

Child Care and Development Fund (CCDF) Plan For Montana FFY 2019-2021

1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. In this section respondents are asked to identify how match and maintenance-of-effort (MOE) funds are identified. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems, and outline the work they have done on their disaster preparedness and response plans.

1.1 CCDF Leadership

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

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

Identify the Lead Agency or joint interagency office designated by the state or 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)).

Effective Date: 10/01/2018

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Department of Public Health and Human Services

Street Address: 111 North Sanders

City: Helena

State: MT

ZIP Code: 59601

Web Address for Lead Agency: <http://dphhs.mt.gov/>

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Sheila

Lead Agency Official Last Name: Hogan

Title: Director, Montana Department of Public Health and Human Services

Phone Number: 406-444-5623

Email Address: sheilahogan@mt.gov

1.1.2 Who is the CCDF Administrator?

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or 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 the person with administrative responsibilities and include his or her contact information.

Effective Date: 10/01/2018

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Patty

CCDF Administrator Last Name: Butler

Title of the CCDF Administrator: Bureau Chief, Early Childhood Services

Phone Number: 406-444-1828

Email Address: pbutler@mt.gov

Address for the CCDF Administrator (if different from the Lead Agency):

Street Address: 111 N Jackson Street

City: Helena

State: MT

ZIP Code: 59601

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

CCDF Co-Administrator First Name: N/A

CCDF Co-Administrator Last Name: N/A

Title of the CCDF Co-Administrator: N/A

Description of the role of the Co-Administrator: N/A

Phone Number: N/A

Email Address: N/A

Address for the CCDF Co-Administrator (if different from the Lead Agency):

Street Address: N/A

City: N/A

State: N/A

ZIP Code: N/A

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as it retains overall responsibility for the administration of the program (658D(b)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards (98.16(i)(3)). Check one.

Effective Date: 10/01/2018

- All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
- 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.

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

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

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

Other.

Describe:

2. Sliding-fee scale is set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

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

Other.

Describe:

3. Payment rates are set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

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

Other.

Describe:

4. Other. List and describe other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

1.2.2 How is the CCDF program operated? In other words, which entity(ies) implement or perform these CCDF services? Check all that apply

Effective Date: 10/01/2018

a) Who conducts eligibility determinations?

- CCDF Lead Agency
- Temporary Assistance for Needy Families (TANF) agency

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

Describe

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

- CCDF Lead Agency
- TANF agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

c) Who issues payments?

- CCDF Lead Agency
- TANF agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note : The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).

Effective Date: 10/01/2018

- CCR&R

- Tasks to be performed: The Lead Agency monitors administrative and implementation responsibilities performed by CCR&R through a Service Delivery Agreement, outlining each agency's responsibilities as to CCDF grant funds and programs receiving them. Child Care Resource and Referral Agencies administer the subsidy eligibility determination, following policies established by the Lead Agency. Further, yearly audits are conducted for CCR&R under the SDA for compliance with program rules and policy and are submitted to the Lead Agency for review. Monitoring of provider and family services is conducted by the Lead Agency through annual site visits and monthly reporting.
- Schedule for completing tasks: Monthly data reports, fiscal monitoring of monthly invoicing, monthly error rate pull, quarterly reports, yearly site visit, quarterly meetings with leadership of agencies.
- Budget which itemizes categorical expenditures in accordance with CCDF requirements: a budget is part of the RFP process as well as the annual renewal of contracts. The Fiscal Analyst reviews the monthly invoices and data for adherence to the budget. Budget line items reflect the categorical expectations of the scope of work and the adherence to the CCDF requirements.
- Indicators or measures to assess performance: reports of data including case load, applications, change reports, consumer education, referral, training and professional development opportunities, and recruitment. Error rate is determined by the Lead Agency for each month and reported back to the agencies for internal control and continuous quality improvement.

- Child Care Licensing (CCL)

- Tasks to be performed: The Lead Agency monitors administrative and implementation responsibilities performed by CCL through a Memorandum of Understanding (MOU), outlining their responsibilities as to CCDF grant funds and programs receiving them. These include monitoring inspections, TA, policy and rule development, orientation,

license application and renewal, background checks, emergency and disaster planning, collaboration with other agencies (such as public health, immunization dept., fire and building dept., and database systems. Schedule for completing tasks: quarterly data reports, bimonthly intergovernmental leadership meetings, monthly program specialist meetings, CCR&R inspectors meet monthly to work on support and TA plans for child care facilities.

- Budget which itemizes categorical expenditures in accordance with CCDF requirements: a budget is part of the MOU process as well as the renewal of the agreement. The Fiscal Analyst of each Division reviews the monthly expenditures and data for adherence to the budget. The budget reflects the categorical expectations of the scope of work and the adherence to the CCDF requirements.
- Indicators or measures to assess performance: The Child Care Licensing program in the Quality Assurance Division receives inter-departmental fiscal reviews, and submits quarterly data reports.
- Montana Early Childhood Project (ECP)
 - Tasks to be performed: The Lead Agency monitors administrative and implementation responsibilities performed by ECP through a contract, outlining their responsibilities as to CCDF grant funds and programs receiving them.
 - Schedule for completing tasks: The Lead Agency monitors ECP through quarterly activity reports and regular meetings.
 - Budget which itemizes categorical expenditures in accordance with CCDF requirements:
 - Indicators or measures to assess performance:
- Temporary Assistance for Needy Families (TANF)
 - Tasks to be performed: Parents participating in the Temporary Assistance for Needy Families (TANF) Cash Assistance program administered by the State of Montana contact their Pathways Case Manager to arrange for a Best Beginnings Child Care Scholarship for Pathways Employability/Service Plan activity that require child care. The Pathways Case Manager makes an electronic referral to the Child Care Resource & Referral (CCR&R agency. The Best Beginnings Child Care Scholarship may begin on the date the CCR&R receives the electronic referral form. The parent then has 30 calendar days from the date of the Pathways referral to submit a completed application to the CCR&R agency. If an application is not submitted within 30 calendar days, the case will be closed. TANF Families must use providers listed in 37.80.101(2). Each family has a monthly copayment listed in ARM 37.80.202. Failure to pay the monthly copayment may result in case closure. An Eligibility Renewal Reminder Notification is sent to the TANF family 45 days from the end of the eligibility period.
 - Schedule for completing tasks: ongoing as needed
 - Budget which itemizes categorical expenditures in accordance with CCDF requirements: there is no budget for this work. Families are determined eligible based on a referral and as needed. Funding is supplemented by a TANF transfer.
 - Indicators or measures to assess performance: program specialist meet to review policy and expectations to assure that family's needs are being met and CCDF expectations are met. CCDF and TANF regulations are used as measures for completion and

accuracy.

- Child Protective Services (CPS)
 - Tasks to be performed: Children are referred to the lead agency by the Child and Family Services Division. CCR&R eligibility specialists accept the referral and continue the process of eligibility determination.
 - Schedule for completing tasks: ongoing as needed
 - Budget which itemizes categorical expenditures in accordance with CCDF requirements: there is not a budget for this work. Children are referred or court ordered based on need. General fund is used to support this assistance.
 - Indicators or measures to assess performance: Because this is a requirement of the court system in Montana, the Lead Agency has internal processes in place. These procedures are examined yearly by the Policy Unit to assure compliance and successful flow of work.

1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)).

Effective Date: 10/01/2018

Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate.

The Lead Agency makes child care information systems available to and reusable by public agencies in other states by: Adhering to industry standards and best practices with regard to the development frameworks and platforms (e.g. supported version(s) of Microsoft .NET, SQL, etc.) it uses; Developing and maintaining technical documentation related to all application development; Following Agile methodology (e.g. sprint-based releases) as the foundation of the agency's Software Development Life Cycle (SDLC); Complying with all State information security requirements. Montana has not received any requests for code or software for child care information systems or information technology.

Effective Date: 10/01/2018

1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).

Effective Date: 10/01/2018

Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.

The Lead Agency's [Child Care Policy Manual](#), Section 1-9, describes how the Lead Agency governs the use and disclosure of confidential and personally-identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds.

The Lead Agency and its contractors may share information about children and families receiving CCDF assistance and child care providers receiving CCDF funds for purposes directly connected with the administration of the public assistance programs with other federal programs and certain entitled entities. Confidential information concerning the applicant or participant, without notice to or permission of the individual, may be provided and used for the following purposes:

- Reporting child abuse and neglect to the appropriate authority (Montana Codes Annotated [MCA] 41-3-205);
- Conducting child support activities;
- Conducting child care licensing activities;
- Establishing eligibility and administering (including audits, investigations, prosecutions, etc.) federal programs or federally assisted programs, which provide assistance (cash, in-kind, or services) directly to individuals based on need.

When there is a question about a breach of confidentiality, the Early Childhood Services Bureau will refer the request to the Office of Legal Affairs.

The Department and its contractors must maintain confidentiality with health records and other materials under the Health Insurance Portability & Accountability Act (HIPAA).

Child Care Resource and Referral [CCR&R] agencies have the responsibility of maintaining confidentiality of family and provider information. Examples of maintaining confidentiality in the Child Care Resource and Referral setting include, but are not limited to, the following:

- The name or any identifying information is not available in a public location, of a family receiving service.
- The CCR&R maintains confidentiality when a non-custodial parent requests the location of their children, without approval from authorities.
- An applicant's or a participant's personal information remains confidential when child care provider inquiries about eligibility. The CCR&R maintains confidentiality when a provider seeks the location of a previous customer.

This policy also includes information related to:

- HIPAA
- Subpoenas
- Emergency situations
- Reporting child abuse and neglect
- Where to report child abuse & neglect
- Contractors
- Volunteers
- Child Care Resource and Referral Practices
- Release to Child Care Licensors & Child and Family Services Investigators
- Release to Law Enforcement
- Release to Participant
- Release to Others
- Child Care Providers

Effective Date: 10/01/2018

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan, which serves as the application for a 3-year implementation period. As part of the Plan development process, Lead Agencies must consult with the following:

(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at

https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf.

(2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).

(3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

Consultation

involves meeting with or otherwise obtaining input from an appropriate agency in the development of the state or territory CCDF Plan. Describe the partners engaged to provide services under the CCDF program in question 1.4.1.

