offices, including the Department's SNAP and TANF offices and the TANF work participation case management offices, and Departmental contractors.

- c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach)? [website](#)

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

- ☐ Electronically via online application, mobile app or email. Provide link _____
- ☒ In-person interview or orientation. Describe agencies where these may occur

The TANF agency provides supportive services to families receiving TANF assistance and participate in the TANF Work Participation program. Supportive services include child care subsidies if needed. The TANF Work Participation program agency staff and contract staff assist TANF families in locating child care or refer the families to the statewide child care resource and referral agency.

The contractor for the Department's for child care subsidy program that serves non-TANF eligible families also has offices statewide that allows interested families to drop off their applications and also have in-person interviews if convenient for eligible families. Otherwise, the contractor will offer over-the-phone interviews if eligible families prefer. The contractor will refer the eligible families who have not identified a potential child care provider to the statewide child care resource and referral agency.

- ☐ Phone
- ☒ Mail
- ☐ At the child care site
- ☐ At a child care resource and referral agency
- ☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe _____
- ☒ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe

Families eligible for TANF assistance may receive child care services without submitting another application specifically for child care subsidies by requesting child care support services through their TANF Work Participation case manager based on documentation verifying their TANF Work Participation activities.

☐ Other strategies. Describe_____

2.2 Consumer and Provider Education Information

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

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

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

☐ Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.87 below.

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

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

- Overall Target Completion Date (no later than September 30, 2016)
January 2017
- ~~Current~~Overall Status – Describe the State/Territory’s **overall** status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially implemented

- ~~Implementation progress to date~~Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~implemented to date if applicable

The Hawai‘i Department of Human Services disseminates information to parents, providers, and the general public through the contracted statewide child care resource and referral agency about the following:

- Information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance;
- Quality of child care providers (either national accreditation with the National Association for the Education of Young Children or the National Early Childhood Program Accreditation);
- Other programs, specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Supplemental Nutrition Assistance Program (SNAP), and Women, Infants and Children (WIC) program, for which families may also qualify, as well as the Child and Adult Care Food Program (CACFP) for providers;
- Research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity); and
- Research and best practices in meaningful parent and family engagement.

The Department also has requirements within the regulations for licensed and registered child care homes and facilities that mental health aspects of child development shall be integrated into the child care program, including sharing information with families about available community resources.

- Unmet requirement - Identify the requirement(s) ~~not fully~~to be implemented

The Hawai'i Department of Human Services must establish dissemination of information to parents, providers, and the general public through the contracted statewide child care resource and referral agency for the following:

- Low-Income Home Energy Assistance Program (LIHEAP),
 - Other programs specifically Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify,
 - Individuals with Disabilities Education Act (IDEA) programs and services,
 - State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children in early childhood programs.
- Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 1. For licensed and registered child care homes and facilities and legally exempt providers caring for children whose families are receiving child care subsidies, the Hawai'i Department of Human Services through a contract partners with Department of Health, Children with Special Health Needs Branch, the University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the American Academy of Pediatrics- Hawai'i Chapter, on the Healthy Child Care Hawaii collaborative project. The Department must amend the contract language to include the development of a pilot project to improve young children's social and emotional development. The pilot project amendment will include developing guidelines and resources to support child care provider's ability to promote children's optimal social and emotional development.
 - a. Once those resources are developed, the Department will coordinate with its contracted statewide child care resource and referral agency to disseminate the information to parents, providers and the general public;
 2. The Hawai'i Department of Human Services must establish and coordinate the dissemination of information to parents, providers, and the general public through the contracted statewide child care resource and referral agency for the following:

- a. Information about programs families may qualify for, including Medicaid and the State Children's Health Insurance Program (SCHIP));
- b. Information about Individuals with Disabilities Education Act (IDEA) programs and services;
- c. Information about Low-Income Home Energy Assistance Program (LIHEAP); and
- d. State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children in early childhood programs.

- Projected start date for each activity

- 1. February 2016
- 2. February 2016

- Projected end date for each activity

- 1. January 2017
- 2. September 2016

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)

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

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

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

For parents of eligible children, the child care subsidy workers provide information to each family as part of the interview process about choosing the child care provider that best fits the needs of the family and child. Informational packets are made available to each family

and the packets include available community resources for families, as well as tips on things to consider when choosing a provider and potential questions families could ask child care providers during the search process.

For providers and the general public, the Department has its website which includes information about the available services for families and children, such TANF, SNAP, Medicaid, and WIC, as well as community resources available for providers.

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

As part of the interview process, the subsidy workers provide information to each family about choosing the right provider for their child. Informational packets are made available to each family that include available community resources for families, as well as tips on points to consider when choosing a provider and potential questions that families could ask providers when searching for child care.

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

The Department partners with its contracted statewide Child Care Resource and Referral agency which provides information about choosing child care and availability of licensed and registered child care home and facilities in Hawai'i. Families choosing exempt child care by kith and kin ("friend, family, neighbor" FFN care) will select the exempt FFN provider they will use, and the child care subsidy worker informs the families that the exempt child care provider and all household members must complete background checks in order for the family to receive the subsidy.

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

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

The Department partners with its contracted statewide Child Care Resource and Referral agency which provides information about choosing child care and availability of licensed and registered child care home and facilities in Hawai'i, as well as information about national accreditation by either the National Association for the Education of Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA).

The Department will also have the child care subsidy workers inform parents of eligible children whether the child care provider the parents have selected is NAEYC or NECPA accredited.

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

The Department provides written brochures and materials that include information about available community resources for families, choosing quality child care, and things to consider when choosing a provider, as well as potential questions that families could ask providers when searching for child care.

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

The Department partners with its contracted statewide Child Care Resource and Referral agency, the Departmental and contract offices that provide child care subsidies, and the contracted agency that provides educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, neighbor care, and to their care providers.

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

- a) Temporary Assistance for Needy Families (TANF)

The Department includes information about the TANF program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the TANF program.

- b) Head Start and Early Head Start Programs

The Department includes information about the Head Start and Early Head Start program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the Head Start and Early Head Start programs.

- c) Low Income Home Energy Assistance Program (LIHEAP)

The Department includes information about the LIHEAP program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all

families applying for child care subsidies a resource listing of available community programs including the LIHEAP program.

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

The Department includes information about the LIHEAP program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the SNAP program.

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

The Department includes information about the WIC program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the WIC program.

f) Child and Adult Care Food Program(CACFP)

The Department includes information about the CACFP program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the CACFP program.

g) Medicaid

The Department includes information about the Medicaid program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the Medicaid program.

h) Children's Health Insurance Program (CHIP)

The Department includes information about the State CHIP program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the State CHIP program.

i) Individuals with Disabilities Education Act (IDEA)

The Department includes information about the IDEA program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the IDEA program.

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

The Department includes information about the state pre-kindergarten program and Hawai'i's tribal subsidy program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the state pre-kindergarten program and the Hawai'i's tribal subsidy program.

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

The Department includes information about the Home Visiting program on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the Home Visiting program.

The Department includes information about the contracted statewide Child Care Resource and Referral agency on the Department's website and on the brochure that provides information about the child care subsidy program. As part of the child care application process, the subsidy worker shall send to all families applying for child care subsidies a resource listing of available community programs including the Child Care Resource and Referral service.

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs. For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc.?

a) Temporary Assistance for Needy Families (TANF)

The Department includes information about the TANF program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the TANF program.

b) Head Start and Early Head Start Programs

The Department includes information about the Head Start and Early Head Start programs on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the Head Start and Early Head Start programs.

c) Low Income Home Energy Assistance Program (LIHEAP)

The Department includes information about the LIHEAP program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the LIHEAP program.

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

The Department includes information about the SNAP program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the SNAP program.

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

The Department includes information about the WIC program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the WIC program.

f) Child and Adult Care Food Program(CACFP)

The Department includes information about the CACFP program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the CACFP program.

g) Medicaid

The Department includes information about the Medicaid program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the Medicaid program.

h) Children's Health Insurance Program (CHIP)

The Department includes information about the State CHIP program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the State CHIP program.

i) Individuals with Disabilities Education Act (IDEA)

The Department includes information about the IDEA program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the IDEA program.

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

The Department includes information about the state pre-kindergarten program and Hawai'i's tribal subsidy program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the state pre-kindergarten program and Hawai'i's tribal subsidy program.

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

The Department includes information about the Home Visiting program on the Department's website. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the Home Visiting program.

The Department includes information about the contracted health consultation program on the Department's website. The program trains community-based medical professionals so that they can be health consultants for licensed child care facilities. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the health consultation program and community public health offices.

The Department includes information about the contracted nutrition training and menu review program on the Department's website. The program provides community-based nutrition training for licensed and registered child care homes and facilities as well as menu review services for child care programs that are not participating in the CACF Program. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the nutrition training and menu review program.

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

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

The Department contracts for services to provide educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, neighbor (FFN) care, and to their care providers. The contractor sends monthly informational packets to parents of eligible children using exempt FFN care and their child care providers and the packets provide the parents and exempt providers information about research and best practices in child development, including social

emotional development, cognitive development, physical health and development, and meaningful parent and family engagement.

The Department also contracts for services to provide training services to promote on-going professional development opportunities to support quality child care settings to early childhood practitioners, parents and caregivers, and the general public for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development, including social emotional development, cognitive development, physical health and development, and meaningful parent and family engagement.

The training contractor also provides quarterly newsletters to those who have signed up for the newsletters and the newsletters are posted on the training contractor's website for the general public to access.

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

As describe in a) above, the Department provides written materials mailed, face-to-face trainings, and information posted on websites by the contracted agencies.

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

The contracted agency that provides the training services for the Department to promote on-going professional development opportunities to support quality child care settings.

The contracted agency that provides educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, neighbor (FFN) care, and to their care providers.

- 2.2.7 Describe how information on the State/Territory's policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to 1) parents, 2) providers and 3) the general public. (658E(c)(2)(E)(i)(VII))

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

The Department contracts for services to provide educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, and neighbor (FFN) care. The contractor sends monthly informational packets to parents of eligible children using exempt FFN, and the packets provide the parents information about research and best practices in child development, including social emotional development. The contractor also posts the newsletters on their website.

The Department also contracts for services to provide training services to promote on-going professional development opportunities to support quality child care settings to interested persons, including parents and caregivers for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development, including social emotional development.

ii. Providers

The Department contracts for services to provide educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, and neighbor (FFN) care and their child care providers as well as registered family child care providers. The contractor sends monthly informational packets to home-based child care providers, and the packets provide the providers with information about research and best practices in child development, including social emotional development. The contractor also posts the newsletters on their website.

The Hawai'i Department of Human Services through a contract partners with Department of Health, Children with Special Health Needs Branch, the University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the American Academy of Pediatrics- Hawai'i Chapter, on the Healthy Child Care Hawai'i collaborative project which are working to develop a pilot project to improve young children's social and emotional development through training and technical assistance and, in some locations, mental health/behavioral consultation to child care providers. There will be four areas that will be addressed through the pilot project:

- Developing guidelines and resources to support child care provider's ability to promote children's optimal social and emotional development.
- Training and technical assistance will be available to licensed and registered child care providers (those who work with young children) to increase their knowledge and skills to encourage good mental health and social emotional wellness and to manage children's challenging behaviors.

- Preventing the occurrence or escalation of mental health problems and minimizing children's social emotional development risk will be done through referrals to community based resources and access to a mental health/behavioral health consultant who will work with child care providers (and/or families) to support the child's developmental needs.

The Department also contracts for services to provide training services to promote on-going professional development opportunities to support quality child care settings to child care providers and practitioners for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development, including social emotional development. The contractor also posts the newsletters on their website.

iii. General public

The Department contracts for services to provide educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, and neighbor (FFN) care and their child care providers as well as registered family child care providers. The contractor sends monthly informational packets to home-based child care providers, and the packets provide the providers with information about research and best practices in child development, including social emotional development. The contractor also posts the newsletters on their website.

The Department contracts for services to provide training services to promote on-going professional development opportunities to support quality child care settings to interested persons, including the general public, for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development, including social emotional development.

The training contractor also provides quarterly newsletters to those who have signed up for the newsletters, and the newsletters are posted on the training contractor's website for the general public to access. The training newsletters include information about research and best practices in child development, including social emotional development.

The Department contracts for statewide Child Care Resource and Referral services. The Resource and Referral contractor provides a quarterly newsletter to those who have signed up for the newsletters, and the newsletters are posted on the contractor's website for the general public to access. The Resource and Referral contractor's newsletters include information about research and best practices in child development, including social emotional development.

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

The contractor providing educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, and neighbor (FFN) care.

The Department of Health, Children with Special Health Needs Branch, the University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the American Academy of Pediatrics- Hawai'i Chapter, partner with the Department of Human Services on the Healthy Child Care Hawai'i collaborative project.

The contractor providing training services to promote on-going professional development opportunities to support quality child care settings.

The contractor providing statewide Child Care Resource and Referral services.

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

- Preschool-aged children (from birth to five) in early childhood programs receiving child care assistance?
 - ☐ Yes. If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link _____
 - ☒ No.
- School-age children from programs receiving child care assistance?
 - ☐ Yes. If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link _____
 - ☒ No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening resources and services. (658E(c)(2)E(ii))At a minimum, the State/Territory must establish procedures to provide information to families and child care providers on: (1) Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or

other developmental delays, which may include social, emotional, physical, or linguistic delays. Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

- ☐ Fully implemented and meeting all Federal requirements outlined above **by March 1, 2016**. List the Lead Agency policy citation(s) ~~and:~~ _____ and:
 - a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened _____
 - b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays _____
- ☒ **X** Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
January 2017
 - ~~Current Overall Status~~ – Describe the State/Territory's **overall** status toward ~~completion complete~~ implementation for ~~any this~~ requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Not yet implemented
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable _____
 - Unmet requirement - Identify the requirement(s) ~~not fully to be~~ implemented

The Department must develop and describe procedures for providing information on and referring families and child care providers to existing developmental screening resources and services for: (1) Early and Periodic Screening, Diagnosis, and Treatment program (42 U.S.C. 1396 et seq.) and developmental screening services available under section

619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) a description of how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children whose families are receiving CCDF who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays.

- Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
1. For licensed and registered child care homes and facilities, the Hawai'i Department of Human Services through a contract partners with Department of Health, Children with Special Health Needs Branch, the University of Hawaii John A. Burns School of Medicine, Department of Pediatrics, the American Academy of Pediatrics-Hawai'i Chapter, on the Healthy Child Care Hawai'i collaborative project. The Department must amend the contract language to include the development of a pilot project to improve young children's social and emotional development. The pilot project amendment will include developing guidelines and resources to support child care provider's ability to promote children's optimal social and emotional development and provide information on referring families to existing developmental screening services available.
 - a. Developing guidelines and resources to support child care provider's ability to promote children's optimal social and emotional development, including information on existing developmental screening services available.
 - b. Training and technical assistance will be available to licensed and registered child care providers (those who work with young children) to increase their knowledge and skills to encourage good mental health and social emotional wellness and to manage children's challenging behaviors as well as disseminating information on existing developmental screening services available.
 2. Coordinating with the contractor providing educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, and neighbor (FFN) care and their child care providers the information

on existing developmental screening services available developed by the Healthy Child Care Hawai'i contractor.

- Projected start date for each activity

1. February 2016
2. September 2016

- Projected end date for each activity

1. January 2017
2. January 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

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

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

The Hawai'i Department of Human Services conducts an investigation of complaints received, whether it is from a parent or someone from the general public, and makes a determination if there is evidence to support the allegations in the complaint. If there is evidence to support an allegation in the complaint, the Department will substantiate the complaint allegation. The allegation must relate to a violation of the Hawaii law regarding licensed and registered child care facilities and homes or a violation of the Department's administrative rules regarding licensure or registration of child care facilities or homes.

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

The Hawai'i Department of Human Services maintains a record of substantiated complaints received about licensed and registered child care providers for as long as the provider is licensed or registered with the Department. Once the home or facility closes its registration or license, the Department maintains the records for three years and then will destroy the records. For child care providers that are not licensed or registered with the Department, the Department will maintain the substantiated complaint record for three years and then will destroy the record.

The records are maintained in a hard-copy format, written report, on file at the investigating child care licensing office.

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

Yes, the Department will make non-confidential information about the substantiated complaint records available to the public on request.

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

The Hawai'i Department of Human Services conducts an investigation of complaints received, whether it is from a parent or someone from the general public, and makes a determination if there is evidence to support the allegations in the complaint. If there is evidence to support an allegation in the complaint, the Department will substantiate the complaint allegation. The allegation must relate to a violation of the Hawaii law regarding licensed and registered child care facilities and homes or a violation of the Department's administrative rules regarding licensure or registration of child care facilities or homes.

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

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

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

Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce and determine which child care forms will be prioritized for translation for the Department of Human Services.

- ☐ None

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

Interpreter services have been provided for the following languages: Cantonese, Chuukese, Ilocano, Japanese, Mandarin, Tagalog, and Vietnamese.

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

All of the Hawai'i Department of Human Services offices and contracted service providers are required to provide reasonable accommodations for persons with disabilities upon request when applying for or receiving services including but not limited to accessible offices, accessible parking, accessible restrooms, sign language interpreters, large print materials taped materials, and auxiliary aids or services.

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing the State/Territory processes for licensing and monitoring child care providers, processes for conducting criminal background checks as required by law (see section 5.3), and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse in child care settings.

