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Child Care and Development Fund (CCDF) Plan
for
State/Territory
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.

**Form ACF-118 Approved OMB Number XXXX-XXXX expires XXXX**

**Table of Contents**

Table of Contents 2

Introduction and How to Approach Plan Development 4

1 Define CCDF Leadership and Coordination with Relevant Systems 7

1.1 CCDF Leadership 7

1.2 CCDF Policy Decision Authority 9

1.3 Consultation in the Development of the CCDF Plan 11

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care 14

1.5 Optional Use of Combined Funds 16

1.6 Public-Private Partnerships 17

1.7 Coordination with Local or Regional Child Care Resource and Referral Systems 17

1.8 Disaster Preparedness and Response Plan 18

2 Promote Family Engagement through Outreach and Consumer Education 19

2.1 Information about Child Care Financial Assistance Program Availability and Application Process 21

2.2 Consumer and Provider Education Information 21

2.3 Website for Consumer Education 27

3 Provide Stable Child Care Financial Assistance to Families 29

3.1 Eligible Children and Families 30

3.2 Increasing Access for Vulnerable Children and Families 36

3.3 Protection for Working Parents 38

3.4 Family Contribution to Payment 41

4 Ensure Equal Access to High Quality Child Care for Low-Income Children 43

4.1 Parental Choice In Relation to Certificates, Grants or Contracts 43

4.2 Assessing Market Rates and Child Care Costs 46

4.3 Setting Payment Rates 48

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access 50

4.5 Payment Practices and Timeliness of Payments 52

4.6 Supply Building Strategies to Meet the Needs of Certain Populations 54

5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings 56

5.1 Licensing Requirements and Standards 56

5.2 Monitoring and Enforcement Policies and Practices 63

5.3 Criminal Background Checks 69

6 Recruit and Retain a Qualified and Effective Child Care Workforce 72

6.1 Training and Professional Development Requirements 73

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds 78

6.3 Early Learning and Developmental Guidelines 81

7 Support Continuous Quality Improvement 84

7.1 Activities to Improve the Quality of Child Care Services 85

7.2 Quality Rating and Improvement System 87

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers 89

7.4 Child Care Resource & Referral 90

7.5 Facilitating Compliance with State Standards 90

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services 91

7.7 Accreditation Support 91

7.8 Program Standards 91

7.9 Other Quality Improvement Activities 92

8 Ensure Grantee Program Integrity and Accountability 92

8.1 Program Integrity 92

# 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 - who rely 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_markup.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, 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 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](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.

# 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.

## 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))

### 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 Massachusetts Department of Early Education and Care
* Address of Lead Agency 51 Sleeper Street, 4th Floor, Boston, MA 02210
* Name and Title of the Lead Agency Official Thomas L. Weber, Commissioner
* Phone Number 617-988-6600
* E-Mail Address tom.weber@state.ma.us
* Web Address for Lead Agency (if any) www.mass.gov/eec

### 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 Thomas L. Weber

Title of CCDF Administrator Commissioner

Address of CCDF Administrator 51 Sleeper Street, 4th Floor, Boston, MA 02210

Phone Number 617-988-6600

E-Mail Address tom.weber@state.ma.us

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

Name of CCDF Co-Administrator Thomas P. Weierman

Title of CCDF Co-Administrator Assistant General Counsel

Phone Number 617-988-2433

E-Mail Address thomas.weierman@state.ma.us

Description of the role of the Co-Administrator Responsible for the day to day management of the CCDF program in the Commonwealth, including analyzing and updating regulations and policies, as well as responding to inquiries from key stakeholders, including families, educators, providers, legislators and other State administrators.

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any) 617-988-6600

Web Address for CCDF program (for the public) (if any) www.mass.gov/eec

Web Address for CCDF program policy manual (if any) http://www.eec.state.ma.us/docs1/regs-policies/20130117-financial-assistance-policy-guide.pdf

Web Address for CCDF program administrative rules (if any) http://www.eec.state.ma.us/docs1/regs-policies/20130118-revised-financial-assistance-regs.pdf

### 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 Massachusetts Department of Early Education
* Name of Lead Contact Gail DeRiggi
* Subsidy/Financial Assistance (section 3 and section 4)
	+ Agency/Department/Entity Massachusetts Department of Early Education
	+ Name of Lead Contact Thomas Weierman
* Licensing/Monitoring (section 5):
	+ Agency/Department/Entity Massachusetts Department of Early Education
	+ Name of Lead Contact Thomas Weierman
* Child Care Workforce (section 6):
	+ Agency/Department/Entity Massachusetts Department of Early Education
	+ Name of Lead Contact Chris Pond
* Quality Improvement (section 7):
	+ Agency/Department/Entity Massachusetts Department of Early Education
	+ Name of Lead Contact Gwen Alexander
* Grantee Accountability/Program Integrity (section 8):
	+ Agency/Department/Entity Massachusetts Department of Early Education
	+ Name of Lead Contact Alicia Siryon-Wells

## 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))

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

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

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

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

[ ]  State/Territory

[ ]  County. If checked, describe the type of eligibility policies the county can set

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

[ ]  Other. Describe

[ ]  Sliding fee scale is set by the:

[ ]  State/Territory

[ ]  County. If checked, describe the type of sliding fee scale policies the county can set

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

[ ]  Other. Describe

[ ]  Payment rates are set by the:

[ ]  State/Territory

[ ]  County. If checked, describe the type of payment rate policies the county can set

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

[ ]  Other. Describe

[ ]  Other. List and describe (e.g., quality improvement systems, payment practices)

### 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?

[x]  CCDF Lead Agency

[x]  TANF agency. Describe. For families with open TANF cases, the Massachusetts Department of Transitional Assistance (DTA) determines eligibility based on the family's financial eligibility for TANF and participation in DTA's employment services program.

[x]  Other State/Territory agency. Describe. For children with open protective service cases with the Massachusetts Department of Children and Families (DCF), social workers may authorize child care in an effort to meet the protective service needs of the family receiving child welfare services from DCF.

[ ]  Local government agencies such as county welfare or social services departments. Describe.

[x]  Child care resource and referral agencies. Describe. Massachusetts has entered into contracts with Child Care Resource and Referral agencies to conduct eligibility assessments for families funded through the voucher system.

[x]  Community-based organizations. Describe. Massachusetts has entered into contracts with child care programs and family child care systems to conduct eligibility assessments for families funded through the contract system.

[ ]  Other. Describe.

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

[x]  CCDF Lead Agency

[ ]  TANF agency. Describe.

[x]  Other State/Territory agency. Describe. For children with open protective service cases with DCF, social workers and regional child care coordinators work with families to locate child care options that best meet the needs of the family.

[ ]  Local government agencies such as county welfare or social services departments. Describe.

[x]  Child care resource and referral agencies. Describe. Massachusetts has entered into contracts with Child Care Resource and Referral agencies to provide information and referral services to any family seeking child care in the Commonwealth.

[x]  Community-based organizations. Describe. Massachusetts has entered into contracts with child care programs and family child care systems to provide direct service for families funded through the contract system. On an as needed basis, these contract providers may offer information and referral services to facilitate transitions for children to other early education and care programs.

[x]  Other. Describe. EEC contracts with Mass 211 to provide statewide information and referral services to families seeking early education and care programs and services in the Commonwealth.

c) Who issues payments?

[x]  CCDF Lead Agency

[ ]  TANF agency. Describe.

[ ]  Other State/Territory agency. Describe.

[ ]  Local government agencies such as county welfare or social services departments. Describe.

[x]  Child care resource and referral agencies. Describe. Massachusetts has entered into contracts with Child Care Resource and Referral agencies to make payments to providers funded through the voucher system.

[x]  Community-based organizations. Describe. Massachusetts has entered into contracts with family child care systems to make payments to affiliated family child care providers funded through the contract system.

[ ]  Other. Describe.

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

### 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.

* **X** [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns Describe EEC is overseen by an eleven member Board of Early Education and Care, appointed by the Governor. Membership of the Board includes the Secretary of Education, the Secretary of Health and Human Services, an early education and care provider, an early education and care teacher, a representative of the business community, a parent receiving early education and care services, an expert on assessment and evaluation, a pediatrician, and three other at-large members. Pursuant to the Massachusetts General Laws, the Board is required to review and approve all federal grant applications, including the CCDF Plan. The Board meets monthly to decide high- level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.

EEC also relies upon a 55 member Advisory Board for input into many aspects of the planning and implementation of agency activities. The Advisory is comprised of representatives of the following groups: legislators, agencies with a vendor or contract relationship with EEC, Business/ Civic, State associations, those with Kindergarten-Grade 12 Linkages. The full advisory meets 4 times per year and the subgroups meet in between each full group meeting.

EEC also holds contracts with over 100 local entities known as Coordinated Family and Community Engagement (CFCE) grantees across the Commonwealth. Through these grants, EEC has created a statewide system of access to a set of locally available comprehensive services and supports that strengthen families and promote optimal child development. EEC meets quarterly with the recipients of these grants to share and gather information.

The Board was consulted multiple times throughout the CCDF plan development process via presentations at Board meetings, review of materials including the previous plan, the Draft pre-print from the federal government as well as drafts of and updates regarding the succeeding plan.

* **X** [REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). Describe The EEC Board has been designated to serve as the State Advisory Council in Massachusetts.
	+ If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?
* **X** Yes
* No.
* If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy
* **X** [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with Neither of the two federally recognized tribes in the Commonwealth have sought to consult with EEC in the development of their respective CCDF State Plans. Check N/A if no Indian Tribes and/or Tribal organizations in the State [ ]
* **X** State/Territory agency responsible for public education. Describe In Massachusetts, the Executive Office of Education’s (EOE) primary function is to advance public education in the Commonwealth by analyzing and implementing statewide education policy and developing a seamless education system from birth through higher education, which includes the Commonwealth’s three education agencies: EEC, Elementary and Secondary Education (ESE), and Higher Education (DHE). The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high-level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies, especially in regards to the development of the state plan.
* **X** 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 Department of Public Health (DPH), which sits within the Executive Office of Health and Human Services (EOHHS), is the Lead Agency responsible for administering Part C of the IDEA, whereas Part B of the IDEA is administered by ESE, which sits within EOE. The Secretaries of both EOHHS and EOE serve as ex officio members of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. In addition, ESE entered into an interagency service agreement (ISA) with EEC related to the administration of the IDEA, Part B, funds. Pursuant to this ISA, EEC will administer these funds to support the inclusion of young children with disabilities through the implementation of a high quality system of early education and care, and to ensure that a free appropriate public education (FAPE) is available to all eligible children with disabilities ages 3 to 5 in compliance with applicable federal and state special education law, including IDEA and the Massachusetts Special Education Law and Regulations. EEC has also partnered with DPH’s Early Intervention Services program to establish and support Regional Consultation Programs (RCPs) to assist children with disabilities by providing expertise on inclusion and effective transition practices to early education and care programs. EEC is also a participating member of DPH’s Interagency Collaborating Council (ICC), which is a federally mandated statewide inter-agency group that advises and assists DPH on issues related to Early Intervention services.
* **X** State/Territory institutions for higher education, including community colleges. Describe The Department of Higher Education (DHE), which sits within the Executive office of Education (EOE), is the lead agency in charge if oversight of state and community colleges. EEC works with this DHE in a number of ways including educational offerings and requirements for educators as well campuses that have early education and care facilities on site. A staff member from DHE is a representative of the CCDF State Plan Advisory Group.
* **X** State/Territory agency responsible for child care licensing. Describe Not applicable. EEC is the state agency responsible for licensing in Massachusetts.
* **X** State/Territory office/director for Head Start State collaboration. Describe EEC is the agency that receives and administers the Head Start State Collaboration Grant in MA. The HSSCO is funded by the Administration of Children and Families (ACF) through the Office of Head Start (OHS). The Collaboration Office provides a structure and a process for OHS to work with State agencies and local entities to leverage their common interests around young children and their families to formulate, implement, and improve state and local policy and practice. The Executive Director of the Massachusetts Head Start Association is a representative of the CCDF State Plan Advisory Group.
* **X** State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe The Head Start State Collaboration Office Director coordinates the partnership between EEC and the state's Early Head Start Partnerships. The Director is directly involved in the drafting of the Department's CCDF Plan.
* **X** State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe ESE, which sits within EOE, is the lead agency responsible for administering the CACFP in Massachusetts. The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. A staff member from ESE sits on the state's Plan Advisory group.
* **X** State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe The Department of Public Health (DPH), which sits within the Executive Office of Health and Human Services (EOHHS), is the Lead Agency responsible for administering WIC in the Commonwealth of Massachusetts. As mentioned above DPH resides within the Health and Human Secretariat and the EOHHS Secretary (or their designee) sits on the EEC Board.
* **X** Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe For the development of the FFY2016-2018 CCDF State Plan, EEC created an Advisory Group of key stakeholders that provide direct service and/or advocacy on behalf of children and families seeking high quality early education and care services in the Commonwealth. This Advisory Group consisted of representatives from the following agencies: (1) EEC; (2) ESE; (3) DHE; (4) the CCRR Network; (5) the Alliance of Massachusetts YMCAs; (6) the Massachusetts Association of Family Child Care Providers (aka, MADCA); (7) the Family Child Care Union; and (8) early education advocate groups, including Early Education for All: Strategies for Children, the Bessie Tartt Wilson Foundation, and Horizons for the Homeless.
* **X** State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe The Massachusetts Department of Public Heath was designated as the lead agency for the Massachusetts Home Visiting Initiative (MHVI). The Department of Early Education and Care, the Massachusetts Children’s Trust Fund, the Department of Children and Families, and the Head Start Collaboration Office are collaborating agencies for this MHVI project.
* Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe Not at this time, but Massachusetts will explore opportunities over the next 2 years of the CCDF Plan cycle.
* **X** McKinney-Vento State coordinators for Homeless Education. Describe ESE, which sits within EOE, is the lead agency responsible for administering the McKinney-Vento Homeless Education Assistance Actin Massachusetts. The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. A staff member from ESE, as well as a representative from Horizons for the Homeless, sit on the CCDF State Plan Advisory group.
* **X** State/Territory agency responsible for public health. Describe DPH, which sits within EOHHS, is the lead agency responsible for public health in the Commonwealth. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
* **X** State/Territory agency responsible for mental health. Describe The Department of Mental Health (DMH), which sits within EOHHS, is the lead agency responsible for mental health in the Commonwealth. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
* **X** State/Territory agency responsible for child welfare. Describe The Department of Children and Families (DCF) within EOHHS is the lead agency responsible for child welfare in the Commonwealth. The Secretary of EOHHS is an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. In addition, EEC and DCF meet on a monthly basis to discuss challenges and opportunities related to child care subsidies/services provided to children and families with open DCF protective service cases.
* **X** State/Territory liaison for military child care programs. Describe EEC staff have attended conferences and trainings administered by the Military Child Education Coalition and other interested advocates and stakeholders. In addition, all of the CCR&R agencies in the Commonwealth are members of the National Association of Child Care Resource and Referral Agencies (NACCRRA), which is charged with providing referrals and supports to all four (4) branches of the military. In expanding support for military child care programs, EEC in partnership with the Head Start State Collaboration Office (HSSCO), the Military Child Education Coalition® (MCEC®), and Wheelock College, conducted a series of regional institutes, “Living in the New Normal™: Helping Children Thrive in Good and Challenging Times,” for EEC’s partners of the mixed delivery system, including Head Start (HS); Coordinated Family and Community Engagement Grantees (CFCE); Child Care Resources and Referral Agencies (CCR&Rs); MASS 2-1-1; Family Child Care (FCC) System Providers; and the Office of Refugees and Immigrants (ORI)’s providers and their stakeholders.
* State/Territory agency responsible for employment services/workforce development. Describe Not at this time, but Massachusetts will explore opportunities over the next 2 years of the CCDF Plan cycle.
* **X** State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe The Department of Transitional Assistance (DTA), which sits within EOHHS, is the lead agency responsible for TANF in the Commonwealth. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
* **X** State/community agencies serving refugee or immigrant families. Describe The Office for Refugees and Immigrants (ORI), which sits within EOHHS, is the lead agency responsible for refugee affairs in the Commonwealth. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
* **X** Child care resource and referral agencies. Describe EEC attends monthly meetings of the Child Care Resource and Referral (CCRR) Network, in order to share information, review updates on their work, and strategize regarding the implementation of any planned policy changes to CCDF supported care that may impact their work and the children and families that they serve. A staff members from the CCRR Network sit on the CCDF State Plan Advisory group.
* **X** Provider groups or associations. Describe In accordance with the Massachusetts General Laws, a representative of the provider community is a named member of the Board of EEC. In addition, the General Laws identify approximately 30 named provider groups and associations who are included in the membership of EEC’s Advisory Board. EEC also attends monthly meetings of the members of the provider community, in order to share information, review updates on their work, and strategize regarding the implementation of any planned policy changes to CCDF supported care that may impact their work and the children and families that they serve.
* **X** Labor organizations. Describe EEC communicates regularly with unions representing its employees to proactively identify and resolve procedural and policy issues and to coordinate implementation. In particular, family child care providers within the Commonwealth have been recognized as public employees as of January, 2013 and meet regularly with EEC to address issues related to rates, professional development, reimbursement and payments. A staff member from SEIU, Local 509, which represents family child care providers, is represented on the CCDF State Plan Advisory Group.
* **X** Parent groups or organizations. Describe EEC both formally and informally through various mechanisms, including, but not limited to: participation on the Board of EEC, as required by the Massachusetts General Laws; serving on local councils for CFCE grantees, as required by the terms of the grant awards; and through the Massachusetts Head Start Association, which requires parent representation.
* Other. Describe

### 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:

1. Date(s) of notice of public hearing December 16, 2015 **Reminder** - Must be at least 20 calendar days prior to the date of the public hearing.
2. 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. EEC posted notice regarding the public hearings on the CCDF State Plan on the Department's website, which requires compliance the Americans with Disabilities Act for purposes of accessibility. In addition, the information related to the dates and times for each of the public hearings was communicated to over 18,000 individuals that have signed up for regular e-mails from the Department's Commissioner's Office. Prior to the website posting and e-mail communication, EEC staff provided the Board with information about the hearings at the December 8, 2015 meeting of the Board.
3. Date(s) of public hearing(s) January, 5, 2016, January 6, 2016, and January 13, 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.
4. Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed To ensure members of the public through the Commonwealth had an opportunity to offer testimony and comments on the CCDF State Plan, EEC held public hearings in the Department's Springfield, Worcester, and Boston offices.
5. Describe how the content of the Plan was made available to the public in advance of the public hearing(s) A copy of the draft plan was posted on EEC's website. In addition, EEC offers the citizens of the Commonwealth several opportunities throughout the year to provide feedback and to guide the direction of the agency. For example, EEC convenes an Advisory Council (codified in Massachusetts statute at M.G.L. c. 15D, § 3A) of key stakeholders in the realm of early education and care. On December 11, 2015, the CCDF State Plan was the sole topic of the State Advisory Council. In addition to the web posting and the Advisory Council, EEC convened a CCDF Advisory Group, which met four times between October 22, 2015 and December 3, 2015 to discuss the challenges and opportunities presented by the CCDBG Reauthorization. Lastly, EEC provides opportunities for public comment prior to each board meeting, which occur a minimum of ten (10) times per year.
6. How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? All comments received by the public were summarized and distributed to senior leadership of the Department, as well as the Board of Early Education and Care, prior to the final submission of the CCDF State Plan.

### 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.

### **X** Working with advisory committees. Describe In the development of the CCDF State Plan, Massachusetts convened a specific advisory group to help the Commonwealth address the challenges and opportunities presented by the CCDBG Reauthorization. The advisory group consisted of direct service providers, including Head Start, the Department of Elementary and Secondary Education, the Child Care Resource and Referral agencies, the Family Child Care Union, and various advocates for children and families in Massachusetts. The challenges and opportunities of Reauthorization were also presented to the EEC Advisory Council, which is statutorily created under M.G.L. c. 15D, Sec. 3.

### **X** Working with child care resource and referral agencies. Describe As noted above, the Child Care Resource and Referral agencies were intentionally included as members of the CCDF State Plan advisory group developed by Massachusetts.

### Providing translation in other languages. Describe

### **X** Making available on the Lead Agency website. List the website http://www.mass.gov/edu/researchers/early-education-and-care/child-care-development-fund-state-plans/

### **X** Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe Massachusetts tweeted out the notice of public hearings, including a link to the draft CCDF State Plan.

### **X** Providing notification to stakeholders (e.g., provider groups, parent groups). Describe In addition to working with the CCDF State Plan advisory group and presenting the challenges and opportunities to the EEC Advisory Council, EEC staff made a formal presentation on CCDBG Reauthorization to the formal trade association for family child care providers in Massachusetts, which is formally known as MADCA.