1.3.1 Describe the Lead Agency's consultation in the development of the CCDF plan.

Effective Date: 10/01/2018

a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

Montana consulted with Best Beginnings Community Coalitions. There are 20 local coalitions statewide. The local coalitions are working to increase coordination across child serving systems at the grass roots level in towns, counties, and regions. Local coalition membership includes members of local government including the Chamber of Commerce, County Attorney's Office, Commissioners, school boards, health departments, local police and fire departments, and other representatives specific to each community. Feedback is gathered at Best Beginnings Advisory Council meetings, in which members of local coalitions are present. Specifically, small group breakout discussions were facilitated to gather information for the State Plan. Community Coalition members report back to their local coalitions about the work being done at the state level, including the development of Montana's State Plan. The State Plan was also discussed during monthly local coalition meetings during the drafting of the State Plan.

b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

The lead agency works with the statewide Best Beginnings Advisory Council to receive policy recommendations including rule revisions, system development, and quality and

training initiatives. Together, the lead agency through the advice of the Council develops, implements, maintains, and evaluates the effectiveness of the state's child care programs. The Best Beginnings Advisory Council serves as the state's comprehensive early childhood advisory council and as the collaborating entity for the early childhood system. The council includes representation from interested constituency groups, governmental agencies, the public at large, child care providers, parents, state and local government, and tribal communities. The council's work focuses on creating a statewide plan for a comprehensive early childhood service system that assists in four principal objectives:

1. Children will have access to high quality early childhood programs.
2. Families with young children will have community support.
3. Children will have access to a medical home and health insurance.
4. Improving the social, emotional, and mental health needs of young children and families.

The Best Beginnings Advisory Council is a 60-member council. There is a CCDF report given by the Early Childhood Services Bureau Chief at each council meeting. Council members can ask questions about the upcoming changes, and are notified of the state's progress on completing the State Plan through email, website updates, and meeting discussions. Opportunities for feedback on the State Plan, and discussion following the presentations are given. Work groups are formed around various policy changes in order to receive feedback and recommendations from Council members. Specifically, small group breakout discussions were facilitated at the Best Beginnings Advisory Council meeting to gather information for the State Plan. Workgroups formed from the BBAC membership met throughout the year to research, gather data, and provide recommendations to the council in the drafting of the state plan. For example, the Infant/Toddler workgroup provided recommendations about increasing infant/toddler slots, revising the reimbursement structure, and incentives. The Provider Payment and Policy Workgroup, which included the Best Beginnings policy unit and CCR&R personnel, and the market rate evaluation team made recommendations for market rate adjustments and provider payment policies. These recommendations included the methodology and rates for payment, and were incorporated in the State Plan through policy and rule changes.

c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including

Tribal leadership. Many States and Tribes have consultation policies and procedures in place.

1. There are representatives from 7 tribes on the Best Beginnings Advisory Council. The council is working to fill the 1 tribal vacancy on the council. The Best Beginnings Advisory Council is a 60-member council. There is a CCDF report given by the Early Childhood Services Bureau Chief at each council meeting. Council members can ask questions about the upcoming changes, and are notified of the state's progress on completing the State Plan through email, website updates, and meeting discussions. Opportunities for feedback on the State Plan, and discussion following the presentations are given. Work groups are formed around various policy changes to receive feedback and recommendations from Council members. A meeting was held with the CCDF Tribal Administrators one day prior to the recent Best Beginnings Advisory Council meeting. Lesa Evers, the Tribal Relations Manager with the Department of Public Health and Human Services, attended the meeting, along with several Tribal CCDF staff. Early Childhood Services Bureau, Child Care Licensing, and the Early Childhood Project attended the meeting. Discussion was held about the State Plan draft, and while no specific recommendations were received at the meeting, information was exchanged to support Tribal CCDF State plan writing, as well as Montana's State Plan writing.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

1. A development team was created by the Lead Agency to develop the state plan. The team consisted of the Early Childhood Services Bureau, Child Care Licensing, and the Early Childhood Project. The Lead Agency consulted with a variety of early childhood grant managers within the Bureau: Head Start, Montana Project LAUNCH (Linking Actions for Unmet Needs in Children's Health), and the Montana Preschool Development Grant, STARS Preschool, and BBAC work groups. Each of these managers contributed language to the state plan.

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

Effective Date: 10/01/2018

a) Date of the public hearing. 04/26/2018

Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in (a)).
04/03/2018

Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).

c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

The Lead Agency posted an announcement about the public hearing on their website at www.bestbeginnings.mt.gov. The announcement included the following information: "The 2019-2021 CCDF State Plan Public Hearing is set for Thursday, April 26, 2018, in the Sanders Auditorium, 111 N. Sanders, Helena, MT at 1:00PM. Details have been posted on the [DPHHS public calendar](#). On April 19th, a draft of the plan will be available on the [Early Childhood Services Bureau website](#), and public comments will be accepted online between April 19th and May 3rd on the [Early Childhood Services Bureau website](#)." The announcement was ADA compliant per state website regulations.

The announcement was also emailed to the Lead Agency's interested parties list. The interested parties list includes staff from the Lead Agency, Child Care Licensing, the Montana Early Childhood Project, CCR&Rs the Best Beginnings Advisory Council, Tribal CCDF Administrators, Head Start / Early Head Start Directors, STARS to Quality (QRIS) programs, and individuals that have requested to be added to the interested parties list.

d) Hearing site or method, including how geographic regions of the state or territory were addressed. The hearing took place in the DPHHS Sanders Auditorium, Helena, MT. The location of the hearing is ADA accessible. The public hearing was recorded, and interested parties were able to call into the meeting using WebEx. A recording of the WebEx meeting was available by request and was ADA compliant with closed captioning. The public comment period was offered over a two-week period, and the public could submit comments electronically through an online survey link, so the public

did not need to attend the hearing for their comments to be considered.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) The plan was available on the Early Childhood Services Bureau website and attached to the State public e-calendar. CCR&R agencies sent this information out to all licensed providers.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? The Early Childhood Services Bureau developed a committee, including the Bureau Chief and program managers, to review all comments submitted during the comment period of April 19th - May 3rd. The committee responded to comments and decided if any changes needed to be made to the plan based on the comments. A report was available on the Early Childhood Services Bureau Website that showed comments and responses from the committee.

1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: <https://www.acf.hhs.gov/occ/resource/pi-2009-01>)

Effective Date: 10/01/2018

a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

<https://dphhs.mt.gov/hcsd/childcare/documentsandresources#711484704-state-plan>

b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

Working with advisory committees.

Describe:

The Best Beginnings Advisory Council is a 60-member council. There is a CCDF report given by the Early Childhood Services Bureau Chief at each council meeting. The Best Beginnings Advisory Council is notified via email, and a notice is posted on the Early Childhood Services Bureau website. Once an amendment to the State Plan

has been made and accepted, the State Plan is updated on the Early Childhood Services Bureau website. The Best Beginnings Advisory Council disseminates the information to their partners they work with, including local and statewide partners.

[Working with child care resource and referral agencies.](#)

[Describe:](#)

Child Care Resource and Referral agencies are notified via email, and a notice is posted on the Early Childhood Services Bureau website. Once an amendment to the State Plan has been made and accepted, the State Plan is updated on the Early Childhood Services Bureau website. Child Care Resource and Referral Agencies route any questions from their community members to the Early Childhood Services Bureau. A quarterly meeting is held with the CCR&R Network wherein information concerning the State Plan is shared and comments are received.

[Providing translation in other languages.](#)

[Describe:](#)

[Sharing through social media \(e.g., Twitter, Facebook, Instagram, email\).](#)

[Describe:](#)

Montana uses an Interested Parties email distribution list to provide updates to Montana's State Plan, including the drafting process, important dates, and amendments. In addition to the Interested Parties List, Montana emails our various partners, including:

- The Early Childhood Project
- Child Care Licensing
- The Best Beginnings Advisory Council
- Best Beginnings Local Coalitions
- The Human and Community Services Division of Montana DPHHS
- Early Head Start and Head Start directors
- The Montana Project LAUNCH team
- Montana Preschool Development Grant team
- Infant Toddler and Preschool Instructors
- Child Care Resource and Referral agencies
- Child and Adult Care Food Program Sponsors

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

Describe:

Montana uses an Interested Parties email distribution list to provide updates to Montana's State Plan, including the drafting process, important dates, and amendments. There are over 350 individuals on the Interested Parties list, including child care providers and parents. In addition to the Interested Parties List, Montana emails our various partners, including:

- The Early Childhood Project
- Child Care Licensing
- The Best Beginnings Advisory Council
- Best Beginnings Local Coalitions
- The Human and Community Services Division of Montana DPHHS
- Early Head Start and Head Start directors
- The Montana Project LAUNCH Initiative team
- Montana Preschool Development Grant team
- Infant Toddler and Preschool Instructors
- Child Care Resource and Referral agencies

These partners share the information provided with the providers and families in their communities. Once an amendment to the State Plan has been made and accepted, the State Plan is updated on the Early Childhood Services Bureau website. The public is notified via email, and a notice is posted on the Early Childhood Services Bureau website.

- Other.

Describe:

CCR&Agency newsletters are distributed by email and postal mail to all providers in the region. The newsletters include news of the State Plan and any changes that may have occurred. This assures that each provider has had the opportunity to read or research the State Plan.

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

Lead Agencies are required to describe how the state or 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. This

includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care (98.14(a)(1)).

1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).

This list includes agencies or programs required by law or rule, along with a list of optional partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services.

Include in the descriptions 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 the quality of services for infants and toddlers through school-age children;
- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

Effective Date: 10/01/2018

- (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns.

Describe the coordination goals and process:

- Coordination: Best Beginnings Community Coalitions are a part of the Best Beginnings Advisory Council. ECSB meets with representatives from these coalitions on a regular basis, usually monthly. The membership of these Coalitions varies, but include school board trustees, city commissioners, county commissioners, and local government representatives. The role of the Coalitions is to link local services to state services and to provide feedback and advice to the BBAC and to ECSB.
- Goals: Increased understanding of services and agencies at local levels which may lead to stronger connections in supporting families and providers.