The State/Territory also must make public certain information about the results of such monitoring as required by law for both licensed and unlicensed providers receiving CCDF (see section 5.2) on a website in a way that is consumer-friendly and in an easily accessible format. (658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring and inspection reports on the website no later than November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

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

- ☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Provide the link to the website [redacted] and describe how the consumer education website meets the requirements to:
- Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe [redacted]
 - Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe [redacted]

- c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe
- d) Provide ~~annual aggregate~~ information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe
- e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request ~~and to persons with disabilities through multiple formats~~, differentiating between violations based on risk to children, and easy to locate and navigate. Describe

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

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

November 19, 2017

- ~~CurrentOverall~~ Status – Describe the State/Territory’s ~~overall~~ status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, in progress, partially completed, substantially completed, other)

In progress

- ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
 - Include a description of the processes for licensing, background checks, and monitoring in plain language and a listing of frequently asked questions.
 - Provide annual aggregate information about the number of deaths, number of serious injuries as defined by the State/Territory and the

number of incidences of substantiated child abuse in child care settings with definitions of serious injuries and substantiated child abuse.

- Includes a description of health and safety requirements and licensing or regulatory requirements for child care providers on the Department's website reviewing the process for licensure or registration and generally what licensing and registration requirements covers in plain language and a listing of frequently asked questions.
 - Unmet Requirement(s) – Identify the requirement(s) ~~that is not fully to be~~ implemented
 - Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations).
 - Include a description of offenses that prevent individuals from being providers.
 - Ensuring the website is consumer-friendly.
 - Tasks/Activities – What specific steps will you take to implement the ~~unmet~~ requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
1. Develop data system modification in order to convert monitoring inspection reports from paper-based reports to electronic-based reports with data entered into the child care licensing data system and tracking of each licensing requirement within the data system for all types of licensed and registered child care homes and facilities.
 2. For licensed and registered child care homes and facilities and for legally exempt child care providers caring for CCDF subsidy children: Develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject licensed, registered, and legally exempt providers caring for CCDF subsidy children to minimum health and safety requirements, including the authority to establish convictions for specific offenses that prevent individuals from being child care providers.
 - a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3 and #4 beyond the timeline specified in the Plan.
 3. For For licensed and registered child care homes and facilities and for legally exempt child care providers caring for CCDF subsidy children: Develop language for amendments to the Department's five (5) sets of

administrative rules for licensing, registration and subsidy programs in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for:

- a. Registered family child care homes;
 - b. Licensed group child care centers and homes
 - c. Licensed infant and toddler centers
 - d. Licensed before and after school programs; and
 - e. Requirements for exempt child care providers caring for subsidy children.
4. For the Department's child care licensing staff: Develop procedures for revised background check requirements including convictions of specific offenses that prevent individuals from being child care providers.
- Projected start date for each activity
 1. August 2015
 2. August 2015
 3. February 2016
 4. June 2016
 - Projected end date for each activity
 1. November 19, 2017
 2. July 2016
 3. July 2017
 4. November 19, 2017
 - Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to “deliver high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance”; and “to improve child care and development of participating children.” (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance

policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

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

3.1 Eligible Children and Families

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

3.1.1 Eligibility Criteria Based upon Child's Age

a) The CCDF program serves children from birth (weeks/months/years) to under 13 years (through age 12).

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

☒ Yes, and the upper age is under 18 years old (may not equal or exceed age 19).
Provide the Lead Agency definition of physical or mental incapacity
A physical or mental condition that prevents a child from doing self-care, as determined by a State-licensed physician or psychologist.

☐ No.

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

☐ Yes, and the upper age is _____ (may not equal or exceed age 19)

☒ No.

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

a) residing with—

means an eligible child living in a home or family setting with the child's eligible caretaker.

b) in loco parentis –

In place of the parent, i.e., charged with the rights, responsibilities and duties of a parent defined as an adult who resides with and is responsible for the care of a child, and who is birth, hanai (child who is taken permanently to be reared, educated, and loved by someone other than the natural parents at the time of the child's birth or early childhood. The child is given outright and the natural parents renounce all claims to the child. The natural parents cannot reclaim the child except for death or serious injury of the hanai parents.), foster parent, adoptive parent, guardian, step-parent, or relative who is related to the child by blood, marriage, or adoption, or a person authorized by the caretaker through a power of attorney valid for a period not to exceed twelve months. The caretaker designation may remain even when the caretaker is temporarily absent from the home as long as the caretaker continues to maintain responsibility for the care, education, and financial support of the child. This includes a foster parent who may not be providing financial support to the child but may be receiving support for the child from a public or private agency.

3.1.3 Eligibility Criteria Based on Reason for Care

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

- working

The caretaker is engaged in an activity for wages or salary, or actively looking for work: a) up to two weeks prior to the scheduled start of employment; or b) up to 30 days during a break in employment, if employment is scheduled to resume within 30 calendar days. There is no minimum number or hours is required to be considered working.

- attending job training

Job training is an approved work program that requires the participant to engage in activities that provide work experience and training to individuals to assist them toward employment and self-sufficiency.

- attending education

An education program has a curriculum that is established by an institution, agency, or business for the purpose of development of skill or academic study necessary for an identified occupation.

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

☒ Yes.

☐ No. If no, describe additional requirements _____

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

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

- 1) Definition of protective services –

Child welfare services by the Department of Human Services to children and their caretakers and siblings, who reside together in their family unit, and are children who are: 1) confirmed to have been abused or neglected; or 2) confirmed to have been threatened with abuse or neglect; or 3) in foster care. The assigned social worker must specify the need for child care services in the family’s or child’s case plan as ordered by the court.

- 2) Does the Lead Agency waive the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis? (658E(c)(5))

☒ Yes.

☐ No.

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

☐ No

3.1.4 Eligibility Criteria Based on Family Income

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

- Definition of income –

Monies received from wages, salaries, commissions, tips, and other sources. For a complete list of countable income, refer to administrative rules 17-79832-10(b) Income considered in eligibility determination. The administrative rules can be found at <http://humanservices.hawaii.gov/wp-content/uploads/2013/01/17-798.2-Child-Care-Services.pdf>

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum “exit” eligibility level if applicable and below the federal limit of 85% of current SMI. Note – If the income eligibility limits are not statewide, check here ☐. Describe how many jurisdictions set their own income eligibility limits _____. Fill in the chart based on the most populous area of the state.

Family Size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]	(c) (IF APPLICABLE) \$/month Maximum “Entry” Income Level if lower than 85% Current SMI	(d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI	(e) (IF APPLICABLE) \$/month Maximum “Exit” Income Level if lower than 85% Current SMI	(f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI
1	3,698	3,143	2,431	66	2,431	66
2	4,837	4,111	3,179	66	3,179	66
3	5,974	5,078	3,927	66	3,927	66
4	7,113	6,046	4,675	66	4,675	66
5	8,251	7,013	5,423	66	5,423	66

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

c) SMI Source and year

LIHEAP Estimated State Median Income, By Household Size and By State, FY 2014

d) These eligibility limits in column (c) became or will become effective on
November 1, 2005

e) Provide the link to the income eligibility limits

<http://humanservices.hawaii.gov/wp-content/uploads/2013/01/17-798.2-Child-Care-Services.pdf>

3.1.5 Graduated Phase-Out of Assistance

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

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

- ☐ Fully implemented and meeting all Federal requirements outlined above **by March 1, 2016**. List the Lead Agency’s policy citation(s) and describe the policies and procedures for graduated phase-out _____
- ☒ **X** Not implemented. The State must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
September 2017
 - **Current Overall Status** – Describe the State/Territory’s **overall** status toward complete implementation for **any** this requirement(s) **not fully implemented** (not yet started, partially implemented, substantially implemented, other)
Partially implemented
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
The Hawai’i Department of Human Services is already serving families whose incomes exceed the TANF eligibility limits and are not transitioning off of TANF. Hawai’i’s gross income threshold is currently 66% of the FY 2014 State Median Income, according to the LIHEAP Estimated State Median Income, By Household Size and By State, FY 2014.
 - Unmet requirement - Identify the requirement(s) **not fully** to be implemented

-
- Provide for a graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income.

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

1. Determine fiscal impact of various scenarios of phase-out period and/or higher “exit” income, in combination with 12-month eligibility (in accordance with Section 3.3. of the Plan), reduced family co-payment amounts (in accordance with Section 3.4. of the Plan), and higher child care payment rates (in accordance with Section 4.3. of the Plan) to determine Hawai‘i’s budgetary constraints to determine what Hawai‘i will use for the phase-out period and/or “exit” income level.
2. Develop language for amendments to the Department’s administrative rules for the child care subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for graduated phase-out period and/or different “exit” income limits.
3. Develop specifications for data system modifications in order to establish “phase-out” income levels into the eligibility requirements as well as a database of wait-listed families that may change actively depending on the priority levels of the families as applications for child care subsidies are submitted and complete data system modifications.
4. Culling existing families from the child care subsidy program and implementation of a wait-list for child care subsidy services to coincide with the implementation of 12 month eligibility, 3 month job-search period, higher child care rates, lower family co-payments, and phase-out period.

- Projected start date for each activity

1. February 2016
2. March 2016
3. March 2016
4. March 2017

- Projected end date for each activity

1. May 2016
2. March 2017
3. September 2017
4. April 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity

3.1.6 Fluctuation in Earnings

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

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

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

- ☒ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement

The Department's administrative rules allow for:

- Using the average of the prior two months gross income for existing employment, the monthly gross income received in the prior month for existing employment, or the monthly gross income that is anticipated to be received from prospective employment;
- Averaging over a six month period for caretakers engaged in activities which provide irregular income, such as selling real estate, or engaging in fishing and farming; and
- Suspension of the child care payments for a period not to exceed one month when the family unit has exceeded the income limits.

- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - ~~Current~~Overall Status – Describe the State/Territory’s overall status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other) _____
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable _____
 - Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented _____
 - Tasks/Activities – What specific steps will you take to implement the ~~unmet~~ requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for complete implementation of this activity _____
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents ~~and include in the description what information is required and how often~~. There are no federal requirements for specific documentation or verification procedures.

- ☐ ☒ Applicant identity. Describe
Applicants are required to provide a picture identification (e.g. driver’s license or state ID) at the time of application and verification of a legal name change (e.g. marriage certificate, divorce decree, etc.).
- ☐ ☒ Applicant’s relationship to the child. Describe
Applicants are required to provide birth certificates or other legal documents that verify the relationship of the child to the applicant at time of application or when a prior document submitted is time-limited (e.g. every 12 months for a power of attorney).
- ☐ ☒ Child’s information for determining eligibility (e.g., identity, age, etc.). Describe

Child's information is obtained through birth certificate or other legal documents at the time of application or when the child enters the home of an on-going child care case.

☐ **X** Work. Describe

Applicants are required to provide verification from new employers about prospective employment or employment information obtained through pay stubs at time of application and at redetermination or if there is a break in employment. For TANF families meeting the work participation requirement, they provide monthly verification to the work participation case manager for TANF requirements.

☐ **X** Job training or Educational program. Describe

Applicants are required to provide school registration information or verification from job training program of enrollment at time of application and at redetermination or if there is a break in activity. For TANF families meeting the work participation requirement, they provide monthly verification to the work participation case manager for TANF requirements.

☐ **X** Family income. Describe

Applicants are required to provide income information by submitting documents, such as pay stubs, child support documents, income tax information for self-employed individuals, etc., at time of application and at redetermination or if there is a change in income so that the family's income exceeds the income limits for a household of the same size.

☐ **X** Household composition. Describe

Applicants self-certify the household composition on the application or the reporting form at the time of application and at redetermination. Birth certificates for all children on the application or added to the household are required.

☐ **X** Applicant residence. Describe

Applicants self-certify their residence on the application or the reporting form at the time of application and at redetermination. Hawaii does not have a minimum residency timeframe requirement.

☐ Other. Describe _____

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

educational standards which may include pre-k settings
(<http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01>).

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

☒ Time limit for making eligibility determinations. Describe length of time

The child care subsidy program is contracted to a private organization for on-going administration. A condition of the contract performance is to provide timely eligibility determinations, and a financial penalty will be imposed on the contractor if they do meet the 30 day threshold set by the Department.

☐ Track and monitor the eligibility determination process

☐ Other. Describe _____

☐ None

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

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age(98.16(9) and 98.33(b)). This requirement did not change under the reauthorization, however Lead Agencies may wish to re-examine those definitions in light of new purposes articulated in Reauthorization and to promote alignment across programs. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

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

State/Territory TANF Agency [Hawai'i Dept. of Human Services](#)

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

- "appropriate child care": [child care provided by a caregiver who meets the eligibility criteria established under 17-798.2-9\(c\).](#)
- "reasonable distance": [located within one hour of travel from the participant's home to the child care provider to the participant's place of employment or work activity.](#)

- "unsuitability of informal child care": friends or family members being considered to provide care who do not meet the criteria established under 17-798.2-9(c).
- "affordable child care arrangements": arrangements for child care that requires no co-payment or a co-payment not exceeding 90% of the state's maximum child care rate per care type.

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

- ☐ In writing
- ☒ Verbally
- ☐ Other. Describe _____
- ☐ List the citation to this TANF policy §§17-798.2 and 17-794.1

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

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

3.2 Increasing Access for Vulnerable Children and Families

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

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

- Provide definition of "Children with special needs"
documentation that verifies that the eligible child under P.L. 105-7, Part C services, meets one of the following conditions that follow: i) has a physical, developmental, behavioral, or emotional health condition that is outside of the normal range; ii) meets the State Department of Health criteria for environmental risk as defined in HRS 321-351; iii) resides in a Limited English Proficiency household; or iv) is homeless. Per the Department of Health, part C eligibility includes those who are developmentally delayed, or at biological risk (e.g. Down's syndrome) or environmental risk (parental age less than 16 years old) for developmental delay
and describe how services are prioritized

by giving such children priority over other CCDF-eligible children if there were a wait-list for CCDF subsidy services.

- b. Provide definition of “Families with very low incomes” gross income is less than 100% of the Federal Poverty Guidelines and describe how services are prioritized by giving such families with very low income priority over other CCDF-eligible families if there were a wait-list for CCDF subsidy services and the Department waives the co-payments for families below the Federal Poverty Guidelines.
- c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act)
TANF families whose incomes meet the definition of families with very low incomes are prioritized over other CCDF-eligible families if there were a wait-list for CCDF subsidy services and the Department waives the co-payments for TANF families who are below the Federal Poverty Guidelines. Families who are transitioning off of TANF through work activities are prioritized over other CCDF-eligible families by giving such families priority over other CCDF-eligible families if there were a wait-list for CCDF subsidy services.

3.2.2 Improving Access for Homeless Children and Families.

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

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

(section 725 of subtitle VII-B) as you implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements.

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

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

Describe the following:

- a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements _____
- b. Procedures to conduct outreach to homeless families to improve access to child care services _____
- c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services _____

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

- Overall Target Completion Date (no later than September 30, 2016)
September 30, 2016
- ~~Current Overall~~ Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~ this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Not Yet Started
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable

 - Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented
 - **Procedures to increase access to CCDF subsidies for homeless children and families**

-
- Procedures to conduct outreach to homeless families to improve access to child care services
 - Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services
 - o Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 1. The Hawai'i Department of Human Services will be partnering with the Hawaii Community Foundation (HCF) to focus initially on increasing outreach to the numerous HCF grantees who are serving homeless families across the State. The Department will focus on getting HCF's partner agencies information about the availability of Department's child care services, including the child care subsidy program and the child care resource and referral services, so that the community providers are helping the families access these services that are essential to supporting homeless families with young children find and maintain stable employment or secure vocational training or educational opportunities in order for the families to maintain and increase their economic self-sufficiency and to be able to secure and maintain permanent housing for themselves.
 2. The Department will also work on similar coordination with the Department's Homeless Program Office, which is the statewide agency in the same Division overseeing state and federally funded contracts for homeless services throughout Hawai'i, on strategies to improve outreach to the contracted service providers in the coordination of services for homeless children whose families may be eligible for child care subsidies and other early childhood services which may be needed to meet the needs of homeless children.
 3. From these partnerships, secure feedback from the service providers about the development of procedures to conduct outreach to homeless families to improve access to child care services and to increase access to CCDF subsidies for homeless families.

4. Collaborate with the Department's Child Welfare Services Branch to develop procedures to increase access to child care services for children who are in foster care.

○ Projected start date for each activity

1. February 2016
2. February 2016
3. May 2016
4. February 2016

○ Projected end date for each activity

1. September 30, 2016
2. September 30, 2016
3. September 30, 2016
4. September 30, 2016

○ Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)

○ Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

3.3 Protection for Working Parents

3.3.1 Twelve-Month Eligibility

The CCDBG Act of 2014 establishes a minimum 12-month eligibility and redetermination period for CCDF families. States and Territories are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for a minimum of 12 months before the State/Territory redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i)&(ii))

Note that this change means a State/Territory may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State/Territory may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

Describe the status of the State/Territory's establishment of 12-month eligibility and redetermination periods for CCDF families.

- ☐ Fully implemented and meeting all Federal requirements outlined above **by March 1, 2016**. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination_____
- ☒ **X** Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) **February 2017**
 - ~~Current~~Overall Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially Implemented
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented ~~to date~~
 - Development of specifications for data system modifications in order to establish 12 month eligibility requirements.
 - Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented
 - each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for a minimum of 12 months before the State redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities.
 - a State may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the State's income eligibility threshold, but not the federal threshold of 85% SMI
 - A State may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

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

1. Determine fiscal impact of various scenarios of 12-month eligibility, in combination with phase-out period and/or higher “exit” income (in accordance with Section 3.1.5. of the Plan), reduced family co-payment amounts (in accordance with Section 3.4. of the Plan), and higher child care payment rates (in accordance with Section 4.3. of the Plan) to determine Hawai‘i’s budgetary constraints to determine the number of families that can be served with the existing CCDF funding.

2. Develop language for amendments to the Department’s administrative rules for the child care subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for 12 month eligibility period.

3. Develop specifications for data system modifications in order to establish 12 month eligibility requirements as well as a database of wait-listed families that may change actively depending on the priority levels of the families as applications for child care subsidies are submitted and complete data system modifications.

4. Culling existing families from the child care subsidy program and implementation of a wait-list for child care subsidy services to coincide with the implementation of 12 month eligibility, 3 month job-search period, higher child care rates, lower family co-payments, and phase-out period.