### Other. Describe

## 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.

### 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.

* **X** [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 In Massachusetts, the Executive Office of Education’s (EOE) primary function is to advance public education in the Commonwealth by analyzing and implementing statewide education policy and developing a seamless education system from birth through higher education, which includes the Commonwealth’s three education agencies: EEC, Elementary and Secondary Education (ESE), and Higher Education (DHE). The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high-level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies, especially in regards to the development of the state plan. EEC is also the agency that receives and administers the Head Start State Collaboration Grant in MA. The Head Start State Collaboration Office is funded by the Administration of Children and Families (ACF) through the Office of Head Start (OHS). The Collaboration Office provides a structure and a process for OHS to work with State agencies and local entities to leverage their common interests around young children and their families to formulate, implement, and improve state and local policy and practice. The Executive Director of the Massachusetts Head Start Association is a representative of the CCDF State Plan Advisory Group.
* **X** [REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribe(s) coordinating with Over the course of the FFY2016-2018 CCDF State Plan period, EEC will formally reach out to the two federally recognized tribes in the Commonwealth, the Wampanoag Tribe of Gay Head (Aquinnah) and the Mashpee Wampanoag Tribe, to streamline access and to improve the quality of early education and care programs serving children and families in Massachusetts.
	+ Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.
* **X** [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe The Department of Public Health (“DPH”), which is the lead agency for administering the Early Intervention program for the Commonwealth, sits within EOHHS. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
* [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act). Describe ESE, which sits within EOE, is the lead agency responsible for administering the McKinney-Vento Homeless Education Assistance Actin Massachusetts. The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. A staff member from ESE, as well as a representative from Horizons for the Homeless, sit on the CCDF State Plan Advisory group.
* **X** [REQUIRED] Early childhood programs serving children in foster care. Describe EEC has entered into contracts with early education and care programs throughout the Commonwealth to serve children with open protective service cases with the Department of Children and Families (DCF). In addition, EEC participates in monthly meetings with representatives of early education and care providers holding contracts to serve DCF involved families, including those whose children are in foster care.
* State/Territory agency responsible for child care licensing. Describe Not applicable. EEC is the state agency responsible for licensing in Massachusetts.
* **X** State/Territory agency with Head Start State collaboration grant. Describe EEC is the agency that receives and administers the Head Start State Collaboration Grant in MA. The HSSCO is funded by the Administration of Children and Families (ACF) through the Office of Head Start (OHS). The Collaboration Office provides a structure and a process for OHS to work with State agencies and local entities to leverage their common interests around young children and their families to formulate, implement, and improve state and local policy and practice. The Executive Director of the Massachusetts Head Start Association is a member of the Department's Plan Advisory Group.
* **X** State Advisory Council authorized by the Head Start Act. Describe The EEC Board has been designated to serve as the State Advisory Council in Massachusetts.
* **X** State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe The Head Start State Collaboration Office Director coordinates the partnership between EEC and the state's Early Head Start Partnerships. The Director is directly involved in the drafting of the Department's CCDF Plan. In addition, EEC staff have participated in Head Start conferences and have met with representatives of both Head Start and the Office of Child Care to discuss opportunities for child care and Head Start to partner in the shared mission to improve access to high quality education for low-income, at-risk children.
* **X** McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe ESE, which sits within EOE, is the lead agency responsible for administering the McKinney-Vento Homeless Education Assistance Actin Massachusetts. The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues; including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. A staff member from ESE, as well as a representative from Horizons for the Homeless, sits on the CCDF State Plan advisory group.
* **X** Child care resource and referral agencies. Describe EEC staff attend monthly meetings of the Child Care Resource and Referral (“CCRR”) agencies in Massachusetts. In addition, staff members from the CCRR network participated on the CCDF State Plan advisory group.
* **X** State/Territory agency responsible for public education. Describe Massachusetts, the Executive Office of Education’s (EOE) primary function is to advance public education in the Commonwealth by analyzing and implementing statewide education policy and developing a seamless education system from birth through higher education, which includes the Commonwealth’s three education agencies: EEC, Elementary and Secondary Education (ESE), and Higher Education (DHE). The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high-level policy issues; including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies, especially in regards to the development of the state plan.
* **X** State/Territory institutions for higher education, including community colleges. Describe The Department of Higher Education (DHE), which sits within the Executive office of Education (EOE), is the lead agency in charge if oversight of state and community colleges. EEC works with this DHE in a number of ways including educational offerings and requirements for educators as well campuses that have early education and care facilities on site.
* **X** State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe ESE, which sits within EOE, is the lead agency responsible for administering the CACFP in Massachusetts. The Secretary of EOE serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues; including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. A staff member from ESE sits on the state's Plan Advisory group.
* **X** State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe The Department of Public Health (DPH), which sits within the Executive Office of Health and Human Services (EOHHS), is the Lead Agency responsible for administering WIC in the Commonwealth of Massachusetts. As mentioned above DPH resides within the Health and Human Secretariat and the EOHHS Secretary (or their designee) sits on the EEC Board which has discussed this plan at length.
* **X** Other Federal, State, local and/or private agencies providing early childhood and school-age/youth serving developmental services. Describe For the development of the FFY2016-2018 CCDF State Plan, EEC created an Advisory Group of key stakeholders that provide direct service and/or advocacy on behalf of children and families seeking high quality early education and care services in the Commonwealth. This Advisory Group consisted of representatives from the following agencies: (1) EEC; (2) ESE; (3) DHE; (4) the CCRR Network; (5) the MA Association of YMCAs; (6) the Massachusetts Association of Family Child Care Providers (aka, MADCA); (7) the Family Child Care Union; and (8) early education advocate groups, including Early Education for All: Strategies for Children, the Bessie Tartt Wilson Foundation, and Horizons for the Homeless.
* **X** State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe The Massachusetts Department of Public Heath was designated as the lead agency for the Massachusetts Home Visiting Initiative (MHVI). The Department of Early Education and Care, the Massachusetts Children’s Trust Fund, the Department of Children and Families, and the Head Start Collaboration Office are collaborating agencies for this MHVI project.
* Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe Not at this time, but Massachusetts will explore opportunities over the next 2 years of the CCDF Plan cycle.
* **X** State/Territory agency responsible for public health. Describe DPH, which sits within EOHHS, is the lead agency responsible for public health in the Commonwealth. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
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* **X** State/Territory agency responsible for child welfare. Describe The Department of Children and Families (DCF) within EOHHS is the lead agency responsible for child welfare in the Commonwealth. The Secretary of EOHHS is an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues; including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies. In addition, EEC and DCF meet on a monthly basis to discuss challenges and opportunities related to child care subsidies/services provided to children and families with open DCF protective service cases.
* **X** State/Territory liaison for military child care programs. Describe EEC staff have attended conferences and trainings administered by the Military Child Education Coalition and other interested advocates and stakeholders. In addition, all of the CCR&R agencies in the Commonwealth are members of the National Association of Child Care Resource and Referral Agencies (NACCRRA), which is charged with providing referrals and supports to all four (4) branches of the military. In expanding support for military child care programs, EEC in partnership with the Head Start State Collaboration Office (HSSCO), the Military Child Education Coalition® (MCEC®), and Wheelock College, conducted a series of regional institutes, “Living in the New Normal™: Helping Children Thrive in Good and Challenging Times,” for EEC’s partners of the mixed delivery system, including Head Start (HS); Coordinated Family and Community Engagement Grantees (CFCE); Child Care Resources and Referral Agencies (CCR&Rs); MASS 2-1-1; Family Child Care (FCC) System Providers; and the Office of Refugees and Immigrants (ORI)’s providers and their stakeholders.
* State/Territory agency responsible for employment services/workforce development. Describe Not at this time, but Massachusetts will explore opportunities over the next 2 years of the CCDF Plan cycle.
* **X** State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe The Department of Transitional Assistance (DTA), which sits within EOHHS, is the lead agency responsible for TANF in the Commonwealth. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues, including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
* **X** State/Territory community agencies serving refugee or immigrant families. Describe The Office for Refugees and Immigrants (ORI), which sits within EOHHS, is the lead agency responsible for refugee affairs in the Commonwealth. The Secretary of EOHHS serves as an ex officio member of the Board of EEC, which meets a minimum of ten times annually to decide high level policy issues; including issues impacting all CCDF funded programs and services. The broad membership and regular meeting schedule of the EEC Board allows for substantial and ongoing consultation and coordination with EEC’s stakeholders and key partner agencies.
* **X** Provider groups or associations. Describe In accordance with the Massachusetts General Laws, a representative of the provider community is a named member of the Board of EEC. In addition, the General Laws identify approximately 30 named provider groups and associations who are included in the membership of EEC’s Advisory Board. EEC also attends monthly meetings of the members of the provider community, in order to share information, review updates on their work, and strategize regarding the implementation of any planned policy changes to CCDF supported care that may impact their work and the children and families that they serve.
* **X** Labor organizations. Describe EEC communicates regularly with unions representing its employees to proactively identify and resolve procedural and policy issues and to coordinate implementation. In addition, family child care providers within the Commonwealth have been recognized as public employees as of January, 2013. As a result, EEC staff meets regularly with SEIU to address issues related to rates, professional development, reimbursement and payments.
* **X** Parent groups or organizations. Describe Parent groups or organizations consult with EEC both formally and informally through various mechanisms, including, but not limited to: participation on the Board of EEC, as required by the Massachusetts General Laws; serving on local councils for CFCE grantees, as required by the terms of the grant awards; and through the Massachusetts Head Start Association, which requires parent representation.
* Other. Describe

## 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.

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

* **X** Yes. If yes, describe at a minimum:
	+ How do you define “combine” Massachusetts pools together federal and state funds that support the services provided by the Department of Early Education and Care. Through the child care subsidy program, Massachusetts provides for “wrap-around” services, which enable full day/full year services for children participating in other federal or state funded educational opportunities (i.e., Head Start, public pre-school, and school age children).
	+ Which funds will you combine CCDF, TANF, Title IV-E, SSBG, and state funds.
	+ 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 Massachusetts pools funds to maximize federal revenue for the Commonwealth and to support full day/full year child care opportunities for children in the child care subsidy program.
	+ Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?) Massachusetts pools funds at the State level.
	+ How are the funds tracked and method of oversight Funds are tracked by the budget fiscal unit of the Department of Early Education and Care and are allocated through the federal draw process. The method of allocation and draw process is subject to internal and external audit.
* No

## 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.

### 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.

### EEC has engaged in several public-private partnerships. An ongoing example is the Massachusetts “Invest in Children” license plate initiative. Funds generated by the sale of these plates go into the Child Care Quality Fund established by the Legislature. In the past decade, EEC has distributed over $2.2 million to over 160 non-profit organizations to support and enhance the quality of services being delivered in early education and out of school time settings across the Commonwealth.

### Other examples of public-private partnership in Massachusetts include:

### EEC’s work with Wheelock College to assess the professional development needs of educators who are English language learners, disseminate best practices, and develop a strategy to meet their needs.

### EEC’s Educator and Provider Support (EPS) grants. Bidders were required to come in as regional partnerships. These partnerships include CCR&Rs, CAP agencies, institutions of higher education (IHEs), private non-profit community organizations, and other public and private entities. These partnerships are the network EEC funds to determine and address the professional development needs of the early education and out of school time workforce.

### EEC’s collaboration with the Bessie Tartt Wilson Initiative for Children to develop a basic career ladder for the early education and out-of-school-time workforce. This ladder is intended as a guide and resource for early education and out of school programs and will provide a common starting point for discussions to address issues such as compensation and career advancement.

### EEC engaged Oldham Innovative Research to study the higher education system in MA. Phase I of the study compared early education and related degree programs across 27 public and private two and four year Institutions of Higher Education. Phase II of the study compared individual courses across these same IHEs and aligned them with EEC’s core competency areas. This study have been made available on line as a resource for educators, IHEs, and other entities working to align higher education with the needs of the early education and out of school time workforce.

### Massachusetts has also made progress in engaging the private sector to support the implementation of the state’s early learning plan (RTT-ELC). The following is a list of key private sector supporters:

### WGBH -- As EEC’s media partner, WGBH is developing a robust set of media-based curricular resources to build the capacity of preschool classroom teachers and family daycare providers to promote the growth of young children, and to support and engage parents in their role as their child’s first teacher. The centerpiece of this work is the production of a “digital hub”, a free, online platform that will feature a centralized library of these resources, direct links to related materials, and customized pathways to guide teachers, parents and other care providers through the site.

### United Way of Massachusetts Bay and Merrimack Valley -- EEC and United Way of Massachusetts Bay and Merrimack Valley launched the Brain Building in Progress campaign to raise the public’s awareness of the importance of early years to the development of young children. Brain Building in Progress highlights the need to provide the Commonwealth’s youngest residents with high quality and enriching experiences to ensure healthy brain development.

### Boston Children’s Museum -- EEC and the Boston Children’s Museum (BCM) are engaged in a statewide strategy that will provide a shared framework and set of resources that will increase the capacity of museums and libraries to support the optimal development of all children through intentional family engagement activities and early learning opportunities. The partnership is focused on four areas in supporting family and community engagement in child development: early literacy, school readiness, including preparation for kindergarten, interest in and awareness of STEM (Science, Technology, Engineering and Math), and public awareness of the importance of early education and care through the state’s Brain Building in Progress communications initiative.

## 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.

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

### **X** 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 following outlines the overall required services for CCRRs in Massachusetts (for more detail, EEC can provide a copy of the request for proposal issued as part of the most recent CCRR procurement, upon request):

**A. FAMILY FOCUSED SERVICES**

1. CCRR must be knowledgeable regarding the early education and out of school time care needs of families in the cities and towns it serves.

2. CCRR shall demonstrate a depth of understanding of the communities in the cities and towns it serves.

3. All families have access to accurate, meaningful consumer information, education and referrals that meet their specific needs and assist them in a quality care decision making process.

4. Families receive information and referrals in a manner that meets high quality customer service benchmarks, and is sensitive to the families in their cities and towns including cultural, socio-economic, language and other factors.

5. Families are informed about the range of care costs in the cities and towns served, and financial assistance available.

6. Enhanced referral services are provided to families that are hard-to-serve/high needs and/or have specialized care needs.

7. Families in need of financial assistance for early education and care services are educated about and assisted with placements on EEC’s centralized Waitlist and with the voucher application/re-assessment and referral processes.

8. Ensure coordination between CCRR and Mass 2-1-1.

9. All families are educated on the concepts of high quality care.

10. Ensure collaboration and coordination between CCRRs and CFCEs.

11. Families are made aware of and linked to other agencies and organizations that provide services and information regarding young children.

12. CCRR will provide high quality information on child development.

13. Family services will be outcome driven and informed by results of service evaluation.

14. CCRR is an active educator for high quality early education and out of school time care.

**B. PROVIDER DEVELOPMENT AND ENGAGEMENT**

1. Recruitment of new providers and new care slots takes place based on the needs of the community served.

2. NACCRRAware is used to maintain information on licensed and license-exempt providers, Family Child Care Systems, and in-home/relative providers in service area.

3. Provider voucher agreements are executed, reviewed, monitored, enforced, and if applicable, terminated.

4. The training and technical assistance needs of the providers in the CCRR service area are assessed as they relate to EEC licensing, health and safety, and voucher utilization.

5. Ensure collaboration and coordination between CCRR and EPS grantees.

6. Providers/Systems are informed of EPS professional development and training opportunities.

7. Ensure high quality trainings on various topic areas are available to providers/Systems and focus mainly on EEC licensing requirements.

8. Quality technical assistance is provided to providers/Systems.

9. A tracking system for training and technical assistance given to providers/Systems is in place.

10. Providers/Systems are educated on QRIS system and how to access trainings that help them achieve their QRIS goals.

11. Linkages for providers/Systems are made to other agencies that have information pertaining to young children and family services.

12. CCRR has knowledge of whether a program’s physical space/facility complies with the Americans with Disabilities Act (ADA) and/or is accessible to families and children with disabilities.

13. CCRR services are marketed to providers/Systems in the field.

14. Education and consultation is provided to informal care providers (e.g. in home and relative care providers).

15. CCRR will promote high quality early education and out of school time care in its service area.

**C. GENERAL MANAGEMENT**

a. Staffing and Internal Controls:

1. Ensure adequate numbers and qualifications of staff to serve the population/geographic area proposed;
2. Make reasonable efforts to have staff and materials reflect the languages and cultural competencies of the families served by the CCRR;
3. Maintain written internal controls policies and procedures outlining all staff responsibilities;
4. Staff reflect the diversity and linguistic needs of the families and providers in the cities and towns they serve;
5. Staff working directly with providers or offering information to families should have direct experience in the early education and care field;
6. Staff possess a sound understanding of EEC’s licensing regulations, subsidy regulations, the Child Care Financial Assistance Policy Guide, EEC initiatives, and any changes or amendments thereto made during the contract;
7. Professional development for staff to include orientation and ongoing training;
8. Staff are supervised regularly and evaluated semi-annually;
9. Written policies and procedures to include operations, orientation and personnel; and
10. Sound financial policies and procedures in place.

b. Leadership and Community Collaboration:

1. Develop partnerships with CFCE and EPS grantees, Mass 2-1-1 and convene meetings with these agencies four times per year.
2. Convene Board of Directors or Advisory Committee that reflects cities and towns served.
3. Involvement in the early education and out of school time care field through membership in local, state and national organizations and associations.

c. Quality Assurance:

1. NACCRRA Quality Assurance achieved within 2 years of submission to NACCRRA or CCRR must be awaiting final visit for quality assurance by December 31, 2014, whichever is later.

d. Data Management:

* 1. Technical capacity and IT support to carry out agency functions and provide online services;
	Capacity to produce data reports for EEC and other constituents;
	2. Plan and process for gathering feedback from various constituencies regarding the delivery of services; and
	3. Trained staff use NACCRRAware, or another equivalent database approved by EEC, to input provider data, family data, and generate reports.

e. Collaboration with EEC:

1. Meet at least monthly with EEC to discuss services being provided by CCRRs and to ensure that all CCRRs have updated information regarding EEC regulations, policies, procedures, initiatives, and/or practices.
2. Have ongoing communication with EEC to ensure that required services are being provided in accordance with contract terms and any updates thereto.

f. Hours and Days of Operation:

1. All CCRRs must be open on a full year basis (excluding federal and state holidays);
2. All CCRRs must maintain at least one administrative office which is staffed and open and available to the general public and to voucher providers/Systems and families receiving EEC financial assistance, in each service delivery area where the CCRR is awarded a contract.
3. Whenever possible, CCRRs should select administrative offices and/or out-posting offices near public transportation terminals.
4. Make staff available to the public in person or by telephone during regular business hours at a minimum from 9:00 a.m. to 5:00 p.m. five days per week (Monday through Friday).
5. Provide services, whenever possible and in particular, assessment/reassessment appointments, during non-traditional hours (before 9 a.m. or after 5 p.m. and on weekends).

g. Laws, Regulations, Policies, and Procedures:

All CCRRs shall ensure that they, their employees, agents, staff, and affiliated providers abide by all laws, regulations and policies that relate to the provision of services under this contract.

g. Technology Standards:

All successful bidders are expected to have access to information technology systems that are compatible with those used by EEC to administer the voucher management and billing functions specified by EEC.

D. TRAINING AND IMPLEMENTATION

Organizations or entities that are awarded a contract under this RFR will be required to attend a four part training and implementation institute conducted by EEC.

### 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.

## Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement thatStates 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.

### Describe the status of State/Territory’s Statewide Child Care Disaster Plan.

* **X** Fully implemented and meeting all Federal requirements outlined above. 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 http://www.mass.gov/edu/docs/eec/licensing/policies/emergency-contingency-plan.pdf
* 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)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
* Implementation progress to date – Identify any requirement(s) partially or substantially implemented
* Unmet requirement - Identify the requirement(s) not fully 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 the State/Territory lead agency to complete implementation of this activity

# 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:
	1. the availability of child care assistance,
	2. the quality of child care providers (if available),
	3. 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.
	4. Individuals with Disabilities Education Act (IDEA) programs and services,
	5. Research and best practices in child development, and
	6. 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:
3. 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).
4. Aggregate annual 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.
5. State/Territory processesfor: 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.

## 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))

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

### 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?) EEC contracts with partners on the state, regional and local level to facilitate the identification of, and connection to, potentially eligible families and to provide information and referral services to the general public. This network/system of statewide partners uses state and community demographic data to support outreach to high need families at the local level.

### 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. The following entities assist EEC in providing outreach to families: (1) Massachusetts Network of Child Care Resource and Referral (CCRR) agencies; (2) Early education and care programs holding contracts to provide direct services to families; (3) Coordinated Family and Community Engagement (CFCE) grantees; (4) Head Start grantees; and (5) Mass211. In addition, Early Intervention providers, the Department of Transitional Assistance, the Department of Children and Families, WIC programs and home visitors through various Massachusetts home visiting programs are among the state and community partners that support outreach efforts to families.

### What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach? Massachusetts contracts with CCRRs and Mass211 to provide information and referral services to the general public. In addition, CFCE grantees conduct outreach to high needs families in their communities to link them to comprehensive services and supports, including linkages to CCRRs for childcare financial assistance services. CFCE grantees conduct community-based council meetings, which include a cross section of community representatives during which information about program and family resources are shared. EEC is also engaged in a media campaign with United Way entitled Brain Building in Progress (BBiP). The BBiP website (http://brainbuildinginprogress.org) includes family friendly content about brain building and the importance of high quality learning experiences for young children, brain building activities/ ideas families can incorporate in their everyday moments with their children and a calendar of activities across the Commonwealth available to families to participate in in order to support their child’s healthy development. EEC has worked with the MBTA and the Registry of Motor Vehicles (RMV) to include campaign materials on trains and buses as well as in RMV offices to promote stakeholders’ understanding of and engagement in brain building activities, too.

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

* **X** Electronically via online application, mobile app or email. Provide link : https://earlyedncareop.eec.state.ma.us/KinderWait/KWclientaccess/
* **X** In-person interview or orientation. Describe agencies where these may occur Parents seeking to seeking child care financial assistance may apply in person at any the contracted CCRR agencies or early education and care programs holding direct service contracts in the Commonwealth.
* **X** Phone
* **X** Mail
* **X** At the child care site
* **X** 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
* **X** 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 Parents receiving services through other Executive Agencies may receive referrals to access child care subsidy, including the Department of Children and Families (i.e., for children with open protective service cases in the state child welfare system), the Department of Transitional Assistance (i.e., for families receiving TAFDC and participating in the Employment Services Program), and the Department of Housing and Community Development (i.e., for families experiencing homelessness or engaged in homeless diversion or stabilization programs).
* Other strategies. Describe

## 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))

### 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.
* **X** Yes. The State/Territory certifies that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.8 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)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
* 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

### 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.

1. Describe how the State/Territory makes information about the full diversity of child care services available to parents of eligible children, providers and the general public As part of its contract with Massachusetts, the CCRR Network is required to provide information and referral services regarding child care options to the general public. EEC also contracts with Mass211 to provide statewide information and referral services to families seeking early education and care programs and services. For children with open protective service cases with DCF, social workers and regional child care coordinators work with families to locate child care options that best meet the needs of the family.
2. Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) Direct Communication, written materials and website information are some of the methods EEC employs to communicate the full range of child care services for families seeking quality child care options. In addition, Mass211, CCRRs incorporate information about quality in their conversations with families when they provide referrals. CFCE grantees speak directly to families individually and/or in groups about quality practices and supports that promote optimal child development, as well.