- (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

- Coordination: Montana's Best Beginning Advisory Council (BBAC) provides input and recommendations to ECSB on statewide early learning community needs and progress. BBAC representatives from around the state meet at least once a year to provide input and recommendations to ECSB so strategies and actions are well-informed and broadly supported by parents, child care providers, health and safety experts and interested members of the public. BBAC members represent Montana's geographically and culturally diverse communities, including members from public, nonprofit and for-profit entities. BBAC and ECSB partnered to create the state's Needs Assessment and Strategic Plan. The plan's vision is aligned with the CCDBG Act's coordination requirements and states "The Best Beginnings Advisory Council's vision is to ensure Montana has a comprehensive, coordinated, early childhood system that provides a governance structure and leads to strong collaboration in order to best meet the needs of Montana's youngest citizens." BBAC further advised ECSB on the implementation of the CCDF Reauthorization passed by Congress
- Goals: The primary goal is to enhance and align the quality of services by expanding accessibility and continuity of care.

- Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

- (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes.

Describe the coordination goals and process, including which tribe(s) was consulted:

- Coordination: The Tribes that are represented on the BBAC are:
 - Blackfeet Tribe
 - Chippewa-Cree Tribe
 - Crow Tribe
 - Confederated Salish and Kootenai Tribe
 - Fort Belknap Indian Community
 - Fort Peck Assiniboine and Sioux
 - Northern Cheyenne

In March of 2018, all of the Indian tribes in Montana were invited to a collaborative consultation meeting to discuss goals and processes, especially in relation to the new federal rule and the subsequent State Plans. Four of the seven tribes attended, with notes and communication shared with others. In addition, all 7 tribes have a seat on the BBAC and participate in the state-wide meeting as well as various work groups. There are seven Tribal Head Start and Early Head Start Programs. The Child and

Adult Care Food Program, also housed in the Early Childhood Services Bureau, serves seven tribes. The system of collaboration within the Early Childhood Services Bureau allows for a great system of coordination as we deliver services and meet individual needs.

- Goals: Increased coordination and understanding of different program administration strategies and policies. Stronger understanding of specific cultural needs and meeting the needs of families. Other outcomes may include MOUs between Tribal government and state government related to licensing standards, expanded participation in the State's quality initiatives.

N/A-There are no Indian tribes and/or tribal organizations in the State.

(REQUIRED) State/territory agency(ies) 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 and Part B, Section 619 for preschool).

Describe the coordination goals and process:

- Coordination: Part C is housed in DPHHS. Representatives from the Developmental Services Division are on the Best Beginnings Advisory Council as well as the Part C Coordinator. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF.
- Goals: Increased understanding of services and agencies which may lead to stronger connections in supporting families with children who may have a disability.

(REQUIRED) State/territory office/director for Head Start state collaboration.

Describe the coordination goals and process:

- Coordination: The Head Start State Collaboration Office is housed in the Early Childhood Services Bureau in addition to having a seat on the statewide Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF.
- Goals: Increased awareness of program and family needs for Head Start programs. Increased understanding of eligibility policies for Head Start programs

(REQUIRED) State agency responsible for public health, including the agency responsible for immunizations.

Describe the coordination goals and process:

- Coordination: Representatives from the Family and Community Health Bureau and

the Children's Mental Health Bureau are included in the Best Beginnings Advisory Council. In addition, joint projects occur among these partners such as partnering with the Public Health office on Immunization training and outreach. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF. The LAUNCH grant is housed at ECSB and works collaboratively with Children's Mental Health Bureau and Family and Community Health Bureau.

- The Public Health and Safety Division (PHSD) of Montana DPHHS is the agency responsible for public health including immunizations. The Lead Agency collaborates with the Montana Immunization Program and the FCHB in multiple ways including the following:

1. Project LAUNCH (Linking Action for Unmet Needs in Children's Health) - LAUNCH is a collaboration of three bureaus: The Early Childhood Services Bureau, Children's Mental Health Bureau, and the Family and Community Health Bureau (FCHB) which houses the Healthy Montana Families (HMF) home visiting program, WIC, and the Maternal and Child Health Block Grant. HMF requires child clients to receive well-child checkups as recommended by the American Academy of Pediatrics Bright Futures. In Montana, this requirement is aligned with the EPSDT benefit. This supports child care by familiarizing the family with the need for regular well-child visits and recommended immunization schedules, thereby making their children more likely to arrive in child care with current immunizations and documentation.
2. Great Beginnings Great Families (GBGF) conference - The Great Beginnings Great Families conference is a partnership between the Lead Agency and the Family and Community Health Bureau within in PHSD. The GBGF conference completed its 6th iteration in August 2018 and will be planning the 7th in September 2018. This conference offers opportunities for professional development for early learning/early childhood providers, social workers/mental health professionals, home visitors, and public health program staff (WIC, Family Planning, Children with Special Health Care Needs).
3. Best Beginnings Advisory Council (BBAC) - The BBAC leadership consists of program staff and leaders from the Lead Agency and the FCHB within PHSD. Healthy Montana Families (MIECHV-funded home visiting program) which is housed in the PHSD has chosen the BBAC to be its advising body. Within the Lead Agency, the Montana Head Start Collaboration Office and the CCDBG/CCDF also use the BBAC as their advising body. The Lead Agency and the FCHB collaborate regularly in order to carry out the work of the BBAC and local community coalitions.

- Montana Immunization Program - The Lead Agency collaborates with the Child Care Licensing program who in turn works directly with the Immunization Program

in order to support child care providers in meeting immunization requirements.

- Goals: Additional Child Care Health Consultants in the State to respond to need and to STARS quality indicators. Establish a framework of Consultants and Advisors. Ongoing policy development for families with special needs children. Support the establishment of an Infant Mental Health association in Montana. Continue Infant Early Childhood Mental Health Consultation throughout Montana in home visiting and child care/early learning settings.

(REQUIRED) State/territory agency responsible for employment services/workforce development.

Describe the coordination goals and process:

- Coordination: The contracted agencies through the Public Assistance Bureau, entitled WoRC operators, have a represented seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF. WoRC operators also provide referrals for TANF families who need child care.
- Goals: Increased awareness of policies and strengthening family friendly approaches by ensuring shared understanding of eligibility policies and requirements. Collaboration with our Apprenticeship Program for workforce development. Data sharing with employment statistics and compensation goals as outcomes. Support the establishment of an Infant Mental Health Association in Montana. Continue Infant Early Childhood Metal Health Consultation throughout Montana in home visiting and child care /early learning settings as introduced by LAUNCH project. The lead agency has collaborated in this project and will continue to apply this framework.

(REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK).

Describe the coordination goals and process:

- Coordination: The Office of Public Instruction has appointed an Early Grades Specialist, a Title 1- Neglected and Delinquent, Homeless Children and Youth Specialist, and a Preschool Specialist for Special Education (3-5) for representation on the Best Beginnings Advisory Council. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF. Montana received a Race to the Top Preschool Development Grant in which the Office of Public Instruction and DPHHS/ECSB partnered to administer the grant. The continuing grant provides opportunity to support the PreK initiative in Montana with this partnership.
- Goals: Increased coordination related to resources and professional development. Increased transition opportunities and structure from early childhood to

kindergarten. Expand opportunities for preschool in Montana in transition, assessment, and accessibility .

(REQUIRED) State/territory agency responsible for child care licensing.

Describe the coordination goals and process:

- Coordination: The Quality Assurance Division houses the Child Care Licensing (CCL) Program which is the entity that is responsible for child care licensing. The Early Childhood Services Bureau collaborates with Child Care Licensing to support child care licensing requirements. Child Care Licensing also provides representation on the Best Beginnings Advisory Council as well. CCL and ECSB work together to coordinate the new federal rules and apply the regulations enhancing and aligning the quality of services.
- Goals: The goal of partnership and alignment between ECSB and Child Care Licensing is to ensure licensing standards and interpretation of rule meet the needs of child care providers as well as the STARS to Quality program. STARS to Quality works very closely with Child Care Licensing to ensure training requirements and criteria are complimentary and not duplicated potentially streamlining the process for licensing and STARS. School Age licensing path is also a goal for this partnership.

(REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs.

Describe the coordination goals and process:

- Coordination: Both the state CACFP office and CACFP sponsors of child care facilities have a seat on the Best Beginnings Advisory Council. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF. CACFP is part of the Early Childhood Services Bureau, and they directly coordinate through meetings and projects to ensure the effective delivery of services throughout the state.
- Goals: Awareness and outreach of services for child care providers. To review and initiate nutrition and physical activity indicators within the QRIS framework, which will involve a great deal of collaboration between Child Care Licensing, Early Childhood Services Bureau (including STARS), and CACFP, who already are meeting on a monthly basis to collaborate and inform one-another about program-specific needs and issues.

(REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons.

Describe the coordination goals and process:

- Coordination: The State Coordinator for Homeless Education is housed in the

Montana Office of Public Instruction. This person is involved with the BBAC and therefore closely collaborates with the Lead Agency regarding this topic. The Office of Public Instruction (OPI) has appointed multiple staff as representatives on the Best Beginnings Advisory Council, including, the OPI Montana Preschool Development Grant Coordinator, the Homeless and Title One coordinator, the Preschool Specialist for Special Education ages 3-5 and an Early Grades Specialist. They bring expertise in early literacy, homelessness, Title 1, Part B and C and preschool programming through the Preschool Development Grant. Several projects and services have been coordinated because of these relationships. The Lead Agency worked with the Public Health and Safety Division and Child Care Licensing Program of the Quality Assurance Division to establish a procedure for how a family experiencing homelessness would be able to comply with immunizations in order to participate in the Best Beginnings Scholarship Program.

- Goals: Increased access to child care services for families who may be homeless by reducing barriers regarding policies and statute. Policy development will support child care providers as well by increasing the resources and knowledge available on enrolling a child whose family is experiencing homelessness.

(REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program.

Describe the coordination goals and process:

- Coordination: A representative from TANF has a seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF. The TANF office and the Child Care Resource and Referral agency offices work closely to ensure that program policies and services are applied consistently. The Eligibility Specialists at the local CCR&R work with the WoRC Program case managers to establish need for service and set up benefits for individuals who are eligible. The TANF Working Caretaker Relative program and the program requirements are outlined in the TANF policy manual.
- Goals: Increased coordination and shared understanding of policies and programs.

(REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program.

Describe the coordination goals and process:

- Coordination: Many families accessing the Best Beginnings Scholarship (child care subsidy) are also Medicaid eligible or participants. Medicaid and Health Services Branch administers Medicaid and the state Children's Health Insurance Program. This branch also includes the Children's Mental Health Services Bureau (CMHB). The Lead Agency collaborates with CMHB, through Project LAUNCH in

the following manner:

- - Project LAUNCH (Linking Action for Unmet Needs in Children's Health) - LAUNCH is a collaboration of three bureaus: The Early Childhood Services Bureau, Family and Community Health Bureau, and Children's Mental Health Bureau (CMHB). The CHMB is responsible for supporting Medicaid reimbursements that support children in a variety of ways particularly in supporting providers who serve children with emotional disturbances and other diagnosed conditions related to mental health.
- Goals: Strengthen partnerships with CMHB to further establish and promote support of mental health services through the use of Medicaid codes and other avenues for children and families.

(REQUIRED) State/territory agency responsible for mental health

Describe the coordination goals and process:

- Coordination: Representatives from the Family and Community Health Bureau and the Children's Mental Health Bureau have a seat on the Council. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF and MIECHV.
- Goals: Strengthen partnerships with the Family and Community Health Bureau and the Children's Mental Health Bureau to increase the support of social, emotional, and mental health needs of young children and families. Montana would like to establish a system of mental health coordinators, which would include family engagement, the Pyramid Model, and social/emotional evidence-based practices.

(REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development.

Describe the coordination goals and process:

- Coordination: Child Care Resource and Referral Agencies are represented on the council. In addition, at least quarterly meetings are held with the Child Care Resource and Referral Agencies in order to brainstorm, address challenges and opportunities for service delivery. CCR&RAgencies are required partners for the Community Coalitions attached to the statewide council. Child Care Training.org is a long distance on-line training organization that ECSB contracts with for creation and deliverance of required child care training options. ECSB meets regularly and receives quarterly reports to monitor work and to coordinate delivery of services to support professional development of providers.
- Goals: Increased coordination and consistent application of policies. Family friendly policies, opportunity to identify strengths and challenges within policy application and community level services.

- (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable).

Describe the coordination goals and process:

- Coordination: The Montana Afterschool Alliance is the organization for advocacy and policy making in Montana. The ECSB Bureau Chief represents DPHHS on the board of this organization.
- Goals: Extending the day and/or year of services for families and enhancing the quality of services. A pathway of licensing regulations specific to the school age child is needed and is being planned. There is a workgroup, of which ECSB belongs, to create quality standards for school age programs.

- (REQUIRED) Agency responsible for emergency management and response.

Describe the coordination goals and process:

- Coordination: The Lead Agency coordinates with the State Continuity and Emergency Management Office (SCEMO) to develop, maintain, and review the Continuity of Operations Plan (COOP) for the Early Childhood Services Bureau. The purpose of the coordination with SCEMO is to support the procedures that facilitate organized decision making at unique times that might otherwise be chaotic. SCEMO assists the Lead Agency in the following processes:
 - Focus decision making on priority issues in a potentially volatile environment
 - Provide process ranking information to assist in the allocation of limited recovery resources at the time of an incident
 - Provide procedures to recover from a variety of incidents in an organized manner
 - Protect State assets
 - Preserve the State image and public confidence
 - Communicate appropriately to the press and staff the nature and resolution of the incident coordination in developing and maintaining the COOP establishes and supports an on-going continuity planning process that will:
 1. Evaluate the impact of significant incidents that may adversely affect the processes identified in this plan
 2. Develop and maintain a plan to ensure the organization can restore the processes according to the priority identified in this plan
 3. Support the National Essential Functions of Government for the citizens and businesses in the state of Montana in a timely manner.
- Goals: Shared focus on the continued functioning of critical government leadership elements, including: succession to key offices, such as those of the governor; communications within the branches of government, government agencies, and the public; leadership and management operations; situational awareness; and personnel accountability. Maintain external relationships and agreements with a wide variety of entities. This includes communications and interactions, as necessary, during a crisis

with critical partners and organizations, including the federal government; other state, territorial, tribal and local governments; and private sector and non-profit organizations.

The following are examples of optional partners a state might coordinate with to provide services. Check all that apply.



State/territory/local agencies with Early Head Start - Child Care Partnership grants.

Describe

- Coordination: The Head Start Collaboration Director for Montana is responsible for convening the Early Head Start Partnership grantees to support alignment within the state early childhood system. This group includes representation from STARS to Quality, Early Childhood Services Bureau, the Early Childhood Project, private child care providers involved in the partnership, Child Care Licensing, Early Head Start Training and Technical Assistance personnel, and the Early Childhood Collaborative Systems Unit Coordinator. The group meets quarterly to coordinate and smooth transition for children between programs and to align quality of services.
- Goals: Increased awareness of program and family needs for Early Head Start. Increased understanding of eligibility policies for Early Head Start programs.



State/territory institutions for higher education, including community colleges

Describe

- Coordination: Representatives of higher education including community colleges participate in the BBAC. ECSB partners with Montana State University - Western to assign and align assessors for the QRIS program in Montana. The Montana Preschool Development Grant offers P-3 scholarships for EC professionals seeking degrees to be able to teach preschool classes.
- Goals: Increased enrollment in Early Childhood Education courses leading to completion of a degree in ECE. Students receiving a degree in ECE increase the qualified candidate pool thereby increasing quality in child care and early childhood education in Montana.



Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services.

Describe

- Coordination: The Early Childhood Services Bureau chief is appointed to the Children's Trust Fund and coordinates with the CTF and the Child and Family Services Division to work within a comprehensive system. ECSB Partners with the

Children's Trust Fund to provide contracted services at a community level for 5 of the 20 Community Coalitions for the prevention of child abuse and neglect. The Children's Trust Fund also contracted with ECSB to write and deliver course work on Trauma Informed Care. The course is available to child care professionals as well as those working in the system of care. The Montana Afterschool Alliance organization is established to support and advocate for school age services in Montana. The Bureau Chief of ECSB sits on this board. The advisory board includes Montana School Administrators, program administrators, and representatives from other government agencies and parents.

- Goals: Increased coordination and understanding across sectors about services for the early childhood population and their families. Development of quality standards for out of school time. A pathway for licensing this unique group of providers for health and safety requirements. Statute is being presented in Montana's 2019 legislative session to allow this licensing avenue to continue.

[State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.](#)

[Describe](#)

- Coordination: The Family and Community Health Bureau, responsible for home visiting, has a seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF.
- Goals: Increased coordination and understanding of services for families. Home visiting will become a strong focus of BBAC and STARS to Quality as we continue to build our coordinated system. The Montana Pyramid Model, a social and emotional program designed to support young children and families will be delivered in part through Family and Community Health Bureau home visiting models.

[Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.](#)

[Describe](#)

- Coordination: Many families accessing the Best Beginnings Scholarship (child care subsidy) are also Medicaid eligible or participants. Medicaid and Health Services Branch administers Medicaid and the state Children's Health Insurance Program. This branch also includes the Children's Mental Health Services Bureau (CMHB). The Lead Agency collaborates with CMHB, through Project LAUNCH in the following manner:
 - Project LAUNCH (Linking Action for Unmet Needs in Children's Health) - LAUNCH is a collaboration of three bureaus: The Early Childhood Services Bureau, Children's Mental Health Bureau, and the Family and Community Health

Bureau which houses the Healthy Montana Families (HMF) home visiting program, WIC, and the Maternal and Child Health Block Grant. HMF requires child clients to receive well-child checkups as recommended by the American Academy of Pediatrics Bright Futures. In Montana, this requirement is aligned with the EPSDT benefit. This supports child care by familiarizing the family with the need for regular well-child visits and recommended immunization schedules, thereby making their children more likely to arrive in child care with current immunizations and documentation.

- Goals: Strengthen partnerships with CMHB to further establish and promote support of mental health services through the use of Medicaid codes and other avenues for children and families.

[State/territory agency responsible for child welfare.](#)

[Describe](#)

- Coordination: Child and Family Services Division is responsible for child welfare in Montana and has a seat on the Council. Referrals from CFSD are accepted by the state child care agency and determined eligible for child care assistance. Additionally, representatives from the lead agency sit on coordinating boards for the prevention of child abuse and neglect and have coordinated with CFSD in building a strategic plan for the state of Montana to meet the needs and eradicate the high number of CPS cases and foster care placements. Healthy Mothers, Healthy Babies directs the Period of Purple Crying for the Children's Trust Fund Board. These organizations, along with the Child Protective Services Administrator, represent child welfare and sit on the BBAC board to coordinate services.
- Goals: Increased coordination and shared understanding of policies and programs. Blended and leveraged funding is possible through combined conferences and programs to develop a statewide strategic plan to mitigate child abuse and neglect.

[State/territory liaison for military child care programs.](#)

[Describe](#)

- Coordination: A child care representative from Fort Harrison has a seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including CCDF.
- Goals: Increased coordination and shared understanding of policies and programs.

[Provider groups or associations.](#)

Describe

- Coordination: MtAEYC, Montana Child Care Association, and labor organizations have representation on the Best Beginnings Advisory Council. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF. The family and group provider organizations in the state are regionally organized and operating. ECSB sponsored a symposium for the providers in 2017 and 2018. The Bureau Chief and the Child Care Licensing Program Manager attend to speak and listen. The ECSB sponsors Community Forums on an annual and rotating basis. The 2018 Community Forums are held within each CCR&R region across the state. Various stakeholders such as child care providers, parents of young children, community partners, partnering state agencies and programs, legislators and policy makers, and interested business and community members are invited to attend. In order to accommodate those that may not be able to attend during a typical work week, forums are held in the evening and offer an opportunity to ask questions regarding CCDF related topics.
- Goals: Increased awareness and shared understanding of the needs of early childhood programs across setting types. Communication and feedback opportunities are increased and a priority is established for Family and Group home providers and families.