- Projected start date for each activity

1. February 2016
2. March 2016
3. March 2016
4. March 2017

- Projected end date for each activity

1. May 2016
2. March 2017
3. September 2017
4. April 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

Note that unless the State allows a minimum 3-month job search period – the State/Territory may not exercise the option to terminate assistance based on a parent's non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the minimum 12-month eligibility and re-determination period. The statute does not specify any documentation that States/Territories must require parents to submit regarding activities during periods of job search or finding training or education program requirements for this period.

Does the State/Territory terminate assistance prior to 12 months due to a parent's non-temporary loss of work or cessation of attendance at a job training or education program?

- ☒ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY. List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

[The Department shall issue a policy clarification to all staff by September 30, 2016 if the administrative rules cannot be amended before September 30, 2016. The policy clarification or rule amendments shall indicate that the period of loss of activity that exceeds a day over three \(3\) months will be considered a "non-temporary" loss of activity and that the subsidy client shall be provided timely notice of the termination of child care assistance on the first day after the three \(3\) month period of job search or resuming attendance in a training or education program has passed.](#)

- ☐ No, the State/Territory does not allow this option.

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance.

(658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

Describe the status of the State/Territory's redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

- ☐ **X** Fully implemented and meeting all Federal requirements outlined above **by March 1, 2016**. List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment
- For initial application for child care assistance, for non-TANF families, the applicant only needs to complete an interview over the telephone to complete the eligibility determination process. The phone interview will be scheduled at the applicant's convenience and may be done during the applicant's lunch hour. If there are missing or additional documents needed in order to complete the initial eligibility determination, the applicant may submit the documentation via postal mail, electronic mail, facsimile, or drop off.
 - For TANF families, the applicant must meet with the TANF work participation case manager in-person to review the TANF work participation program requirements and child care eligibility may be requested and reviewed the same time.
 - For redetermination periods, for both TANF and non-TANF families, the clients may submit via postal mail, facsimile, or dropping off supporting documentation along with the completed simplified report form to verify continued eligibility. Another interview is not required, however the subsidy worker may contact the client to discuss any questions the subsidy worker has about the completed simplified report form and/or

the corresponding supporting documentation submitted. Supporting documentation that would need to be submitted may include but is not limited to current pay stubs, current work calendar, and current child care receipt.

- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - ~~Current Overall~~ Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any this~~ requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other) _____
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable _____
 - Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented _____
 - Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for complete implementation of this activity _____
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5)) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

- 3.4.1 Provide the CCDF copayments in the chart below according to family size for one child in care. Note – If the sliding fee scale is not statewide, check here ☐ and describe how many

jurisdictions set their own sliding fee scale _____. Fill in the chart based on the most populous area of the State.

Family Size	(a) Minimum Lowest“Entry” Income Level Where Copayment First Applied	(b) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(c) What is the percent of income for (b) ?	(d) Maximum Highest“Entry” Income Level Before No Longer Eligible	(e) What is the monthly copayment for a family of this size upon initial entry into CCDF?	(f) What is the percent of income for (e)?
1	447	10% of eligible child care benefit per child* (e.g. \$67)	15%	2430	90% of eligible child care benefit per child* (e.g. \$607)	25%
2	600	10% of eligible child care benefit per child* (e.g. \$67)	11%	3178	90% of eligible child care benefit per child* (e.g. \$607)	19%
3	752	10% of eligible child care benefit per child* (e.g. \$67)	9%	3926	90% of eligible child care benefit per child* (e.g. \$607)	15%
4	905	10% of eligible child care benefit per child* (e.g. \$67)	7%	4674	90% of eligible child care benefit per child* (e.g. \$607)	13%
5	1057	10% of eligible child care benefit per child* (e.g. \$67)	6%	5422	90% of eligible child care benefit per child* (e.g. \$607)	11%

* The family co-payment is based upon the calculated eligible child care payment amount for each child. Since there are a variety of factors that affect the calculated eligible child care payment amount for a child, the figures provided here are given for full-time child care at a preschool for a 4 year old.

a) What is the effective date of the sliding fee scale(s)? [February 1, 2010](#)

b) Provide the link to the sliding fee scale <http://humanservices.hawaii.gov/wp-content/uploads/2013/01/17-798.2-Child-Care-Services.pdf>

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

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

The co-payment structure is based on the principle that as families earn more, they will be able to pay a greater percentage of the cost of the child care, so that once they exceed the income eligibility requirements, the family is better prepared to fully fund the cost of child care and the loss of the child care subsidy will have less of an impact on the family's finances. The co-payment is a range between 0 and 90% of the calculated eligible child care payment per child. The eligible calculated child care payment is determined by hours of child care needed, hours of activity that the client(s) is engaged in, the cost of child care. The family co-payment is then applied to the calculated eligible child care payment.

3.4.3 Will the Lead Agency use other factors in addition to income and family size to determine each family's copayment? (658E(c)(3)(B))

- ☒ Yes, and describe those additional factors using the checkboxes below.
 - ☐ Number of hours the child is in care

☒ Lower copayments for higher quality of care as defined by the State/Territory

☐ Other. Describe other factors _____

☐ No.

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.42(c)). Will the Lead Agency waive family contributions/co-payments for families whose incomes are at or below the poverty level?

☒ Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size. The poverty level used by the Lead Agency for a family size of 3 is \$751.

☐ No, the Lead Agency does not waive family contributions/co-payments.

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable and not a barrier to families receiving CCDF? Check all that apply.

☐ Limits the maximum co-payment per family. Describe _____

☐ Limits combined amount of copayment for all children to a percentage of family income. List the percentage of the copayment limit and describe _____

☒ Minimizes the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance discussed in 3.1.5. Describe

The co-payment structure is based on the principle that as families earn more, they will be able to pay a greater percentage of the cost of the child care, so that once they exceed the income eligibility requirements, the family is better prepared to fully fund the cost of child care and the loss of the child care subsidy will have less of an impact on the family's finances. The co-payment is a range between 0 and 90% of the calculated eligible child care payment per child.

☐ Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying. Describe _____

☒ Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider. Describe

The Department will cover for registration, supplies, and/or activity fees charged by the child care provider once per state fiscal year per child up to \$125.00.

☐ Other. Describe _____

4 Ensure Equal Access to High Quality Child Care for Low-Income Children

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory's payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2))_____

4.1.2 Describe how the parent is informed of the option to choose from a variety of child care categories – such as private, not-for-profit, faith-based providers (if using a certificate), centers, family child care homes, or in-home providers.(658E(c)(2)(A)(i), 658P(2), 658Q)) Check all that apply.

- ☐ ☒ Certificate form provides information about the choice of providers, including high quality providers
- ☐ ☒ Certificate is not linked to a specific provider so parents can choose provider of choice
- ☐ ☒ Consumer education materials on choosing child care
- ☐ ☒ Referral to child care resource and referral agencies
- ☐ Co-located resource and referral in eligibility offices
- ☐ ☒ Verbal communication at the time of application
- ☐ Community outreach, workshops or other in-person activities
- ☐ ☒ Other. Describe [The Department's website:](http://humanservices.hawaii.gov/bessd/child-care-program/ccch-subsidies/)
<http://humanservices.hawaii.gov/bessd/child-care-program/ccch-subsidies/>

4.1.3 Child Care Services Available through Grants or Contracts

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



Yes. If yes, **describe:**

- the type(s) of child care services available through grants or contracts
[The Department currently has three types of contracted services for slots. One contracted service targets infant and toddler care in group settings for teen parents on-site or near public high schools throughout the state, operated by the Department of Education \(DOE\) or a private provider. The second contracted service provides drop-in care for TANF families, who are meeting with their work participation case manager or participating in other activities at the work participation offices, if the family does not already have child care arrangements for their children ages 2 years old to 12 years old. Private providers bid for the contracted services which are provided at the work participation offices. The third contracted service is with the Department of Education to fund slots at after-school care providers at public elementary schools for the children who qualify for free and reduced lunch. The DOE operates the after-school care programs or contracts with private providers to operate the after-school care programs.](#)

-
- the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.)
Private child care providers bid on publicly procured contracts or exempt contract agreements are made with the Department of Education.
 - the process for accessing grants or contracts
 - The Department of Education public high school will select and enroll interested teen parents who agree to participate in the DOE's specialized curricula program that includes parenting education and skill building along with support for completion of high school.
 - The TANF work participation case manager will contact the child care programs at the work participation offices to schedule child care for TANF families upon request from the family.
 - The Department of Education or its contracted after-school providers inform families of fee waivers for the afterschool child care costs if the family submits an application to determine the family's eligibility for the fee waivers.
 - the range of providers available through grants or contracts
Only private providers who meet child care licensing requirements and are awarded contracts through the public procurement process, private providers operating school-age programs exempt from licensure under Chapter 346-152, Hawaii Revised Statutes, through contracts with the Department of Education (DOE), or programs operated by the DOE are the types of providers available through grants or contracts.
 - how rates for contracted slots are set through grants and contracts
Contract costs are determined by estimating the cost for care per child and the number of children that can be served at a particular site.
 - how the State/Territory determines which entities to contract with for increasing supply and/or improving quality
The Department must publicly procure for contract slots for the on-site child care at TANF work participation offices. Entities that comply with state laws may be awarded contracts.
 - if contracts are offered statewide and/or locally
Contracts are offered statewide for the infant and toddler care for teen parents and the after-school child care at public elementary schools. The contract for on-site child care for TANF work participation offices are only offered on Oahu, as the other islands have more rural communities.

☐ No. If no, skip to 4.1.4.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following (check all that apply):

☒ Increase the supply of specific types of care with grants or contracts for:

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

☒ Improve the quality of child care programs with grants or contracts for:

- ☐ Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
- ☒ Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
- ☐ Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
- ☐ Programs to serve children with disabilities or special needs
- ☒ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve homeless children
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds

☐ Programs that serve specific geographic areas

☐ Urban

☐ Rural

☐ Other. Describe _____

- 4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access

The Child Care Certificate and Provider Agreement specifies that providers caring for a child receiving CCDF subsidies must allow parents unlimited access to their children while in care. When the Department implements the monitoring component for exempt child care provider caring for children whose families are receiving CCDF subsidies, the monitoring staff will also verify that the child care providers are following this requirement.

- 4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. Will the Lead Agency limit the use of in-home care in any way?

☒ Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.

☐ Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act. Describe _____

☒ Restricted based on provider meeting a minimum age requirement. Describe

The child care provider must be age 18 years or older.

☐ Restricted based on hours of care (certain number of hours, non-traditional work hours). Describe _____

☐ Restricted to care by relatives. Describe _____

☐ Restricted to care for children with special needs or medical condition. Describe _____

☐ Restricted to in-home providers that meet some basic health and safety requirements. Describe _____

☒ Other. Describe

The in-home child care provider must not have a known history of child abuse or neglect, physical or psychological or psychiatric problems, or criminal convictions that may adversely affect or interfere with the care of children. Background clearance checks are done for the in-home child care provider and may include Federal fingerprint search, state fingerprint search, state name search, national sex offender registry

search, state sex offender registry search, child abuse and neglect registry search, and adult protective services registry search.

☐ No

4.2 Assessing Market Rates and Child Care Costs

The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval (see <http://www.acf.hhs.gov/programs/occ/resource/ccdf-reauthorization-faq>).

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State/Territory must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Internet in an easily interpretable and understandable form.

The State/Territory must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the law requires States and Territories to take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, **to the extent practicable**, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology. Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

- ☒ MRS
- ☐ Alternative Methodology. Describe _____
- ☐ Both. Describe _____
- ☐ Other. Describe _____

4.2.2 Describe how the State consulted with the State Advisory Council(SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities **which could include worker organizations** prior to developing and conducting the MRS or alternative methodology.

The Market Rate Study that was finalized and issued in August 2015 was conducted during the first six (6) months of 2015, and therefore the survey and methodology was being finalized in late 2014, which was prior to the finalization of the CCDF Plan pre-print, and about the same time as the signing of the Child Care and Development Block Grant Act of 2014. The Department will consult with the State Advisory Council on developing and conducting the 2016 Market Rate Survey.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable. To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory.

The Department's contracted statewide child care resource and referral agency (CC R&R) conducts the Market Rate Survey annually for the Department. The CC R&R agency surveys child care providers in Hawaii and enters the responses received into a proprietary data system that captures the data. The CC R&R agency provides the Department's Audit, Quality Control, and Research Office Research staff with a data extract of the survey responses received from child care providers. The Research staff use SAS statistical software to analyze the child care rate data and create summary reports of the analysis.

Of the 1,004 child care providers statewide who provide responses, only 670 child care providers were included in the study along with the 3,327 rates they provided. Only full-time monthly rates were analyzed. Full-time monthly rates were weighted by total desired capacity of each provider. The desired capacity was used rather than licensed

capacity, since individual providers do not always choose to enroll the maximum number or children they are licensed to serve.

The 334 child care providers that were excluded from the study were excluded because they did not offer child care to the general public, such as Head Start and Kamehameha Schools who have eligibility requirements to enroll in their programs. Also excluded were licensed before and afterschool child care that is only offered to students who are attending that school or program during the regular school day. Other reasons for exclusion from the study were inactive/closed provider status, missing rate information, part-time care rates, and missing capacity information.

The following types of regulated child care providers were included in the child care rate analysis: licensed Before/After School Care program, registered family child care home, licensed group child care home, licensed group child care center (i.e. preschool), and licensed infant and toddler center.

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

a) Geographic area (e.g., statewide or local markets)

Results showed that child care market rates are higher for younger children and center-based care, and rates are lower for family child care. It is preferable to examine child care rates by statewide, county, or urban/rural classifications rather than by island because limited rate information was available for some of the islands.

b) Type of provider

Results showed that child care market rates are higher for younger children and center-based care, and rates are lower for family child care. It is preferable to examine child care rates by statewide, county, or urban/rural classifications rather than by island because limited rate information was available for some of the islands.

c) Age of child

Results showed that child care market rates are higher for younger children and center-based care, and rates are lower for family child care. It is preferable to examine child care rates by statewide, county, or urban/rural classifications rather than by island because limited rate information was available for some of the islands.

d) Describe any other key variations examined by the market rate survey, such as quality level

For the purposes of the study, the child care provider was considered to be accredited if it possessed accreditation designations by the National Association for the Education of Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA).

4.2.5 Describe the process used by the State/Territory to prepare a detailed report containing the results and make the report widely available to the public.

- a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016) [August 2015](#)
- b) Date report containing results was made widely available, no later than 30 days after the completion of the report [February 2016](#)
- c) How the report containing results was made widely available and provide the link where the report is posted if available
<http://humanservices.hawaii.gov/bessd/child-care-program/>

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children). Note – If the payment rates are not set by the State/Territory, check here ☐. Describe how many jurisdictions set their own payment rates_____.

- a) Infant (6 months), full-time licensed center care in most populous geographic region
 - Rate \$[1395](#) per [month](#) unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile [56](#)
- b) Infant (6 months), full-time licensed FCC care in most populous geographic region
 - Rate \$[650](#) per [month](#) unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile [42](#)
- c) Toddler (18 months), full-time licensed center care in most populous geographic region
 - Rate \$[1395](#) per [month](#) unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile [56](#)
- d) Toddler (18 months), full-time licensed FCC care in most populous geographic region
 - Rate \$[650](#) per [month](#) unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile [42](#)

- e) Preschooler (4 years), full-time licensed center care in most populous geographic region
 - Rate \$675 per month unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 21
- f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
 - Rate \$600 per month unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile 25
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
 - Rate \$155 per month unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile >100
- h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
 - Rate \$600 per month unit of time (e.g., hourly, daily, weekly, monthly, etc.)
 - Percentile N/A school age care rates not reported separately from 0-5 rates
- i) Describe the calculation/definition of full-time care
Full-time care is more than 97 hours of child care needed per month
- j) Provide the effective date of the payment rates February 1, 2010
- k) Provide the link to the payment rates <http://humanservices.hawaii.gov/wp-content/uploads/2013/01/17-798.2-Child-Care-Services.pdf>

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care. In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

☐ Tiered rate/rate add-on for non-traditional hours. Describe _____

- ☐ Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe _____
- ☐ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on). Describe _____
- ☒ Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe _____

The Department provides a higher rate for center-based care providers accredited by the National Association for the Education of Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA). The rates took into consideration the annual Market Rate Studies for accredited center-based rates at the time when the Department revised the child care rates.

- ☐ Tiered rate/rate add-on for programs serving homeless children. Describe _____
- ☐ Other tiered rate/rate add-on beyond the base rate. Describe _____
- ☐ None.

- 4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology

The Department provides a higher rate for center-based care providers accredited by the National Association for the Education of Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA). The rates took into consideration the annual Market Rate Studies for accredited center-based rates at the time when the Department revised the child care rates in February 2010. The Department must conduct an analysis of the fiscal impact of raising the rates for all types of licensed and registered child care facilities and homes to current market rates from the 2015 survey in conjunction with additional fiscal impact of implementation of other requirements of the Child Care and Development Block Grant Act of 2014, Public Law 113-186, in combination with the phase-out period and/or higher "exit" income (in accordance with Section 3.1.5. of the Plan), 12-month eligibility (in accordance with Section 3.3. of the Plan), and reduced family co-payment amounts (in accordance with Section 3.4. of the Plan) to assess Hawai'i's budgetary constraints to set what Hawai'i will use for the payment rates for the child care subsidy program.

- 4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

The Department took into consideration the cost of providing higher quality child care services through tiered payments for child care programs that are accredited by the National Association for the Education of Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA), and the Department has not been able to increase the tiered rates with a sufficient differential to support high quality child care until an updated funding analysis is completed taking into account additional requirements under the Child Care and Development Block Grant Act of 2014, Public Law 113-186, including the phase-out period and/or higher “exit” income (in accordance with Section 3.1.5. of the Plan), 12-month eligibility (in accordance with Section 3.3. of the Plan), and reduced family co-payment amounts (in accordance with Section 3.4. of the Plan), determination that sufficient funds are available or secured, and administrative rules are revised to address higher rates.