Through EEC's website, Massachusetts offers families and the general public helpful resources and tips for selecting quality early education and care programs. This resource is available in both Spanish and Portuguese. The link is found here:

http://www.mass.gov/edu/birth-grade-12/early-education-and-care/find-early-education-and-care-programs/types-of-early-education-and-care-programs-and-tips-for-parents-on-selecting-a-quality-program/

1. Describe who you partner with to make information about the full diversity of child care choices available As noted above, EEC partners with the following entities to provide consumer education services: the CCRR Network, United Way, Mass211, Early Intervention, Educator and Provider Support grantees and Coordinated Family and Community Engagement grantees.

### 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

1. Describe how the State/Territory makes information about child care quality available to parents of eligible children, providers and the general public Prior to the end of State Fiscal Year 2016 (June 30, 2016), EEC intends to hire an outside consultant to assist in the creation of a comprehensive communications strategy for families and stakeholders that aligns EEC's quality initiatives. These initiatives include QRIS, the MA Brain Building in Progress campaign, Coordinated Family and Community Engagement programs (CFCE), Child Care Resource and Referral (CCR&R) networks, and QRIS Community online platform. Activities will include creating: (1) an easily-recognized brand identity to communicate quality/QRIS, including a new name for the MA QRIS, a new name for the MA QRIS tiers, and a consumer friendly logo for the MA QRIS; (2) a comprehensive communications strategy to communicate the importance of quality early education and care; (3) materials related to a comprehensive marketing/communication strategy: print, digital, radio, video, social media, and other media identified in strategy (must be in accessible format); and (4) Printed materials will be translated into Spanish, Brazilian Portuguese, Haitian Creole, Khmer, Simplified Chinese, and Vietnamese.
2. Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) To be determined based on the negotiated scope of the contract referenced in 2.2.3(a) above.
3. Describe who you partner with to make information about child care quality available To be determined based on the negotiated scope of the contract referenced in 2.2.3(a) above.

### 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.

1. Temporary Assistance for Needy Families (TANF)EEC provides families with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including TANF. In addition to providing all of the information about TANF, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
2. Head Start and Early Head Start Programs EEC partners with the Head Start State Collaboration Office (HSSCO), the Massachusetts Head Start Association, the Head Start Statewide Advisory, and Head Start and Early Head Start programs to ensure information, training and resources about other comprehensive services and school readiness across the state are shared with families. In addition, EEC's website contains information for families related to multiple services offered through HS and EHS grantees in Massachusetts. HSSCO conducts quarterly advisory meeting with state partner agencies to share resources and information to be shared and distributed with local families. Key partners that support the work of the Collaboration Office include the Department of Children and Families, the Department of Housing and Community Development, the Department of Elementary and Secondary Education, the Massachusetts Community Action Programs Association, the Head Start Association, the Office of Refugees and Immigrants, WIC, etc. Parents from Head Start and Early Head Start programs are invited to participate as members of the HSSCO Advisory. As members of the HSSCO Advisory, parents are encouraged to share resources and information at the State meetings.
3. Low Income Home Energy Assistance Program (LIHEAP) EEC provides families with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including LIHEAP. In addition to providing all of the information about LIHEAP, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
4. Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps)EEC provides families with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including SNAP. In addition to providing all of the information about SNAP, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
5. Women, Infants, and Children Program (WIC) EEC provides families with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including WIC. In addition to providing all of the information about WIC, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
6. Child and Adult Care Food Program(CACFP) EEC provides families with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including CACFP. In addition to providing all of the information about CACFP, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
7. Medicaid EEC provides families with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including Medicaid. In addition to providing all of the information about Medicaid, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
8. Children's Health Insurance Program (CHIP) EEC provides families with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including CHIP. In addition to providing all of the information about CHIP, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
9. Individuals with Disabilities Education Act (IDEA) EEC partners with the Department of Elementary and Secondary Education (ESE) and the Department of Public Health (DPH) to ensure information, training and resources about other human services programs across the state are shared with families.
10. Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten) Not applicable.
11. Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program) The Massachusetts Department of Public Health (DPH) is the lead agency for the MIECHV program, also known locally as the Mass Home Visiting Initiative (MHVI). This inter-agency collaboration among DPH, EEC ,and the Children's Trust ensures that the home visiting, early childhood education, and family support programs and agencies in the 17 designated MHVI communities are connected to the others to ensure that families are able to receive the services that they need.

### 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.?

1. Temporary Assistance for Needy Families (TANF)EEC provides providers with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including TANF. In addition to providing all of the information about TANF, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
2. Head Start and Early Head Start Programs EEC partners with the Head Start State Collaboration Office (HSSCO), the Massachusetts Head Start Association, the Head Start Statewide Advisory, and Head Start and Early Head Start programs to ensure information, training and resources about other comprehensive services and school readiness across the state are shared with providers. Key partners that support the work of the Collaboration Office include the Department of Children and Families, the Department of Housing and Community Development, the Department of Elementary and Secondary Education, the Massachusetts Community Action Programs Association, the Head Start Association, the Office of Refugees and Immigrants, WIC, etc.
3. Low Income Home Energy Assistance Program (LIHEAP) EEC provides providers with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including LIHEAP. In addition to providing all of the information about LIHEAP, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
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8. Children's Health Insurance Program (CHIP) EEC provides providers with information to other available human service programs in a variety of ways, through the Child Care Resource and Referral Agencies, MASS211, and EEC’s network of Coordinated Family and Community Engagement grantees across the Commonwealth. These entities maintain information on local and/or regional comprehensive services available to families, including CHIP. In addition to providing all of the information about CHIP, they may provide information on additional comprehensive supports, such as adult basic education, local and state agencies responsible for subsidized housing, shelter programs, etc. Referrals to families are provided to/from the entities within this network of agencies as well, ensuring that families are connected to the best resources to meet their needs. Partners include all of the entities listed above as well as, Early Intervention, the Department of Elementary and Secondary Education, the Department of Public Health, the Department of Mental Health, the Department of Transitional Assistance and the Department of Children and Families. Information may be provided in-person or via telephone and online or printed materials.
9. Individuals with Disabilities Education Act (IDEA) EEC partners with the Department of Elementary and Secondary Education (ESE) and the Department of Public Health (DPH) to ensure information, training and resources about other human services programs across the state are shared with providers.
10. Other State/Federally Funded Child Care Programs (example-State Pre-K) Not applicable.
11. Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program) The Massachusetts Department of Public Health (DPH) is the lead agency for the MIECHV program, also known locally as the Mass Home Visiting Initiative (MHVI). This inter-agency collaboration among DPH, EEC ,and the Children's Trust ensures that the home visiting, early childhood education, and family support programs and agencies in the 17 designated MHVI communities are connected to the others to ensure that providers are aware of the services available to families.

### 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))

1. Describe how the State/Territory makes information about research and best practices in child development available to parents of eligible children, providers and the general public Information is shared through direct communication via our state, regional and community-based partners, addressing a family’s specific need or through general communication across communities, which may include newsletters, email blasts and/or dissemination of online resources.

Through the Race to the Top Early Learning Challenge Grant, EEC, in partnership with the WGBH Educational Foundation, created Resources for Early Learning, a media-rich site of educational resources to help support adults who teach, nurture, and care for children from birth to age five. These resources were developed by a team of early childhood experts, educators, and parents. Resources for Early Learning contains activities for parents and early educators to engage in with young children, parenting education videos, WGBH-themed videos and interactive games for young children that focus on language and science concepts, curricula for early educators, and professional development for early educators. For more information visit the Resources for Early Learning website.

Through the Race to the Top Early Learning Challenge Grant, EEC, in partnership with the Boston Children’s Museum, created resources for educators and families around four core areas, STEM, Brain Building, School Readiness and Literacy, translated in many languages. For more information, please visit: http://www.bostonchildrensmuseum.org/learning-resources/race-to-the-top

Various research and best practice resources are also available on EEC's website, including:

• Parent and Family Support Resources: http://www.mass.gov/edu/birth-grade-12/early-education-and-care/parent-and-family-support/parent-and-family-support-publications/

• Infant Toddler and Preschool Guides: http://www.mass.gov/edu/birth-grade-12/early-education-and-care/parent-and-family-support/

• Brain Building in Progress website: http://brainbuildinginprogress.org/the-science

• Choosing Child Care Tips: http://www.mass.gov/edu/docs/eec/programs-licensing/choosing-childcare-spa.pdf

• Early Learning Standards, including Massachusetts Standards for Preschool and Kindergarten in the Domains of Social and Emotional Learning, and Approaches to Play and Learning (available in multiple languages): http://www.mass.gov/edu/birth-grade-12/early-education-and-care/curriculum-and-learning/pre-school-and-kindergarten-standards.html

• Guidelines, including the Massachusetts Early Learning Guidelines for Infants and Toddlers : http://www.eec.state.ma.us/docs1/curriculum/20110519\_infant\_toddler\_early\_learning\_guidelines.pdf

1. Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.) EEC collaborates with the Department of Elementary and Secondary Education (ESE) and the Department of Public Health (DPH) to ensure information, training and resources on social and emotional behavior is provided to the entire mixed-delivery system, which includes those working in family child care homes, center-based programs, and those that are exempt from licensing. In partnership with ESE, the Commonwealth has developed the Massachusetts Standards for Preschool and Kindergarten in the Domains of Social and Emotional Learning, and Approaches to Play and Learning (available in multiple languages): http://www.mass.gov/edu/birth-grade-12/early-education-and-care/curriculum-and-learning/pre-school-and-kindergarten-standards.html. Training modules on the standards for both educators and families are in development and will be offered across Massachusetts in Spring 2016.
2. Describe who you partner with to make information about research and best practices in child development available EEC’s partners include CCRRs, CFCE grantees, MASS211, EPS grantees, United Way, Head Start, and contracted providers, as well as state partners like the Department of Children and Families, the Department of Public Health, and the Department of Transitional Assistance.

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

1. 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:
	1. Parents EEC developed a friendly URL for families, providers and the general public to obtain information on Early Childhood Mental Health (ECMH): www.mass.gov/eec/ecmh. This URL describes the scope of ECMH services available, as well as a listing of the current ECMH grantees and resources.
	2. Providers EEC developed a friendly URL for families, providers and the general public to obtain information on Early Childhood Mental Health (ECMH): www.mass.gov/eec/ecmh. This URL describes the scope of ECMH services available, as well as a listing of the current ECMH grantees and resources.
	3. General public EEC developed a friendly URL for families, providers and the general public to obtain information on Early Childhood Mental Health (ECMH): www.mass.gov/eec/ecmh. This URL describes the scope of ECMH services available, as well as a listing of the current ECMH grantees and resources.
2. Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available As noted above, Massachusetts has entered into contracts with ECMH partners to support early childhood mental health services. In addition, EEC has partnered with the Department of Public Health to review and assess policies related to suspensions and expulsions in early education and care settings.
3. Does the State have a written policy regarding preventing expulsion of:

### **X** Preschool-aged children (from birth to five) in early childhood programs receiving child care assistance?

### **X** 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 If a program chooses to suspend or terminate a child for any reason the program must provide written documentation to the parents of the specific reasons for the proposed suspension or termination of the child, and the circumstances under which the child may return, if any. In addition, all licensed center-based group and school age child care programs are required to have written policies in place to avoid terminations and expulsions, which must include must include: (1) providing an opportunity to meet with parents to discuss options other than suspension or termination; (2) offering referrals to parents for evaluation, diagnostic or therapeutic services; (3) pursuing options for supportive services to the program, including consultation and educator training; and (4) developing a plan for behavioral intervention at home and in the program. Massachusetts is currently assessing the need to incorporate the same or similar requirements to license-exempt programs serving subsidized children.

### No.

### **X** School-age children from programs receiving child care assistance?

### **X** 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 If a program chooses to suspend or terminate a child for any reason the program must provide written documentation to the parents of the specific reasons for the proposed suspension or termination of the child, and the circumstances under which the child may return, if any. In addition, all licensed center-based group and school age child care programs are required to have written policies in place to avoid terminations and expulsions, which must include must include: (1) providing an opportunity to meet with parents to discuss options other than suspension or termination; (2) offering referrals to parents for evaluation, diagnostic or therapeutic services; (3) pursuing options for supportive services to the program, including consultation and educator training; and (4) developing a plan for behavioral intervention at home and in the program. Massachusetts is currently assessing the need to incorporate the same or similar requirements to license-exempt programs serving subsidized children.

### No.

### 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.

* **X** Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency policy citation(s) and: 606 CMR 7.04(17)(h) - Written Plans for Referral Services; 606 CMR 7.06(5) - Documenting and Reporting Special Problems or Significant Developments; and 603 CMR 28.03(1)(d) - Pre-School Screening Requirements.

a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened All licensed providers are required to complete progress reports on children participating in the child care program. Progress reports for infants and children with documented special needs must be completed every three months, progress reports for toddlers and pre-school aged children are required every six months, and progress reports for school age children must be completed at least annually at the mid-point of the program year.

Notwithstanding the progress report timelines, all licensed providers must document any special problems and significant developments and bring such issues to the parent’s attention as soon as they arise. In such instances, the licensee must offer information regarding health and educational resources for the child and family; and obtain parental consent prior to contacting any outside social, educational or health care resource or service provider on behalf of an individual child.

In addition to EEC's Licensing Regulations, the [Massachusetts Special Education laws](http://www.doe.mass.edu/lawsregs/603cmr28.html) articulate the responsibilities of the Local Education Agencies regarding the provision of Preschool Screenings as follows**:** Each school district shall conduct screening for three and four year olds and for all children who are of age to enter kindergarten. Such screening shall be designed to review a child's development and to assist in identification of those children who should be referred for an evaluation to determine eligibility for special education services.

The Massachusetts Quality and Improvement Rating System (QRIS) requires all Level 3 or higher participants, which includes all recipients of the Massachusetts Universal Pre-Kindergarten (UPK) grant, to use screening tools, progress reports, formative assessments and information gathered through observation to set goals for individual children across all developmental domains.

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 Any early education and care provider may make a referral to the state's Department of Public Health's Early Intervention Programs to obtain an evaluation with the child and family to determine eligibility. If such direct contacts are made by the program, the licensee must maintain a written record of such contacts and the results of such contacts.

Further, the child care licensing regulations require all licensed group and school age programs to develop and implement written plans for referring parents to appropriate social, mental health, educational and medical services, including but not limited to dental check-up, vision or hearing screening for their child, should the program staff feel that an assessment for such additional services would benefit the child. The written plan shall include, but not be limited to the following:

* 1. staff responsibilities for informing the licensee of their concern;
	2. procedures for observing and recording the child’s behavior and reviewing the child’s record prior to making a referral;
	3. procedures for meeting with parents to notify them of the program’s concern;
	4. a current list of referral resources in the community for children in need of social, mental health, educational or medical services. This list shall include the contact person for St. 1972 c.766 and Early Intervention Program referral;
	5. written notice to the appropriate administrator of special education that the licensee is serving a child with a disability, if the child is 2 years and 9 months old or older;
	6. written notice to the administrator of the DPH Early Intervention program if the licensee is serving a child with a disability who is younger than two years and nine months old.

Infants and toddlers in EEC licensed programs are expected to be referred to Early Intervention if they are:

* + - not reaching age-appropriate milestones in one or more areas;
		- diagnosed with a physical, emotional, or cognitive condition that may result in a developmental delay; or
		- at risk for developmental delay(s) due to various biological and/or environmental factors.

Families or child care providers may also utilize the preschool screenings as offered through the school districts to obtain developmental screenings for children who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays.

In addition to the aforementioned referrals and screenings, the state's Coordinated Family and Community Engagement (CFCE) grantees work directly with interested parents and families in community-based settings to offer developmental screenings for young children. CFCE programs offer the Ages and Stages Questionnaire (ASQ) and Ages and Stages Questionnaire Social Emotional (ASQ-SE) developmental screening tools to parents who consent to have their child screened. Depending on the outcome of the screening, CFCE programs can make referrals to Early Intervention, the special education department in the local school district, or to other appropriate services. Parents and families who are interested having their child screened with the ASQ/ASQ-SE are able to be connected to their local CFCE program via the Mass 211 hotline. The 89 CFCE programs across the Commonwealth perform targeted outreach and information about the ASQ to parents and families in their designated communities.

* 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 Status – Describe the State/Territory’s status toward completion implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

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

### How does the State/Territory define substantiated parental complaint Massachusetts defines substantiated complaint as any regulatory non-compliance that is related to the nature of the complaint. If an investigation into a parental complaint results in non-compliances that are unrelated to the allegation, the non-compliances would not be considered a substantiated parental complaint.

### 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) Through its statewide computerized tracking system, EEC logs and tracks all complaints, incidents and other information that it receives about child care providers from a variety of sources, such as parents, concerned individuals, other state agencies and providers themselves. Substantiated parental complaints are not tracked by any separate means. Records related to substantiated parental complaints are maintained electronically for an indefinite period of time. All electronic records may be reproduced in hard copy, as needed. Hard copies of records are generally kept in file, by provider, at EEC for a minimum of 5 years, then sent to archive for 21 years.

* 1. How does the State/Territory make substantiated parental complaints available to the public on request Upon request, the Department may release reports from complaint investigations, as such records are considered public records. See M.G.L. c. 66, §10. Prior to releasing any reports to the public, EEC staff review the records to ensure any personally identifiable, confidential or statutorily protected information/data is redacted (i.e., identity of complainants, references to supported abuse or neglect allegations, social security numbers, etc.). See M.G.L. c. 4, §7, cl. 26 (c), (e) and (f), M.G.L. c. 66A and M.G.L. c. 93H.
	2. Describe how the State/Territory defines and maintains complaints from others about providers As noted in Question 2.2.9(b) above, EEC electronically logs and tracks all complaints, incidents and other information that it receives about child care providers from a variety of sources, such as parents, concerned individuals, other state agencies and providers themselves. This system allows appropriate EEC staff access to information about child care programs, including all open and completed complaints and investigations, required self-reports of serious injuries and incidents occurring at a program and/or other information alleging a concern that may affect the health, safety or well-being of children in care.

### 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.

[x]  Application in other languages (application document, brochures, provider notices)

[x]  Informational materials in non-English languages

[x]  Training and technical assistance in non-English languages

[ ]  Website in non-English languages

[x]  Lead Agency accepts applications at local community-based locations

[x]  Bilingual caseworkers or translators available

[x]  Bilingual outreach workers

[x]  Partnerships with community-based organizations

[ ]  Other

[ ]  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/Territory has the ability to have translation/interpretation in all primary and secondary languages Spanish, Chinese, Haitian Creole, and Portuguese are primary languages. Subject to appropriate, Massachusetts has dedicated for the translation of documents into these primary languages as well as other common languages in the Commonwealth, including Arabic, French, Khmer, Nepali, Russian, Somali, and Vietnamese.

### In addition, through the work of the Department's ”Initiative to Support Young Dual Language Learners,” a series of state family focus groups were conducted in partnerships with multiple stakeholders including the Coordinated Family & Community Engagement (CFCE) grantees. This series was offered as a way to communicate with families of young dual language learners about the importance of their role in supporting their children’s language development and school readiness. In addition, families learned about EEC’s newly adopted Early English Language Development Standards to support dual language learners. In support of this effort, a series of family brochures and resources were translated in six different languages including: Spanish, Arabic, Russian, Portuguese, Creole, and Chinese.

### Finally, through the Race to the Top Early Learning Challenge Grant, EEC, in partnership with the Boston Children’s Museum, created resources for educators and families around four core areas, STEM, Brain Building, School Readiness and Literacy, translated into many languages. http://www.bostonchildrensmuseum.org/learning-resources/race-to-the-top.

## 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.

### Describe the status of State/Territory’s consumer education website.

### Fully implemented and meeting all Federal requirements outlined above. Provide the link to the website       and describe how the consumer education website meets the requirements to:

1. 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
2. Include a description of health and safety requirements and licensing or regulatory requirements for child care providers
3. Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers
4. 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
5. 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, differentiating between violations based on risk to children, and easy to locate and navigate \_\_\_\_\_
* **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) 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.

### Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, in progress, partially completed, substantially completed, other) Partially completed.

### Implementation progress to date – Identify any requirement(s) partially or substantially implemented EEC’s website already includes information related to the regulatory and policy requirements for both its licensing and background record check units. In addition, the existing website contains a basic search function for licensed early education and care providers throughout the Commonwealth, which includes information related to each provider’s licensing status.

### Unmet Requirement(s) – Identify the requirement(s) that is not fully implemented EEC’s existing website does not have report on the aggregate number of deaths, significant injuries, or substantiated allegations of child abuse, nor does the existing website contain a mechanism for the general public to view results of monitoring and inspection visits.

* Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider. To meet the requirements of Reauthorization, EEC will require information technology enhancements to link licensing information with the website.

	+ Projected start date for each activity March 1, 2016
	+ Projected end date for each activity September 30, 2016
	+ Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A
* Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Description of health and safety requirements and licensing or regulatory requirements for child care providers. To meet the requirements of Reauthorization, EEC will review current website content to ensure that it is consumer friendly.

	+ Projected start date for each activity March 1, 2016
	+ Projected end date for each activity September 30, 2016
	+ Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A
* Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. To meet the requirements of Reauthorization, EEC needs to amend its existing regulations to identify offenses categorized as mandatory disqualifications. In addition, the Department will review current website content to ensure that it is consumer friendly.

	+ Projected start date for each activity March 1, 2016
	+ Projected end date for each activity September 30, 2016
	+ Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A
* Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) 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. To meet the requirements of Reauthorization, EEC will require information technology enhancements to link licensing information with the website.

	+ Projected start date for each activity March 1, 2016
	+ Projected end date for each activity September 30, 2016
	+ Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A
* Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Design website in consumer-friendly format, 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, differentiating between violations based on risk to children, and easy to locate and navigate. To meet the requirements of Reauthorization, EEC will require information technology enhancements to link licensing information with the website.

	+ Projected start date for each activity March 1, 2016
	+ Projected end date for each activity November 19, 2017
	+ Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity N/A

# Provide Stable Child Care Financial Assistance to Families

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

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

## 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))

### Eligibility Criteria Based upon Child’s Age

a) The CCDF program serves children from 0 (weeks/months/years) to 12 years (through age 12).