Parent groups or organizations.

Describe

- Coordination: Parents have representation on the statewide Best Beginnings Advisory Council and the local community councils. The Council advises the Early Childhood Services Bureau on comprehensive early childhood services in Montana, including the CCDF.
- Goals: Parent Participation increases the Early Childhood Services Bureau's understanding about the barriers the families experience and offers insight into what family friendly policies are needed to meet family needs.

Other.

Describe

- Coordination: Philanthropic organizations, Department of Labor and Industry and business will also have representation on the Council. The Early Childhood Services Bureau contracts with Child Care Training to deliver long distance/online training. Other contracting and coordinating work includes Child Care +, U of M - Missoula for child care inclusion classes and training, and coordination with workgroups responsible for ELG, Assessment and Curriculum, and the Montana Pyramid Model. Twenty Community Coalitions are established to carry out the work of BBAC in coordination and delivery of services to families and children. These Coalitions are a result of the collaboration of Healthy Montana Families

(MIECHV-funded home visiting) and the BBAC.

- Goals: The potential for diversified funding sources and community level support are expanded through the participation of these groups. A partnership with these organizations increases family friendly practices with businesses through awareness.

1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds

Optional Use of Combined Funds:

States and territories have the option to combine CCDF funds with any program identified as required in 1.4.1. These programs include those 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, children experiencing homelessness, 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 to expand and/or enhance services for infants, toddlers, preschoolers and school-age children and families to allow for the delivery of comprehensive 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 a 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 Program Performance Standards or state/territory prekindergarten requirements in addition to state/territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start 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 CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start ' Child Care Partnerships:

https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf
).

1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?

Effective Date: 10/01/2018

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

Using multiple funding streams to pay for services; by paying a portion out of each funding stream and/or paying for some services with one funding stream and other services with a different funding stream. Allocation percentages are based on available funding.

b) Which funds you will combine

TANF, IV-E Waiver, and Montana State general funds.

c) Your purpose and expected outcomes for combining funds, 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

The purpose of combining funds is to spend them evenly throughout the year and ensure payments are made promptly to providers, early childhood partners, and contractors. Allocations of funding streams are determined based on available funds. Allocations of funding streams are determined based on available funds. The expected outcome of combining funds it to ensure a consistent funding stream and to ensure that all clients are served without having a waiting list.

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

CCDF Funds are combined the same way across the State. Funds are combined by changing allocation percentages throughout the year between state general funds and federal funds.

e) How are the funds tracked and method of oversight

The funds are tracked through the State of Montana's accounting system: SABHRS (Statewide Accounting and Budgeting / Human Resources System). The Budget Analyst for the Early Childhood Services Bureau, within the Human and Community Services Division of the State of Montana Department Public Health and Human Services is responsible for tracking, reconciling, reporting, and maintaining all accounting records associated with these funding streams. Periodic audit reviews are conducted to ensure compliance and accuracy.

1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)?

Note:

The Lead Agency must check at least public and/or private funds as matching, even if preK funds also will be used.

Use of PreK for Maintenance of Effort: The CCDF final rule clarifies that public preK funds may also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate preK and child care services to expand the availability of child care while using public preK funds as no more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for preK services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

Effective Date: 10/01/2018

N/A - The territory is not required to meet CCDF matching and MOE requirements

- Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.

-- If checked, identify the source of funds:

General Fund and State Special Revenue

-- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$ 9,015,689 annually

- Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).

-- If checked, are those funds:

donated directly to the State?

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

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

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

- State expenditures for preK programs are used to meet the CCDF matching funds requirement.

If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent):

-- If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$

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

- State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

-- The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).

No

Yes

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

-- Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent):

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

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: \$

1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (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 the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level-state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)).

State Level

Through the Best Beginnings Advisory Council, representatives of local government including public health, local education agencies, and county commissioners are encouraged to participate on their community councils. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF.

The Office of Public Instruction (OPI) has appointed multiple staff as representatives on the Best Beginnings Advisory Council, including, the OPI Montana Preschool Development Grant Coordinator, the Homeless and Title One Coordinator, the Preschool Specialist for Special Education ages 3-5 and an Early Grades Specialist. They bring expertise in early literacy, homelessness, Title 1, Part B and C and preschool programming through the Preschool Development Grant. Several projects and services have been coordinated because of these relationships. OPI staff and DPHHS staff have collaborated to create IDEA documents to help Head Start and child care providers understand the referral and IDEA process to help ensure youth needing services are able to receive them. In addition, DPHHS and OPI are working on family engagement strategies for both agencies; they have developed strong relationships that have resulted in joint work regarding development of state KEA tools and including all Head Start programs into the AIM, state wide data system. Representatives from the Family and Community Health Bureau and the Children's Mental Health Bureau are included in the Best Beginnings Advisory Council. Members are both at the Bureau Chief and program level. In addition, joint projects occur among these partners, such as partnering with the Public Health office on immunization training and outreach. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF. These bureaus partner with the Early Childhood Services Bureau to lead the Montana Project LAUNCH (Linking Actions in Unmet Needs in Children's Health) grant. This grant is working towards improved systems and access to mental health services for young children and their families. Children-serving bureaus also coordinate and work to share data and resources to support the work provided by the partnering bureau.

The contracted agencies through the Public Assistance Bureau, WoRC operators, have a represented seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF. WoRC operators also provide referrals for TANF families who need child care.

Both the state CACFP office and CACFP sponsors of child care facilities have a seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF. CACFP is part of the Early Childhood Services Bureau, and they directly coordinate through meetings and

projects to ensure the effective delivery of services throughout the state.

A representative from the DPHHS Disability services Division sits on the Best Beginnings Advisory Council as well as the Part C Coordinator. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF.

The Family and Community Health Bureau, responsible for home visiting, has a seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF. The Children's Trust Fund and Child and Family Services Division has a seat on the Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF.

The Early Childhood Services Bureau Chief sits on the following state boards: The Montana Afterschool Alliance, Children's Trust Fund, and the Family Support Services Advisory Council.

Additionally, the state child care agency administers the child care program for children in foster care based on referrals from community social workers, determining need for care. A child care representative from Military services has a seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including CCDF.

The Early Childhood Services Bureau contracts with Child Care Training to deliver long distance/online training. Other contracting and coordinating work includes Child Care +, U of M - Missoula for child care inclusion classes and training, and coordination with workgroups responsible for ELG, Assessment and Curriculum, and the Montana Pyramid Model. Twenty Community Coalitions are established to carry out the work of BBAC in coordination and delivery of services to families and children. These Coalitions are a result of the collaboration of Maternal and Early Childhood Home Visiting (MECHV) and the BBAC.

The Best Beginnings STARS to Quality Program is a voluntary quality rating and improvement system that aligns quality indicators with support and incentives for early childhood programs and early childhood professionals. STARS programs receive discounts from several businesses that offer early childhood products and educational materials. STARS partners with local CCR&Rs and the Early Childhood Project to offer free training that is required for STARS participation.

Healthy Mothers, Healthy Babies is an organization that works to improve the health and safety of mothers, babies and families through education and collaborative partnerships of public and private organizations. This organization has been collaborating with the local early childhood coalition coordinators around the state. Healthy Mothers, Healthy Babies, in

partnership with the local coalition coordinators, received a grant to focus on children's health data.

County/Local Level

Each of Montana's Tribal CCDF Programs has a represented seat on the Best Beginnings Advisory Council. The Council provides advisory capacity for comprehensive early childhood services in Montana, including the CCDF.

Child Care Resource and Referral Agencies are represented on the council. In addition, quarterly meetings are held with the Child Care Resource and Referral Agencies in order to brainstorm, and address challenges and opportunities for service delivery. CCR&R Agencies are required partners for the community councils attached to the statewide council.

Philanthropic organizations, Department of Labor and Industry and business also have representation on the Council.

Program Level

MtEYC, Montana Child Care Association and labor organizations have representation on the Best Beginnings Advisory Council. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF. Parents have representation on the statewide Best Beginnings Advisory Council and the local community councils. The Council advises the Early Childhood Services Bureau on comprehensive early childhood services in Montana, including the CCDF.

The Act Early Initiative has representation on the Best Beginnings Advisory Council. The Council will provide advisory capacity for comprehensive early childhood services in Montana, including the CCDF. The Act Early Initiative promotes collaboration among early childhood programs in states and territories so children with autism or other developmental disabilities can be identified early and get the services and support they and their families need.

A Representative of the Arthur M. Blank Family Foundation, a philanthropic organization, is on the Best Beginnings Advisory Council. The CCDF administrator and multiple grant leads within the Early Childhood Services Bureau have worked collaboratively with the Funders for Montana's Children, a private philanthropic group that is providing funding Early Childhood Service support in Montana. Individual meetings about collaboration have been held with the CCDF administrator and the Early Childhood Services Bureau staff have participated as panelists at a statewide forum sponsored by the funders group.

Effective Date: 10/01/2018

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

Lead Agencies may use CCDF funds to establish or support a system of local or regional child care resource and referral (CCR&R) organizations 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 (such as a statewide CCR&R network) (658E(c)(3)(B)(iii); 98.52).

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.

- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).

- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;

- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;

- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, what services are provided and how it is structured and use section 7.6.1 to address the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

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

Effective Date: 10/01/2018

No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.

Yes. The state/territory funds a CCR&R system. If yes, describe the following:

a) What services are provided through the CCR&R organization?

Montana has a written contract with regional CCR&Rs. The following services are provided by the regional CCR&R agencies and contained in the written contracts.

Contractors are required to report quarterly regarding data for the following:

1. Referral services for families seeking child care services in the CCR&R region

include the following:

- Parent referrals include information regarding provider facility types, hours of care including those that include nontraditional hours, and emergency child care providers;
- Including customer service and consumer education about making an informed child care choice that meets the needs of the family.
- Referrals made to other needed community services

2. Eligibility determination services for families needing assistance to pay for child care services, including eligibility specialists' caseloads

3. Consumer Education information for families and providers in the following areas:

- Information about quality, quantity of child care services, facilities participating in Montana's QRIS system and provider training opportunities
- Referrals include data on the supply and number of child care inquiries, the types of facility, and other personal preferences for child care providers; and
- Working with the state Best Beginnings Advisory Council, Best Beginnings local coalitions, non-profits, and child care providers located in the CCR&R regions to increase supply and quality of providers available for families.