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDFplan shall provide a summary of data and facts relied on by the State/Territory to certifythat paymentrates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1 What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access – such as percentile that rates cover or proportion of costs covered)? Check all that apply and describe.

- ☐ Payment rates are set at the 75th percentile or higherof the most recent survey. Describe _____
- ☒ X Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.
- ☐ Rates based on data on the cost to the provider of providing care meeting certain standards. Describe _____
- ☐ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe _____
- ☐ Data on the proportion of children receiving subsidy being served by high-quality providers. Describe _____
- ☐ Data on where children are being served showing access to the full range of providers. Describe _____
- ☐ Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF. Describe _____

- ☐ Feedback from parents, including parent survey or parent complaints. Describe _____

- ☒ **X** Other. Describe

The payment rates allows families receiving subsidies to access all care types at a majority of the licensed and registered child care facilities and homes throughout the state as the **median** rates charged statewide are the same or slightly lower than the Department's payment rates for center-based infant/toddler care, registered family child care home – infant/toddler care, and licensed before school care/after school care, based on the 2015 market rate survey results.

4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

- ☐ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access **by March 1, 2016**. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access _____

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

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

September 2017

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

Partially implemented

- ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented **to date if applicable**

- The Department provides a higher rate for center-based care providers accredited by the National Association for the Education of Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA). The rates took into consideration the annual Market Rate Studies for accredited center-based rates at the time when the Department revised the child care rates in February 2010.

- The payment rates allows families receiving subsidies to access all care types at a majority of the licensed and registered child care facilities and homes throughout the state as the **median** rates charged statewide are the same or slightly lower than the Department's payment rates for center-based infant/toddler care, registered family child care home – infant/toddler care, and licensed before school care/after school care based on the 2015 market rate survey.
- o Unmet requirement - Identify the requirement(s) **not fully** to be implemented
- That payment rates are sufficient to ensure equal access based on the current MRS.
 - o Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - 1. Determine fiscal impact of various scenarios of higher child care payment rates (in accordance with Section 4.3. of the Plan) in combination with phase-out period and/or higher “exit” income (in accordance with Section 3.1.5. of the Plan), 12-month eligibility (in accordance with Section 3.3. of the Plan), and reduced family co-payment amounts (in accordance with Section 3.4. of the Plan) to determine Hawai'i's budgetary constraints to determine what Hawai'i will use its child care payment rates.
 - 2. Develop language for amendments to the Department's administrative rules for the child care subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for child care payment rates.
 - 3. Develop specifications for data system modifications in order to establish changes to the child care payment rates into the eligibility and payment requirements as well as a database of wait-listed families that may change actively depending on the priority levels of the families as applications for child care subsidies are submitted and complete data system modifications.
 - 4. Culling existing families from the child care subsidy program and implementation of a wait-list for child care subsidy services to coincide with the implementation of 12 month eligibility, 3 month

job-search period, higher child care rates, lower family co-payments, and phase-out period.

- Projected start date for each activity

1. February 2016
2. March 2016
3. March 2016
4. March 2017

- Projected end date for each activity

1. May 2016
2. March 2017
3. September 2017
4. April 2017

- Agency – Who is responsible for complete implementation of this activity _____
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

4.5 Payment Practices and Timeliness of Payments

The CCDBG Act of 2014 added a provision that requires States and Territories to describe in the Plan how the State/Territory's payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory—so as to provide stability of funding and encourage more child care providers to participate in the subsidy program. To the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences due to holidays or unforeseen circumstances such as illness. (658E(c)(2)(S))

- 4.5.1 Describe the status of State/Territory's payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory.

- ☒ Fully implemented and meeting all Federal requirements outlined above by **March 1, 2016**. Describe using 4.5.2 through 4.5.3 below.
- ☐ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please

provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016) _____
- ~~Current~~Overall Status – Describe the State/Territory’s overall status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other) _____
 - ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable _____
 - Unmet requirement - Identify the requirement(s) ~~not fully to be~~ implemented _____
 - Tasks/Activities – What specific steps will you take to implement the ~~unmet~~ requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for complete implementation of this activity _____
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. **Check all that apply and describe.** The Lead Agency ...

- ☒ **X** Pays prospectively prior to the delivery of services. Describe
Once determined eligible and initial payments have been issued, the Department pays the child care subsidy payments at the start of the month to the family for that month’s child care needs.
- ☐ Pays within no more than 21 days of billing for services. Describe _____
- ☒ **X** Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory’s definition of occasional absences
The Department determines the child care need from the previous month during recertifications and projects that same need for the next eligibility period. If the child is absent for a portion of the month, but the child care provider is paid for that

month to hold the child's place and the family receives a receipt to document payment to the child care provider, the family continues to be eligible. However, once the child is disenrolled from the child care provider's program, the family not notify the Department and child care assistance would be suspended until the family finds a new child care provider, the provider completes the child care certificate, and the child care provider determine to have completed the required background checks.

- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe _____
- ☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month. Specify the number of absence days allowed and paid for and describe _____
- ☐ ☒ Pays on a full-time or part-time basis (rather than smaller increments such as hourly)

The Department pays for child care on a full-time basis (97 hours or more of care needed per month), or less than full-time basis in 3 other increments of 61-96 hours of care needed per month, 25-60 hours of care needed per month, or 1-24 hours of care needed per month.

- ☐ ☒ Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)

The Department will pay for registration fees, supplies, or activity fees charged by the child care provider once per state fiscal year per child up to \$125.00.

- ☐ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment _____
- ☐ Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe _____
- ☐ Other. Describe _____

- ☐ ☒ For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory

The Department pays the subsidy to the eligible family. Due to confidentiality requirements, the Department is not allowed to release any information to the child care provider regarding the family's eligibility status or the payment amount without the family's consent. All notices regarding disposition of an application or changes to on-going eligibility or payment amounts are sent to the family. The family is provided with a timely appeal and resolution process for inaccuracies and disputes.

4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

- ☐ ☒ Policy on length of time for making payments. Describe length of time

The Department pays the child care subsidy payment to the family at the beginning of the month for that month's child care needs. For partial month payments when a family applies for and is determined eligible during the month, supplemental child care payments can be issued on a daily basis once the child care subsidy payment amount is determined and authorized.

- ☐ ☒ Track and monitor the payment process

The Department receives reports on an on-going basis that will report if any electronic payments are not issued.

- ☐ ☒ Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe

The Department utilizes Electronic Benefit Transfer cards or direct deposit to the families to make payments to legally exempt child care providers. For licensed and registered child care providers, with the consent of the family, the Department will forward the family's child care subsidy payment from the family's EBT card or account to the bank account which the provider has registered with the Department for the forwarding of payments.

- ☐ Other. Describe _____

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

The CCDBG Act of 2014 added a provision that the State/Territory will develop and implement strategies to increase the supply and improve the quality of child care services for children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (658 E(c)(2)(M))

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?

- ☐ Yes. Describe data sources _____

- ☐ ☒ No. If no, how does the State/Territory determine most critical supply needs?
Feedback received at various community meetings the Department attends on an on-going basis, at Early Learning Advisory Board meetings, and the Department's Child Care Advisory Committee members and meeting attendees.

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

- a) Infants and toddlers (check all that apply)

- ☐ ☒ Grants and contracts (as discussed in 4.1.3)

- ☐ Family child care networks
- ☐ Start-up funding
- ☒ Technical assistance support
- ☒ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☒ Other. Describe Higher base rate for infant and toddler care

b) Children with disabilities (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☐ Technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other. Describe _____

c) Children who receive care during non-traditional hours (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☒ Technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)
- ☐ Other. Describe _____

d) Homeless children (check all that apply)

- ☐ Grants and contracts (as discussed in 4.1.3)
- ☐ Family child care networks
- ☐ Start-up funding
- ☐ Technical assistance support
- ☐ Recruitment of providers
- ☐ Tiered payment rates (as discussed in 4.4.1)

☐ Other. Describe _____

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high-quality programs. (658E(c)(2)(Q)) Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

☒ Fully implemented and meeting all Federal requirements outlined above by **March 1, 2016**. Describe

The Department currently has three types of contracted services for slots. One contracted service targets infant and toddler care in group settings for teen parents on-site or near public high schools throughout the state, operated by the Department of Education (DOE) or a private provider. The second contracted service provides drop-in care for TANF families, who are meeting with their work participation case manager or participating in other activities at the work participation offices, if the family does not already have child care arrangements for their children ages 2 years old to 12 years old. Private providers bid for the contracted services which are provided at the work participation offices. The third contracted service is with the Department of Education to fund slots at after-school care providers at public elementary schools for the children who qualify for free and reduced lunch. The DOE operates the after-school care programs or contracts with private providers to operate the after-school care programs.

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- ~~Current~~ Overall Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~ this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other) _____
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable _____

- Unmet requirement - Identify the requirement(s) ~~not fully~~to be implemented _____
- Tasks/Activities – What specific steps will you take to implementthe **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

- Projected start date for each activity _____
- Projected end date for each activity _____
- Agency – Who is responsible for complete implementation of this activity _____
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the pre-service/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don't care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State/Territory is required to certify it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(F) Nothing in the statute prohibits the State/Territory from exempting child care providers from licensing requirements. But, if the State/Territory exempts any child care providers from State/Territory licensing requirements, the CCDBG Act of 2014 requires States and Territories to describe how such licensing exemptions do not endanger the

health, safety, and development of children receiving CCDF who are cared for by the license-exempt providers. (658E(c)(2)(F)(ii))

- 5.1.1 The State/Territory certifies that it has licensing requirements applicable to all child care services provided within the State. (658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

Center-based child care providers are defined as a provider licensed to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. Licensed center-based settings include school-age before- and after-school or intercession care, infant and toddler child care centers, preschools (aka group child care centers) which are not exempted under section 346-152(a), Hawaii Revised Statutes.

Group child care homes are defined as a provider licensed to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. Licensed group homes care for 7 to 12 children in a home-based setting.

Family child care homes are defined as a provider registered to provide child care services for fewer than 24 hours per day per child in a non-residential setting, unless care in excess of 24 hours is due to the nature of the parent(s)' work. Registered family child care homes which are not exempted under chapter 346-152(a), Hawaii Revised Statutes, are caring for more than 2 but less than 7 unrelated children.

- 5.1.2 Does your State/Territory exempt any child care providers that can receive CCDF from its licensing requirements?

- ☐ ☒ Yes. Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers
- In-home child care providers who provide child care services in the child's own home.
 - Child care providers caring for children related to themselves by blood, marriage, or adoption and care for up to two enrolled children who are unrelated to themselves in their own home.
 - Exemptions for center-based programs that care for children less than 6 hours per week, programs that offer a specialized training or skill, multi-service organizations or community associations, county operated programs, programs operated by the Department of Education, programs that operate for only two consecutive weeks in a 3-month period, and programs licensed or certified by the U.S. Department of Defense and located on federal property.

-
- Chapter 346-152(a), Hawaii Revised Statutes provides a list of exemptions from licensure or registration that can be found at: http://www.capitol.hawaii.gov/hrscurrent/Vol07_Ch0346-0398/HRS0346/HRS_0346-0152.htm

Exempt child care providers caring for children whose families are receiving subsidies must self-certify that they have appropriate health and safety practices for toileting and diapering, hand-washing, use of car seats for transporting children, available first-aid kits, emergency exit plans, working smoke detectors, appropriate discipline methods, and satisfactory TB clearance or chest x-ray.

The Hawai'i Department of Human Services may conduct an unannounced site-visit for a legally exempt provider caring for children whose families are receiving subsidies if it is part of a complaint investigation to determine regulation compliance.

The Department will also conduct background checks on legally exempt child care providers, including all staff and household members, caring for children whose families are receiving subsidies. Background checks include state and federal fingerprint record checks, state criminal history record checks, national and state sex offender registry checks, Hawai'i child abuse and neglect registry check, and Hawai'i adult abuse and neglect registry check.

☐ No

5.1.3 Describe the status of the State/Territory's development and implementation of child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting.(658E(c)(2)(H))

- ☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 5.1.4 and 5.1.5 below.
- ☒ Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016)
July 2017

- ~~Current~~Overall Status – Describe the State/Territory’s overall status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially Implemented
 - ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
 - The Hawai‘i Department of Human Services’ administrative rules already include ratios for the number of children to staff/providers for licensed Group Child Care Centers, Group Home Child Care, Infant and Toddler Centers, Before- and After- School Care facilities, and registered Family Child Care Homes as described in 5.1.4.
 - The Department’s administrative rules for licensed Infant & Toddler Child Care Centers and Group Child Care Homes and registered Family Child Care Homes as described in 5.1.4. address group sizes.
 - Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented
 - Establishing group sizes for Group Child Care Centers, Group Child Care Homes, and Before- and After- School Child Care facilities.
 - Establishing ratios for the number of children to staff/providers for legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
 - Tasks/Activities – What specific steps will you take to implement the ~~unmet~~ requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 1. Develop language for amendments to the Department’s administrative rules for the Group Child Care Centers and and Before and After School Child Care facilities in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for group sizes limits.
 2. For legally exempt child care providers caring for CCDF subsidy children: Develop and submit to Hawai‘i State Legislature the proposed bill to obtain statutory authority to subject legally exempt child care providers caring for CCDF

subsidy children to minimum health and safety requirements.

- a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3 and #4 beyond the timeline specified in the Plan.
3. Develop language for amendments to the Department's subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for legally exempt child care providers caring for CCDF subsidy children for health and safety standards, including group sizes and ratios for the number of children to staff/providers.
4. For the Department's child care licensing staff: Develop procedures for revised requirements for licensed and registered child care facilities and homes and procedures for health and safety requirements and monitoring inspections of legally exempt child care providers caring for CCDF subsidy children.
 - Projected start date for each activity
 1. February 2016
 2. August 2015
 3. July 2016
 4. June 2016
 - Projected end date for each activity
 1. February 2017
 2. July 2016
 3. July 2017
 4. July 2017
 - Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting.(658E(c)(2)(H))

a) Licensed Center-Based Care

1. Infant

- State/Territory age definition [6 weeks to 12 months](#)
- Ratio [4:1](#)
- Group size [8](#)

2. Toddler

- State/Territory age definition [12 months to 36 months](#)
- Ratio [4:1 for 12 months to 24 months](#)
[6:1 for 18 months – 36 months](#)
- Group size [12](#)

3. Preschool

- State/Territory age definition [2 years to 6 years](#)
- Ratio [8:1 for 2 year olds](#)
[12:1 for 3 year olds](#)
[16:1 for 4 year olds](#)
[20:1 for 5 year olds and above](#)
- Group size [to be established](#)

4. School-Age

- State/Territory age definition [4 years and 8 months and older who are enrolled in public or private elementary schools.](#)
- Ratio [20:1](#)
- Group size [to be established](#)

5. If any of the responses above are different for exempt child care centers, describe [Hawai'i must first obtain statutory authority to subject legally exempt child care providers caring for CCDF subsidy children to minimum health and safety requirements, including group sizes and ratios for the number of children to staff/providers.](#)

6. Describe, if applicable, ratios and group sizes for centers with mixed age groups

- [Multi-age grouping for children between 6 weeks – 18 months, or 6 months – 36 months shall be the ratio and group size of the age of the youngest child in the group. For multi-age groups, the ratio and group size shall not exceed the ratio and group size of one age group higher than the youngest child in the group, and two thirds of the children must be in the oldest age group.](#)

- For 2 – 5 year old children, if the program does not specify mixing the ages, ratio shall be determined by the age of the youngest child.
- When an instructional curriculum and classroom environment and teacher training specifically require mixing the ages, the number of children per staff member is determined by the average of the staff-child ratios (2 yr olds 8:1; 3 yr olds 12:1; 4 yr olds 16:1; 5 yr olds 20:1) and shall not apply to more than 3 hours of mixed instructional time during any operational day for the same child or group of children.

b) Licensed Group Child Care Homes:

1. Infant

- State/Territory age definition N/A, Group Child Care Homes shall only care for children ages 2 years and older.
- Ratio N/A, Group Child Care Homes shall only care for children ages 2 years and older.
- Group size N/A, Group Child Care Homes shall only care for children ages 2 years and older.

2. Toddler

- State/Territory age definition N/A, Group Child Care Homes shall only care for children ages 2 years and older.
- Ratio N/A, Group Child Care Homes shall only care for children ages 2 years and older.
- Group size N/A, Group Child Care Homes shall only care for children ages 2 years and older.

3. Preschool

- State/Territory age definition 2 years to 6 years
- Ratio 8:1 for 2 year olds
12:1 for 3 year olds
16:1 for 4 year olds
20:1 for 5 year olds and above
- Group size 12

4. School-Age

- State/Territory age definition 4 years and 8 months and older who are enrolled in public or private elementary schools.
- Ratio 20:1
- Group size 12

5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day

Maximum number of children permitted is 12. Related children are counted in the ratio of children to staff/providers. Infants are not permitted. Toddlers who are 2 years and older are permitted. School-age children are counted toward the maximum number of children in care at one time.

6. If any of the responses above are different for exempt group child care homes, describe [N/A, Group child care homes are not exempt in Hawai'i.](#)

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios [6:1](#), group size [6](#), the threshold for when licensing is required [more than 2 children unrelated to the child care provider and up to 6 children in care](#), maximum number of children that are allowed in the home at any one time [6](#) children, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size [not required if the child care provider's child is 6 years of age or older or under 6 years of age and attending a school or child care center more than 6 hours per day](#), or the limits on infants and toddlers or additional school-age children that are allowed for part of the day [up to 2 children under 18 months or 4 children under 18 months if there is a second full-time adult assisting the child care provider.](#)

2. If any of the responses above are different for exempt family child care home providers, describe

[Hawai'i must first obtain statutory authority to subject legally exempt child care providers caring for CCDF subsidy children to minimum health and safety requirements, including group sizes and ratios for the number of children to staff/providers.](#)

d) Any other eligible CCDF provider categories:

Describe the ratios [N/A](#), group size [N/A](#), the threshold for when licensing is required [N/A](#), maximum number of children that are allowed in the home at any one time [N/A](#), if the State/Territory requires related children to be included in the child-to-provider ratio or group size [N/A](#), or the limits on infants and toddlers or additional school-age children that are allowed for part of the day [N/A](#).