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

[x]  Yes, and the upper age is 16 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity – Section 1A of Chapter 15D of the Massachusetts General Laws defines “child with special needs” as “a child who, because of temporary or permanent disabilities arising from intellectual, sensory, emotional, physical, or environmental factors, or other specific learning disabilities, is or would be unable to progress effectively in a regular school program.” In order to establish the physical, emotional, or mental disability of a child, the applicant family must submit a completed “Verification of Disability/Special Need for Children” form. The form must be signed by a licensed health care professional, an Early Intervention Director, or a local education agency special education director. In addition, the professional completing the form must identify the nature of the special need or disability, explain the amount of time child needed to accommodate the special need or disability, and explain how the child will benefit by participating in an early education and care program.

[ ]  No.

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

[ ]  Yes, and the upper age is       (may not equal or exceed age 19)

[x]  No.

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

1. residing with – For purposes of determining eligibility for subsidized child care, a family is defined as one of the following: A parent and his/her dependent child(ren) and any dependent grandparents who reside in the same household; or a teen parent and his or her children who reside in the same household.
2. in loco parentis – A person who lives with, supervises and cares for a child or children, whose parents do not live in the home such as a foster parent, legal guardian (temporary or permanent), or designated caregiver, in accordance with M.G.L. c. 201F.

### Eligibility Criteria Based on Reason for Care

### 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 EEC regulations define working in terms of a “service need” equal to the amount of time child care is required due to the parent’s participation in an approved employment related activity. Furthermore, EEC regulations and policy establish the following approved employment related activities, which qualify as “working” for purposes of determining eligibility for subsidized child care: paid employment, including self-employment; seeking employment (i.e., 3 month job search\*); actively deployed military service; or retirement, if applicant is age 65 or older.

*\* Regulatory change will be required to change job search from 8 weeks with an addition 4 weeks based on exigent circumstances to the 3 month requirement set forth in Reauthorization.*

* attending job training EEC regulations define attending job training in terms of a “service need” equal to the amount of time child care is required due to the parent’s participation in an approved training activity. Furthermore, EEC regulations and policy establish the following activities, which qualify as training for purposes of determining eligibility for subsidized child care: vocational training program, not including graduate, medical or law; or English language training program for people whose primary language is not English (i.e., ESOL).
* attending education EEC regulations define attending education in terms of a “service need” equal to the amount of time child care is required due to the parent’s participation in an approved educational activity. Furthermore, EEC regulations and policy establish the following activities, which qualify as education for purposes of determining eligibility for subsidized child care: full-time high school program; high school equivalency program; or accredited college/university leading to an associate’s or bachelor’s degree.
1. 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)?

[x]  Yes.

[ ]  No. If no, describe additional requirements

1. Does the Lead Agency provide child care to children in protective services?

[x]  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 – Families who have active protective needs documented in a supported report of abuse or neglect within the previous 12 months or when there is a determination of need to begin or continue supportive child care at a Department of Children and Families Progress Supervisory Review, will be deemed to be in need of protective services. Additionally, children may be deemed at risk of needing protective services in special circumstances, wherein families are unable to provide child care for any portion of a 24 hour day due to foster care, domestic violence, homelessness, a physical, mental, emotional or medical condition, or participation in a drug treatment or drug rehabilitation program.

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))

[x]  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

### 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 – For purposes of eligibility for subsidized early education and care, income includes the following: wages/salary; self-employment income; social security benefits; interest from dividends; income from estates or trusts; rental income; royalties; pensions and annuities; unemployment compensation; alimony or child support; and public assistance payments.

### 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 | N/A | N/A | N/A | N/A | N/A | N/A |
| 2 | $6,016 | $5,114 | $3,008 | 50% | N/A | N/A |
| 3 | $7,432 | $6,317 | $3,716 | 50% | N/A | N/A |
| 4 | $8,848 | $7,521 | $4,424 | 50% | N/A | N/A |
| 5 | $10,263 | $8,724 | $5,132 | 50% | N/A | N/A |

**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](file:///C%3A/Users/dawn.ramsburg/AppData/Local/Microsoft/Windows/Temporary%20Internet%20Files/Content.Outlook/736F2SJA/poverty%20guidelines) are available at <http://aspe.hhs.gov/poverty/index.cfm> .

c) SMI Source and year 2015

d) These eligibility limits in column (c) became or will become effective on 10/1/2015

e) Provide the link to the income eligibility limits http://www.mass.gov/edu/birth-grade-12/early-education-and-care/financial-assistance/financial-assistance-for-families/

### **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))

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

* **X** Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency’s policy citation(s) and describe the policies and procedures for graduated phase-out The Massachusetts child care subsidy regulations and policies allow families whose income has increased at the time of reassessment to remain financially eligible provided that the total household income does not exceed 85% of the SMI.
* Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.
* Overall Target Completion Date (no later than September 30, 2016)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully implemented

* Tasks/Activities – What steps will you take to implement the 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

### **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.

* **X** Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency’s policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement Families receiving subsidized child care in Massachusetts are only required to report substantial changes in income that occur after an eligibility assessment is conducted. Massachusetts defines a substantial change in income as a 20% or more increase to the total household income reported on the most recent child care subsidy application. For more information on this policy, please see Section 2.8 of the Financial Assistance Policy Guide. In addition, Massachusetts requires tax returns and tax transcripts to determine income eligibility for all self-employed, independent contractors or cash-only earners. As the Commonwealth moves forward in implementing all of the requirements associated with the CCDBG Reauthorization, interim self-reporting requirements and income verifications are being discussed. Any changes to these requirements, if any, would require regulatory change.
* 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 Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
* Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

### Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

* Applicant identity. Describe Massachusetts requires applicants to submit an original, valid and unexpired photo identification, such as driver’s license, passport or school identification card.
* Applicant’s relationship to the child. Describe Massachusetts requires applicants to submit documentation of each dependent child, under 18, or under 24 if child is a full-time student to verify relationship. Documentation includes birth certificates, hospital birth records, court records or other relevant documents, as defined in policy.
* Child’s information for determining eligibility (e.g., identity, age, etc.). Describe Massachusetts requires applicants to submit documentation of citizenship or immigration status of each child seeking financial assistance, including birth certificates, passports, or report of birth abroad. In addition, applicants must verify relationship and age of child, as discussed above. For families declaring special needs or disability of child, which allows for full-time child care eligibility for applicants that only demonstrate a part-time need, applicants must complete the special needs/disability verification form.
* Work. Describe For employed applicants, Massachusetts requires applicants to submit documentation verifying employment may consist of recent pay stubs or completed self-employment packets and tax returns for self-employed or independent contractors.
* Job training or Educational program. Describe For applicants participating in training or educational programs, Massachusetts requires applicants to submit documentation verifying the program’s schedule (hours, days/week and/or credits) are required, including a transcript or written statement from the program.
* Family income. Describe For earned income, Massachusetts requires applicants to submit to submit 4 out of the most recent 6 weekly pay stubs. If self-employed or an independent contractor, applicants must submit employment verification forms, including report of self-employment earnings, and copies of most recent federal tax returns. For unearned income, copies of award letters (i.e., social security benefits, unemployment compensation, worker’s compensation, retirement benefits, etc.) or copies of court orders, child support enforcement records or other agreements (i.e., alimony or child support). For in-kind earnings, self -declaration or other informal agreement may be submitted.
* Household composition. Describe Massachusetts requires applicants to report all household members and attest to report veracity, under the pains and penalties of perjury. If subsidy manager has reason to believe applicants have provided incomplete, false, and/or misleading information, additional documentation may be requested to document the residence of non-reported family members, such as copies of any bills, preferably utility bills, dated within 45 days of the eligibility assessment. Concerns of fraud are reported to the Bureau of Special Investigations within the State Auditor’s Office.
* Applicant residence. Describe Massachusetts requires applicants to submit documentation of residency annually or at each reassessment, whichever comes first. Acceptable proofs of residency must show that the applicant’s current primary address is located within the Commonwealth. Post Office Box addresses and 911 emergency residence verifications will not be accepted as proof of residency. Examples of acceptable documentation to verify Massachusetts residency include: (a) utility bills issued within the most recent 45 days; (b) property tax bills; (c) individual income tax returns for the most recent year; (d) mortgage documents or home owner insurance documents; (e) vehicle registration cards; (f) residential rental or lease agreements; or (g) letters from shelter programs confirming residence in a Massachusetts shelter program.
* Other. Describe For homeless contracts, applicants must obtain referral from the Department of Housing and Community Development (DHCD), which verifies homelessness and participation in at least 30 hours of self-sufficiency activities, such as employment, job training, counseling and/or housing search, or from the Department of Children and Families (DCF), which verifies homelessness and protective service need based on family’s involvement with either domestic violence and/or substance abuse issues. For supportive contracts, applicants must obtain an authorization from DCF, which verifies open protective services cases based on supported allegations of abuse or neglect. For teen parent contracts, in addition to the requirements above, applicants must verify participation in high school or GED program or receipt of high school diploma or GED and participation in any approved work, education or training program.

**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>).

### 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

[x]  Track and monitor the eligibility determination process

[ ]  Other. Describe

[ ]  None

### 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 Department of Transitional Assistance (DTA)

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

* "appropriate child care" DTA does not have specific definitions for the terms listed in section 3.1.9. However, DTA Field Operations Memo 2005-1A states the following: Each child-care provider, licensed by OCCS [which is the predecessor agency to EEC], is generally considered an appropriate resource for recipients who need child care. The Child Care Resource and Referral (CCRR) agency staff will assist TANF recipients in making informed decisions regarding the child-care search by assessing each family’s needs and reviewing available child-care options. The CCRR makes referrals only to appropriate, licensed child-care providers and discusses licensed-exempt options, such as in-home and relative care. If the recipient refuses all referrals made by the CCRR, the recipient shall be deemed to have been offered appropriate and available child care, unless the recipient can provide a reasonable explanation to OCCS [EEC] why the child care should be considered unavailable to or inappropriate for the particular family.
1. "reasonable distance" See above
2. "unsuitability of informal child care" See above
* "affordable child care arrangements" See above

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

[x]  In writing

[x]  Verbally

[ ]  Other. Describe

[ ]  List the citation to this TANF policy DTA Field Operations Memo 2005-1A

### 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.

* **X** 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.

## 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))

### 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” Section 1A of Chapter 15D of the Massachusetts General Laws defines “child with special needs” as “a child who, because of temporary or permanent disabilities arising from intellectual, sensory, emotional, physical, or environmental factors, or other specific learning disabilities, is or would be unable to progress effectively in a regular school program” and describe how services are prioritized On a case by case basis, children with special needs may be deemed as having a protective services need. As such, families may enter care at 85% of the SMI and remain in care up to 100% of the SMI. Additionally, children with special needs are eligible for full time child care placements; provided that his/her parent(s) establish a part time service need.

### Provide definition of “Families with very low incomes” Massachusetts defines families with very low incomes as those families who are at or below 50% of the State Median Income (SMI) and describe how services are prioritized To ensure child care subsidies are prioritized for families with very low incomes, Massachusetts has implemented a tiered eligibility system that limits entry to the subsidy system for families at or below 50% of the SMI. In addition, the Commonwealth prioritizes access to child care financial assistance for specific vulnerable low income populations through its system of statewide contracts, which aim to increase access for families experiencing homelessness, children of teen parents and children of families receiving protective services through the Department of Children and Families. In addition parent fees may be waived, on a case-by-case basis, for families receiving, or at risk of receiving, protective services, in accordance with 45 CFR 98.20(a)(3)(ii)(A).

### 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) Families receiving TANF cash assistance and participating in the Employment Services Program through the Department of Transitional Assistance, have immediate access to child care subsidies. The Commonwealth also waives co-payment requirements for TANF recipients, based on the fact that all of these families are at or below the federal poverty level.

### Improving Access for Homeless Children and Families.

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

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

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

* **X** Fully implemented and meeting all Federal requirements outlined above. Describe the following:

### 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 To ensure immediate access to children experiencing homelessness in the Commonwealth, EEC has entered into direct service contracts with 27 early education and care providers to serve 685 children. To access these slots, either the shelter provider or the contracted child care provider must contact the Department of Housing and Community Development or the Department of Children and Families to obtain a homeless child care referral. In State Fiscal Year 2016, EEC launched an initiative to identify additional homeless families through vouchers that might not be reached through the existing homeless contracts (e.g., direct outreach to substance abuse shelters working with families that are impacted by the opioid crisis that are funded/overseen by the Department of public health).With respect to grace periods to comply with immunization and other health safety requirements, Massachusetts child care licensing policy recognizes the fact that homeless children may have difficulty obtaining medical records at the time of admission into a child care program because of the stresses caused by issues affecting these priority populations. Accordingly, homeless families may be granted up to six (6) months from the date of their child's admission into a child care program to obtain the child's medical records.

* 1. Procedures to conduct outreach to homeless families to improve access to child care services As noted in Question 3.2.2(a), Massachusetts has entered into contracts with child care programs to provide direct service to homeless families. In addition, EEC has collaborated and coordinated with Horizons for Homeless in the development of the CCDF State Plan and will continue to seek to improve opportunities to provide increased access to high quality child care programs for homeless families.
	2. 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 With respect to grace periods to comply with immunization and other health safety requirements, Massachusetts child care licensing policy recognizes the fact that children involved with the Department of Children and Families (DCF), including foster children, may have difficulty obtaining medical records at the time of admission into a child care program because of the stresses caused by issues affecting this priority population. Accordingly, DCF involved families may be granted up to six (6) months from the date of their child's admission into a child care program to obtain the child's medical records.
* 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 Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
* Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

## Protection for Working Parents

### **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. 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) September 30, 2016
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Substantially implemented
* Implementation progress to date – Identify any requirement(s) partially or substantially implemented Current child care subsidy regulations and policies allow for authorization periods for up to 12 months with some exceptions that will require regulatory change.

### Unmet requirement - Identify the requirement(s) not fully implemented Regulations related to child care opportunities for children involved with the Commonwealth’s child welfare agency, the Department of Children and Families, are currently limited to 6 month intervals. In addition, other aspects of the existing child care subsidy regulations and policies will need to be amended, including the requirement for recipients engaged in educational programs to demonstrate an alternative service need during semester breaks, limitations for recipients on approved maternity or paternity leave from employment, and policies requiring recipients to remove children from subsidized child care during temporary medical leave.

### Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Administrative rule changes will be required to comply with the 12 month authorization requirements set forth in the CCDBG Reauthorization.

### Projected start date for each activity March 1, 2016

* + Projected end date for each activity September 30, 2016
	+ Agency – Who is responsible for complete implementation of this activity The Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity The Department of Children and Families, the Department of Transitional Assistance, and the Department of Housing and Community Development.

### **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
* **X** No, the State/Territory does not allow this option.

### **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. List the Lead Agency’s policy citation(s) and describe the policies and procedures for not unduly disrupting employment Documentation of a family’s income, service need, family size, and residence must be updated for each reassessment. Reassessment should occur by phone, mail, e-mail, or fax, if possible, to facilitate access for families. *See* EEC Financial Assistance Policy Guide at § 10.1. This requirement is also expressly included in the terms of the CCRR contract, as a method for reducing the burden on families receiving subsidy through the voucher system. For families funded through the contract system, eligibility assessments are completed, generally, by the early education and care program (or umbrella agency) who is providing the services to the children in the household.
* 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 Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
* Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

## 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.

### 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 [ ] . 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 “Entry” Income Level** | **(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 “Entry” Income Level** | **(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 | N/A | N/A | N/A | N/A | N/A | N/A |
| 2 | $0 | $0 | 0% | $3,008 | $497.95 | 16.5% |
| 3 | $0 | $0 | 0% | $3,716 | $497.95 | 13.4% |
| 4 | $0 | $0 | 0% | $4,424 | $476.30 | 10.7% |
| 5 | $0 | $0 | 0% | $5,132 | $497.95 | 9.7% |

### What is the effective date of the sliding fee scale(s)? July 1, 2001

1. Provide the link to the sliding fee scale http://www.mass.gov/edu/birth-grade-12/early-education-and-care/financial-assistance/financial-assistance-for-families/

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

[x]  Fee is a dollar amount and

[ ]  Fee is per child with the same fee for each child

[x]  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

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

[x]  Yes, and describe those additional factors using the checkboxes below.

 [x]  Number of hours the child is in care

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

[ ]  Other. Describe other factors

[ ]  No.

### 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 $      .

[x]  No, the Lead Agency does not waive family contributions/co-payments.

### 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

[x]  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 Providers may not collect fees from parents receiving EEC financial assistance to supplement their approved EEC reimbursement daily rate.

[x]  Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider. Describe Providers shall not charge parents, for whom they are receiving EEC financial assistance funding, any additional "registration," application, field trip, special activity, food for special events, or materials fees for participation in their program, or surcharges for late payments of parent fees. Additional fees may be charged for services not offered to every child as part of the regular early education or out-of-school time program, such as transportation, when not paid by EEC. Only providers who have signed a transportation addendum as part of their provider agreement or who hold a transportation contract with EEC are allowed to provide transportation with EEC funding. At their discretion, parents may enter into agreements with vendors for services that are made available through the program, and parents will be expected to pay for such optional services. Providers may charge parents for the care of children who remain in care beyond program hours due to late pick-up by parents, and for bank fees resulting from checks deposited against overdrawn accounts (e.g., bounced checks).

[ ]  Other. Describe

# 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))

## 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.

### 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)) The Parent Choice regulations and policies of EEC's child care subsidy program, which allow a parent to transfer his/her child to another program provided that the parent gives the existing provider at least two weeks' notice of the change. *See* 606 CMR 10.04(2)(c) and §§ 9.1 and 9.4 of the EEC Financial Assistance Policy Guide. It is the responsibility of the subsidy administrators -- the Child Care Resource and Referral agencies or Contract Providers -- to advise a parent of his/her right to change providers.

### 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.

* **X** 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
* **X** Consumer education materials on choosing child care
* **X** Referral to child care resource and referral agencies
* **X** Co-located resource and referral in eligibility offices
* **X** Verbal communication at the time of application
* **X** Community outreach, workshops or other in-person activities
* Other. Describe

### Child Care Services Available through Grants or Contracts

1. 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.

[x]  Yes. If yes, **describe:**

* the type(s) of child care services available through grants or contracts EEC administers multiple contracts with child care programs to serve low-income and priority population families. All contracted child care providers are authorized to make eligibility determinations for subsidized child care. Contracted providers use the centralized waiting list for EEC financial assistance to identify eligible families, coordinate continuity of care for children whose “status” is about to change (e.g., from an infant slot to a toddler slot as the child ages, etc.), and refer families to other services they may need. In addition, contracted providers refer families to other sources of information about early education and care programs and services.

Currently, EEC has contracts to provide the following early education and care services to families in Massachusetts:

**Child Care for Low-Income Families:** EEC contracts with child care providers throughout the Commonwealth for child care slots for the children of low-income families (Income Eligible Child Care Financial Assistance contracts).

**Supportive Child Care:** EEC contracts with programs that provide supportive child care to families who have active protective services cases with the Department of Children and Families (DCF). The purpose of the supportive child care program is to facilitate children’s placement in quality child care settings and to support the work of DCF through the purchase of early education and out-of-school time care that is supplemented by case management, comprehensive social services, and transportation services.

**Teen Parent Child Care Services:** EEC contracts with programs that provide early education and care services for the children of teen parents. Teen parents need child care services that provide education and developmental activities for children and allow teens to develop their parenting skills, while attending school or developing career skills. Teen parents also need social supports designed to encourage them to stay in school, decrease the likelihood of repeat teen pregnancies and lower the risk that they or their children will be abused or neglected. In addition to child care, teen parent child care services include transportation, mentoring, parenting skills classes, counseling, and support to help teens finish high school or get their GED.

**Homeless Child Care:** EEC contracts with programs that provide early education and care services for the children of homeless families. The goal of this program is to provide homeless children with a stable, nurturing and stimulating environment that meets their individual developmental, behavioral and emotional needs, while at the same time offering the children’s parents counseling services to inform them about community support services and public assistance benefits they may access while seeking housing and employment.

* 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.) EEC contracts with center-based child care programs, including school age programs, and with family child care systems for family child care services at affiliated licensed family child care homes.
* the process for accessing grants or contracts Contracts for direct child care services are awarded through a competitive procurement process.
* the range of providers available through grants or contracts EEC contracts with center-based child care programs, including school age programs, and with family child care systems for family child care.
* how rates for contracted slots are set through grants and contracts Rates for child care subsidies are set based on geographic region taking into account the age of children (i.e., infant, toddler, pre-school, and school age) and child care settings (i.e., center-based versus family child care). Through EEC’s Priority Population contracts for supportive child care, teen parent child care, and homeless child care, contracted providers receive an additional $17.22 per day for support services. “Support services” include required case management/social services as well as transportation costs.
* how the State/Territory determines which entities to contract with for increasing supply and/or improving quality Contracts for direct child care services are awarded through a competitive procurement process.
* if contracts are offered statewide and/or locally Statewide

[ ]  No. If no, skip to 4.1.4.

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

[x]  Increase the supply of specific types of care with grants or contracts for:

[ ]  Programs to serve children with disabilities

[x]  Programs to serve infants and toddlers

[x]  Programs to serve school-age children

[ ]  Programs to serve children needing non-traditional hour care

[x]  Programs to serve homeless children

[x]  Programs to serve children in underserved areas

[ ]  Programs that serve children with diverse linguistic or cultural backgrounds

[x]  Programs that serve specific geographic areas

[x] Urban

[x] Rural

[ ]  Other. Describe

[x]  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

[x]  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

[x]  Programs to serve infants and toddlers

[x]  Programs to serve school-age children

[ ]  Programs to serve children needing non-traditional hour care

[x]  Programs to serve homeless children

[x]  Programs to serve children in underserved areas

[ ]  Programs that serve children with diverse linguistic or cultural backgrounds

[x]  Programs that serve specific geographic areas

[x] Urban

[x] Rural

[ ]  Other. Describe

### 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 EEC’s regulations require that all licensed child care programs provide parents with access to their children whenever children are in care. See 606 CMR 7.08(4). Specifically, licensed programs must permit and encourage unannounced visits by parents to the program and to their child’s room while their child is present. To ensure that parents are aware of this requirement, EEC requires that providers have a written policy regarding parents’ unlimited access to their children and that providers communicate this policy to parents at enrollment through the parent handbook.