4. Community services available to assist families and providers regarding special needs including community availability of IDEA services, homelessness, immunizations, etc.

5. Coaching and consultation for providers involved in Montana's QRIS system

6. Technical assistance for all child care programs
7. Emergency preparedness information for families and providers using child care services in Montana
8. Professional Development facilitation and support (training hours, health & safety training)
9. Program recruitment for new licensed child care programs
10. Data collection, and its use at a state level as well as a regional level.
 - Annual reports are created to inform communities of needs and of the effect of the CCR&R services.
 - Quarterly reports keep the lead agency apprised of trends and needs and referral data is used to track accessibility and affordability.
 - Other data collected includes: number of child care facilities by type by community, county, region or state (NACCRAware (hosted by lead agency) or CCUBS); child care capacity by community, county, region or state (NACCRRAware); cost of child care; supply and demand; scholarship usage by county - families and children served, dollars invested by county (from lead agency via CCUBS for community use); number of children enrolled in the child care scholarship program who have a special need, which may include accessing part B and C IDEA services; CCR&R inclusion specialists support provided to child care providers who serve children with special needs, including collaboration with Part B and C IDEA services; and child care facility recruitment efforts and results

b) How are CCR&R services organized, include how many agencies, if there is a statewide network and if the system is coordinated?

Montana contracts with 6 CCR&R agencies for a total of 7 regions statewide. For a description of each CCR&R and region, visit the [Early Childhood Services Bureau CCR&R Website](#). The CCR&R directors support their own statewide network, which meets regularly to support the statewide CCR&R system of services.

Public and Private partnerships are created and supported in each region. One such example is the collaboration with a private for-profit enterprise, MyVillage which seeks to attract new child care homes and support home child care startups to deliver quality care via shared series and technical assistance. CCR&R have promoted MyVillage and have offered space to host initial meetings.

Other examples are that some CCR&R are working with local businesses and chambers of commerce to open employer sponsored child care facilities or to bring business investment into child care to expand or subsidize slots available to help address the workforce shortage. The State Workforce Innovation Board hosted a

panel discussion by the Chamber of Commerce, the CCR&R a corporate leader and an architect regarding the process of linking business investment to a child care to facilitate expansion. Another CCR&R helped facilitate a partnership between a rural city government, the school district, and private investors to build a child care facility where there was no child care available. Another CCR&R has built a partnership with a tribal CCDBG program to minimize duplication of services and support both child care scholarships and provider training on the reservation with respective funding sources. These models are shared within the CCR&R Network and with the State Agency to encourage replication.

1.8 Disaster Preparedness and Response Plan

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children including the need for safe child care, before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122) through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body:

Statewide Child Care Disaster Plan

- The plan was developed in consultation with the Best Beginnings Advisory Council, CCL, CCR&Rs, Head Start, and additional early childhood stakeholders.
- The plan was developed in collaboration with the State Continuity & Emergency Management Office, and formalizes coordination with child care within statewide emergency planning.

- The CCR&R regional agencies are required to maintain, and train staff annually on their agency Emergency Preparedness Plan; which contains a Continuity of Operations plan (COOP), and a Devolution Plan. The Emergency Preparedness plan, COOP, and the Devolution of Operations plans are reviewed by each agency's Emergency Work Group Committee on an annual basis. Changes are made to the plan as changes occur. The plan includes a working strategy to create, administer and staff an Emergency Child Care Center for rescue and relief workers and a "guardian" program to help staff the center in an emergency. CCR&Rs work with their local city/county emergency preparedness
- committee to build awareness of efforts in the event that a significant natural event should occur.
- Consultation and coordination with CCL ensures that providers engage in emergency preparedness and planning activities, including distribution of materials and resources to assist child care providers.

Continuity of Operations Plan (COOP):

The Lead Agency collaborated with the State Continuity and Emergency Management Office (SCEMO) to develop, maintain, and review the Continuity of Operations Plan (COOP) for the Early Childhood Services Bureau. The purpose of the coordination with SCEMO is to support the procedures that facilitate organized decision making at unique times that might otherwise be chaotic. SCEMO assists the Lead Agency in the following processes:

- Focus decision making on priority issues in a potentially volatile environment
- Provide process ranking information to assist in the allocation of limited recovery resources at the time of an incident
- Provide procedures to recover from a variety of incidents in an organized manner
- Protect State assets
- Preserve the State image and public confidence
- Communicate appropriately to the press and staff the nature and resolution of the incident coordination in developing and maintaining the COOP establishes and supports an on-going continuity planning process that will:

1. Evaluate the impact of significant incidents that may adversely affect the processes identified in this plan
2. Develop and maintain a plan to ensure the organization can restore the processes according to the priority identified in this plan
3. Support the National Essential Functions of Government for the citizens and businesses in the state of Montana in a timely manner.

Coordination with CCR&Rs:

- Child Care Resource and Referral agencies are required to maintain, and train staff annually on their agency Emergency Preparedness Plan; which will contain a Continuity of Operations plan, and a Devolution Plan. The Emergency Preparedness plan, Continuity of Operations Plan, and the Devolution of Operations plans need to be

- reviewed by each agency's Emergency Work Group Committee on an annual basis.
- The plan must include a working strategy to create, run and staff an Emergency Child Care Center for rescue and relief workers and a "guardian" program to help staff the center in an emergency.
 - For continuity planning, an updated roster for members on the guardian plan will be submitted with the revised plans on the first Friday in January. This information is essential in the event that duties need to be devolved to another agency.
 - If a significant natural event occurs in the local service area, which impacts families and/or providers, the following will occur:
 1. The agency will check in with their child care providers in the affected areas to assure that they are Ok and if they are in need of any resources
 2. If the Provider has to evacuate, the agency within that service area will assist in getting information to the families of the children in the programs and act as a communication resource for families and child care providers. Methodology for informing families should be included in the emergency preparedness plan
 3. Report to the Early Childhood Services Bureau within 24 hours any information necessary related to the significant natural event. Information shall be emailed to the Early Childhood Services Bureau Child Care Program Manager

Effective Date: 10/01/2018

1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster:

Provisions for continuing core CCDF program functions

- Continuing Best Beginnings Scholarship Program payments to CCDF providers or extending eligibility re-determinations for families, etc.) will be coordinated by ECSB management, CCR&R management, and supporting staff during and after a disaster.
- Core function continuation will be managed by the State Continuity & Emergency Management Office by using the Early Childhood Services COOP

CCR&Rs

- For continuity planning, an updated roster for members on the guardian plan will be submitted with the revised plans on the first Friday in January. This information is essential in the event that duties need to be devolved to another agency.
- If a significant natural event occurs in the local service area, which impacts families and/or providers, the following will occur:
 - The agency will check in with their child care providers in the affected areas to assure

that they are Ok and if they are in need of any resources

-If the Provider has to evacuate, the agency within that service area will assist in getting information to the families of the children in the programs and act as a communication resource for families and child care providers. Methodology for informing families should be included in the emergency preparedness plan

-Report to the Early Childhood Services Bureau within 24 hours any information necessary related to the significant natural event. Information shall be emailed to the Early Childhood Services Bureau Child Care Program Manager

ECSB

- In the event of a disaster, ECSB will execute their COOP with the support of the State Continuity & Emergency Management Office. The purpose of the ECSB COOP is to help ensure that business processes can continue during a time of emergency or disaster.
- The COOP addresses the following as Priority 1, which means this process will be functional within 24 hours of a disaster:

1. Procedures that address systems data security and data storage to ensure adequate backup of family and child care provider records after a disaster.
2. Mechanism to collect data and track families receiving subsidies and providers serving subsidized children that are impacted by a disaster.
3. Provisions for continuing services to families in the event CCR&Rs are unable to conduct eligibility re-determinations or families are unable to submit necessary documentation.
4. The plan includes policies to continue assistance for families that are temporarily out of work or engaged in job search after a disaster.
5. The plan includes policies that anticipate an increased need for child care subsidies among families impacted by a disaster in addition to families already receiving assistance.
6. Provisions to quickly establish and manage a waiting list for families needing assistance.
7. Currently, Montana does not have a waiting list.
8. Coordination with CCL, emergency management officials, voluntary organizations, and CCR&R agencies to implement temporary child care services after a disaster, including establishment of contracts or agreements.

- During a disaster, CCL is responsible for coordinating the following efforts:

1. Training and identifying pre-approved child care providers that have undergone criminal history and background checks who are willing to assist with provision of temporary child care after a disaster.
2. Temporary operating standards (or provisions for temporarily waiving certain child care regulatory requirements) to accommodate providers that need to re-locate and/or the provision of temporary child care in alternate facilities, such as shelters.

1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services:

CCR&Rs, with the guidance and support from ECSB, are responsible for the following post-disaster efforts:

- Provide ongoing technical assistance, training, resources, and support to child care providers to help them better prepare for emergencies and disasters.
- Work with emergency management officials, CCL, and ECSB to conduct timely assessments of the damage to and status of child care providers within the impacted area.
- Engagement and training strategies for child care providers to ensure business continuity should a disaster occur, including adequate insurance coverage and protection of records and assets after a disaster.
- Providing information and resources to child care providers about financial assistance that is available for the restoring or rebuilding process if that is necessary.
- Engaging business associations, community development financial institutions, and other organizations that can potentially provide financial assistance or micro-loans to help providers re-open.
- Preparedness planning with FEMA regional officials to clarify child care services that are eligible for reimbursement under the Public Assistance program.
- Provisions to quickly establish and manage temporary child care in non-traditional settings when existing child care facilities have been temporarily or permanently damaged.
- The Early Childhood Services Bureau will continue to work closely with its state-wide Public Health and Safety Division which has oversight of the state's disaster relief services to identify areas hardest hit by disaster. Once identified, the following steps will occur:

1. Child Care Resource and Referral agencies will be contacted to ascertain which families are in need of child care assistance in temporary programs;
2. Coordination with Child Care Licensing will occur to ensure that temporary facilities meet operational standards;
3. Work with the identified facilities to ensure that they are set up to receive child care assistance payments in a timely manner;
4. Cooperation with families, shelters, and Child Care Resource and Referral agencies to ensure family child care needs continue to be met until they are able to return to their

homes.