- 5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed, minimum education level, any specific content required related to the age of children.(658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher

- A bachelor's degree in Early Childhood Education (ECE) or Child Development (CD) or related fields, e.g., maternal-child health, nursing, or human development, and, twelve months full time experience working with children under thirty six months of age in a licensed group care setting, and, twelve credits approved ECE or CD training courses (may be part of the bachelor's degree) including thirty hours course work in infant and toddler development from an accredited teacher training institute or program; or
- A high school diploma, or its equivalent and credential in child development associate program, and, twenty four months full time experience working with children under five years of age in a licensed group care setting of which twelve months shall have been with children under thirty six months of age, and, twelve credits approved ECE or CD training courses, including thirty hours of course work in infant toddler development from an accredited teacher training institute or program; or
- Two years of college, preferably in ECE or CD or related fields, and, twenty four months full time experience working with children under five years of age in a licensed group care setting of which twelve months shall have been with children under thirty six months of age, and, twelve credits approved ECE or CD training courses including thirty hour course work in infant and toddler development from an accredited teacher training institute.

and assistant teacher qualifications

- A high school diploma or its equivalent, and, twelve months full time experience working with children under thirty six months of age in a licensed group care setting, and, twelve credits approved ECE or CD training courses including thirty hours of course work in infant and toddler development from an accredited teacher training institute or program; or
- A high school diploma or its equivalent, and, twenty four months of full time experience working with children under thirty six months of age in a licensed group care setting, and, thirty hours of course work in infant and toddler development from an accredited teacher training institute or program; or
- No high school diploma, and, thirty six months full time experience working with children under thirty six months of age in a licensed group setting, and, thirty hours of course work in infant and toddler development from an accredited teacher training institute or program.

2. Toddler lead teacher same as lead infant teacher and assistant teacher qualifications same as assistant infant teacher.

3. Preschool lead teacher

- A degree in child development or early childhood education from an accredited college or university, and six months working experience in an early childhood program; or
- Post secondary credential in child development associate program or organized two-year (sixty credit) college program and certificate in early childhood education, plus one year supervised teaching experience in an early childhood program; or
- Baccalaureate (bachelor's degree) in elementary education from an accredited college or university plus six months working in an early childhood program, plus six credit -- semester or equivalent approved child development or early childhood training courses, (may be included as part of bachelors of arts or bachelors of science degree); or
- Baccalaureate (bachelor's degree) in any field from an accredited college or university plus six months working in an early childhood program, plus twelve credits--semester or equivalent approved child development or early childhood training courses, (may be included as part of bachelor of arts or bachelor of science degree).

and assistant teacher qualifications

- Post secondary credential in child development associate program or associate of arts degree and certificate in early childhood education, and six months experience working in an early childhood program; or
- Two years (sixty credits) of post secondary education plus six months working in an early childhood program and nine credits--semester equivalent approved child development or early childhood training courses.

4. School-Age lead teacher

- Two years of college education and six months experience in working with school-age children; or
- Child development associate (CDA) and six months experience in working with school-age children; or
- Completion of high school and nine months of experience in working with school-age children; and
- In all cases undergo an orientation training provided by the facility.

and assistant teacher qualifications

-
- Must be at least 18 years old, shall always be under the direction of a program leader, and shall undergo orientation training provided by the facility.

5. Director qualifications

- For Infant and Toddler Center:
 - A Bachelor's degree in early childhood education, child development, or related field from an accredited college or university, including in all cases 30 hours of course work in infant and toddler development from an accredited teacher training institute or program; and 12 months full time experience working with children under 36 months of age in a licensed group care setting; or
 - Two years of college education in early childhood education, child development, or related field, including in all cases 30 hours of course work in infant and toddler development from an accredited teacher training institute or program; and 24 months full time experience working with children under 36 months of age in a licensed group care setting.
- For a Preschool (group child care center):
 - A bachelor's degree from an accredited college or university preferably with courses in early childhood education, child development, or related fields, and two years of experience working with children; or
 - Combination of two years of college education or child development associate (CDA) certification and four years of experience in work with children; and
 - In either case, at least one year of experience shall be with children of the appropriate age for the child care center being directed.
- For a Before- and After-School facility:
 - A bachelor's degree from an accredited college or university and twelve months of experience in working with children; or
 - Child development associate (CDA) certification and twelve months of experience in working with children; or

- Two years of college education and twenty-four months of experience in working with children; and
- In all cases, at least six months of experience shall be with children of the appropriate age for the before/after school program being directed.

b) Licensed Group Child Care Homes:

1. Infant lead teacher N/A, Group Child Care Homes shall only care for children ages 2 years and older and assistant qualifications N/A, Group Child Care Homes shall only care for children ages 2 years and older
2. Toddler lead teacher N/A, Group Child Care Homes shall only care for children ages 2 years and older and assistant qualifications N/A, Group Child Care Homes shall only care for children ages 2 years and older.
3. Preschool lead teacher same as Licensed Center-Based Care preschool lead teacher and assistant qualifications same as Licensed Center-Based Care preschool assistant teacher
4. School-Age lead teacher same as Licensed Center-Based Care preschool lead teacher and assistant qualifications same as Licensed Center-Based Care preschool assistant teacher.

☐ N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications

Registered family child care home providers must have current certification in First Aid and child cardio-pulmonary resuscitation (CPR) and must be 18 years or older.

d) Other eligible CCDF provider qualifications

Other eligible CCDF providers who are legally exempt and caring for a child receiving CCDF subsidies must be 18 years or older and have completed the background checks as required under Section 5.3 of the Plan.

- 5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas **as of March 1, 2016. Provide a citation and a link if available**

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

- Overall Target Completion Date (no later than September 30, 2016)
July 2017
- ~~Current~~**Overall**Status – Describe the State/Territory’s **overall** status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially Implemented
 - ~~Implementation progress to date~~Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~implemented to date if applicable

-
- On-going development of health and safety requirements for licensed and registered child care homes and facilities as well as legally exempt provider caring for children whose families are receiving CCDF subsidies.
 - o Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented
 - Establish health and safety requirements for legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
 - Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 1. Develop data system modification in order to convert monitoring inspection reports from paper-based reports to electronic-based reports with data entered into the child care licensing data system and tracking of each licensing requirement or health and safety standard within the data system for all types of licensed and registered child care homes and facilities as well as legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
 2. For legally exempt child care providers caring for CCDF subsidy children: Develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject legally exempt child care providers caring for CCDF subsidy children to minimum health and safety requirements, including monitoring inspections.
 - a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3 and #4 beyond the timeline specified in the Plan.
 3. For legally exempt child care providers caring for CCDF subsidy children: Develop language for amendments to include requirements for annual inspections for compliance with health and safety standards in the Department's subsidy program in consultation with the Department of the

Attorney General and complete process of adopting amended administrative rules.

4. For the Department's child care licensing staff: Develop procedures for health and safety standards and monitoring inspections of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.

- Projected start date for each activity

1. August 2015
2. August 2015
3. February 2016
4. June 2016

- Projected end date for each activity

1. July 2017
2. July 2016
3. July 2017
4. July 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)

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

- b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

- ☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that

address each of the requirements relating to the topics listed above **as of March 1, 2016**. Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements _____

- ☐ **X** No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016)
July 2017
 - ~~Current Overall Status~~ – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~ **this** requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially Implemented
 - ~~Implementation progress to date~~ **Implemented requirement(s)** – Identify any requirement(s) partially or substantially implemented
 - **On-going development of health and safety pre-service or orientation training requirements for licensed and registered child care homes and facilities as well as legally exempt provider caring for children whose families are receiving CCDF subsidies.**
 - **On-going development of health and safety training requirements for annual training.**
 - **Unmet requirement** - Identify the requirement(s) ~~not fully to be~~ **implemented**
 - **Establish health and safety on-going training requirements for providers serving children whose families are receiving CCDF assistance relating to matters included in the topics.**

-
- Establish pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics.
 - o Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - 1. Develop data system modification in order to track completion of initial pre-service or orientation training and annual training requirements have been met.
 - 2. For legally exempt child care providers caring for CCDF subsidy children: Develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject legally exempt child care providers caring for CCDF subsidy children to minimum health and safety requirements, including initial and on-going training requirements.
 - a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3 and #4 beyond the timeline specified in the Plan.
 - 3. For licensed and registered child care homes and facilities and for legally exempt child care providers caring for CCDF subsidy children: Develop language for amendments to include requirements for initial and on-going training in the Department's five (5) sets of administrative rules for licensing, registration and subsidy programs in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for:
 - a. Registered family child care homes;
 - b. Licensed group child care centers and homes
 - c. Licensed infant and toddler centers
 - d. Licensed before and after school programs; and
 - e. Requirements for exempt child care providers caring for children whose families are receiving subsidies.

-
4. For the Department's child care licensing staff: Develop procedures for revised requirements for licensed and registered child care facilities and homes and procedures for health and safety requirements and monitoring inspections of legally exempt child care providers caring for children whose families are receiving subsidies.

- Projected start date for each activity

1. July 2016
2. August 2015
3. February 2016
4. June 2016

- Projected end date for each activity

1. July 2017
2. July 2016
3. July 2017
4. July 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

- 5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

- ☐ ☒ Nutrition (including age appropriate feeding). Describe
Licensed and registered child care homes and facilities that provide meal service are required to comply with the requirements of the U.S. Department of Agriculture Child and Adult Care Food Program, even if the provider does not participate in the CACFP reimbursements.
- ☐ ☒ Access to physical activity. Describe
Licensed and registered child care homes and facilities shall provide daily opportunities for children to participate in vigorous and varied physical activities.

- ☐ Screen time. Describe
- ☐ Caring for children with special needs. Describe
- ☒ **Recognition and reporting of child abuse and neglect.** Describe
 Licensed and registered child care homes and facilities, including staff, are required to report suspected child abuse and neglect to the Department's Child Welfare Services for possible investigation.
- ☐ Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety. Describe

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from CCDF health and safety training requirements. Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics? Note this exception applies if the individual cares ONLY for relative children.

- ☒ **Yes**, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care.

Relative child care providers caring for children whose families are receiving CCDF subsidies who are the child's aunt, uncle, grandparent, great-grandparent, or an adult sibling residing outside the home will be exempt from all health and safety training requirements.

The Department will send families receiving CCDF subsidies and who are using relative a child care provider information about health and safety recommendations for the families to review with the relative child care provider. The Department will also provide families with a checklist of health and safety considerations that the family to review with the relative child care provider. All relative child care providers and their household members will still complete background checks in accordance with Section 5.3 of the Plan.

- ☐ Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. _____
- ☐ No, relatives are not exempt from CCDF health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory has in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

☐ Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities **as of March 1, 2016**. List the policy citation _____

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

- Overall Target Completion Date (no later than September 30, 2016)
July 2017
- ~~Current Overall~~ Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any this~~ requirement(s) **not fully implemented** (not yet started, partially implemented, substantially implemented, other)
Partially implemented
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) **partially or substantially** implemented to date if applicable
 - *The Department has requirements for health and safety standards for licensed and registered child care homes and facilities under Hawaii Administrative Rules 17-891.1, 17-892.1, 17-895, and 17-896.*
 - Unmet requirement - Identify the requirement(s) **not fully** to be implemented
 - *Established policies and practices to ensure that legally exempt providers caring for children whose families are receiving CCDF subsidies and their facilities comply with applicable State or local licensing and health and safety requirements.*
- Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

1. Develop data system modification in order to convert monitoring inspection reports from paper-based reports to electronic-based reports with data entered into the child care licensing data system and tracking of each licensing requirement or health and safety standard within the data system for all types of licensed and registered child care homes and facilities as well as legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
2. For legally exempt child care providers caring for CCDF subsidy children: Develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject legally exempt child care providers caring for CCDF subsidy children to minimum health and safety requirements, including monitoring inspections.
 - a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3 and #4 beyond the timeline specified in the Plan.
3. For legally exempt child care providers caring for CCDF subsidy children: Develop language for amendments to include requirements for annual inspections for compliance with health and safety standards in the Department's subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules.
4. For the Department's child care licensing staff: Develop procedures for health and safety standards and monitoring inspections and complaint investigations of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.

- Projected start date for each activity

1. August 2015
2. August 2015
3. February 2016
4. June 2016

- Projected end date for each activity

1. July 2017
2. July 2016
3. July 2017
4. July 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). **While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.**

a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))

- ☐ Yes. The State/Territory certifies that **as of March 1, 2016** it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting: _____
- ☒ **X** No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)
[July 2017](#)
- ~~Current~~**Overall**Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~**this** requirement(s) ~~not fully~~

~~implemented~~ (not yet started, partially implemented, substantially implemented, other)

Partially Implemented

- ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
- The Department has established minimum qualification requirements for individuals hired to be licensing inspectors. These qualification requirements have been approved through the position classification process, which includes approval by the state employees' union and collective bargaining, required for state employee positions.
 - Graduation from an accredited four (4) year college or university with a bachelor's degree which included a minimum of twelve (12) semester credit hours in courses such as counseling, criminal justice, human services, psychology, social work, social welfare, sociology, or other behavioral sciences, or a bachelor's or master's degree from social work in a program of study accredited by the Council on Social Work Education, or a doctoral degree in social work from a college or university accredited by the Western Association of Schools and Colleges, or comparable regional accreditation body.
 - Six months for the Level II, one and one-half years for Level III, and for level IV, two and one-half years of progressively responsible professional work experience which involved helping individuals and their families find satisfactory ways of identifying their problems, coping with their conditions, and functioning effectively within their environments. Depending of the employment setting and the kinds of clients served, job duties and responsibilities may vary, although typically the work will include the identification and evaluation of the client's problems and needs; the development of a service or treatment plan, sometimes in tandem with other professionals working within an interdisciplinary team; the initiation and implementation of the service plan, either directly or through the authorization of provider/vendor services; monitoring of services being provided; and evaluation/assessment of the client's progress, with amendments to the service/treatment plan made as appropriate.
 - Possession of a Master's degree in counseling, psychology, social welfare, sociology or other behavioral science, which included successful completion of a minimum of three (3) courses dealing with the human

condition such as understanding human behavior, motivations, and emotions; socialization processes; personality development; understanding of various cultures; behavior disorders, etc., will be deemed to meet all requirements for the Human Services Professional III. A practicum or internship which allowed the practice, under appropriate supervision, of studied theory, is preferred.

- Possession of a bachelor's degree in social work from an accredited college or university will be deemed to meet all requirements for the Human Services Professional II. Coursework which integrates the knowledge and skills gained in the classroom with field work, and which allows the applicant, under appropriate supervision, to work with and gain an understanding of people in need of human services, is preferred.
- Possession of a Master's degree in Social Work from an accredited college or university will be deemed to meet all requirements for the Human Services Professional III, provided that coursework focused on preparation for direct services work, i.e., helping people in need, rather than, e.g., being concerned primarily with administration or academic research. Practicum experience which focused on helping people in need is also preferred.
- The Department provides on-going language access and civil rights training to all Departmental staff, including licensing inspectors, including provision of free interpreter services and not discriminating against persons due to their national origin.
- On-going development of training for licensing inspectors related to health and safety requirements, including the Department's licensure and registration requirements.
 - Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented
- The development of training for licensing inspectors related to health and safety requirements, including the Department's licensure and registration requirements and appropriate to the different ages of children in care and care types.
- The development of training for licensing inspectors related to health and safety standards and appropriate to the different ages of children in

care and care types of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.

- Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 1. Work with the Staff Development Office within the Department's Benefit, Employment and Support Services Division to develop training for licensing inspectors related to licensure and registration with the Department's health and safety requirements.
 2. For legally exempt child care providers caring for children whose families are receiving CCDF subsidy: Develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject legally exempt child care providers caring for children whose families are receiving CCDF subsidies to minimum health and safety requirements, including monitoring inspections.
 - a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3 and #4 beyond the timeline specified in the Plan.
 3. For legally exempt child care providers caring for children whose families are receiving CCDF subsidy, develop language for amendments to include requirements for annual inspections for compliance with health and safety standards in the Department's subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules.
 4. Develop procedures and training for health and safety standards and monitoring inspections and complaint investigations of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.

- Projected start date for each activity

1. August 2015
2. August 2015
3. February 2016
4. July 2016

- Projected end date for each activity

1. July 2017
2. July 2016
3. July 2017
4. July 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

b) **Inspections for Licensed CCDF Providers** -It will require licensing inspectors to perform inspections, with not less than one prelicensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))

- ☐ Yes. The State/Territory certifies that **as of March 1, 2016** it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits _____
- ☒ **X** No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than November 19, 2016)
November 2016
 - ~~Current~~**Overall** Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~**this** requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)

Partially Implemented

- ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
- Prelicensure or preregistration inspections are already conducted by the Department's licensing inspectors for compliance with health, safety, and fire standards prior to issuing a license or registration to operate a child care home or facility.
- Annual inspections are already conducted by the Department's licensing inspectors for compliance with health and safety for licensed and registered child care homes and facilities.
- Unmet requirement - Identify the requirement(s) ~~not fully~~ to be implemented
- Unannounced inspections to be conducted annually for compliance with health, safety and fire standards.
 - Tasks/Activities – What specific steps will you take to implement the ~~unmet~~ requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 1. Develop policy clarification and procedures for the child care licensing workers for conducting unannounced inspections annually to determine compliance with health, safety, and fire standards for licensed and registered child care homes and facilities.
 - Projected start date for each activity
 1. February 2016
 - Projected end date for each activity
 1. November 2016
 - Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

c) **Inspections for License-Exempt CCDF Providers (except those serving relatives)** – It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))

- ☐ Yes. The State/Territory certifies that **as of March 1, 2016** it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements: _____
- ☒ **X** No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)
July 2017
- ~~Current Overall~~ Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any this~~ requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially Implemented
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
 - *The on-going development of standards for health and safety and appropriate to the different ages of children in care and care types of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.*
 - Unmet requirement - Identify the requirement(s) ~~not fully to be~~ implemented
 - *Annual inspections to be conducted for legally exempt child care providers caring for children whose families are receiving CCDF subsidies for compliance with health, safety and fire standards.*
- Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule

changes, modify agreements with coordinating agencies, etc.)