### 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?

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

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

[x]  Restricted based on provider meeting a minimum age requirement. Describe

[x]  Restricted based on hours of care (certain number of hours, non-traditional work hours). Describe

[x]  Restricted to care by relatives. Describe

[ ]  Restricted to care for children with special needs or medical condition. Describe

[x]  Restricted to in-home providers that meet some basic health and safety requirements. Describe

[ ]  Other. Describe

[ ]  No

## 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.

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.

### 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?

* **X** MRS
* Alternative Methodology. Describe
* Both. Describe
* Other. Describe

### 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 prior to developing and conducting the MRS or alternative methodology. EEC consulted with the Child Care Resource and Referral Agencies, a representative group of child care providers, and the Service Employees International Union (SEIU) Local 509 to develop the 2015 Market Rate Study. These groups were very involved in the development of the survey questions to clarify intent and reduce response errors and assisted with ensure that providers were aware of the survey and responded in a timely manner.

### 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 Market Rate Survey was completed using a statistically representative random sample of programs stratified by program type and EEC region for the market rate survey. The final sample plan included outreach to 4,569 family child care homes and center-based programs; 2,663 of which were family child care homes, and 1,906 were center-based programs. EEC provided the research team with information on each of the state’s licensed child care programs including program name, address, telephone number, email address, program identification number, program type, license status, and EEC rate region assignment. From this information, the research team generated a list of randomly selected programs to be included in the final outreach sample for the survey. The randomly selected providers were pulled from the full population of licensed child care programs at the time of the survey (March 2015) which included 6,691 family child care providers and 2,798 center-based providers. The sample was pulled to meet a 95% confidence level. Additionally, to gain a more accurate representation of the true market rate of child care in each region, a 10% oversample of private pay only programs was randomly selected from designated “high priority” towns.

### 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) Massachusetts constructed the survey sample to capture a representative sample of all programs within each of the six designated geographic regions of the Commonwealth. Survey results were presented to compare rates within each of the six regions.

b) Type of provider The Market Rate Survey included questions that catered to each type of program: center-based programs, out-of-school-time programs and family child care providers to ensure complete and comparable responses by all groups.

c) Age of child The Market Rate Survey collected rate information by each age group, including infants, toddlers, pre-school age children, and school age children.

d) Describe any other key variations examined by the market rate survey, such as quality level The Market Rate Survey collected information around quality including accreditation types, participation in QRIS, and barriers to achieving higher quality programs.

### 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.

### 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) December 8, 2015

### Date report containing results was made widely available, no later than 30 days after the completion of the report A draft of the Market Rate Survey was completed on June 30, 2015 and initially presented to the Fiscal Oversight Committee of the Board of Early Education and Care on September 7, 2015. Draft was accepted and finalized by the Board of Early Education and Care on December 8, 2015. Once approved by the Board, report was posted to EEC’s website on December 16, 2015.

### How the report containing results was made widely available and provide the link where the report is posted if available In addition to being presented at a public board meeting, the report is also available on EEC’s website at: http://www.mass.gov/edu/birth-grade-12/early-education-and-care/notice-of-public-hearings-ccdf-state-plan.html

## Setting Payment Rates

### Provide the base payment rates and percentiles (based on current MRS) 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     .

1. Infant (6 months), full-time licensed center care in most populous geographic region
	* Rate $57.61 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 14.8
2. Infant (6 months), full-time licensed FCC care in most populous geographic region
	* Rate $34.75 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 16.3
3. Toddler (18 months), full-time licensed center care in most populous geographic region
	* Rate $51.87 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 12.1
4. Toddler (18 months), full-time licensed FCC care in most populous geographic region
	* Rate $34.75 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 37.3
5. Preschooler (4 years), full-time licensed center care in most populous geographic region
	* Rate $38.76 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 21.1
6. Preschooler (4 years), full-time licensed FCC care in most populous geographic region
	* Rate $30.72 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 20.8
7. School-age child (6 years), full-time licensed center care in most populous geographic region
	* Rate $34.48 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 38.8
8. School-age child (6 years), full-time licensed FCC care in most populous geographic region
	* Rate $30.72 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
	* Percentile 20.8
9. Describe the calculation/definition of full-time care The Commonwealth's subsidy regulations define "full-time care" as services for not less than 30 hours nor more than 50 hours per week at any one placement, unless otherwise approved. *See* 606 CMR 10.02 (Definitions).
10. Provide the effective date of the payment rates July 1, 2015
11. Provide the link to the payment rates http://www.mass.gov/edu/birth-grade-12/early-education-and-care/laws-regulations-and-policies/financial-assistance-regulations-and-policies/daily-reimbursement-rates.html

### 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
* **X** Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe EEC provides funding for one on one aides for children with special needs as requested by providers.
* **X** 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 Massachusetts has implemented a 3% rate increase for any programs serving infants and toddlers through the child care subsidy program that have achieved a Level 2 or above rating in QRIS.
* **X** Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe Massachusetts has implemented a 3% rate increase for any programs serving infants and toddlers through the child care subsidy program that have achieved a Level 2 or above rating in QRIS.
* **X** Tiered rate/rate add-on for programs serving homeless children. Describe Through its Priority Populations contracts, programs awarded contracts to serve homeless children receive an additional $17.22 per day.
* Other tiered rate/rate add-on beyond the base rate. Describe
* None.

### 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 Based on an historical review of EEC’s subsidy management applications and market rate study results, more than 50% of the licensed early education and care programs throughout the Commonwealth have held voucher agreements and/or contracts to serve children eligible to receive CCDF funded child care subsidizes. Though the market rate survey, Massachusetts has begun to seek information related to incentives for providers to begin or continue serving children eligible to receive CCDF funded child care subsidize, including analyze rates, professional development opportunities, program processes, and support services for providers.

### 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. Massachusetts has contracted with 110 providers to serve priority populations (homeless, teens, and children involved with the child welfare system). By the terms of the contract, the providers are paid an enhanced rate to maintain support services, case management, and transportation for these families. In addition, Massachusetts offers a 3% rate increase for any programs serving infants and toddlers through the child care subsidy program that have achieved a Level 2 or above rating in QRIS.

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

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

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

* Payment rates are set at the 75th percentile or higher of the most recent survey. Describe
* **X** Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs. Through its Priority Populations contracts, programs awarded contracts to serve homeless children, children of teen parents, and children involved in the child welfare system receive an additional $17.22 per day.
* **X** Rates based on data on the cost to the provider of providing care meeting certain standards. Describe Massachusetts offers a 3% rate increase for any programs serving infants and toddlers through the child care subsidy program that have achieved a Level 2 or above rating in QRIS.
* 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
* **X** Data on where children are being served showing access to the full range of providers. Describe Historical data has shown that more than 50% of licensed early education and care providers have active voucher agreements and/or contracts to serve children eligible to receive CCDF funded child care subsidizes.
* Feedback from parents, including parent survey or parent complaints. Describe
* Other. Describe

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

* **X** Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access Although Massachusetts subsidy rates are lower than the 75th percentile of market rates, historical data has shown that more than 50% of licensed early education and care programs accept children eligible to receive CCDF funded child care subsidizes. In addition, Massachusetts commits to evaluating its existing rate structure in a manner to addresses the true cost of quality, while seeking to raise the base rate for subsidized child care statewide.
* 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)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

## 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))

### 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.

* **X** Fully implemented and meeting all Federal requirements outlined above. 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 Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

### 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. The Lead Agency …

* Pays prospectively prior to the delivery of services. Describe
* **X** Pays within no more than 21 days of billing for services. Describe Generally, Massachusetts reviews, processes, and schedules within 10 to 15 days of receipt any request for reimbursement. Once scheduled in the Commonwealth’s accounting system, payments are made overnight.
* Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory’s definition of occasional absences
* Supports fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe
* **X** 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 EEC pays providers in full for up to 30 absences in a 6 month period or up to 3 consecutive unexplained absences. Absences above that level are considered excessive and will result in an immediate reassessment of the family's continued need for child care.
* **X** Pays on a full-time or part-time basis (rather than smaller increments such as hourly) EEC rates are based on a per child, per day value. Programs serving children authorized for full time care are reimbursed up to the full day rate based on child schedule. Programs serving children authorized for part time care are reimbursed up to the part day rate based on child schedule and parent choice.
* Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)
* **X** Provides prompt notice to providers regarding any changes to the family’s eligibility status that may impact payment If EEC determines that the family is no longer eligible for care, 2 week notice is provided to both the family and the provider. The provider will receive payment for that two week period but not for any care provided after.
* Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe All disputes and resolutions are handled on a case by case basis in a prompt manner by the Associate Commissioner for Accounting and Contracts.
* Other. Describe

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

* **X** Policy on length of time for making payments. Describe length of time Massachusetts law requires all invoices to be paid within 42 days of receipt. However, EEC is committed to processing payments faster that that time limit.
* **X** Track and monitor the payment process EEC uses the state accounting system to track and monitor the payment process.
* **X** Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe All providers receive funds via electronic transfer which allows for funds to be received within 24-48 hours of processing.
* Other. Describe

## 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))

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

* **X** Yes. Describe data sources In coordination with the Urban Institute, Massachusetts completed a *Review of Child Care Needs of Eligible Families in Massachusetts* which was completed in March 2015.
* No. If no, how does the State/Territory determine most critical supply needs?

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

### Infants and toddlers

### **X** Grants and contracts (as discussed in 4.1.3)

### **X** Family child care networks

### Start-up funding

### **X** Technical assistance support

### **X** Recruitment of providers

### **X** Tiered payment rates (as discussed in 4.4.1)

### Other. Describe

### Children with disabilities

### Grants and contracts (as discussed in 4.1.3)

### **X** Family child care networks

### Start-up funding

### **X** Technical assistance support

### **X** Recruitment of providers

### **X** Tiered payment rates (as discussed in 4.4.1)

### Other. Describe

### Children who receive care during non-traditional hours

### Grants and contracts (as discussed in 4.1.3)

### **X** Family child care networks

### Start-up funding

### **X** Technical assistance support

### **X** Recruitment of providers

### Tiered payment rates (as discussed in 4.4.1)

### Other. Describe

###  Homeless children

### **X** Grants and contracts (as discussed in 4.1.3)

### **X** Family child care networks

### Start-up funding

### **X** Technical assistance support

### **X** Recruitment of providers

### **X** Tiered payment rates (as discussed in 4.4.1)

### Other. Describe

### 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.

* **X** Fully implemented and meeting all Federal requirements outlined above. Describe Massachusetts has contracted with over 150 early education and care programs to serve high priority populations (homeless, teens, and children involved with the child welfare system). In future contract awards, Massachusetts may look at using data to prioritize both dedicated contract slots and voucher allocations to high poverty areas of the Commonwealth.
* 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 Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

# 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).

## 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))

### 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:** Any facility operated on a regular basis whether known as a day nursery, nursery school, kindergarten, child play school, progressive school, child development center, day care center, pre-school, or known under any other name which receives children, not of common parentage, younger than seven years old, or younger than 16 years old if such children have special needs, for non-residential custody and care during part or all of the day separate from their parent(s). Child Care center shall not include: any part of a public school system; any part of a private organized educational system, unless the services of such a system are primarily limited to kindergarten, nursery or related pre-school services; a Sunday school conducted by a religious institution; a facility operated by a religious organization where children are cared for during short periods of time while persons responsible for such children are attending religious services; a family child care home; an informal cooperative arrangement among neighbors or relatives; or the occasional care of children with or without compensation therefore. *See* 606 CMR 7.02.**Family Child Care:** Temporary custody and care provided in a private residence during part or all of the day for no more than ten children younger than 14 years old or children younger than 16 years old if such children have special needs. Family child care shall not mean an informal cooperative arrangement among neighbors or relatives, or the occasional care of children with or without compensation therefore. See 606 CMR 7.02.

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

* **X** 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

**Relative Child Care:** Subsidized child care may be provided by a relative of the child in a private residence if the caregiver is at least 18 years old. The caregiver may not be the child’s parent, stepparent, foster parent or guardian. Relative caregivers, include siblings, aunts, uncles, and grandparents, must submit evidence of their age and relationship to the child receiving care and of their age. Prior to entering into an agreement to accept child care subsidy, relative caregivers must attend an orientation provided by the CCR&R. Relative caregivers must also complete a Health & Safety Checklist prior to providing child care services and being reimbursed for care. If the relative caregiver is caring for children in her own home, the total number of her own children under the age of 13 and any other children under the age of 13 present in the home while she is providing care may not exceed six. Children under the age of 16 with special needs shall be included in determining a caregiver’s capacity. EEC also conducts Sexual Offender Registry checks on any individual seeking to provide relative care funded by the Department.

**In Home/Non-Relative Child Care:** Caregivers unrelated to the child who are providing subsidized care must be at least 18 years old. Non-relative caregivers must have a background free of conduct which, in EEC’s sole judgment, bears adversely upon their ability to provide for the safety and well-being of children. CCR&Rs shall not issue child care vouchers for an In-Home, Non-Related (IHNR) caregivers until EEC has conducted a background record check (BRC) and has notified the CCR&R that the individual’s BRC has been approved. At the time of initial registration to provide IHNR child care and at each subsequent assessment, an applicant must complete the Consent for Background Record Check for In-Home, Non-Relative Applicants form. Non-related caregivers must provide care in the child’s home and may not be residents of the child’s household. In-home, non-related caregivers must attend an orientation provided by the CCR&R. In-home, non-related caregivers must complete a Health & Safety Checklist prior to providing the child care services and being reimbursed for care. If the non-related caregiver is caring for children in the child’s home, the total number of the caregiver’s own children under the age of 13 and all of the children under the age of 13 who reside in the child’s home cannot exceed six. Children under the age of 16 with special needs shall be included in determining a caregiver’s capacity.

**Center-Based Child Care Operated by Public Schools** are exempt from licensure by EEC, as these programs are under the jurisdiction of other state and local agencies that regulate health and safety concerns related to physical space and educator background record checks, including state and national finger print checks.

**Center-Based Child Care Operated as Part of a Private Organized Educational System**, unless the services of such a system are primarily limited to kindergarten, nursery or related pre-school services are exempt from licensure by EEC, as these programs are under the jurisdiction of local agencies that regulate health and safety concerns related to physical space and educator background record checks, including state and national finger print checks.

**Summer Camps**, which are under the jurisdiction of the local Board of Health for each city/town in the Commonwealth and subject to health and safety requirements established by the Department of Public Health, are exempt from licensure by EEC.

* No

### 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))

* **X** Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.
* Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
* Overall Target Completion Date (no later than September 30, 2016)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

### 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 An infant is defined as child under 15 months of age.
* Ratio 1:3 or 2:7
* Group size 7
1. Toddler
* State/Territory age definition A toddler is defined as a child who is at least 15 months of age but under 33 months of age.
* Ratio 1:4 or 2:9
* Group size 9
1. Preschool
* State/Territory age definition A preschool age child is defined as any child at least 2.9 years but not yet attending first grade.
* Ratio 1:10 or 2:20
* Group size 20
1. School-Age
* State/Territory age definition A school age child is defined as a kindergarten child or a child who is attending a public or approved private elementary school.
* Ratio 1:13 or 2:26
* Group size 26
1. If any of the responses above are different for exempt child care centers, describe For Department of Public Health regulated summer camps, the following ratios are required: Residential and day camps shall have at least one supervisory staff person for every ten campers over the age of six. There shall be one supervisory staff person for every five campers age six or under. Junior counselors may be included in meeting up to one half of the camper/staff ratio within each unit, living or general activity group, but only if they have received training and supervision to verify their ability to handle camper groups independently. *See* 105 CMR 430.101. For license exempt public school after-school programs, schools are expected to follow local requirements; however, the recommended ratio is 1:13, which is identical to EEC's school age ratio requirement.
2. Describe, if applicable, ratios and group sizes for centers with mixed age groups For mixed Infant/Toddler groups, Massachusetts child care licensing regulations set forth the following group size limitations: no more than 9 children, of which no more than 3 infants may be infants. In addition, the regulations establish the following educator to child ratios for mixed Infant/Toddler groups: 1:3 or 2:9. For mixed Toddler/Preschool groups, Massachusetts child care licensing regulations restrict group size for the classroom to no more than 9 children with educator to child ratios of 1:5 or 2:9. For mixed Preschool/School Age groups, group size for the classroom is restricted to no more than 20 children with a maximum age of 8 years and educator to child rations of 1:10 or 2:20.

### b) Licensed Group Child Care Homes:

1. Infant
* State/Territory age definition
* Ratio
* Group size
1. Toddler
* State/Territory age definition
* Ratio
* Group size
1. Preschool
* State/Territory age definition
* Ratio
* Group size
1. School-Age
* State/Territory age definition
* Ratio
* Group size

### 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

1. If any of the responses above are different for exempt group child care homes, describe

[x]  N/A. State/Territory does not have group child care homes.

### c) Licensed Family Child Care:

### 1. Describe the ratios 1:6 , group size 6, the threshold for when licensing is required 1, maximum number of children that are allowed in the home at any one time 6, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size 6, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day With one educator, no more than 3 children under the age of two may be included in the group size, of which at least one child must be walking independently. If the program has three children under the age of 3, any additional child must be older than 24 months. The child to staff ratio may be increased to 8:1 provided that any child enrolled over the capacity limit of 6 must be a school-aged child.

2. If any of the responses above are different for exempt family child care home providers, describe Not applicable.

d) Any other eligible CCDF provider categories: Not applicable.

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

### Describe 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 Must be at least 21 years of age and meet one of the following sets of requirements for education and experience. At least nine months of work experience or one practicum must be with infants and toddlers. If all work experience is with infants and toddlers, the total work experience required is reduced by 1/3.

			1. High School diploma or equivalent; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 36 months of work experience.
			2. High School diploma or equivalent; Child Development Associate (CDA) Credential in Center-Based, Home Visitor or Family Child Care setting with infant/toddler endorsement and 27 months of work experience.
			3. Associate’s degree in Early Childhood Education or a related field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 18 months of work experience.
			4. Bachelor’s degree in an unrelated field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 18 months of work experience.
			5. Bachelor’s or advanced degree in Early Childhood Education or in a related field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 9 months of work experience.
			6. Alternative Early Childhood Training Program; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 27 months of work experience.
				3. Certification as an Early Intervention Specialist by the Department of Public Health. and assistant teacher qualifications Must be at least 16 years of age or have a high school diploma or equivalent; must work at all times under the direct supervision of at least a teacher qualified staff person.
		2. Toddler lead teacher Must be at least 21 years of age and meet one of the following sets of requirements for education and experience. At least nine months of work experience or one practicum must be with infants and toddlers. If all work experience is with infants and toddlers, the total work experience required is reduced by 1/3.

			1. High School diploma or equivalent; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 36 months of work experience.
			2. High School diploma or equivalent; Child Development Associate (CDA) Credential in Center-Based, Home Visitor or Family Child Care setting with infant/toddler endorsement and 27 months of work experience.
			3. Associate’s degree in Early Childhood Education or a related field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 18 months of work experience.
			4. Bachelor’s degree in an unrelated field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 18 months of work experience.
			5. Bachelor’s or advanced degree in Early Childhood Education or in a related field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 9 months of work experience.
			6. Alternative Early Childhood Training Program; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development and three credits in Infant and Toddler Care; and
				2. 27 months of work experience.
			7. Certification as an Early Intervention Specialist by the Department of Public Health. and assistant teacher qualifications Must be at least 16 years of age or have a high school diploma or equivalent; must work at all times under the direct supervision of at least a teacher qualified staff person.
		3. Preschool lead teacher Must be at least 21 years of age and meet one of the following sets of requirements for education and experience. At least nine months of work experience or one practicum must be with preschoolers.
			1. High School diploma or equivalent; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development, and two credits in Planning Programs, Curriculum or Classroom management; and
				2. 36 months of work experience.
			2. High School diploma or equivalent; Child Development Associate (CDA) Credential in Center Based, Home Visitor, or Family Child Care setting with a preschool endorsement; and 27 months of work experience.
			3. Associate’s degree in Early Childhood Education or a related field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development, and two credits in Planning Programs, Curriculum or Classroom management; and
				2. 18 months of work experience.
			4. Bachelor’s degree in an unrelated field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development, and two credits in Planning Programs, Curriculum or Classroom management; and
				2. 18 months of work experience.
			5. Bachelor’s or advanced degree in Early Childhood Education or in a related field of study; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development, and two credits in Planning Programs, Curriculum or Classroom management; and
				2. nine months of work experience.
			6. Alternative Early Childhood Training Program; and
				1. 12 credits in at least four categories of study except Child Care Administration including three credits in Child Growth and Development, and two credits in Planning Programs, Curriculum or Classroom management; and
				2. 27 months of work experience.
			7. K-3 Teacher of Young Children with Special Needs Certification from the Department of Education. and assistant teacher qualifications Must be at least 16 years of age or have a high school diploma or equivalent; must work at all times under the direct supervision of at least a teacher qualified staff person.
1. School-Age lead teacher Must be at least 21 years of age or have a high school diploma or equivalent and meet one of the following sets of requirements:
	* + - 1. have successfully completed three credits in category Child Growth and Development and have nine months of work experience or one practicum; or
				2. have a Child Development Associate (CDA) Credential; or
				3. have graduated from a two-year high school vocational program in early childhood education, approved by the Department for both the education and experience requirements and have been evaluated and recommended by the program instructor.
2. The following education may substitute for a portion of the required work experience:
3. An Associate’s or Bachelor’s degree in early childhood education or a related field of study may substitute for six months of the required experience.
4. A Bachelor’s degree in an unrelated field of study may substitute for three months of the required experience.
5. For infant-toddler teachers, one continuing education unit (ten hours of instruction) in category Infant and Toddler Development, Care and Program Planning may substitute for three months of work experience.

and assistant teacher qualifications Must be at least 16 years of age or have a high school diploma or equivalent; must work at all times under the direct supervision of at least a teacher qualified staff person.