Effective Date: 10/01/2018

1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place-evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions:

[ARM 37.95.124](#) requires child care facilities to have a written emergency disaster plan. The plan for each structure used for child care must be developed in such a way that the plan can be followed in the event of a natural or human-caused disaster, such as flood, fire, tornado, or responding to an intruder. Written emergency plans must include plans for evacuation, including identification of at least one off-site gathering point; plans for evacuation of nonmobile children and children with special health care needs; contingencies that address children's individual needs; staff responsibilities; plans for reunification of children with their parents; plans for shelter in place and lock down; and plans for continuity of operation. Facilities must have on site an emergency supply of blankets, water, food, and supplies.

Effective Date: 10/01/2018

1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers-emergency preparedness training and practice drills as required in 98.41(a)(1)(vii):

[ARM 37.95.124](#) requires a facility to conduct ten emergency drills per year to include eight fire drills; and two other disaster drills that are likely to occur in the facility. All emergency drills must be documented and include the following minimum information: who conducted the drill; date and time of drill; the number of adults and children present during the drill; the length of time to evacuate; and problems identified during the drill and corrective actions.

Emergency plans must be submitted prior to license approval.

[ARM 37.95.163](#) requires that Early Childhood Teachers complete a 2-hour emergency preparedness and response course as part of their orientation. This course walks through all the steps to prepare for an emergency including the relocation plan, shelter in place plan and evacuation plan and how to create an emergency go kit. All staff are required to take the trainings and participate in drills.

Effective Date: 10/01/2018

1.8.6 Provide the link to the website where the statewide child care disaster plan is available:

[Early Childhood Services Bureau: Emergency Preparedness](#)

Effective Date: 10/01/2018

2 Promote Family Engagement through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to 'promote involvement by parents and family members in the development of their children in child care settings' (658A(b)). Lead Agencies have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

The target audience for the consumer education information includes three groups: parents receiving CCDF assistance, the general public, and when appropriate, child care providers. In this section, Lead Agencies will address how information is made available to families to assist them in accessing high-quality child care and how information is shared on other financial

assistance programs or supports for which a family might be eligible. In addition, Lead Agencies will certify that information on developmental screenings is provided and will describe how research and best practices concerning children's development, including their social-emotional development, is shared.

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, that is made available to parents, providers, and the general public and the ways that it is made available. This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency and the manner in which it links to the national website and hotline. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

2.1.1 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families for whom English is not their first language. Check all that apply.

Effective Date: 10/01/2018

- Application in other languages (application document, brochures, provider notices)
- Informational materials in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Bilingual outreach workers

- Partnerships with community-based organizations
- Other.

Describe:

2.1.2 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families with a person(s) with a disability. Check all that apply.

Effective Date: 10/01/2018

- Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
- Websites that are accessible (e.g. Section 508 of the Rehabilitation Act)
- Caseworkers with specialized training/experience in working with individuals with disabilities
- Ensuring accessibility of environments and activities for all children
- Partnerships with state and local programs and associations focused on disability-related topics and issues
- Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
- Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
- Other.

Describe:

2.2 Parental Complaint Process

The Lead Agency must certify that the state/territory maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)). Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency

maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16; 98.32).

2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process:

Parents and other individuals can submit complaints by visiting the [Child Care Complaint website](#) or by calling the main Child Care Licensing office.

Effective Date: 10/01/2018

2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring:

Complaints can be submitted online by visiting the [Child Care Complaint website](#). The policy, [Complaint Referrals and Investigations](#), is available online. Licensors are assigned to submitted complaints based on geographic area. Complaints are screened by the child care licensor assigned to the case. An investigation is initiated when a complaint is determined to be licensing-related and the information received has been assessed by Child Care Licensing to determine potential violations of licensing rules. The licensor conducts an inspection within 7 days of receiving the complaint. A complaint investigation is substantiated (validated) when the licensing worker has enough information to determine that the complaint allegations occurred or are occurring or that a regulation violation occurred during the investigation.

Effective Date: 10/01/2018

2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring:

Montana does not differentiate between CCDF and non-CCDF providers in terms of licensing rules and processes. All licensed facilities are eligible to receive CCDF funds. The Child Care Licensing Program does not have the authority to investigate un-licensed providers except for determining if the facility requires licensure according to statute. If a complaint is received for illegally operating providers, Child Care Licensing determines if the provider is requires licensure per statute. Complaints can be submitted online by visiting the [Child Care Complaint website](#). The policy, [Complaint Referrals and Investigations](#), is available online and pertains to licensed and license-exempt providers. Licensors are assigned to submitted complaints based on geographic area. Complaints are screened by the child care licensor assigned to the case. An investigation is initiated when a complaint is determined to be licensing-related and the information received has been assessed by Child Care Licensing to determine potential violations of licensing rules. The licensor conducts an inspection within 7 days of receiving the complaint. A complaint investigation is substantiated (validated) when the licensing worker has enough information to determine that the complaint allegations occurred or are occurring or that a regulation violation occurred during the investigation.

Effective Date: 10/01/2018

2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:

The information available in CCUBS is maintained permanently. The information available on the public portal includes inspection information since 2009. A copy of the inspection and any correspondence is also maintained in the facility file. This information is kept in the file until it meets the retention schedule of 4 years.

Effective Date: 10/01/2018

2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:

Inspection reports for complaint investigations that result in a deficiency are available on the Child Care Licensing Public Web Portal, which is located at <https://dphhs.mt.gov/qad/licensure/childcarelicensing/providersearch>.

The information available on the public portal includes inspection information since 2009. If the complaint is not validated, the complaint information is not available to the public.

Effective Date: 10/01/2018

2.2.6 Provide the citation to the Lead Agency's policy and process related to parental complaints:

[Child Care Licensing Day Care Complaint Referrals and Investigations](#)

Effective Date: 10/01/2018

2.3 Consumer Education Website

States and Territories are required to provide information to parents, the general public, and when applicable, child care providers through a State website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports for the provider, the quality of each provider (if such information is available for the provider), and the availability of the provider (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on deaths, serious injuries, and the number of cases of

substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. If the Lead Agency has not fully implemented the Consumer Education website elements identified in Section 2.3, then respond to question 2.3.12. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:

The Lead Agency's website is organized based on audience type. The main website menu provides two options to select: parents and families, and early childhood providers. There is a navigation menu on the left side of the page that provides consumer friendly, easily accessible quick links to commonly viewed program and services pages. These navigation strategies ensure the user will easily find what they are searching for. A website review team meets regularly to add new information to the home page. All web pages are ADA compliant per state and federal accessibility standards, which allows to accessibility to the widest range of consumers. All of the pages are monitored through Department web support to ensure website standard compliance.

Effective Date: 10/01/2018

2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):

In addition to English, the website is available in the following languages:

- Spanish
- German
- Chinese
- Japanese
- Tagalog

- French
- Russian
- Korean
- Arabic
- Thai
- Norwegian
- Vietnamese
- Ukrainian
- Dutch
- Italian

Effective Date: 10/01/2018

2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:

The website, per state regulations, is ADA compliant per Federal Section 508, Accessibility Requirements.

Effective Date: 10/01/2018

2.3.4 Lead Agency processes related to child care.

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

Effective Date: 10/01/2018

a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:

[Become a Child Care Provider](#)

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2:

[DPHHS Policy Manual: Child Care Licensing Monitoring Activities](#); [DPHHS Policy Manual: Child Care Licensing Licensing Key Indicator System for Child Care Facilities](#)

c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11:

[ARM 37.95.161 CHILD CARE FACILITIES: CRIMINAL BACKGROUND CHECKS](#) ; [37.95.176 DAY CARE FACILITIES: NEGATIVE LICENSING ACTION](#); [Child Care Licensing Staff Approval and Administrative Reconsideration](#)

2.3.5 List of providers

The consumer education website must include a list of all licensed providers and, at the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

Effective Date: 10/01/2018

a) Provide the website link to the searchable list of child care providers:

[Licensed Provider Search](#)

b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):

- License-exempt center-based CCDF providers
- License-exempt family child care (FCC) CCDF providers
- License-exempt non-CCDF providers
- Relative CCDF child care providers

Other.

Describe

N/A: the Lead agency only includes licensed providers in their searchable list.

c) Identify what informational elements, if any, are available in the searchable results.

Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

Licensed Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

PV number, License status, license approval and expiration date, city

License-Exempt, non-CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

License-Exempt CCDF Center Based Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

License-Exempt CCDF Family Child Care

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

Relative CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

Other.

Describe:

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

2.3.6 Lead Agencies must also identify specific quality information on each child care provider for whom they have this information. The type of information provided is determined by the Lead Agency, and it should help families easily understand whether a provider offers services that meet Lead Agency-specific best practices and standards or a nationally recognized, research-based set of criteria. Provider-specific quality information must only be posted on the consumer website if it is available for the individual provider.

Effective Date: 10/01/2018

a) How does the Lead Agency determine quality ratings or other quality information to include on the website?

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start requirements
- Meeting prekindergarten quality requirements
- School-age standards, where applicable

Other.

Describe

b) For what types of providers are quality ratings or other indicators of quality available?

Licensed CCDF providers.

Describe the quality information:

The Early Childhood Services website has a list of providers that participate in STARS to Quality. The list includes program name, program type, STAR level, city, and CCR&Rregion.

Licensed non-CCDF providers.

Describe the quality information:

The Early Childhood Services website has a list of providers that participate in STARS to Quality. The list includes program name, program type, STAR level, city, and CCR&Rregion.

License-exempt center-based CCDF providers.

Describe the quality information:

License-exempt FCC CCDF providers.

Describe the quality information:

License-exempt non-CCDF providers.

Describe the quality information:

Relative child care providers.

Describe the quality information:

Other.

Describe

2.3.7 Lead Agencies are required to post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services on the consumer education website. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports when available, going forward (not retrospectively), beginning October 1, 2018.

Certify by responding to the questions below:

Effective Date: 10/01/2018

a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports.