1. For legally exempt child care providers caring for children whose families are receiving CCDF subsidies, develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject legally exempt providers caring for children whose families are receiving CCDF subsidy to minimum health and safety requirements, including annual monitoring inspections and inspections for complaints of health and safety violations.
 - a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #2 and #3 beyond the timeline specified in the Plan.
2. Develop language for amendments to the Department's administrative rules for child care subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for health and safety requirements for legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
3. For the Department's child care licensing staff, develop procedures for health and safety standards and monitoring inspections and complaint investigations of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
 - Projected start date for each activity
 1. August 2015
 2. February 2016
 3. July 2016
 - Projected end date for each activity
 1. July 2016
 2. July 2017
 3. July 2017
 - Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)

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

d) **Ratio of Licensing Inspectors** – It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))

- ☐ Yes. The State/Territory certifies that ~~as of March 1, 2016~~ it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors: _____
- ☒ **X** No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than November 19, 2016)
July 2018
 - ~~CurrentOverall~~ Status – Describe the State/Territory's **overall** status toward complete implementation for ~~anythis~~ requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially Implemented
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
 - Practices have already been established that licensing inspectors positions are maintained and vacancies filled as soon as allowable at a sufficient level to enable the Department to conduct inspections of licensed and registered child care homes and facilities on a timely basis, i.e. annually, each year, in accordance with State requirements.
 - Unmet requirement - Identify the requirement(s) ~~not fully to be~~ implemented

-
- Establish policies that require the ratio of licensing inspectors to such child care homes and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law.
 - - Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
1. Develop policy clarification for a ratio of licensing inspectors across the state to licensed and registered child care homes and facilities, taking into account regional variations and driving distances, to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal and State requirements.
 2. For legally exempt child care providers caring for children whose families are receiving CCDF subsidies, develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to subject legally exempt providers caring for CCDF subsidy children to minimum health and safety requirements, including annual monitoring inspections and inspections for complaints of health and safety violations.
 - a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3, #4, and #5 beyond the timeline specified in the Plan.
 3. Develop language for amendments to the Department's administrative rules for child care subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for health and safety requirements for legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
 4. For the Department's child care licensing staff, develop procedures for health and safety standards and monitoring inspections and complaint investigations of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
 5. Develop policy clarification for a ratio of licensing inspectors across the state to licensed and registered child care homes and facilities, as well as legally exempt child care providers caring for children whose families are receiving CCDF subsidies, taking into account

regional variations and driving distances, to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal and State requirements.

6. The Department may need to request funding and establishment for additional positions during the 2017 Legislative session if the ratio of licensing inspectors across the state to licensed and registered child care homes and facilities, as well as legally exempt child care providers caring for children whose families are receiving CCDF subsidies does not meet the policy developed by the Department and if approved, need to establish, recruit and train additional hires.

- Projected start date for each activity

1. February 2016
2. August 2015
3. February 2016
4. February 2016
5. February 2016
6. August 2016

- Projected end date for each activity

1. September 2016
2. July 2016
3. July 2017
4. July 2017
5. September 2017
6. July 2018

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

e) **Child Abuse and Neglect Reporting** – That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i))(658E(c)(2)(L))

- ☐ Yes. Fully implemented and meeting all Federal requirements outlined above by **March 1, 2016**. List the Lead Agency's policy citation(s) _____

- ☐ ☒ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)

July 2017

- ~~Current~~Overall Status – Describe the State/Territory’s overall status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)

Partially Implemented

- ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable

- Section 350-1.1, Hawaii Revised Statutes, already requires licensed and registered child care providers, including employees or officers, to report suspected child abuse or neglect to the Department’s Child Welfare Services hotline and follow up with a written report.

- Unmet requirement - Identify the requirement(s) ~~not fully~~to be implemented

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

1. For legally exempt child care providers caring for children whose families are receiving CCDF subsidies, develop and submit to Hawai`i State Legislature the proposed bill to obtain statutory authority to subject legally exempt providers caring for children whose families are receiving CCDF subsidies to minimum health and safety requirements, including annual monitoring inspections and inspections for complaints of health and safety violations.

-
- a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #2 and #3 beyond the timeline specified in the Plan.
2. Develop language for amendments to the Department's administrative rules for child care subsidy program in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for health and safety requirements for legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
3. For the Department's child care licensing staff, develop procedures for health and safety standards and monitoring inspections and complaint investigations of legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
- Projected start date for each activity
 1. August 2015
 2. February 2016
 3. February 2016
 - Projected end date for each activity
 1. July 2016
 2. July 2017
 3. July 2017
 - Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____
- 5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from inspection requirements. Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

- ☒ **X** Yes, all relatives are exempt from all inspection requirements. If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.

Relative child care providers caring for children whose families are receiving CCDF subsidies who are the child's aunt, uncle, grandparent, great-grandparent, or an adult sibling residing outside the home will be exempt from all health and safety inspection requirements. The Department will send families receiving CCDF subsidies and who are using relative a child care provider information about health and safety recommendations for the families to review with the relative child care provider. The Department will also provide families with a checklist of health and safety considerations that the family to review with the relative child care provider. All relative child care providers and their household members will still complete background checks in accordance with Section 5.3 of the Plan.

- ☐ Yes, some relatives are exempt from inspection requirements. If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt **from which requirements (all or some)** and include how the State/Territory ensures the health and safety of children in relative care. _____
- ☐ No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories **are required to must** have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as **any** other **individuals adults** in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff

member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry.

Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

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

Fees for background checks – Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency – The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.

Appeals process – The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.

Privacy considerations - Lead Agency may not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

5.3.1 Describe the status of the State/Territory's requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

- ☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the policy citation within the Lead Agency's rules _____ and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.
- ☒ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text

responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2017)
September 2017
- ~~Current~~Overall Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Partially Implemented
 - ~~Implementation progress to date~~Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~implemented to date if applicable
 - Conduct background checks, including a Hawai'i child abuse and neglect registry check, national and state sex offender registries' checks, FBI fingerprint checks, state criminal history record checks, and a Hawai'i adult abuse perpetrator registry check.
 - If the staff member is ineligible, the Department will provide information about each disqualifying crime to the staff member.
 - The Department shall provide the results of the background check in a statement that indicates whether the staff member is ineligible or upon individual request eligible, without revealing specific disqualifying information.
 - The Department has established charges for the costs of processing applications and administering a criminal background check which does not exceed actual costs to the Department for processing and administration.
 - The Department has established a process for a child care provider or staff member to appeal the results of their background check to challenge the accuracy and completeness.
 - The Department does not publicly release the results of individual background checks.
 - Unmet requirement - Identify the requirement(s) ~~not fully~~to be implemented
 - Conduct background checks including State child abuse and neglect registry in each State where the staff member has resided over the past

5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification.

- Child care staff members cannot be employed by a provider if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.
 - The Department must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request.
 - The Department shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information.
 - Publish policies and procedures for conducting criminal background checks are published on the Department's consumer education website (also see section 2.3) or other publicly available venue.
 - Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
1. Develop data system modification in order to track additional background checks required (child abuse neglect registries in other states, and NCIC search) and include data monitoring to flag checks not completed within 45 days of request submitted for all caregivers, employees, and household members for licensed and registered child care homes and facilities as well as legally exempt child care providers caring for children whose families are receiving CCDF subsidies.
 2. For licensed and registered child care homes and facilities and for legally exempt child care providers caring for CCDF subsidy children: Develop and submit to Hawai'i State Legislature the proposed bill to obtain statutory authority to

subject licensed, registered, and legally exempt providers caring for children whose families are receiving CCDF subsidies to minimum health and safety requirements, including the authority to establish convictions for specific offenses that prevent individuals from being child care providers.

- a. If the proposed bill does not pass the 2016 Legislative session, Hawai'i will need additional time to complete tasks #3 and #4 beyond the timeline specified in the Plan.
3. For licensed and registered child care homes and facilities and for legally exempt child care providers caring for children whose families are receiving CCDF subsidies: Develop language for amendments to the Department's five (5) sets of administrative rules for licensing, registration and subsidy programs in consultation with the Department of the Attorney General and complete process of adopting amended administrative rules for requirements for:
 - a. Registered family child care homes;
 - b. Licensed group child care centers and homes;
 - c. Licensed infant and toddler centers;
 - d. Licensed before and after school programs; and
 - e. Requirements for exempt child care providers caring for children whose families are receiving subsidies.
4. For the Department's child care licensing staff: Develop procedures for revised background check requirements including situations or convictions of specific offenses that prevent individuals from being child care providers.
 - Projected start date for each activity
 1. August 2015
 2. August 2015
 3. February 2016
 4. June 2016
 - Projected end date for each activity
 1. November 2017
 2. July 2016
 3. July 2017

4. November 2017

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity

- 5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and ~~appealing~~ **providing opportunities for applicants to appeal** the results of background checks.

The Department conducts the background checks for licensed and registered child care providers and staff members and completes assessments of any background check information found. The Department does not release the details of results of the background checks to anyone but the individual directly and may provide a general statement that the individual has been determined to pose a risk to children in care. The Department provides the individual with the opportunity to request an administrative appeal hearing regarding the Department's determination that the individual poses a risk to children in care. The administrative appeal hearing is conducted by another office within the Department, which is separate from the licensing division. The hearing officer reviews the supporting documentation and report from the Department along with any evidence provided by the individual, makes inquiries to the Department and/or individual as needed, and will issue a written, final binding decision after the hearing. The hearing decision may be appealed to a court of law if the individual does not agree with the officer's written decision.

- 5.3.3 Describe how the State/Territory is ~~helping~~ **assisting** other States process background checks, including any agencies/entities responsible for responding to requests from other states

The Department's Child Welfare Services Branch staff respond to request for child abuse and neglect registry checks from other states for provisions of the Adam Walsh Act. The Department will be considering its administrative resources needed to conduct and provide responses to requests for child abuse and neglect registry checks from other states for provisions of the Child Care and Development Block Grant (CCDBG) Act of 2014 for child care providers. It is not known whether the Department's Child Welfare Services Branch staff will be able to complete such CCDBG requests within 45 days of request received. If additional staffing will be needed, the Department would need to submit the request for funding and establishment of positions in the 2017 Legislative session or later.

5.3.4 Does the State/Territory have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

☐ ☒ Yes. Describe

The Department has a review process to consider the suitability of an individual including but not limited to a felony drug offense in which the Department may consider the nature of the incident, when the incident occurred, patterns of behavior which are considered reckless or negligent and resulted in or could have resulted in injury to the person or others, and evidence of rehabilitation.

☐ No

5.3.5 Does the State/Territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 5.3?

☐ ☒ Yes. Describe

The Department may assess on a case-by-case basis any background history, including convictions for other crimes not specifically listed in 5.3., and the Department has a review process to consider the suitability of an individual in which the Department may consider the nature of the incident, when the incident occurred, patterns of behavior which are considered reckless or negligent and resulted in or could have resulted in injury to the person or others, and evidence of rehabilitation.

☐ No

5.3.6 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from background check requirements. Note this exception only applies if the individual cares ONLY for relative children. Does your State State/Territory exempt relatives from background checks?

☐ Yes, all relatives are exempt from all background check requirements.

☐ ☒ Yes, some relatives are exempt from the background check requirements.

~~Describe~~ the State/Territory exempts some relatives from background check requirements, describe which relatives are exempt from which requirements (some or all).

The Department exempts relative child care providers caring for children whose families are receiving CCDF subsidies who are the child's aunt, uncle, grandparent, great-grandparent, or an adult sibling residing outside the home from the FBI fingerprint and NCIC background check requirement. All other background checks are conducted for such relative child care providers caring for children whose families are receiving CCDF subsidies.

- ☐ No, relatives are not exempt from background checks.

- 5.3.7 Describe how the State/Territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether conducted by the State/Territory or a 3rd party vendor or contractor. Lead Agencies can report that no fees are charged if applicable.

The Department charges a nominal fee for processing FBI fingerprint checks of \$14.75 to the individual needing background checks, including the FBI fingerprint check. This fee is assessed to the Department by the State's criminal justice data agency processing the checks on behalf FBI. No other fees are associated with the remaining background checks completed by the Department.

If the provider is a relative who is the child's aunt, uncle, grandparent, great-grandparent, or an adult sibling residing outside the home, the FBI fingerprint check is not required and therefore no background check fee is charged by the Department to such related individuals completing the other background checks.

- 5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue

The Department's website describes in plain language summary the process for completing background checks. The Department is not able to include a description of offenses that prevent individuals from being providers until the Hawaii Legislature has passed a bill authorizing the Department to establish disqualifying convictions that prevents individuals from being child care providers. See 2.3. of the Plan.

- 5.3.9 Does the Lead Agency release aggregated data by crime?

- ☐ Yes. List types of crime included in the aggregated data _____
- ☒ No

6 Recruit and Retain a Qualified and Effective Child Care Workforce

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a “career ladder” that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children’s development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

- 6.1.1 Describe the status of the State/Territory's professional development system or framework, including training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

The Lead Agency assures that the State/Territory's training and professional development requirements:

- a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).
 - b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.
 - c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)
 - d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF
 - e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.
- ☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 6.1.2 through 6.1.6 below.
- ☒ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your

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

- Overall Target Completion Date (no later than September 30, 2016)
February 2017
- ~~Current~~Overall Status – Describe the State/Territory’s **overall** status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other)
Substantially Implemented
 - ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable
 - Early Childhood Professional Development is a system designed to increase the quality of care from individuals who work with young children and their families. Components of professional development include training, education, scholarships and career pathways. Initial training prepares the child care workforce at the entry level while ongoing training leads to improvements in attitudes, skills, and knowledge that every practitioner of early child care needs to know and be able to perform.
 - A community-based collaborative workgroup of 27 agencies, organizations and State Departments who have a vested interest in early childhood workforce and professional development meet on an on-going basis to develop an early childhood career lattice that aligns with career pathways which support the growth of the professional and integrate training requirements connected to the professional development system.
 - The Department has standardized the evaluation of staff qualifications for education and experience through a statewide contracted service for the Department’s Child Care Provider Registry. Staff employed at licensed infant and toddler centers, group child care centers, and group child care homes are required to submit their education and experience qualifications to the registry service to determine which position(s) the individual is qualified to fill at a licensed infant and toddler center, group child care center, or group child care home. Registered family child care home operators and legally exempt child care providers caring for children whose families are receiving CCDF subsidies are not required to participate in the Child Care Provider Registry.
 - The Department of Human Services in collaboration with community stakeholders, contractors, and the Department of Health recognizes the

importance of ongoing professional development as it improves the quality of practice, knowledge and skills for the child care workforce.

- The Department contracts for community-based training services addressing the on-going professional development needs of the early childhood sector:
 - Various methodologies of training are available: online training, in- person training, and live-webinar training. This is to ensure that best practice is being met and the quality of the child care workforce increases. Continuing training provides opportunities to the child care workforce by keeping them abreast of the latest research and allows them to be more responsive to child development, program management and professionalism
 - The training is available to any employee of licensed child care facilities, including Hawaiian medium early learning and care employees, or registered family child care provider, or potential applicant to become a registered family child care provider.
 - The contracted agency is required to provide interpreter services for attendees of trainings provided through the contract.
 - Community-based trainings provided through the Department's contracted training services address a range of ages in care from birth to school age. Trainings also address cultural diversity and family partnerships for child care providers.
 - A training series focused on inclusive environments in early childhood settings for special needs children. Some of the areas addressed in the classes are the importance of building family partnerships, cultural awareness and effective communication, strategies for building tolerance and acceptance, exploring attitudes towards inclusion.
- - Unmet requirement - Identify the requirement(s) ~~not fully~~to be implemented
- Developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care.
 - Tasks/Activities – What specific steps will you take to implementthe **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

1. The Department must consult with the State Advisory Council (SAC) on Early Education and Care, which is the Early Learning Advisory Board, on which the Department is a member, regarding the existing professional development opportunities and services available through the Department and to determine whether there is a need for revisions to existing contracted services.
2. Alignment of existing training provided through the Department's contracted Training services to reflect the applicable components of the Hawai'i Early Learning and Development Standards (HELDS), which is the Early Learning Guidelines for Hawai'i.
 - Projected start date for each activity February 2016
 - Projected end date for each activity February 2017
 - Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

6.1.2 Describe how the State/Territory provides ongoing training and professional development that is accessible for the diversity of providers in the State/Territory, provides for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities) and improves the quality and stability of the child care workforce. Use the checkboxes below to identify and describe the elements of the progression of professional development. Check all that apply.

- ☒ X State/Territory professional standards and competencies. Describe
The Department's Child Care Provider Registry contractor utilizes the standards and competencies developed by the community-based collaborative workgroup of 27 agencies, organizations and State Departments, which can be found at <http://www.patchhawaii.org/assets/content/providers/center/careers/ASK-Booklet.pdf?1416515464>. The competencies defines what all staff in all early childhood roles and setting are required to know and be able to do.
- ☒ X Career ladder or lattice. Describe
The Department has a career lattice and framework that is in alignment with the requirements for staff at licensed center-based child care facilities and can be found at

<http://www.patchhawaii.org/assets/content/providers/center/careers/Framework.pdf?1416509744>.