* + 1. Director qualifications Director I: must meet the requirements of lead teacher; have six months of work experience after meeting lead teacher qualifications; have evidence of satisfactory completion of at least two credits or three CEUs in category Child Care Administration; and have evidence of satisfactory completion of at least two additional credits or three CEU’s in any category 606 CMR 7.09(18)(b)1 through 12.

		Director II: must meet all the requirements of Director I and have evidence of satisfactory completion of at least two additional credits or three CEUs in any category 7.09(18)(b)6 or 7.09(18)(b)8 through 13.

### b) Licensed Group Child Care Homes: Not applicable.

1. Infant lead teacher       and assistant qualifications
2. Toddler lead teacher       and assistant qualifications
3. Preschool lead teacher       and assistant qualifications
4. School-Age lead teacher       and assistant qualifications

[x]  N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care home provider qualifications All educators must be at least 18 years of age. Licensees. Prior to being licensed for the first time to provide family child care the applicant must submit evidence of current certification in basic first aid and CPR that is age appropriate for all of the children in care. In addition, (1) an applicant for a license to care for six or fewer children must have at least the following: one year of experience as a parent; or one year of full-time experience, or the equivalent, in caring for children younger than 12 years of age; or nine months of full-time experience in caring for children younger than 14 years of age and completion of 15 hours of training, approved by the Department, not including the EEC educator orientation; or six months of full-time experience in caring for children younger than 12 years of age and completion of 30 hours of training, approved by the Department, not including the EEC orientation; or qualification as a teacher or site coordinator by EEC. (2) An applicant for a license to care for seven or eight children, at least two of whom must be school age, must have evidence of having completed within one year prior to application a pre-service training approved by the Department; and either two years of experience as a family child care licensee or certified assistant; or one year of experience as a family child care licensee or certified assistant and one additional year caring for unrelated children in a group setting; or EEC certification as a teacher or site coordinator. An additional three credits in education or early childhood education may substitute for six months of the required additional experience. An additional six credits in education or early childhood education may substitute for nine months of the required additional experience. (3) An applicant for a license to care for nine or ten children must have evidence of having completed within one year prior to application a five hour pre-service training approved by the Department and either three years of experience as a family child care licensee or certified assistant, or one year of experience as a family child care licensee or certified assistant; and one of the following: two additional years caring for unrelated children in a group setting, which may include experience as a family child care licensee or certified assistant; EEC certification as a teacher or site coordinator and one additional year of experience caring for unrelated children in a group setting, which may include experience as a family child care licensee or certified assistant. An additional three credits in education or early childhood education may substitute for six months of the required additional experience. An additional six credits in education or early childhood education will substitute for nine months of the additional required experience.

d) Other eligible CCDF provider qualifications Not applicable.

### 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.

### 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.
* **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 30, 2016
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Substantially implemented.
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented Massachusetts certifies that it has health and safety requirements for licensed providers.

### Unmet requirement - Identify the requirement(s) not fully implemented Massachusetts needs to review and assess the health and safety requirements for license exempt programs receiving CCDF funded child care subsidy.

* + - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) To ensure compliance with the health and safety requirements for license exempt programs receiving CCDF funded child care subsidy, Massachusetts may need to amend existing regulations and policies, as well as modify existing agreements with CCRRs to ensure proper qualifications for license exempt providers.
			* Projected start date for each activity March 1, 2016
			* Projected end date for each activity September 30, 2016
			* Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
			* Partners – Who is the responsible agency partnering with to complete implementation of this activity Department of Elementary and Secondary Education, Department of Public Health, and any private schools (or associations representing private schools).
1. 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* for best practices and recommended time needed to address these training requirements.
* **X** 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. 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 For new licensing applicants, EEC regulations require pre-service qualifications dependent on the potential educator’s education and experience, as described below. On-going training requirements for licensed early education and care educators are up to 20 hours annually. EEC regulations also establish minimum requirements for orientation for all educators, including both center based and family child care settings. For license exempt providers, the Child Care Resource and Referral network requires preservice training and orientation prior to entering into any voucher agreements with programs that are exempt from licensure.
* 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)
		- Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
			* Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
			* 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

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

* **X** Nutrition. Describe EEC licensing regulations contain provisions for nutrition and food service at 606 CMR 7.12.
* Access to physical activity. Describe EEC licensing regulations require at least 60 minutes of physical activity per day at 606 CMR 7.06(1)(b)5.
* Screen time. Describe
* Caring for children with special needs. Describe EEC licensing regulations establish requirements for the provision of reasonable accommodations for children with disabilities and special needs at 606 CMR 7.04(13).
* Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children’s health and safety. Describe

### 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.

* **X** 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. Relatives seeking to provide CCDF funded child care services must complete a Sexual Offender Registry Check, as well as a health and safety orientation by the CCRR network, prior to being approved as a relative caregiver.
* 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.

## Monitoring and Enforcement Policies and Practices

### 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. 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) September 30, 2016
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Substantially implemented
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented For licensed providers, Massachusetts requires on-site visits prior to the issuance of any license for both center-based and family child care settings. For license exempt providers, Massachusetts requires participation in orientations and completion of health and safety checklists prior to entering into any agreements to provide child care subsidy services.

### Unmet requirement - Identify the requirement(s) not fully implemented Review processes for ensuring license exempt providers are in compliance with state and local health and safety requirements.

* + - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Massachusetts may need to update/revise existing contracts and/or policies to ensure license exempt providers seeking to provide subsidy meet all State and local health and safety requirements prior to entering into voucher agreements.
			* Projected start date for each activity March 1, 2016
			* Projected end date for each activity September 30, 2016
			* Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
			* Partners – Who is the responsible agency partnering with to complete implementation of this activity Department of Elementary and Secondary Education, Department of Public Health, and any private schools (or associations representing private schools).

### 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).

* 1. **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))
* **X** Yes. The State/Territory certifies that 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 : Department of Early Education and Care hiring policies establish minimum requirements for child care licensors.
* 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)
		- Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
			* 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
	1. **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 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 19, 2016
		- Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Partially implemented
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented Over the past two to three years, Massachusetts has been working to implement a system of differential monitoring to shorten the time necessary to complete licensing visits based on establishing key indicators of quality and health and safety.

### Unmet requirement - Identify the requirement(s) not fully implemented Massachusetts needs to review and assess its current regulations, policies and practices to establish specific plans to address the annual, unannounced visit requirement set forth in the CCDBG Reauthorization.

* + - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) Regulatory and policy changes are likely necessary to meet this requirement.
			* Projected start date for each activity March 1, 2016
			* Projected end date for each activity November 19, 2016
		- Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
		- Partners – Who is the responsible agency partnering with to complete implementation of this activity CACFP, Head Start, Department of Public Health – Early Intervention, and any other entity required to perform on-site visits to licensed early education and care programs.

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 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) November 19, 2016
		- Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other) Not yet started.
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented Not applicable

### Unmet requirement - Identify the requirement(s) not fully implemented EEC does not currently conduct on-site visits to license exempt providers receiving child care subsidy.

* + - Tasks/Activities – What specific steps will you take to implement the requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.) To meet this requirement, EEC may need to revise existing regulations and policies, as well as modify existing agreements for the provision of subsidized child care by license exempt providers in Massachusetts, including informal child care (i.e., in-home, non-relative), summer camps, public schools, and private schools.
			* Projected start date for each activity March 1, 2016
			* Projected end date for each activity November 19, 2016
		- Agency – Who is responsible for complete implementation of this activity Department of Early Education and Care
		- Partners – Who is the responsible agency partnering with to complete implementation of this activity CACFP, Head Start, Department of Public Health – Early Intervention, and any other entity required to perform on-site visits to licensed early education and care programs.
1. **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))
* **X** Yes. The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors : Over the past two to three years, Massachusetts has been working to implement a system of differential monitoring to shorten the time necessary to complete licensing visits based on establishing key indicators of quality and health and safety. EEC anticipates that this effort will allow for the Department to work with its existing resources to meet the monitoring requirements set forth in the CCDBG Reauthorization. The Department also put forth a budget proposal seeking additional funds to add licensing staff.
* 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)
		- Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
			* 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

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))

* + **X** Yes. Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency’s policy citation(s) EEC’s licensing regulations contain strict no tolerance requirements related to abuse and neglect in early education and care settings at 606 CMR 7.11(4). In addition, all educators are mandated reporters, which require immediate disclosure of any concerns related to abuse and neglect to both EEC and the Department of Children and Families.
	+ 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)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
			* 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

### 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. Although Massachusetts exempt relative care providers from licensure, any relative seeking to provide subsidized child care must attend an orientation, complete a health and safety checklist, and undergo a sex offender registry check prior to entering into any voucher agreement.
* Yes, some relatives are exempt from inspection requirements. If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt and include how the State/Territory ensures the health and safety of children in relative care.
* No, relatives are not exempt from inspection requirements.

## 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 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 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.

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

* Fully implemented and meeting all Federal requirements outlined above. List the policy citation within the Lead Agency’s rules       and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.
* **X** 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 17, 2017
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)

Partially Implemented

* + Implementation progress to date – Identify any requirement(s) partially or substantially implemented Currently, EEC completes Background Record Checks (BRC) on: licensees, BRC reviewers, employees, volunteers, and interns in group and school age programs; family child care providers and their household members and people regularly on the premises of the home; transportation personnel; caregivers receiving reimbursement for caring for unrelated children in the child's home; and relative caregivers who receive reimbursement by EEC for caring for a relative. EEC's regulations mandate a BRC on anyone who has the potential for unsupervised with children. All applicants receive a Criminal Offender Record Information (CORI) check through the Massachusetts Department of Criminal Justice Information Services (DCJIS); a Massachusetts child welfare check through the Massachusetts Department of Children and Families (DCF); a Massachusetts Sex Offender Registry Information (SORI) check through the Massachusetts Sex Offender Registry Board (SORB); and a fingerprint-based check of state and national databases through the Federal Bureau of Investigations (FBI), the Massachusetts State Police, and DCJIS.

Below is an outline of all background record checks required by the CCDBG reauthorization, and EEC's plan for implementing the additional requirements:

1. In-state CORI check - Fully Implemented
2. In-state DCF check - Fully Implemented
3. SORI Check - Fully Implemented
4. National Fingerprint-Based Check - Fully Implemented

### Unmet requirement - Identify the requirement(s) not fully implemented The following BRC requirements under CCDBG Reauthorization have not yet been implemented in Massachusetts:5. Criminal Record Checks from Other States - Not Implemented6. Other States' Child Welfare Checks - Not Implemented7. National SORI Check - Not Implemented8. National Crime Information Center (NCIC) Check - Not 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.) To fully implement the BRC requirements set forth in the CCDBG Reauthorization, Massachusetts will require legislative change, administrative rule change, policy updates, and agreements with coordinating agencies, including Massachusetts agencies and other State child care and/or licensing departments.

**Criminal Record Checks from Other States**

* + Projected start date for each activity January 1, 2016
	+ Projected end date for each activity September 30, 2017 or sooner
	+ Agency – Who is responsible for complete implementation of this activity Massachusetts Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity Federal Bureau of Investigations (FBI): Massachusetts Department of Criminal Justice Information Services (DCJIS); Massachusetts Executive Office of Public Safety and Security (EOPSS); the Office of Child Care within the U.S. Administration for Children and Families; and other states' child care licensing agencies.

**Child Welfare Checks from Other States**

* + Projected start date for each activity January 1, 2016
	+ Projected end date for each activity September 30, 2017 or sooner
	+ Agency – Who is responsible for complete implementation of this activity Massachusetts Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity Massachusetts Department of Children and Families (DCF); Massachusetts Executive Office of Health and Human Services (EOHHS); the Office of Child Care within the U.S. Administration for Children and Families; and other states' child welfare agencies.

	**National Sex Offender Registry Check**
	+ Projected start date for each activity January 1, 2016
	+ Projected end date for each activity September 30, 2017 or sooner
	+ Agency – Who is responsible for complete implementation of this activity Massachusetts Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity Massachusetts Sex Offender Registry Board (SORB); Massachusetts Executive Office of Public Safety and Security (EOPSS); U.S. Department of Justice; and the Office of Child Care within the U.S. Administration for Children and Families.

	**National Crime Information Center (NCIC) Check**
	+ Projected start date for each activity January 1, 2016
	+ Projected end date for each activity September 30, 2017 or sooner
	+ Agency – Who is responsible for complete implementation of this activity Massachusetts Department of Early Education and Care
	+ Partners – Who is the responsible agency partnering with to complete implementation of this activity Federal Bureau of Investigations (FBI): Massachusetts Department of Criminal Justice Information Services (DCJIS); Massachusetts Executive Office of Public Safety and Security (EOPSS); and the Office of Child Care within the U.S. Administration for Children and Families.

### 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 the results of background checks.

After receiving an applicant's BRC consent form, EEC sends the applicant's information to DCJIS for completion of a MA CORI, which confirms whether the applicant has a criminal history within Massachusetts. EEC simultaneously completes a check for findings of abuse or neglect with DCF, and submits the applicant's name for a Massachusetts SORI check. CORI and DCF checks have around a four business day turnaround time, and SORI checks have an average turnaround time of seven business days. After the completion of CORI, DCF, and SORI, an applicant may work conditionally pending the results of the fingerprint check. After completion of a fingerprint check, the applicant becomes a regular employee.

Immediately upon learning of a finding from one of the checks, EEC provides the applicant with the ability to contest the validity of the finding, and to request that EEC approve the applicant despite the presence of a CORI, DCF, SORI, and/or fingerprint finding. A discretionary review application is automatically provided to the applicant upon EEC learning of a finding, and the applicant has twenty-one (21) days to respond to EEC with an explanation and documents stating why the applicant's background does not pose a risk of harm to children. After EEC receives all materials from the applicant, EEC writes a detailed decision determining whether to allow or deny the applicant's request for discretionary approval. After EEC issues its decision, those who are being denied a license or assistant certificate may request a further appeal to the Massachusetts Division of Administrative Law Appeals (DALA) within twenty-one days of the issuance of EEC's decision. If the applicant timely responds to the appeal, then EEC will schedule a hearing before DALA. The DALA magistrate will issue a written recommended decision, and EEC's Commissioner will determine whether to adopt DALA's recommended decision as EEC's Final Agency Decision.

EEC takes great measures to ensure the protection of applicants' privacy. CORI and DCF information is statutorily protected and is only communicated to the applicant or designated agents within the applicant's employer. EEC is the only one who accesses SORI and fingerprint information. EEC is permitted by law to communicate if a sex offender is a level 3 sex offender. Level 2 sex offenders have a higher threshold of privacy, however, EEC does not reveal that information unless it is in the interest of protecting the safety of children. Fingerprint information is solely communicated to the BRC applicant, and EEC issues a "suitable" or "not suitable" determination after the results are reviewed without disclosing the reasons behind the decision to third parties. The only exception to our decision not to disclose the information is in the event the appeals process requires EEC to reveal the information. EEC's BRC regulations also address the issue of protecting the privacy of child care staff in 606 CMR 14.16, explaining to whom the records may be disseminated, and throughout the BRC regulations requiring that those who maintain CORI and DCF information keep the records in locked and segregated files.

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

### We have alerted other state agencies within Massachusetts including, EOPPS, DCJIS, and DCF, of the CCDBG requirements so they are responsive to other states. We plan to work with them to address our internal requirements and to find a manageable system for responding to inquiries from out of state.

### 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?

* **X** Yes. Describe. The review process for individuals disqualified due to felony drug offenses is outlined in EEC's BRC regulations at 606 CMR 14.00 et seq. At this time, Massachusetts does not have any mandatory disqualifications related to felony drug offenses or any other crimes. The BRC regulations designate crimes either as presumptive offenses or discretionary offenses. If an applicant has a conviction for a crime categorized as a presumptive offense, then the applicant must provide EEC with a letter from a criminal justice official or a mental health professional explaining why the person does not pose a risk of harm to children. In the event an applicant satisfies that burden, the applicant may submit a request for discretionary approval. The discretionary approval process is available for any applicant that satisfies the presumptive burden and for all other criminal offense categorized as a discretionary disqualification under the BRC regulations. The discretionary approval process allows an applicant the opportunity to submit documentation and an explanation to support their claim that there is clear and convincing evidence that his/her criminal history does not pose a risk of harm to children. In making its decision to grant or deny a request for discretionary approval, EEC applies the criteria outlined in the BRC regulations.
* No

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

* **X** Yes. Describe. In Massachusetts, all criminal charges, whether the offense results in a conviction or not, are potentially disqualifying. As noted in the response to Question 5.3.4 above, the BRC regulations designate crimes either as presumptive offenses or discretionary offenses.
* No

### 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.
* **X** Yes, some relatives are exempt from the background check requirements. Describe which relatives are exempt. Currently, EEC requires that relative caregivers, or individuals who are reimbursed by the state for caring for one related subsidized child in either the child's or the caregiver's own home, receive a SORI check. This population is exempt from CORI, DCF, and fingerprint checks. If the relative caregiver is licensed by EEC as a family child care provider, then that person is no longer exempt from any of EEC's BRC checks.
* No, relatives are not exempt from background checks.

### 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. EEC does not charge applicants any fees for conducting CORI, DCF, or SORI checks. However, Massachusetts law requires that a fee be assessed for completing fingerprint checks. Specifically, the law states that the fee for processing the state and national fingerprint checks will be used to finance the costs of operating and administering the checks, and that the maximum fee is $35. EEC plans to work with our state partners to determine whether the additional checks will require us to charge applicants for processing BRCs, and if so, how we can implement such charges in a manner that causes the least financial hardship on applicants as possible.

### Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue EEC's website contains a link to background record check information and includes EEC's existing BRC regulations and policies. EEC is currently in the process of reviewing our website content to ensure transparency during the BRC process.

### Does the Lead Agency release aggregated data by crime?

* Yes. List types of crime included in the aggregated data
* **X** No

# 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.

## 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.

### 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:

### 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).

### 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.

### 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)

### Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF

### 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.

* **X** Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.
* Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
* Overall Target Completion Date (no later than September 30, 2016)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

### 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

Massachusetts takes a comprehensive view of the critical importance of developmentally appropriate experiences to children from birth. To that end, there are multiple standards and competencies designed for educators and program administrators in planning and evaluating curricula. They include the following:

* + - * Massachusetts Early Learning Guidelines for Infants and Toddlers
			* Guidelines for Preschool Learning Experiences
			* The Massachusetts Curriculum Frameworks for Pre-Kindergarten to 12
			* Kindergarten Learning Experiences
			* Pre-School and Kindergarten Standards in the Domains of Social-Emotional Development and Approaches to Play and Learning
			* Pre-K Science, Technology and Engineering Standards
			* Early English Language Development Standards (E-ELD)
* **X** Career ladder or lattice. Describe A basic career ladder has been developed and endorsed by the Commonwealth's Board of Early Education and Care, which may be used as a model and as a resource for programs. Massachusetts is also developing a career lattice for English Language Learners.
* **X** Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe EEC worked with the MA Department of Higher Education (DHE) to revise the Early Childhood Education Transfer Compact. The Compact allows graduates of a state community college to begin a bachelor's degree in early education or Pre K-12 teacher licensure as a junior at a state university. EEC has further supported this work at a local level by convening 2- and 4-year college representatives through the MA Readiness Center network and EPS grantees in efforts to streamline academic advising and support transfer students. DHE is convening public 2-year and 4-year institutions of higher education to further build and align coursework for articulation and transfer for early education degree programs. Articulation agreements are in place to facilitate transfer of the newly developed Post-Master’s certificate into a Certificate of Advanced Graduate Study (CAGS) or Doctoral program at select Massachusetts' colleges.
* **X** Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe EEC training to meet licensing and regulatory requirements are offered through several systems. EEC has established a statewide a Educator and Provider Support (EPS) network to provide state-funded professional development opportunities to the early education and out of school time workforce within each Region of the Commonwealth. The EPS grant serves educators working in EEC's mixed delivery system including those working in family child care homes, center-based programs, and those that are exempt from licensing. EEC also has a Child Care Resource and Referral Network that provides training to meet basic pre-licensing and ongoing training requirements, which are located in each Region of the Commonwealth. EEC licensing staff also provide training to meet licensing requirements.
* **X** Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe Educators working in EEC-licensed programs serving children from birth through school age, regardless of setting, must create an individual educator profile in EEC’s Professional Qualifications Registry (PQR) and update it annually. EEC requires educators who work in programs that are not subject to EEC licensure, including those who work in public preschools, to register if they would like to participate in trainings funded by EEC or are in programs participating in EEC's Quality Rating Improvement System (QRIS). EEC's PQR gathers important information on the size, composition, education, and experience of our current workforce. It stores information about the retention and turnover of educators working in early education and out-of-school time programs. This information will help EEC build a workforce development system that responds to the needs of all educators and programs in Massachusetts.
* **X** Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe EEC is governed by the Board of Early Education and Care, which has ten members appointed by the Governor. The Secretaries of the Executive Office of Health and Human Services and the Executive Office of Education are members of the Board. EEC also has a state advisory council on early education and care, the members of which represent a reasonable geographic balance and reflect the diversity of the commonwealth in race, ethnicity, gender and sexual orientation. All appointees have a special expertise or interest in high quality early childhood education and care and represent a mix of representatives of the early childhood community, the civic, labor, and business communities, academics, parents, teachers, social service providers, and health care providers.

The advisory council reviews and offer comments on any rules or regulations before promulgation by the board, and makes recommendations to the board that it considers appropriate for changes and improvements in early education and care programs and services, including professional development.

The advisory also has expertise groups in order to maximize focused, relevant and in-depth conversations with multiple stakeholder types. The following six expertise groups meet:

1. Agencies with Vendor/Contract Relationship;
2. Legislators;
3. Business/Civic;
4. Higher Education;
5. State Associations; and
6. K-12 Linkages.
* **X** Continuing education unit trainings and credit-bearing professional development. Describe EEC requires that all training have either CEUs, CECs, or college credits associated with it to meet QRIS requirements. Professional development supported by EEC through initiatives such as the Educator and Provider Support grant must award a minimum of 0.5 CEUs or 1 college credit. The goal is to ensure high quality training. Professional development funded by EEC and to support QRIS must meet the guidelines for Continuing Education Units (CEUs), Competency Education Credits (CECs), or college coursework. In addition, CEUs may be used to substitute for some of the required coursework to meet EEC Certification for Lead Teacher or Director I or II. Therefore, EEC requires all of its grantees that provide professional development to offer trainings that are credit-bearing or have been approved for CEUs. This includes the EPS Grantees, the Statewide Assessment Grantee and the QRIS Measurement Tools Grantee.
* **X** State-approved trainings. Describe EEC training to meet licensing and regulatory requirements are offered through several systems. EEC has a Educator and Provider Support (EPS) network to provide state-funded professional development opportunities to the early education and out of school time workforce. The EPS grant serves educators working in EEC's mixed delivery system including those working in family child care homes, center-based programs, and those that are exempt from licensing. EEC also has a Child Care Resource and Referral Network that provides training to meet basic pre-licensing and ongoing training requirements. EEC licensing staff also provide training to meet licensing requirement. In addition, there are Grantees that provide trainings statewide on child assessment and on the measurement tools utilized in the MA-QRIS.
* **X** Inclusion in state and/or regional workforce and economic development plans. Describe Not applicable
* Other. Describe

### 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 advisory council reviews and makes recommendations to the EEC Board that it considers appropriate for changes and improvements in early education and care programs and services, including professional development. All training and professional development mandated by EEC-licensing regulations requires input and approval by the Board. Any changes in the professional development system or delivery requires extensive input from the Advisory and the Board. In May, 2015, the EEC Board and its Committees reviewed the current professional development and training requirements in advance of making recommendations for potential changes in the system for FY2017. In addition, in accordance with the authority granted in the Head Start Act, the Board of Early Education and Care was designated by the Governor as the State Advisory Council. The goals and priorities of the SAC are aligned with the EEC's Five Year Strategic Plan.

### 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 EPS Grantees are required to provide credit-bearing (CEU or college credit) professional development on the Early Learning Guidelines. EPS grantees are also required to align professional development opportunities to the appropriate guidelines. Support for implementation includes coaching and technical assistance. In addition, training, coaching, and technical assistance is provided on the Center for Social-Emotional Foundation of Early Learning (CSEFEL) model, which is focused on promoting the social emotional development and school readiness of young children birth to age 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) EEC provides training for all educators in Massachusetts through a mixed delivery system which includes group and center based programs, out of school time programs, family child care homes, public preschool programs, private preschool programs, kindergarten, and Head Start programs. This would include those educators in tribal organizations.

### 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. EEC considers the needs and diversity of the children and families statewide when designing and delivering professional development. Grantees are required to offer professional development opportunities and support services for educators seeking EEC certifications or ECE credentials for Infants and Toddlers or School-Age populations. Coursework and coaching is provided on working with children from diverse languages and cultures and second language acquisition. EEC also works with Early Intervention and the Department of Elementary and Secondary Education to ensure that educators have access to training and support on working with children with disabilities.

### Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.

* **X** Financial assistance for attaining credentials and post-secondary degrees. Describe The Early Childhood Educators (ECE) Scholarship Program was established in 2005 to support increases in quality early education and out of school time settings. The ECE Scholarship program provides financial assistance to early education and care out-of-school time providers working in EEC-licensed or licensed-exempt program who are also pursuing an associate's or bachelor's degrees in early childhood education or a related field at an approved Massachusetts college or university. The ECE Scholarship is available annually and is a joint initiative with EEC and the MA Department of Higher Education Office of Student Financial Assistance (OSFA).
* **X** Financial incentives linked to education attainment and retention. Describe An important focus of the EEC’s Framework is in making progress towards increased compensation through rate increases, incentives for educator and program improvement and increasing the access of benefits associated with the Universal Pre-K grant. To that end, programs participating in the QRIS serving infants and toddlers receive a rate increase as a reward for moving to QRIS level 2 to acknowledge the additional educational requirements at that level. Programs participating in the state-funded Universal Pre-K Program (UPK) also receive additional funds that may be used for stipends to acknowledge the additional educational requirements of moving to a QRIS-level 3, which is a UPK requirement.
* Registered apprenticeship programs. Describe
* **X** Outreach to high school (including career and technical) students. Describe EEC has an ongoing relationship with the high schools that maintain vocational early education and care programs. This include ongoing visits and technical assistance to those programs.
* **X** Policies for paid sick leave. Describe Beginning in 2015, EEC began providing earned sick time to family child care providers who receive subsidized payments from EEC for providing child care to eligible families. Each FCC provider is entitled to receive up to four days of earned sick time per year to use when they or a family member is ill, to attend medical appointments, or to address the impact of domestic violence.
* **X** Policies for paid annual leave. Describe At Level 3 of the Massachusetts QRIS, early education and care programs must offer staff at least one benefit program, such as annual paid leave, health care, or retirement.
* **X** Policies for health care benefits. Describe At Level 3 of the Massachusetts QRIS, early education and care programs must offer staff at least one benefit program, such as annual paid leave, health care, or retirement.
* **X** Policies for retirement benefits. Describe At Level 3 of the Massachusetts QRIS, early education and care programs must offer staff at least one benefit program, such as annual paid leave, health care, or retirement.
* Support for providers’ mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe Not applicable.
* Other. Describe Not applicable.

### 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. Massachusetts has a diverse population of families, including those for whom English is not their first language. EEC strives to recruit providers that can match families’ diverse needs and reflect their language and culture. This is done through ensuring materials are translated into multiple languages, providing EPS training and coaching in educators’ native languages and ensuring that Grantees such as the Community and Family Engagement (CFCE) Grantees, Child Care Resource and Referral (CCR&R) Grantees and Family Child Care (FCC) Systems have staff that reflect the language and culture of the families they serve.

### 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.

[x]  Informational materials in non-English languages

[x]  Training and technical assistance in non-English languages

[x]  CCDF health and safety requirements in non-English languages

[x]  Provider contracts or agreements in non-English languages

[ ]  Website in non-English languages

[x]  Bilingual caseworkers or translators available

[x]  Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce

[ ]  Other

[ ]  None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages Spanish, Chinese, Haitian Creole, and Portuguese are primary languages. Subject to appropriate, Massachusetts has dedicated for the translation of documents into these primary languages as well as other common languages in the Commonwealth, including Arabic, French, Khmer, Nepali, Russian, Somali, and Vietnamese.

In addition, through the work of the Department's ”Initiative to Support Young Dual Language Learners,” a series of state family focus groups were conducted in partnerships with multiple stakeholders including the Coordinated Family & Community Engagement (CFCE) grantees. This series was offered as a way to communicate with families of young dual language learners about the importance of their role in supporting their children’s language development and school readiness. In addition, families learned about EEC’s newly adopted Early English Language Development Standards to support dual language learners. In support of this effort, a series of family brochures and resources were translated in six different languages including: Spanish, Arabic, Russian, Portuguese, Creole, and Chinese.

Finally, through the Race to the Top Early Learning Challenge Grant, EEC, in partnership with the Boston Children’s Museum, created resources for educators and families around four core areas, STEM, Brain Building, School Readiness and Literacy, translated into many languages. http://www.bostonchildrensmuseum.org/learning-resources/race-to-the-top.

### 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).

* **X** Yes. The State certifies that no later than September 30, 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 The Massachusetts Department of Early Education and Care (EEC) and United Way of Massachusetts Bay and Merrimack Valley are partnering with Horizons for Homeless Children to support the healthy development and learning of young children in homeless shelters. This effort is part of the state's Brain Building in Progress campaign, which promotes the importance of enriching environments in fostering healthy brain development in children, and the critical role that the public plays in providing positive experiences that support children's learning. The Department of Early Education and Care and United Way jointly lead the Brain Building in Progress campaign.

Through this new partnership, EEC and United Way are providing training and education on child development to Horizons for Homeless Children's Playspace Activity Leaders (PALs) and homeless shelter liaisons. Horizons for Homeless Children's Playspaces are located in homeless shelters across the state and provide settings where children and adults can engage in fun and enriching activities that support the children's growth, healthy brain development, and learning. Horizons for Homeless Children's adult volunteer activity leaders provide enriching experiences for the children in the homeless shelter play spaces.

* 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)
* Current Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

## 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.

### Does the State/Territory fund the training and professional development of the child care workforce?

* **X** Yes. If yes,

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. EEC's Educator and Provider Support (EPS) grant is the primary vehicle for providing state-funded professional development opportunities to educators working in EEC's mixed delivery system. Since the inception of the EPS grants in 2011, grantees have been required to evaluate all services provided through the grant including continuing education and college courses, as well as technical assistance (coaching and mentoring). Grantees are also required to conduct an annual needs assessment to identify professional development needs and improvements for future opportunities and services. Grantees report on the services provided through the grant on a quarterly basis. In September 2015 EEC began working with our federal technical assistance provider, Diane Schilder, at CEELO, to update the current evaluation form and process. The revised evaluation form for EPS coursework will be available electronically and is intended to capture feedback on the overall quality of the course and instructor, knowledge learned and improved practice. Survey responses and comments will be reviewed by EPS grantees and EEC staff. Responses will help to inform future professional development opportunities. The revised evaluation form was piloted this Fall at a conference serving more than 300 educators. At this point 169 participants have responded to the survey. The electronic format has allowed for almost instant results and analysis of the event.

At the individual grantee level there is constant evaluation of services provided through partnership meetings, individual meetings with educators and programs, and professional learning communities. Evaluation of professional development opportunities has also evolved with follow-up coaching and mentoring or technical assistance paired with specific course offerings or through specific "program focused" models through the grant. In a "program focused" model an EPS funded coach will work with an EEC licensed or license exempt program on the programs needs and staff needs, mostly as it related to upward movement on the MA Quality Rating and Improvement System or national accreditation. Through this model there is a dedicated coach working with the program and program staff supporting theory to practice and the implementation of knowledge learned through coursework.

* 1. Indicate which funds will be used for this activity (check all that apply)
* **X** CCDF funds. Describe Massachusetts uses CCDF funds to supports its network of professional development and quality improvement through the EPS grants.
* **X** Other funds. Describe Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).
	1. 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 EPS grantees are required to provide training on all of these topics. In addition, EEC health advisors provide training and support related to nutrition and physical activity. EEC has recently awarded a grant to the Collaborative for Educational Services (CES) to develop and deliver training on social-emotional development and approaches to play and learning. These trainings will be offered initially through CES and then through the EPS Network. In addition, training, coaching and technical assistance is provided on the Center for Social-Emotional Foundation of Early Learning (CSEFEL) model, which is focused on promoting the social emotional development and school readiness of young children birth to age 5.
* **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 EPS grantees are required to provide training on all of these topics. In addition, EEC health advisors provide training and support related to nutrition and physical activity. EEC has recently awarded a grant to the Collaborative for Educational Services (CES) to develop and deliver training on social-emotional development and approaches to play and learning. These trainings will be offered initially through CES and then through the EPS Network. In addition, training, coaching and technical assistance is provided on the Center for Social-Emotional Foundation of Early Learning (CSEFEL) model, which is focused on promoting the social emotional development and school readiness of young children birth to age 5. Massachusetts has a state leadership team comprised of stakeholders from various state and local agencies. The team provides resources and training to support educators and families on promoting positive social-emotional outcomes for children.
* **X** 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 Coordinated Family & Community Engagement Grantees provide training and technical assistance to families to support their children’s positive development. In addition, the QRIS Measurement Tools Grantee provides training and support on the Strengthening Families Tool and Survey to learn about risk and protective factors, strategies to support families, and use of the early childhood educator program self-assessment.
* **X** 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 By the terms of the EPS contract, grantees are required to provide trainings that are developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the Massachusetts Early Learning and Development Standards.
* 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 Not applicable.
* **X** Using data to guide program evaluation to ensure continuous improvement. Describe The QRIS Measurement Tools grantee provides high quality, innovative and diverse professional development how to use research-based measurement tools used in the MA-QRIS to evaluate their program, as well as implement program improvement efforts. All grantees are utilizing the new Continuous Quality Improvement Plan (CQIP) to guide program’s effort in ensuring programs are able to identify their strengths and areas of growth to improve program practice.
* Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe Not applicable.
* **X** Caring for and supporting the development of children with disabilities and developmental delays. Describe EEC also works with the Department of Public Health/Early Intervention and the Department of Elementary and Secondary Education to ensure that educators have access to training and support on working with children with disabilities and developmental delays.
* **X** Supporting positive development of school-age children. Describe EEC works with the Department of Elementary and Secondary Education ensuring educators in school-age programs have access to trainings on supporting positive development for school age children.
* Other. Describe
	1. 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 Educators and Provider Support Grantees provide coaches and specialists around career and academic advising in partnership with 2 and 4-year colleges and universities statewide.
* **X** State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities EEC has an Online Professional Development Calendar that allows educators to search for trainings by geography, training category, credit type, age group, type of setting, position level, and level of experience and education. All entities receiving professional development funds from EEC must list their professional development opportunities on the calendar, including those relevant to postsecondary education opportunities. In addition, EEC publishes the course catalog offered yearly by EPS Grantees.
* **X** Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education The Early Childhood Educators (ECE) Scholarship Program was established in 2005 to support increases in quality early education and out of school time settings. The ECE Scholarship program provides financial assistance to early education and care out-of-school time providers working in EEC-licensed or licensed-exempt program who are also pursuing an associate's or bachelor's degrees in early childhood education or a related field at an approved Massachusetts college or university. The ECE Scholarship is available annually and is a joint initiative with EEC and the MA Department of Higher Education Office of Student Financial Assistance (OSFA).
* Other. Describe
* No

### 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.

* **X** Yes. If yes, describe:

### Licensed Center-Based Care

* 1. Number of pre-service or orientation hours and any required areas/content As described in Part 5 of the CCDF State Plan, EEC licensing regulations establish minimum qualifications for all educators, which require up to 5 hours of pre-service training based on education and experience. In addition, all educators are required to complete a program orientation.
	2. Number of on-going hours and any required areas/content All educators working in licensed center-based early education and care programs must complete up to 20 hours of professional develop annually. At least one-third of the professional development hours must address the needs of diverse learners.

### Licensed Group Child Care Homes

* 1. Number of pre-service or orientation hours and any required areas/content Not applicable.
	2. Number of on-going hours and any required areas/content Not applicable.

### Licensed Family Child Care Provider

* 1. Number of pre-service or orientation hours and any required areas/content All applicants for family child care must submit evidence of current certification in basic first aid and CPR. A potential licensee must also complete up to 30 pre-service training hours, as approved by the Department, depending on the number of children s/he seek to serve and the education/experience of the applicant. In addition to the pre-service qualifications, all family child care applicants must complete a program orientation pertaining to the operation of the program, including but not limited to, emergency procedures, variances, first aid, supervision, child guidance, individual health care plans, infant safe sleep, and curriculum planning.
	2. Number of on-going hours and any required areas/content All licensed family child care providers and family child care assistants must complete up to 10 hours of professional develop annually. At least one-third of the professional development hours must address the needs of diverse learners.

### d) Any other eligible CCDF provider

1. Number of pre-service or orientation hours and any required areas/content Prior to entering into a voucher agreement, license exempt must participate in an orientation conducted by the CCRRs.
2. Number of on-going hours and any required areas/content Not applicable.
* No

### Describe the status of the State/Territory’s policies and practices to strengthen provider’s business practices.

* **X** Fully implemented. 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 EEC, through a contract, developed a 1.5 CEU course on Business Expertise for Early Education and Care providers. This course is an easily accessible resource to assist educators in both home-based and center-based settings with implementing sound business practices that will result in higher scores on the PAS and BAS to meet higher level criteria on the QRIS to demonstrate improved program quality. It includes practices related to fiscal management, budgeting, supervisory practices (including record keeping, hiring, developing and retaining staff), marketing and parent communication. Participants who finish the course leave with a complete business plan for their program.
* 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 Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

## 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.

### Describe the status of the State/Territory’s early learning and development guidelines appropriate for children from birth to kindergarten entry.

### [x]  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 The Massachusetts Guidelines for Preschool Learning Experiences were approved in 2003; the Massachusetts Guidelines for Infants and Toddlers were last revised in 2011; the Massachusetts Early English Language Development Standards were approved in 2013; the Massachusetts Pre-K Science, Technology and Engineering Standards were approved in 2014; and the Massachusetts Standards for Preschool and Kindergarten: Social and Emotional Learning, and Approaches to Play and Learning were approved in 2015.
* **X** Fully implemented and meeting all Federal requirements outlined above. 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 Status – Describe the State/Territory’s status toward complete implementation for any requirement(s) not fully implemented (not yet started, partially implemented, substantially implemented, other)
	+ Implementation progress to date – Identify any requirement(s) partially or substantially implemented

### Unmet requirement - Identify the requirement(s) not fully 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.)
	+ 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

### Check for which age group(s) the State/Territory has established early learning and development guidelines:

[x]  Birth-to-three. Provide a link http://www.mass.gov/edu/birth-grade-12/early-education-and-care/curriculum-and-learning/

[x]  Three-to-Five. Provide a link http://www.mass.gov/edu/birth-grade-12/early-education-and-care/curriculum-and-learning/

[x]  Birth-to-Five. Provide a link http://www.mass.gov/edu/birth-grade-12/early-education-and-care/curriculum-and-learning/

[x]  Five and older (check if State/Territory has standards for five and older that complement but cover child development areas not covered by k-12 academic standards). Describe and provide a link http://www.mass.gov/edu/birth-grade-12/early-education-and-care/curriculum-and-learning/

[ ]  Other. Describe

### 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?

* **X** 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

### If yes, check all that apply to the technical assistance and describe.

* **X** 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 EPS Grantees, who form the statewide professional delivery and coaching system, have a cadre of coaches that provide TA and support on implementing the Early Learning Guidelines into program practice.
* **X** The technical assistance is linked to the State’s/Territory’s quality rating and improvement system. Describe EPS Grantees, who form the statewide professional delivery and coaching system, have a cadre of coaches that provide TA and support on program practice as it relates to the QRIS. In conjunction with EPS, technical assistance is provided by Program Quality Specialists (PQS), who carry out the responsibilities of QRIS. QRIS offers providers an opportunity to work with Technical Assistance Providers as part of its Quality Improvement Grant program. These technical assistance support structures work with providers on continuous quality improvement planning, which addresses how providers nurture children’s cognitive, physical, social and emotional development.
* **X** Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe EPS Grantees, who form the statewide professional delivery and coaching system, have a cadre of coaches that provide TA and support on implementing the Early Learning Guidelines into program practice for all program types and age groups.
* **X** Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe EPS Grantees, who form the statewide professional delivery and coaching system, have a cadre of coaches that provide TA and support on implementing the Early Learning Guidelines into program practice for all program types and age groups.
* **X** Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe EPS Grantees, who form the statewide professional delivery and coaching system, have a cadre of coaches that provide TA and support on implementing the Early Learning Guidelines into program practice for all program types and age groups.
1. Indicate which funds are used for this activity (check all that apply)
* **X** CCDF funds. Describe EEC allocates approximately $3M annually to support its professional develop grants. A substantial portion of these funds are allocated to CCDF.
* **X** Other funds. Describe Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).

### Check here [x]  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

# 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.

## Activities to Improve the Quality of Child Care Services

### 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 Massachusetts' goals for quality improvement in early education and care settings are aligned with the Strategic Plans for the Executive Office of Education and the Department of Early Education and Care.

### Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

* **X** 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)

**X** CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) Providers that participate in QRIS that have self-assessed at a level 2 or higher receive a 3% rate increase for Infant and Toddlers. Direct Services are allocated to CCDF match, CCDF discretionary, CCDF mandatory, CCDF Moe and TANF discretionary and the TANF block grant.

* **X** Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).
* **X** 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)
* **X** 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 Providers that participate in QRIS that have self-assessed at a level 2 or higher receive a 3% rate increase for Infant and Toddlers. Direct Services are allocated to CCDF Fed match, CCDF discretionary, CCDF mandatory, CCDF Moe and TANF discretionary and the TANF block grant. In addition to the direct service efforts to improve the supply of high quality child care, Massachusetts funds professional development grants and Coordinated Family and Community Engagement grants that target the training needs of educators serving infants and toddlers and informal family engagement activities outside of the classroom.
* **X** Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).
* **X** 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)
* **X** CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) EEC allocates up to $4.6M annually for CCR&R services to CCDF Fed match, CCDF discretionary and CCDF targeted discretionary.
* **X** Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).
* **X** 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)
* **X** CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) EEC allocates approximately $3.6M annually to the CCDF block grant for Fed match related the administrative expense of staffing the Department's licensing unit.
* **X** Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) EEC anticipates that an additional $8.2M in state funds will be needed to meet the requirements of the CCDBG Reauthorization. Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).
* 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.)
* **X** Supporting accreditation. If checked, respond to 7.7.
* Indicate which funds will be used for this activity (check all that apply)
* **X** CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) EEC allocates approximately $3.3M annually to support accreditation through its professional develop grants. These funds are allocated to CCDF matching funds and discretionary funding.
* **X** Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).
* **X** 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)
* **X** CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) In SFY2016, EEC allocated approximately $13M in grants to quality supports for children and families through the Coordinated Family and Community Engagement grants. These grants support local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development.
* **X** Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).
* **X** 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)
* **X** CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.) In SFY2016, approximately $900K has been set aside for training related to Early English language Standards, Peer Coaching and mentoring, QRIS Orientations, Support Staff Training, DPH Child Health Specialist and DPH Quality Heal Advisors and Program Quality conference. An additional $250K has been set aside for Research Environment Rating Scales, QRIS Revisions & research and Revisions to the Assessment of Program Practices Tool. Massachusetts also allocated $400K for information technology projects to hosting a platform for E-Learning and QRIS consumer & provider communications.
* **X** Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) Any state expenditures related to the quality activities noted above that exceed the CCDF allocation are supported by state and other federal funds (i.e., TANF and Title IV-E).