The career lattice describes the sequence of qualifications related to professional development, including education, training, and experience required to fulfill various roles at licensed child care facilities throughout Hawai'i. The career lattice is used as a voluntary guide and planning resource for career counseling provided through the Department's contracted agency for the Child Care Provider Registry service and to guide early childhood staff in securing scholarships through the Department's Training and Scholarship contracted services for continuing education in the early childhood workforce.

- ☐ ☒ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe
Articulation agreements are in place across and within institutions of higher education within Hawai'i. This is also monitored within the group of higher education representatives that meet regularly to discuss ways to increase the availability and accessibility of higher education coursework.
- ☐ ☒ Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe
The Department contracts for approved Infant and Toddler Training for staff employed at licensed infant and toddler centers to meet the licensing requirements of initial 30 hours of training in infant and toddler development and an additional 15 hours of training to be completed within two years of completing the initial 30 hours of training.
- ☐ ☒ Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe
The Department has standardized the evaluation of staff qualifications for education and experience through a statewide contracted service for the Department's Child Care Provider Registry. Staff employed at licensed infant and toddler centers, group child care centers, and group child care homes are required to submit their education and experience qualifications to the registry service to determine which position(s) the individual is qualified to fill at a licensed infant and toddler center, group child care center, or group child care home. Registered family child care home operators and legally exempt child care providers caring for children whose families are receiving CCDF subsidies are not required to participate in the Child Care Provider Registry.
- ☐ Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework.
Describe _____
- ☐ Continuing education unit trainings and credit-bearing professional development.
Describe _____

- ☐ ☒ State-approved trainings. Describe

The Department contracts for approved Infant and Toddler Training for staff employed at licensed infant and toddler centers to meet the licensing requirements of initial 30 hours of training in infant and toddler development and an additional 15 hours of training to be completed within two years of completing the initial 30 hours of training.

- ☐ Inclusion in state and/or regional workforce and economic development plans.

Describe _____

- ☐ Other. Describe _____

- 6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC.

The Department must consult with the State Advisory Council (SAC) on Early Education and Care, which is the Early Learning Advisory Board, on which the Department is a member, regarding the existing professional development opportunities and services available through the Department and to determine whether there is a need for revisions to existing contracted services.

- 6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements (see Information Memorandum on Children's Social Emotional and Behavioral Health <http://www.acf.hhs.gov/programs/occ/resource/im-2015-01>)

The Department's contractor for the Training services must align the existing training curricula provided through the Department's contracted Training services to reflect the applicable components of the Hawai'i Early Learning and Development Standards (HELDS), which is the Early Learning Guidelines for Hawai'i.

- 6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)

The Department also contracts for services to provide training services to promote on-going professional development opportunities to support quality child care settings to early childhood practitioners, including providers supported through tribal organizations and the statewide Hawaiian medium early learning provider and its employees, for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development, including social emotional development, cognitive development, physical health and development, and meaningful parent and family engagement.

The training contractor also provides quarterly newsletters to those who have signed up for the newsletters and the newsletters are posted on the training contractor's website for the general public to access.

The statewide Hawaiian medium early learning provider's employees may access the Department's Training and Scholarship contract services for employees to pursue obtaining additional early childhood coursework to obtain an early childhood degree and become qualified for assistant teacher, teacher, or director positions at the program.

- 6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians

The Department contracts for community-based training services for a nominal cost that covers 12 separate series and 93 classes addressing the on-going professional development needs of the early childhood sector. The trainings include information about research and best practices in child development, including social emotional development, cognitive development, physical health and development, and meaningful parent and family engagement.

- Various methodologies of training are available: online training, in- person training, and live-webinar training. This is to ensure that best practice is being met and the quality of the child care workforce increases. Continuing training provides opportunities to the child care workforce by keeping them abreast of the latest research and allows them to be more responsive to child development, program management and professionalism
- The training is available to any employee of licensed child care facilities, including Hawaiian medium early learning and care employees, or registered family child care provider, or potential applicant to become a registered family child care provider.
- The contracted agency is required to provide interpreter services for attendees of trainings provided through the contract.
- Community-based trainings provided through the Department's contracted training services address a range of ages in care from birth to school age. Trainings also address cultural diversity and family partnerships for child care providers.
- A training series focus on an inclusive environments in early childhood settings for special needs children. Some of the areas addressed in the classes are the importance of building family partnerships, cultural awareness and effective communication, strategies for building tolerance and acceptance, exploring attitudes towards inclusion.

6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

☐ ☒ Financial assistance for attaining credentials and post-secondary degrees. Describe [The Department of Human Services offers scholarships to child care providers and staff working with children and pursuing post-secondary degrees through the contracted Training and Scholarships services.](#)

- ☐ Financial incentives linked to education attainment and retention. Describe _____
- ☐ Registered apprenticeship programs. Describe _____
- ☐ Outreach to high school (including career and technical) students. Describe _____
- ☐ Policies for paid sick leave. Describe _____
- ☐ Policies for paid annual leave. Describe _____
- ☐ Policies for health care benefits. Describe _____
- ☐ Policies for retirement benefits. Describe _____
- ☐ Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe _____
- ☐ Other. Describe _____

6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language.

[The contracted agency for the Training services is required to provide interpreter services for attendees of 12 separate training series and 93 classes provided through the contract, including the series for those interested in becoming registered family child care providers.](#)

6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.

- ☐ Informational materials in non-English languages
- ☒ Training and technical assistance in non-English languages
- ☐ CCDF health and safety requirements in non-English languages
- ☐ Provider contracts or agreements in non-English languages
- ☐ Website in non-English languages
- ☐ Bilingual caseworkers or translators available
- ☐ Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce

☒ Other The contracted agency for the Training services is required to provide interpreter services for attendees of 12 separate training series and 93 classes provided through the contract.

☐ None

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

The Department does not limit the languages that interpreter services can be provided by the contracted agency for the Training services provided on behalf of the Department. The contractor must provide interpreter services upon request in all primary and secondary languages.

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

- ☐ Yes. The State certifies that no later than **March 1, 2016** it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers _____
- ☒ **X** No. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016)
September 30, 2016
 - **CurrentOverallStatus** – Describe the State/Territory's **overall** status toward complete implementation for **anythis** requirement(s) **not fully implemented** (not yet started, partially implemented, substantially implemented, other)
Not Yet Started
 - ~~Implementation progress to date~~ Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~ implemented to date if applicable _____
 - Unmet requirement - Identify the requirement(s) ~~not fully to be~~ implemented

-
- Training and technical assistance to providers to increase access to CCDF subsidies for homeless children and families
 - Training and technical assistance to conduct outreach to homeless families to improve access to child care services
 - Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

1. The Hawai'i Department of Human Services will be coordinating with the Hawaii Community Foundation (HCF) to focus initially on increasing outreach to the numerous HCF grantees who are serving homeless families across the State. The Department will focus on getting HCF's partner agencies training and technical assistance about the availability of Department's child care services, including the child care subsidy program and the child care resource and referral services, so that the community providers are helping the families access these services that are essential to supporting homeless families with young children find and maintain stable employment or secure vocational training or educational opportunities in order for the families to maintain and increase their economic self-sufficiency and to be able to secure and maintain permanent housing for themselves.

2. The Department will also work on similar coordination with the Department's Homeless Program Office, which is the statewide agency in the same Division overseeing state and federally funded contracts for homeless services throughout Hawai'i, on strategies to improve training and technical assistance for outreach to the contracted service providers in the coordination of services for homeless children whose families may be eligible for child care subsidies and other early childhood services which may be needed to meet the needs of homeless children.

- Projected start date for each activity

1. February 2016
2. February 2016

- Projected end date for each activity

1. September 30, 2016
2. September 30, 2016

- Agency – Who is responsible for complete implementation of this activity [Hawai'i Dept. of Human Services](#)
- Partners – Who is the responsible agency partnering with to complete implementation of this activity

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

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 Does the State/Territory fund the training and professional development of the child care workforce?

☐ ☒ Yes. If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

- The number of employees and individuals working with children at licensed and registered child care homes and facilities that are provided training and professional development, including community-based trainings
- The number of employees and individuals working with children at licensed and registered child care homes and facilities that are provided scholarships for post-secondary education early childhood coursework that result in completion of early childhood education degrees.
- The number of children served in programs operated by the participating trainees.

b) Indicate which funds will be used for this activity (check all that apply)

☐ ☒ CCDF funds. Describe [Quality funds](#)

☐ Other funds. Describe _____

c) Check which content is included in training and professional development activities. Check all that apply.

-
- ☐ **X** Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe

The agency that the Department of Human Services contracts for training services to child care providers will provide trainings that focus on the social emotional, nutrition, physical activity and cognitive development of children.

The Department also contracts with the University of Hawai'i to provide nutrition consultation and menu reviews with licensed child care providers. Training topics included general food and nutrition education and resources, workshops that promote nutrition for center-based lunch menus and nutrition information for home lunch options and a food allergy podcast series.

The Department also contracts with University of Hawai'i that provides 1 hour training sessions statewide to physicians and nurses. There is also a training program for pediatric residents (physicians in training) with opportunities for learning and exposure to the early intervention environments. As part of a community rotation, pediatric residents at the University of Hawaii visit child care programs, become familiar with national health and safety standards for early child care and education programs and learn what constitutes high quality child care.

This agency also provides training on child health issues to child care licensing staff upon request from the Hawai'i Department of Human Services. In addition, this agency provides seminars on various health and safety topics for child care providers and licensing staff. Materials are distributed and posted on the website following training. Past seminars have included the following topics: Health and Safety in Child Care, Social and Emotional Health, Physical Activity, Infectious Disease, Childhood Obesity Prevention, Toxic Stress in Children, Building Resilience in Children.

- ☐ **X** Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2). Describe

The agency that Hawai'i contracts with for training services offers an online infant and toddler trainings that addresses social-emotional development and early childhood mental health, including strategies to

reducing challenging behaviors. Additional training series addresses strategies to reducing challenging behaviors in preschool-age children and promoting nurturing positive behaviors and building positive relationships with children and their families.

- ☐ Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe _____
- ☐ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards. Describe _____
- ☐ On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development. Describe _____
- ☐ Using data to guide program evaluation to ensure continuous improvement. Describe _____
- ☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe _____
- ☐ Caring for and supporting the development of children with disabilities and developmental delays. Describe _____
- ☐ Supporting positive development of school-age children. Describe _____
- ☐ Other. Describe _____

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

- ☒ X Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling
- ☐ State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities
- ☒ X Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education

☐ Other. Describe _____

☐ No

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas? States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address training hour requirements.

☐ ☒ Yes. If yes, describe:

a) Licensed Center-Based Care

- 1) Number of pre-service or orientation hours and any required areas/content
For staff employed at licensed infant and toddler centers, each staff must complete 30 hours of infant and toddler child development coursework from an accredited teacher training institute or program.
- 2) Number of on-going hours and any required areas/content
Thereafter, all staff employed at licensed infant and toddler centers must complete an additional 15 hours of course work in infant and toddler development from an accredited teacher training institute or program within two years of completion of the initial 30 hours of course work.

b) Licensed Group Child Care Homes

- 1) Number of pre-service or orientation hours and any required areas/content
N/A The Department must revise its administrative rules for pre-service or orientation hours and required content/areas.
- 2) Number of on-going hours and any required areas/content
N/A The Department must revise its administrative rules for on-going hours and required content/areas.

c) Licensed Family Child Care Provider

- 1) Number of pre-service or orientation hours and any required areas/content
N/A The Department must revise its administrative rules for pre-service or orientation hours and required content/areas.
- 2) Number of on-going hours and any required areas/content
N/A The Department must revise its administrative rules for on-going hours and required content/areas.

d) Any other eligible CCDF provider

- 1) Number of pre-service or orientation hours and any required areas/content

2) Number of on-going hours and any required areas/content _____

☐ No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

- ☒ **X** Fully implemented **as of March 1, 2016**. Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance

The Department contracts with an agency that provides training to child care providers. This agency offers several courses in business practices for the Family Child Care provider. Some of the areas addressed by these business courses are budgeting, record keeping, marketing and parent-provider communication.

In the fall of 2015, the agency began to offer courses in business practice for the Group Child Care Providers. Some of the areas addressed by these courses are the fundamentals of early childhood education and care, staff qualifications and professional development, diversity and inclusive settings and families, child care centers and community partnerships.

- ☐ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016) _____
 - ~~Current Overall~~ Status – Describe the State/Territory's **overall** status toward complete implementation for ~~any~~ this requirement(s) **not fully implemented** (not yet started, partially implemented, substantially implemented, other) _____
 - ~~Implementation progress to date~~ Implemented requirement(s) – Identify any requirement(s) ~~partially or substantially~~ implemented **to date if applicable** _____

- Unmet requirement - Identify the requirement(s) **not fully to be** implemented _____
- Tasks/Activities – What specific steps will you take to implement the **unmet** requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for complete implementation of this activity _____
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity _____

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State/Territory's early learning and development guidelines appropriate for children from birth to kindergarten entry.

- ☒ The State/Territory assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
 - Implemented in consultation with the State educational agency and the State Advisory Council(SAC) or other state or state-designated cross-agency body if there is no SAC
 - Updated as determined by the State. List the date or frequency
- ☐ **X** Fully implemented and meeting all Federal requirements outlined above **as of March 1, 2016**. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

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

- Overall Target Completion Date (no later than September 30, 2016) _____
- ~~Current~~OverallStatus – Describe the State/Territory’s overall status toward complete implementation for ~~any~~this requirement(s) ~~not fully implemented~~ (not yet started, partially implemented, substantially implemented, other) _____
 - ~~Implementation progress to date~~Implemented requirement(s)– Identify any requirement(s) ~~partially or substantially~~implemented to date if applicable _____
 - Unmet requirement - Identify the requirement(s) ~~not fully~~to be implemented _____
 - Tasks/Activities – What specific steps will you take to implement the ~~unmet~~ requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) _____
 - Projected start date for each activity _____
 - Projected end date for each activity _____
 - Agency – Who is responsible for complete implementation of this activity _____
 - Partners – Who is the responsible agency partnering with to complete implement this activity _____

6.3.2 Check for which age group(s) the State/Territory has established early learning and development guidelines:

☐ Birth-to-three. Provide a link _____

☐ Three-to-Five. Provide a link _____

☒ Birth-to-Five. Provide a link <http://earlylearning.hawaii.gov/wp-content/uploads/2014/02/HELDS-continuum-2014.04.01.pdf>

☐ Five and older (check if State/Territory has standards for five and older that complement **academic** but cover child development areas not covered by k-12 academic standards). Describe and provide a link _____

☒ Other. Describe

The current Hawai'i Early Learning and Developmental Standards (HELDS) were endorsed by the Governor and the Early Learning Advisory Board in 2012.

A workgroup consisting of members from higher education institutions from the early childhood education faculty in Hawaii will begin reviewing the HELDS for revisions and updates in the fall of 2016 with a projected completion date of spring of 2018 for revisions to be finalized and approved by various stakeholder groups.

The HELDS span five age groups: Infants (children from birth to 12 months old), Younger Toddlers (children 12-24 months old), Older Toddlers (children 24-36 months old), 3 year olds (children 36-48 months old), 4 year olds (children 48 months – Kindergarten entry), with the standards listed for each age range indicating what the child should be able to do by the end of the age range. The HELDS are grouped by the children's ages; however, the Hawai'i Department of Education standards are grouped by grade. Since some children will turn five prior to attending kindergarten, the HELDS addresses their development.

In 2014, Hawaii's public pre-kindergarten (pre-K) program was established for the 2014-2015 school year at 21 public elementary school campuses across the state. The Executive Office on Early Learning, the agency administrative attached to the Department of Education, administers the public pre-K program. The teachers in the public pre-K program have incorporated the HELDS into the public pre-K curricula.

The HELDS are vertically aligned with three sets of learning standards for kindergarten children currently being implemented in the Hawaii Department of Education:

- The Common Core State Standards (CCSS) for English language Arts and Literacy and Mathematics
- The Hawaii Content and Performance Standards (HCPS) III in seven content areas (Social Studies, Science, Health, Physical Education, Fine Arts, World Languages, and Career and Technical Education), and
- General Learner Outcome (GLOs) that have indicators that identify student effort, work habits and behavior.

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?

☐ Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

☐ Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☒ No, the State/Territory has no plans for development

a) If yes, check all that apply to the technical assistance and describe.

☐ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines. Describe _____

☐ The technical assistance is linked to the State's/Territory's quality rating and improvement system. Describe _____

☐ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe _____

☐ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe _____

☐ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe _____

b) Indicate which funds are used for this activity (check all that apply)

☐ CCDF funds. Describe ~~Describe~~ CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) _____

☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) _____

6.3.4 Check here ☒ to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

- 1) Supporting the training and professional development of the child care workforce (as described in Section 6)
- 2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
- 3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
- 4) Improving the supply and quality of child care programs and services for infants and toddlers
- 5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
- 6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
- 7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
- 8) Supporting providers in the voluntary pursuit of accreditation

-
- 9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
 - 10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

- 7.1.1 What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

Goal 1: Promoting access to quality and accredited child care for low-income families receiving the CCDF subsidies.

The Department will analyze the feasibility of providing a larger differential in the child care payment rates and/or decreased family co-payments for families selecting licensed child care facilities that are accredited by the National Association for the Education for Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA) and consider including registered family child care homes that become accredited by the National Accreditation for Family Child Care (NAFCC). The Department will also evaluate the feasibility of implementing technical assistance services to increase the number of child care facilities and homes that complete the accreditation process for both NAEYC or NECPA or NAFCC. The Department will also analyze the feasibility of raising the child care payment rates and/or decreased family co-payments for families selecting licensed group care facilities. Increasing child care payment rates and/or decreasing family co-payments will allow Hawaii's working families who are struggling to make ends meet have the opportunity to afford quality child care and promote continuity and stability of care and increase school readiness for Hawaii's most vulnerable children.

In state fiscal year 2015, over sixty percent of Hawaii's children whose families receive CCDF child care subsidies were with legally exempt child care providers. It is not clear whether families are choosing legally exempt child care because that is their preference due to a variety of reasons which can include cultural values or non-traditional work schedules or because of limited slots are available in licensed and registered child care settings. In adjusting the child care payment rates and/or reducing family co-payments for accredited child care providers, the Department may be able to identify trends as to whether families would shift to utilizing

accredited licensed and registered child care homes and facilities if their out-of-pocket cost for such care was lower.

Goal 2: Ensuring the health, safety, and welfare of children in licensed and registered child care homes and facilities and in legally exempt, non-relative care for children.

Hawaii will be seeking statutory authority to subject legally exempt child care providers caring for children whose families are receiving child care subsidies to health and safety standards. For federal fiscal year 2015, Hawai'i's children were cared for by 1,000 legally exempt, non-relative child care providers, the majority of which are home-based providers.

Implementing health and safety monitoring inspections of such legally exempt, non-relative child care providers presents a significant change for child care licensing staff by nearly doubling the number of child care providers that licensing staff will need to cover, in addition to completing the background check requirements. This change will require additional training and support for the licensing staff as they transition into the legally exempt sector. The Department will need to assess the workload and caseload ratio for licensing staff once Hawaii starts implementation of the monitoring requirements for legally exempt child care providers caring for children whose families are receiving CCDF subsidies.

The Department contracts for service providers drop-in care for TANF families, who are meeting with their work participation case manager or participating in other activities at the work participation offices, if the family does not already have child care arrangements for their children ages 2 years old to 12 years old. Private providers bid for the contracted services which are provided at the work participation offices.

Goal 3: Improving the quality of child care, wherever children are, by providing resources and supports for licensed and registered child care providers and for legally exempt providers caring for children whose families are receiving CCDF subsidies.

The Department is interested in continuing to support child care providers in improving the quality of care provided to children and offers a variety of services for Hawai'i's child care providers, including licensed, registered, and legally exempt caring for CCDF subsidy children. The Department will continue to review existing services being provided as well as considering additional services and needs that may be needed.

Existing contracted services provided by the Department are:

1. Services to provide training and scholarship services to promote on-going professional development opportunities to support quality child care settings to interested persons, including parents and caregivers for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development. The contractor and the Department are exploring ways to make community-based child care training more accessible to all

child care providers statewide. Hawai'i is made up of 6 primary islands, and there are local community needs and transportation issues. On-line training has been a great help to those providers who reside in areas that are not easily accessible or who lack adequate transportation. Scholarships are provided for post-secondary education coursework to individuals working in the child care sector or not yet entered and pursuing their post-secondary degrees in Early Childhood Education to promote qualified staff and retention of staff through a career pathway.

2. Health consultation services, which trains community-based medical professionals so that they can be health consultants for licensed child care facilities, and provides trainings throughout the year to licensed and registered child care providers about current issues or new research-based practices affecting the child care sector, such as emergency preparedness, resiliency, toxic stress, and infectious diseases. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the health consultation program and community public health offices.
3. Nutrition training and menu review program, which provides community-based nutrition training for licensed and registered child care homes and facilities as well as menu review services for child care programs that are not participating in the Child and Adult Care Food Program (CACFP). As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the nutrition training and menu review program.
4. The Department contracts for services to provide educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, and neighbor (FFN) care and their child care providers as well as registered family child care providers. The contractor sends monthly informational packets to home-based child care providers and subsidy families, and the packets provide the providers and families with information about research and best practices in child development. The contractor also provides activity sheets and reflection surveys that can be returned to the contractor and the provider or family will receive children's books to keep. The contractor also posts the newsletters on their website.

Additional services that may be considered by the Department: mental health consultation and technical assistance support services to promote children's social-emotional health, a professional development entity to provide a comprehensive cross-sector calendar of available professional development opportunities throughout the the state that can be accessed by the child care workforce and to develop a quality assurance process for reviewing community-based early childhood/child care training and trainers to support the child care workforce in its work with children, technical assistance and support services for providers seeking or maintaining national accreditation through NAEYC, NECPA, and NAFCC to promote families' access to high quality care, and other quality improvement opportunities that may arise.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

- ☐ Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)_____
 - ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____
- ☒ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☒ CCDF funds. Describe CCDF funds (e.g., quality set-aside,, including whether designated infant- and toddler set aside, etc.)funds are being used along with other CCDF funds [Quality set-aside and designated for infant and toddler set-aside](#)
 - ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____
- ☒ Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☒ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) [Quality set-aside](#)
 - ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____
- ☒ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5.
 - ☐ Indicate which funds will be used for this activity (check all that apply)

- ☐ ☒ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) [Quality set-aside and designated for infant and toddler set-aside](#)
- ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____
- ☐ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)_____
 - ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____
- ☐ ☒ Supporting accreditation. If checked, respond to 7.7.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☐ ☒ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) [Quality set-aside and designated for infant and toddler set-aside](#)
 - ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____
- ☐ Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8.
 - ☐ Indicate which funds will be used for this activity (check all that apply)
 - ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)_____
 - ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____
- ☐ ☒ Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9.

- ☐ Indicate which funds will be used for this activity (check all that apply)
- ☐ CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)_____
- ☐ Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)_____

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

- ☐ Yes, the State/Territory has a QRIS operating State/Territory-wide. Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available _____
- ☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide. Provide a link, if available _____
- ☐ No, but the State/Territory is in the development phase
- ☒ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

- ☐ Participation is voluntary
- ☐ Participation is mandatory for providers serving children receiving subsidy. If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.) _____
- ☐ Participation is required for all providers
- ☐ Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels
- ☐ Supports and assesses the quality of child care providers in the State/Territory
- ☐ Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers
- ☐ Embeds licensing into the QRIS. Describe _____
- ☐ Designed to improve the quality of different types of child care providers and services
- ☐ Describes the safety of child care facilities
- ☐ Addresses the business practices of programs

- ☐ Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled
- ☐ Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services. If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality _____
- ☐ Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

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

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall

quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- ☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe _____
- ☐ Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe _____
- ☒ Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe

The Hawai'i Department of Human Services contracts with a private agency to provide infant and toddler training that meets the requirements of initial 30 hours and an additional 15 hours of training in infant and toddler development needed within 2 years for staff employed at licensed infant and toddler centers. The goals of this service is to increase the availability of infant and toddler care settings by increasing the pool of qualified infant and toddler center staff who are appropriately trained to care for infants and toddlers and increase the quality of care in early childhood settings by providing training which increases the knowledge and expertise of caregivers who work with infants and toddlers.

- ☒ Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care. Describe

The Hawai'i Department of Human Services contracts with the Hawai'i Department of Education (DOE) and a private agency to provide five (5) infant and toddler child care centers for teen parents enrolled in/attending high schools located on the islands of Hawaii, Kauai, and Maui. The centers provide care for children ages 6 weeks to 3 years old, and the teen parents must be participating in the DOE's Reality and Dual Role Skills (GRADS) program or alternate on-campus program that provides educational and parenting support services for pregnant and parenting teens. This childcare service enable them to continue their high school education with a goal of graduation and to learn life skills and child development skills as appropriate parents to ensure a healthy and safe environment for their child. The staff of these high schools select motivated students and refer them to the GRADS program and

the child care program. The students' attendance and grades are monitored by the DOE and contracted agency's staff. Participation in the child care program activities is expected. The teen parents sign a contract with respect to enrollment and participation in this service. Violation of their personal contracts dismisses them from using the child care service. The service is available when the public schools are in session. The DOE and contracted agency tracks the number of teen parents enrolled in the program who were promoted to the next grade or graduated high school.

- ☐ Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists. Describe _____
- ☐ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) Describe _____
- ☐ Developing infant and toddler components within the State's/Territory's QRIS. Describe _____
- ☐ Developing infant and toddler components within the State/Territory's child care licensing regulations. Describe _____

Hawai'i is developing safe sleep requirements within its administrative requirements for licensed infant and toddler centers and registered family child care homes that cover sleep environment and sleep positioning of children under 12 months of age in care.

Hawai'i will also develop similar requirements for legally exempt providers caring for children under 12 months of age and whose families receive CCDF subsidies, once the Department has obtained statutory authority to establish minimum health and safety standards for such legally exempt child care providers.

- ☐ Developing infant and toddler components within the early learning and development guidelines. Describe _____
- ☐ Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe _____
- ☐ Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe _____
- ☐ Other. Describe _____

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory

- The number of children served by the child care centers on or near the DOE public high school campuses.
- The number of teens that are promoted to the next grade level or graduate from high school.
- The number of family child care providers or employees of licensed infant and toddler centers that are trained through the infant and toddler training contractor.
- The number of infant and toddler age children served in programs operated by the participating trainees.
- The number of registered family child care homes and licensed infant and toddler centers adhering to the safe sleep requirements.
- The number of children whose families are receiving CCDF subsidies who are less than 12 months of age and are being cared for by a legally exempt child care provider.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system (as discussed in Section 1.7)

- ☐ ☒ State/Territory has a CCR&R system operating State/Territory-wide. Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary

Hawai'i has a coordinated, statewide child care resource and referral system, as the Department contracts with a single agency for this service. The contracted agency must have offices on the four (4) most populous islands in order to offer in-person and region-specific information and resources to families and child care providers. Parents are able to call in to the agency with questions regarding available community resources and child care referrals and may also go on-line to search for child care referrals, although these on-line listings are not as extensive, as the Department currently allows registered family child care providers and licensed child care facilities to opt out of the online searchable database to receive child care referrals. Not all licensed or registered child care providers are interested in receiving referrals through the online child care referral service.

- ☐ State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide. Describe _____
- ☐ State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

- Number of child care referral services provided by child care resource and referral agency
- Number of unduplicated persons receiving child care referral services provided by child care resource and referral agency
- Number of upuplicated persons finding child care as a result of child referral services provided by child care resource and referral agency
- Number of referrals to other types of resources or services needed provided by child care resource and referral agency

7.5 Facilitating Compliance with State Standards

7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards? Describe

The Department of Human Services contracts with a private agency through the training and scholarship services to actively recruit family child care homes in the efforts to meet the child care needs of Hawaii's families. These potential family child care providers are offered a series of courses to help prepare them for the field of child care. To reach out and increase recruitment of potential child care providers, the agency makes follow up calls, home visits and pre-licensing home visits promptly.

The Department is interested in continuing to support child care providers in improving the quality of care provided to children and offers a variety of services for Hawaii's child care providers, including licensed, registered, and legally exempt caring for CCDF subsidy children. The Department will continue to review existing services being provided as well as considering additional services and needs that may be needed.

Existing contracted services provided by the Department are:

1. Services to provide training and scholarship services to promote on-going professional development opportunities to support quality child care settings to interested persons, including parents and caregivers for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development. The contractor and the Department are exploring ways to make community-based child care training more accessible to all child care providers statewide. Hawai'i is made up of 6 primary islands, and there are local community needs and transportation issues. On-line training has been a great help to those providers who reside in areas

that are not easily accessible or who lack adequate transportation. Scholarships are provided for post-secondary education coursework to individuals working in the child care sector or not yet entered and pursuing their post-secondary degrees in Early Childhood Education to promote qualified staff and retention of staff through a career pathway.

2. Health consultation services, which trains community-based medical professionals so that they can be health consultants for licensed child care facilities, and provides trainings throughout the year to licensed and registered child care providers about current issues or new research-based practices affecting the child care sector, such as emergency preparedness, resiliency, toxic stress, and infectious diseases. As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the health consultation program and community public health offices.
3. Nutrition training and menu review program, which provides community-based nutrition training for licensed and registered child care homes and facilities as well as menu review services for child care programs that are not participating in the Child and Adult Care Food Program (CACFP). As part of the child care licensing or registration application process, the licensing workers provide to applicants a resource listing of available community programs including the nutrition training and menu review program.
4. The Department contracts for services to provide educational outreach services, technical assistance, and resources to promote quality of care for subsidy families utilizing legally exempt friend, family, and neighbor (FFN) care and their child care providers as well as registered family child care providers. The contractor sends monthly informational packets to home-based child care providers and subsidy families, and the packets provide the providers and families with information about research and best practices in child development. The contractor also provides activity sheets and reflection surveys that can be returned to the contractor and the provider or family will receive children's books to keep. The contractor also posts the newsletters on their website. The contractor is also developing initial health and safety training guidebook that would be used for all licensed and registered child care homes and facilities as well as legally exempt providers caring for children whose families receive CCDF subsidies.

7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

- Number of licensed and registered child care homes and facilities were provided training services.

- Number of legally exempt providers caring for children whose families receive CCDF subsidies received health and safety training guidebooks.
- Number of licensed and registered child care homes and facilities received health and safety training guidebooks.
- Number of children served by the licensed and registered child care homes and facilities receiving training services.
- Number of subsidy children served by the legally exempt provider caring for children whose families receive CCDF subsidies.
- Number of licensed and registered child care homes and facilities receiving health consultation services.
- Number of licensed and registered child care homes and facilities receiving menu reviews

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

- 7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children

The Department provides a higher child care payment rate for licensed centers that are nationally accredited by the the National Association for the Education for Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA).

The Department is also considering including a higher child care payment rate for registered family child care homes that are nationally accredited by the National Accreditation for Family Child Care (NAFCC).

The Department also contracts for services to provide training services to promote on-going professional development opportunities to support quality child care settings to interested persons working with children, including potential registered family child care providers, employees of licensed center-based providers, for a nominal cost that covers 12 separate series and 93 classes. The trainings include information about research and best practices in child development, including social emotional development.

7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

- Number of registered family child care providers and child care staff that receive scholarship funds from the Department.
- Number of registered family child care providers and child care staff that receive a post-secondary degree or Child Development Associate through the scholarship funds from the Department.
- Number of legally exempt child care providers caring for children whose families are receiving subsidies that are visited and meet minimum health and safety requirements.
- Number of children whose families are receiving CCDF subsidies who attend an accredited child care facility or home.

7.7 Accreditation Support

7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

- ☒ Yes, the State/Territory has supports operating State/Territory-wide. Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation

The Department provides a higher child care payment rate for licensed centers that are nationally accredited by the the National Association for the Education for Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA).

The Department is also considering including a higher child care payment rate for registered family child care homes that are nationally accredited by the National Accreditation for Family Child Care (NAFCC).

- ☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide. Describe _____
- ☐ No, but the State/Territory is in the development phase
- ☐ No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

- Number of licensed child care facilities becoming accredited by the National Association for the Education of Young Children (NAEYC) or the National Early Childhood Program Accreditation (NECPA)
- Number of registered family child care homes that become accredited by the National Accreditation for Family Child Care (NAFCC).

7.8 Program Standards

- 7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe _____
- 7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory _____

7.9 Other Quality Improvement Activities

- 7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten. _____

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements. _____

8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.

- ☐ ☒ Issue policy change notices
- ☐ Issue new policy manual
- ☐ ☒ Staff training
 - ☐ ☒ Orientations
 - ☐ Onsite training
 - ☐ Online training
- ☐ ☒ Regular check-ins to monitor implementation of the new policies. Describe _____
- ☐ Other. Describe _____

8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

For the subrecipient contracted to implement the subsidy program and the statewide child care resource and referral agency, monitoring activities include review of quarterly reports and monthly invoices. For the subsidy program subrecipient, the Department also reviews monthly data reports, conducts random case reviews to determine issuance of correct payments and to determine the need for retraining or policy clarifications, and a penalty provision in the contract is specified for lack of satisfactory performance as defined by the contract.

Definition: “Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as “vendors”). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance

with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified.”

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

☐ Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

☒ Run system reports that flag errors (include types). Describe

Review monthly system reports that include data such as the number of untimely applications processed and which cases and subsidy workers have frequent changes to bank account information completed in the data system.

☐ Review of enrollment documents, attendance or billing records

☒ Conduct supervisory staff reviews or quality assurance reviews

☐ Audit provider records

☒ Train staff on policy and/or audits

☐ Other. Describe

☐ None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines_____

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

- ☐ Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))
- ☒ Run system reports that flag errors(include types). Describe
Review monthly system reports that include data such as which cases and subsidy workers have frequent changes to bank account information completed in the data system.
- ☐ Review of enrollment documents, attendance or billing records
- ☒ Conduct supervisory staff reviews or quality assurance reviews
- ☐ Audit provider records
- ☒ Train staff on policy and/or audits
- ☐ Other. Describe_____
- ☐ None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines_____

8.1.5 Which activities (or describe under “Other”) the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory? The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

- a) Check which activities (or describe under “Other”) the Lead Agency will use for unintentional program violations?
- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
 - ☐ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
 - ☒ Recover through repayment plans
 - ☒ Reduce payments in subsequent months
 - ☒ Recover through State/Territory tax intercepts
 - ☒ Recover through other means
 - ☒ Establish a unit to investigate and collect improper payments. Describe
The Fiscal Management Office has a Collections and Recovery Section unit that will process remittances from clients who had over payments.
 - ☐ Other. Describe_____
 - ☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines_____
- b) Check which activities the Lead Agency will use for intentional program violations or fraud?

- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
- ☐ Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
- ☒ Recover through repayment plans
- ☒ Reduce payments in subsequent months
- ☒ Recover through State/Territory tax intercepts
- ☒ Recover through other means
- ☒ Establish a unit to investigate and collect improper payments. Describe composition of unit below

The Investigations Office within the Department's Benefit, Employment and Support Services Division is comprised of 9 investigators to review, investigate and pursue TANF, SNAP, and CCDF intentional improper violations and fraud.
- ☐ Other. Describe _____
- ☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, including action steps and completion timelines _____

c) Check which activities the Lead Agency will use for administrative error?

- ☐ Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount _____
- ☐ Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
- ☒ Recover through repayment plans
- ☒ Reduce payments in subsequent months
- ☒ Recover through State/Territory tax intercepts
- ☒ Recover through other means
- ☐ Establish a unit to investigate and collect improper payments. Describe composition of unit below
- ☐ Other. Describe _____
- ☐ None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines _____

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

- ☐ Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified. _____

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- ☐ Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified. _____
 - ☒ Prosecute criminally
 - ☐ Other. Describe _____

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