## Quality Rating and Improvement System

### Does your State/Territory have a quality rating and improvement system (QRIS)?

* **X** Yes, the State/Territory has a QRIS operating State/Territory-wide. Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available The MA QRIS is administered statewide by EEC. All programs from the mixed-delivery system are encouraged to participate, including licensed and license-exempt center based, public preschool, family child care, and afterschool/out-of-school time programs. The link to the MA QRIS is: http://www.mass.gov/edu/birth-grade-12/early-education-and-care/provider-and-program-administration/quality-rating-and-improvement-system-qris.html.
* 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.

* **X** Participation is voluntary
* **X** 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.) Providers serving children that receive subsidies are required to participate in QRIS. Currently there is no minimum rating required.
* Participation is required for all providers
* **X** Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels
* **X** Supports and assesses the quality of child care providers in the State/Territory
* **X** Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers
* **X** Embeds licensing into the QRIS. Describe Compliance with EEC licensing serves as Level 1 of the MA QRIS. EEC Program Quality staff and EEC Licensors work closely to support programs and providers and align their work to provide seamless continuous quality improvement.
* **X** Designed to improve the quality of different types of child care providers and services
* **X** Describes the safety of child care facilities
* **X** Addresses the business practices of programs
* **X** 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
* **X** 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 EEC has created many financial incentives for providers that participate in the MA QRIS. Some of these opportunities include:
	+ Eligibility to apply for QRIS Quality Improvement Grants that provide grantees with individualized technical assistance; funding for program planning; and awards for durable goods that support improvements to both the indoor and outdoor the learning environments.
	+ Providers that are self-assessed at a Level 2 receive a rate increase equal to three percent of their current subsidized rate for the infants and toddlers they serve.
	+ Providers that are rated Level 3 and above are eligible to apply for the MA Universal Pre-Kindergarten (UPK), which promotes early learning guidelines to support school readiness and positive outcomes for children participating in UPK classrooms and homes; supports and enhances the quality of services for children especially those with high needs; maximizes parent choice by ensuring participation from all program types within a mixed public and private service delivery system; assures that programs use evidence-based child formative assessment systems/tools to ensure that programs are effectively measuring children’s progress across all developmental domains; and allows programs to serve as models of excellence, engage in communities of practice, and support the process of continuous quality improvement.
	+ Providers that are self-assessed and final submitted at QRIS Level 1 or higher are eligible to apply for funding the state-funded Inclusive Preschool Learning Environments Grant (IPLE), which are designed to support inclusive preschool learning environments serving preschool-age children with and without disabilities in high quality, inclusive early education and care settings.
* **X** 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.

* **X** Licensed child care centers
* **X** Licensed family child care homes
* **X** License-exempt providers
* **X** Early Head Start programs
* **X** Head Start programs
* State pre-kindergarten or preschool program
* **X** Local district supported pre-kindergarten programs
* **X** Programs serving infants and toddlers
* **X** Programs serving school-age children
* **X** Faith-based settings
* **X** Other. Describe. Military Child Care programs

### 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. EEC contracted with UMass Donahue to conduct a validation study of the Massachusetts Quality Rating and Improvement System. Results of the Study are expected in early 2016. Through this partnership with the UMass Donahue Institute and Wellesley Centers for Women at Wellesley College, EEC will have a clear understanding of whether there are distinguished measures of quality among the tiers, and also if child outcomes are greater for children in higher rated programs. EEC will also learn which QRIS requirements have the greatest impact on improving quality, and this data will inform future revisions and improvements to the system.

## 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.

### 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.

* **X** 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

Massachusetts has implemented Coordinated Family and Community Engagement Programs (CFCE), which are locally based programs serving families with children birth through school age. There are five main goals of the CFCE program:
	+ Increase knowledge of and accessibility to high-quality early education and care programs and services for families with children prenatal through school-age.
	+ Promote parent education, family engagement and early literacy.
	+ Facilitate collaboration and community planning between local early education and care partners and other community stake holders, including parents.
	+ Provide support and information to families with children transitioning between and among early education and care settings, home and school, and
	+ Support early education and care programs across the public and private sectors in delivering high-quality services.
* **X** Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe EEC has contracts with 42 Family Child Care Systems statewide, which provide resources and supports to family child care providers such as training, technical assistance and consultation, monitoring, and referrals to health and social services for children in their care. FCC Systems may provide referrals to family child care providers.
* **X** Providing training and professional development to promote and expand child care providers’ ability to provide developmentally appropriate services for infants and toddlers. Describe EPS Grantees provide professional development and coursework to promote and expand child care providers’ ability to understand developmentally appropriate practices for infants and toddlers.
* **X** 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 Programs participating in the QRIS serving infants and toddlers receive a rate increase as a reward for moving to QRIS level 2 to acknowledge the additional educational requirements at that level.
* **X** Providing coaching and/or technical assistance on this age group’s unique needs from Statewide networks of qualified infant-toddler specialists. Describe EPS Grantees provide coaching and technical assistance to providers of all age groups. Coaches specialize in program and age types according to their qualifications.
* **X** 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 EEC has partnered with DPH’s Early Intervention Services program to establish and support Regional Consultation Programs (RCPs) to assist children with disabilities by providing expertise on inclusion and effective transition practices to early education and care programs. EEC is also a participating member of DPH’s Interagency Collaborating Council (ICC), which is a federally mandated statewide inter-agency group that advises and assists DPH on issues related to Early Intervention services.
* **X** Developing infant and toddler components within the State’s/Territory’s QRIS. Describe Center Based/School Based programs area assessed using the Infant and Toddler Environment Rating Scale- Revised Edition (ITERS-R). Family Child Care providers use the Family Child Care Environment Rating Scales- Revised Edition (FCCERS-R). Using evidenced-based criteria known to promote strong program quality and child outcomes, these tools encourage providers to embrace best practices while also holding them accountable for maintaining a high quality environment for the infants and toddlers they serve.
* **X** Developing infant and toddler components within the State/Territory’s child care licensing regulations. Describe Massachusetts licensing regulations have specific components related to the health, safety and development of infants and toddlers.
* **X** Developing infant and toddler components within the early learning and development guidelines. Describe EEC has specific Early Learning Guidelines for Infants and Toddlers.
* **X** Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe Coordinated Family and Community Engagement (CFCE) grantees provide child development education across all domains for families that support their knowledge of best practices in terms of caring for infants and toddlers. CFCEs share printed and electronic resources and information about ages and stages of development with families. EEC has developed resources for families that communicate this information that are posted on our website:

http://www.mass.gov/edu/birth-grade-12/early-education-and-care/parent-and-family-support/

http://www.mass.gov/edu/birth-grade-12/early-education-and-care/find-early-education-and-care-programs/types-of-early-education-and-care-programs-and-tips-for-parents-on-selecting-a-quality-program/choosing-after-out--school-programs.html

In addition, the Commonwealth has entered into contracts with both the CCRR Network and Mass 211 to provide information and referral services to all citizens seeking child care options, including individuals seeking information about high quality infant and toddler early education and care.

* **X** 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 EEC has engaged in an infant safe sleep public service campaign to improve the health and safety of infants participating in early education and care programs. In addition, EEC will be offering a home visiting grant in 2016 to support family child care providers who serve toddler age children. Lastly, the Department engaged in partnerships with the Registry of Motor Vehicles and the Massachusetts Bay Transit Authority to emphasize the importance of reading to children and effective ways to communicate with children for parents and caregivers.
* Other. Describe

### 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 EEC has a strong partnership with a team of Environment Rating Scales Reliable Raters. Regular classroom observations has provided quantitative and qualitative data about our infant, toddler, preschool, family child care and school age programs. Through detailed analysis , EEC has engaged in regular policy development, provided targeted trainings and technical assistance, and offered grant funding that focuses on specific areas that have been identified to need improvement. EEC will be concluding the QRIS Validation Study in December 2015 and expects to share the findings with the field and other stakeholders in January 2016. EEC will continue to work with the UMass Donahue Institute in 2016, and will use the results of the validation study to inform revisions to the system.

## Child Care Resource & Referral

### Describe the status of the child care resource and referral system

* **X** 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 The Child Care Resource and Referral (CCRR) system in Massachusetts is comprised of a state-wide network of 7 independent CCRRs, who were awarded the CCRR service contract through a competitive procurement.
* 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

### 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 The CCRR contract contains several reporting requirements that the Department uses to evaluate the effectiveness of the CCRR Network. In addition, EEC requires the CCRR Network to conduct satisfaction surveys with the individuals receiving services at the local level. The results of these surveys are sent to EEC on a monthly basis.

## Facilitating Compliance with State Standards

### 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 Massachusetts uses CCDF quality funds to support the staffing of the Department of Early Education and Care's field operations unit, which includes licensors and investigators who are charged with inspecting monitoring and providing training/technical assistance to licensed early education programs throughout the Commonwealth.

### 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 The Department has been working to develop a system of differential licensing in the Field Operations Unit. This is a system of utilizing a limited number of regulatory indicators which have been proven to be statistically significant in determining compliance with the larger set of regulations. The Department is working to institute this system of regulatory compliance in all three types of licensing in Massachusetts: Family Child Care, Large Group and School Age Child Care and Residential and Placement. The goal of the differential licensing project is to increase the number of visits to licensed programs by decreasing the amount of time spent on each visit. The caseloads of the licensing staff are significantly higher than the national average and those recommended by national accrediting bodies. By decreasing the amount of time spent on visits utilizing the differential licensing model, the Department, even with high caseloads, anticipates the ability to make annual licensing visits to programs as required by the CCDBG Reauthorization.

## Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

### 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 Massachusetts requires all programs participating in the child care subsidy program to engage the MA QRIS. As part of the QRIS, measurement tools are used by providers and by EEC to gauge progress. These tools include the Environment Rating Scales (Early Childhood Environment Rating Scales [ECERS-R], Infant/Toddler Environment Rating Scales [ITERS-R], Family Child Care Environment Rating Scales [FCCERS-R], and School Age Childcare Environment Rating Scales [SACERS]), Strengthening Families Protective Factors, Business Administration Scale (BAS), Program Administration Scale (PAS), Assessment of Program Practices Tool (APT), Arnett Caregiver Interaction Scale, and Classroom Assessment Scoring System (CLASS). At each MA QRIS Level, providers complete self-assessments to generate action steps for improvement. These action steps are directly submitted in each provider's Continuous Quality Improvement Plan (CQIP). EEC reviews self-assessments and CQIPs at Level 2, which is titled "Commitment to Quality." Environment Rating Scales self-assessment scores are verified by EEC at Level 3, and by a reliable rater at Level 4.

### 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 EEC is able to track progress of programs engaged in the QRIS to determine which programs have demonstrated improved quality through higher QRIS ratings. As noted above, the Department has contracted with UMass Donahue to conduct a validation study of the QRIS system. A report on the findings of this study are expected in early 2016.

## Accreditation Support

### 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?

* **X** 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 EPS supports programs in achieving accreditation through the National Association for the Education of Young Children (NAEYC), the National Association of Family Child Care (NAFCC) or the Council on Accreditation (COA) by providing targeted professional development and coaching geared towards accreditation and paying a portion of accreditation fees for programs.
* 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

### 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 EEC tracks how may accredited programs are participating in the MA-QRIS and their QRIS Levels. In addition, EEC receives data from EPS grantees related to the number of programs that are accredited in the Commonwealth.

## Program Standards

### 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 Not applicable.

### 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 Not applicable.

## Other Quality Improvement Activities

### 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. MA QRIS Health Advisors completed five training modules for programs and providers: emergency readiness, health policy, personal care routines, nutrition and food allergies, and individual health care plans. The Health Advisors are currently piloting the training modules with programs and providers to prepare for the implementation of a required 0.5 CEU health and safety course. In 2016, EEC will develop and implement these trainings in an e-learning format.

### The Health Advisors completed a pilot health and safety self-assessment in which will be used as a QRIS self-assessment measurement tool to help programs and providers identify the areas of growth that could be supported by a visit from a Child Care Health Consultant at Level 3. MA QRIS Health Advisors are developing a certification procedure for Health Consultants, which will include a training on the five modules and an orientation on how MA QRIS works. Upon certification, Health Consultants will be entered into a registry, where programs can contact them to arrange a Level 3 visit.

# 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.

## Program Integrity

### Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements. In accordance with the changes made to the child care subsidy program through CCDBG reauthorization, Massachusetts will need to revise its existing regulations and policies. The necessary regulatory and policy revisions will be implemented prior to September 30, 2016. Accordingly, the Commonwealth will also ensure that its tools for auditing and monitoring are updated to reflect the revisions to the child care subsidy program.

### Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.

* **X** Issue policy change notices
* **X** Issue new policy manual
* **X** Staff training
	+ **X** Orientations
	+ **X** Onsite training
	+ Online training
* **X** Regular check-ins to monitor implementation of the new policies. Describe In addition to the policy change notices and public hearings on the changes requiring regulatory change, EEC's Audit Compliance and Resolution Unit holds weekly staff meetings to discuss changes to regulations and policies, as well as common issues observed during fiscal monitoring reviews.
* Other. Describe

### 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.All state and federally funded providers that contract with EEC to provide and/or manage subsidized child care for eligible families, including early education programs holding contracts to provide access to early childhood programs, family child care systems and Child Care Resource and Referral Agencies (CCR&R’s), are subject to fiscal and program compliance monitoring by EEC’s Audit Compliance and Resolution (ACR) Unit. The monitoring program consists of activities to confirm that families receiving care through these contracts are eligible to receive services according to state and federal regulations and EEC policies. In addition, the monitoring program corroborates contractor compliance by verifying financial information, confirming compliance with audits, and evaluating internal controls. The EEC ACR Unit conducts the following activities to ensure compliance with federal and state laws and policies:

### (1) Evaluation of financial and audit reports, including Uniform Financial Report, A133 Audits, and independent provider audits;

### (2) Risk Assessment analysis to determine the priority status and scope of monitoring for each contracted provider. As part of the risk assessment, monitors consider each provider’s licensing history and the amount of state and/or federal funding received by each provider;

### (3) Onsite monitoring visits to contracted providers and CCR&Rs according to their priority status resulting from the risk assessment analysis. (Note: Some providers may not be subject to an onsite review). The onsite review may consist of verification of the following: (a) revenues/expenses; (b) eligibility determination and documentation; (c) management procedures and internal controls; (d) billing practices and records; (e) attendance records; and (f) follow up to previous audit or onsite review issues; and

### (4) Compliance activities related to Corrective Action Plans that may result from desk reviews or prior onsite monitoring visits by requesting follow-up reports and/or conducting follow-up onsite visits.

### (5) Yearly Subsidy Management trainings are held in every region across the Commonwealth related to fiscal, program, system, and eligibility issues. This EEC conducted training includes presentations from the Fiscal, Audit, Legal, and IT Units. The training topics include contract administration, waitlist, eligibility determinations, financial assistance polices, billing and address any updates to federal and state regulations. EEC direct contract providers are required to have at least one representative attend training in their region.

**Definition**: “Subrecipient means a non-Federal entity that receives a subaward from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A subrecipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93).Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as “vendors”).The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified.”

### Describe the 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.

### 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))

### **X** Run system reports that flag errors (include types). Describe Massachusetts’ Child Care Financial Assistance (“CCFA”) application contains an audit log that reports all actions taken by subsidy administrators, including affected client record, the type of record, the action taken, the date the action was taken, and user id of the individual that took the action. The record types included in the report are person, placements, attendance, and eligibility. CCFA requires subsidy administrators to state the reason for making an adjustment to each record, which will help facilitates reviews conducted by the EEC Audit Unit.

### **X** Review of enrollment documents, attendance or billing records

* **X** Conduct supervisory staff reviews or quality assurance reviews
* **X** Audit provider records
* **X** Train staff on policy and/or audits
* Other. Describe As described above at 8.1.3, EEC’s ACR Unit engages in several activities to identify program violations and administrative error to ensure integrity of the CCDF program including risk assessment analysis, on-site monitoring, review of attendance records, review of billing, and technical assistance through corrective action plans.
* 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))

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### **X** Review of enrollment documents, attendance or billing records

* **X** Conduct supervisory staff reviews or quality assurance reviews
* **X** Audit provider records
* **X** Train staff on policy and/or audits
* Other. Describe As described above at 8.1.3, EEC’s ACR Unit engages in several activities to identify program violations and administrative error to ensure integrity of the CCDF program including risk assessment analysis, on-site monitoring, review of attendance records, review of billing, and technical assistance through corrective action plans.
* None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines

### 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.

1. 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
* **X** Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
* **X** Recover through repayment plans
* **X** Reduce payments in subsequent months
* **X** Recover through State/Territory tax intercepts
* Recover through other means
* **X** Establish a unit to investigate and collect improper payments. Describe All state and federally funded providers that contract with EEC to provide and/or manage subsidized child care for eligible families including family child care systems and Child Care Resource and Referral Agencies (CCR&Rs) are subject to fiscal and compliance monitoring by EECs ACR Unit. The monitoring program consists of activities to confirm that families receiving care through these contracts are eligible to receive services according to state and federal regulations and EEC policies. In addition, the monitoring program corroborates contractor compliance by verifying financial information, confirming compliance with audits and evaluating internal controls.
* Other. Describe Through EEC’s automated eligibility and billing system, Child Care Financial System (CCFA) , EEC can recoup from a provider’s future payments any sums that must be repaid related to services provided within the current fiscal year, including payments that were improperly authorized for families who were ineligible for child care subsidies. EEC can also recoup any improper payments made to CCR&Rs through CCFA by reducing future payments for services provided within the current fiscal year.

EEC places outstanding debts owed by contractors, providers, and/or subsidy recipients on the Commonwealth’s Billing and Accounts Receivable Subsystem (BARS) which may include prior fiscal year improper authorized payments. Through BARS, invoices are generated to debtors that include instructions on how to make payments and notifications of any rights which the debtor may have to request a hearing to challenge the debt amount. If the debtor fails to make any payments on a timely basis, the Commonwealth may initiate a collection action against the debtor and/or intercept any other State funds being paid to the debtor including, but not limited to, the intercept of tax refund payments.

EEC works closely with the Massachusetts Operational Services Division and the Attorney General’s Office, Division of Public Charities, in reviewing and following up with providers whose annual financial reports and/or filings indicate that improper payments may have occurred. In addition, and as discussed above, EEC fiscal monitoring staff conduct annual fiscal evaluations of its contracted child care providers which include reviews of providers’ current fiscal year filings.

When a contracted provider, voucher provider or subsidy recipient is suspected of committing fraud, the case is referred to the Office of the State Auditor/Bureau of Special Investigations (BSI), who may initiate an in-depth investigation. EEC and/or the Auditor’s Office may also refer the matter to the Attorney General’s Office or District Attorney’s Office for further civil or criminal legal action, which could include the attachment and liquidation of assets.

* 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
1. 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
* **X** Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
* **X** Recover through repayment plans
* **X** Reduce payments in subsequent months
* **X** Recover through State/Territory tax intercepts
* Recover through other means
* **X** Establish a unit to investigate and collect improper payments. Describe All state and federally funded providers that contract with EEC to provide and/or manage subsidized child care for eligible families including family child care systems and Child Care Resource and Referral Agencies (CCR&Rs) are subject to fiscal and compliance monitoring by EECs ACR Unit. The monitoring program consists of activities to confirm that families receiving care through these contracts are eligible to receive services according to state and federal regulations and EEC policies. In addition, the monitoring program corroborates contractor compliance by verifying financial information, confirming compliance with audits and evaluating internal controls.
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* 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
1. 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
* **X** Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
* **X** Recover through repayment plans
* **X** Reduce payments in subsequent months
* **X** Recover through State/Territory tax intercepts
* Recover through other means
* **X** Establish a unit to investigate and collect improper payments. Describe All state and federally funded providers that contract with EEC to provide and/or manage subsidized child care for eligible families including family child care systems and Child Care Resource and Referral Agencies (CCR&Rs) are subject to fiscal and compliance monitoring by EECs ACR Unit. The monitoring program consists of activities to confirm that families receiving care through these contracts are eligible to receive services according to state and federal regulations and EEC policies. In addition, the monitoring program corroborates contractor compliance by verifying financial information, confirming compliance with audits and evaluating internal controls.
* Other. Describe Through EEC’s automated eligibility and billing system, Child Care Financial System (CCFA) , EEC can recoup from a provider’s future payments any sums that must be repaid related to services provided within the current fiscal year, including payments that were improperly authorized for families who were ineligible for child care subsidies. EEC can also recoup any improper payments made to CCR&Rs through CCFA by reducing future payments for services provided within the current fiscal year.

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* 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

### 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.

* **X** Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified. If Massachusetts determines that an applicant or recipient of subsidized child care committed fraud as part of his/her application, the Department reserves the right to disqualify the individual for up to three years or until the improper payment is repaid/recouped. Any time an applicant’s child care subsidy is denied, terminated or reduced, the individual has the right to seek an appeal through the Department. If the individual is still aggrieved after the Department issues its final agency decision, s/he may seek further appeal of the decision in Superior Court.
* **X** Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified. EEC may terminate a provider’s voucher agreement with the CCR&R and/or terminate a provider’s contract with the Department if a provider has been found responsible for improper payments due to program violations. EEC may also preclude a specific provider from bidding on a competitive procurement if a provider has been found responsible for improper payments related to program violations. Although there are no administrative appeal rights to challenge such actions directly with EEC, a provider may challenge these decisions in the State's Superior Court through the Commonwealth's administrative procedures act, at Massachusetts General Laws, Chapter 30A, on the grounds that there has been an abuse of discretion.
* **X** Prosecute criminally
* **X** Other. Describe In addition, EEC may also limit the number of referrals issued to voucher only providers and/or reduce the number of contract slots awarded to contracted providers. Although there are no administrative appeal rights to challenge such actions directly with EEC, a provider may challenge these decisions in the State's Superior Court through the Commonwealth's administrative procedures act, at Massachusetts General Laws, Chapter 30A, on the grounds that there has been an abuse of discretion. In addition, EEC may use a history of improper authorizations against a provider that is seeking to enter into a contract with the Department to provide early education and care services to children and families of the Commonwealth. Under such circumstances, a provider may be able to request a formal debriefing, in accordance with the terms of the procurement, from EEC's procurement officer as to the reasons for the decision and then can appeal that decision to EEC's General Counsel. The provider may further appeal the General Counsel's decision to the Operational Services Division (OSD) who oversees the Commonwealth procurement process.