Montana defines plain language as language written at a reading level below 8th grade that includes both the rule, intent, and rationale. Inspection reports include categories and sub-categories of the rules that are part of the inspection tool. Next to each sub-category there is a column that indicates compliance status at the time of inspection ("yes", "N/A", or "no"). If "no" is indicated the requirement and rule number is cited along with a plain language summary of how or why the "intent of the rule was not met". Following the summary is information about when or if the Plan of Correction was accepted. Montana has not received any feedback from parents and the public about readability of reports, but Montana has received feedback about searchability, and the reports are now easily searchable with the search function. If feedback was received from a parent, Child Care Licensing would coordinate with the data system developers to make updates and improvements as needed.

b) Are monitoring and inspection reports in plain language?

If yes,

include a website link to a sample monitoring report.

A link to a report is unavailable based on the setup of the site. Users download all reports for specific providers on the [Licensed Provider Search website](#). To view a report, select Search for a list of all providers to populate. Select a provider, and view their report under the Inspections tab, which is sorted by date and inspection type.

If no,

describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary.

c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:

Date of inspection

Health and safety violations, including those violations that resulted in fatalities or serious injuries.

Describe how these health and safety violations are prominently displayed.

Inspection reports are listed by category. The information about the number of deaths, numbers of serious injuries as defined by Montana and the number of incidences of substantiated child abuse in child care settings are included in a report format and is updated annually by Child Care Licensing. The report is available on the [Child Care Licensing website](#).

Corrective action plans taken by the State and/or child care provider.

Describe

N/A

d) The process for correcting inaccuracies in reports.

Child Care providers, including license-exempt Family, Friend, and Neighbor (FFN) providers, have 10 days after receiving the report to contact their local licensor if they believe the information in the inspection report is inaccurate. The licensor will review the request, and if corrections are needed based on inaccuracies, they will inform the provider and correct the report.

e) The process for providers to appeal the findings in reports, including the time requirements, timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded.

Child Care providers have 10 days after receiving the report to dispute the information in the inspection report. Providers contact their licenser or the Child Care Licensing Program Manager if they are disputing the licenser's decision. Licensers and licensing program staff investigate the appeal in a timely manner, and reports are not publicly posted until the conclusion of the appeal process.

f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of 'timely' and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies define 'timely,' we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken

Once a Plan of Correction (POC) is received, the inspection report is posted to the website. Child Care Providers are given 10 working days to submit a POC. If the POC is not received within 10 days, a 2nd request for the POC is made allowing an additional 10 days. If the POC is not received within 20 working days, the inspection report is posted to the website without the receipt of a POC. This policy is available on the [Child Care Licensing website](#).

g) Describe the process for maintaining monitoring reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)).

Inspections conducted since 2009 are posted to the website as long as the facility is currently licensed.

h) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.

- License-exempt non-CCDF providers
- Relative child care providers
- Other.

Describe

N/A: the lead agency only provides information for licensed providers.

2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. This aggregate information on serious injuries and deaths must be organized by category of care (e.g., center, FCC, etc.) and licensing status for all eligible CCDF provider categories in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. The aggregate report should not list individual provider-specific information or names.

Certify by providing:

Effective Date: 10/01/2018

a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity.

Licensed child care providers are required to report injuries which result in a child being hospitalized, requiring ambulance transport or intervention, or requiring physician treatment. License-exempt providers are not required to submit reports of any serious injuries or deaths of children occurring in child care. Licensed providers must report this to the Child Care Licensing program within 24 hours following the incident. The report is located on the Child Care Licensing website. The report is broken out by facility type, then by year for injuries, deaths, and child abuse and neglect.

b) The definition of "substantiated child abuse" used by the Lead Agency for this requirement.

The Lead agency uses the Child and Family Services' definition, "Upon investigation, the child protection specialist has determined that the facts showing that abuse, neglect, sexual abuse, or exploitation occurred are more convincing than the facts offered to show the abuse, neglect, sexual abuse, or exploitation did not occur."

c) The definition of "serious injury" used by the Lead Agency for this requirement.

The Lead agency uses the Child and Family Services' definition, "An incident, act, omission, or gross negligence resulting in medical care due to substantial skin bruising, internal bleeding, substantial injury to skin, subdural hematoma, burns, bone fractures, extreme pain, permanent or temporary disfigurement, or impairment of any bodily organ or function.

d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

The report is located on the [Child Care Licensing website](#). The report is broken out by facility type, then by year for injuries, deaths, and child abuse and neglect.

2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:

The Early Childhood Services Bureau website provides information about CCR&R referrals in the following way: "Looking for Child Care? Choosing child care is one of the most important decisions you'll ever make as a parent. Quality child care impacts how children learn, think, develop and behave. It encourages curiosity, a love of learning, and prepares children for school. Contact your local Child Care Resource and Referral Agency for help finding child care."

Effective Date: 10/01/2018

2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information:

The Child Care Licensing Program has inspection information available on the [Child Care](#)

[Licensing website](#), with a link included on the Lead Agency website, <http://dphhs.mt.gov/hcsd/ChildCare.aspx>. The Child Care Licensing website includes general provider information, as well as all inspections and history. Health and safety information is included on the Lead Agency website which is linked to the Child Care Licensing website. The child care regulations are also available online.

Effective Date: 10/01/2018

2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes.

[Early Childhood Services Bureau website](#)

Effective Date: 10/01/2018

2.3.12 Other. Identify and describe the components that are still pending per the instructions on

CCDF Plan Response Options for Areas where Implementation is Still in Progress in the Introduction.

N/A

Effective Date: 10/01/2018

2.4 Additional Consumer and Provider Education

Lead Agencies are required to certify that they will collect and disseminate information about the full diversity of child care services to promote parental choice to parents of eligible children, the general public, and where applicable, child care providers. In addition to the consumer

education website, the consumer education information can be provided through CCR&R organizations or through direct conversations with eligibility case workers and child care providers. Outreach and counseling can also be effectively provided via information sessions or intake processes for families (658E(c)(2)(E); 98.15(b)(4); 98.33(b)).

In questions 2.4.1 through 2.4.5, certify by describing:

2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences.

The Lead Agency's website provides information about child care services available, along with other programs that the family may be eligible. Our site has separate pages based on audience, so families can access a variety of resources and information about services that support families. Child Care Resource and Referral agencies share information with families in the following ways:

- Consumer Education information for families and providers in the following areas:
 1. Information about quality, quantity of child care services, and provider training opportunities or participating in Montana's QRIS system;
 2. Referrals include data on the supply and number of child care inquiries, the types of facility, and other personal preferences for child care providers; and
 3. Working with the state Best Beginnings Advisory Council, Best Beginnings local coalitions, non-profits, and child care providers located in the CCR&Rs regions to increase supply of providers available for families.
- Community services available to assist families and providers regarding special needs including community availability of IDEA services, homelessness, immunizations, etc. Information is shared electronically, and through direct communications. Information about subsidy is also provided in brochures.

Effective Date: 10/01/2018

2.4.2 The partnerships formed to make information about the availability of child care services available to families.

The lead agency partners with local Child Care Resource and Referral Agencies, TANF/SNAP staff, Head Start/Early Head Start staff, STARS support, and other early childhood program staff to make information about the availability of child care services available to families.

Montana offers an online course that is available to providers and other interested parties about the subsidy program called Best Beginnings Scholarship Basics for Providers. The objectives of this course are for a child care provider to:

- Be able to understand the basic scholarship requirements for a Best Beginnings Participant.
- Understand the difference between presumptive eligibility and the 12-month eligibility period.
- Recognize the beginning and ending dates of eligibility along with approved hours of care and how those are determined.
- Understand co-payment requirements and over and above charges.
- Understand confidentiality guidelines between the Eligibility Specialist and provider.
- Understand the Eligibility Specialist's responsibility when processing the Best Beginnings Scholarship application.
- Understand notifications (in the CCUBS data system).

These objectives demonstrate how this course provides information to child care providers serving children and families utilizing subsidy in order to better support families.

Effective Date: 10/01/2018

2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.

Effective Date: 10/01/2018

Temporary Assistance for Needy Families program:

What information is provided? On the Lead Agency's website, a general description of the Temporary Assistance for Needy Families (TANF) program is provided to consumers:

- Montana's Temporary Assistance for Needy Families (TANF) program is called TANF cash assistance, a welfare reform program that promotes the values of work, responsibility, and family. The MT Department of Public Health and Human Services is committed to the philosophy that public assistance is intended to provide temporary support to eligible individuals for the purpose of assisting them to reach economic self-support. The opportunity for self-support will be achieved through immediate employment, the vigorous pursuit of child support, and other alternatives to public assistance.
- Temporary financial assistance may be provided to the following families and individuals:
 1. Minor Children;
 2. Specified relatives with whom the children are living;
 3. The minor children's blood-related/adoptive siblings with whom the children are living;
 4. Pregnant women in their last trimester who have no other eligible children; and
 5. Refugees with minor dependent children. The receipt of TANF cash assistance is limited to 60 months in an adult's lifetime.
- How the information is provided: The Lead Agency provides this information in a section of a web page called [Other Programs and Services that Support Children and Families in Montana](#). A description of TANF services is included, along with a link to their website.
- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general description of the program that is applicable to all audience types, and includes links for the user to click to find out more information.

Head Start and Early Head Start programs:

- What information is provided? Information on the Head Start webpage includes a Head Start locator, where the user can enter a city, state, or zip code to find local Head Start and Early Head Start programs; Head Start and Early Head Start demographics; resources; and needs assessment information.
- How the information is provided: [The Montana Head Start Collaboration Office](#) has its own page within the Early Childhood Services Bureau website.
- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general

description of the program that is applicable to all audience types, and includes links for the user to click to find out more information. The website includes data and statistics that could be helpful to constituents such as policy makers, legislators, and legislative representatives.

Low Income Home Energy Assistance Program (LIHEAP):

- What information is provided? On the Lead Agency's website, information regarding LIEAP is provided to consumers. It includes a general description of the program, how it is administered, who may qualify and benefit, and the intent of LIEAP.
- How the information is provided: The Lead Agency provides this information in a section of a web page called [Other Programs and Services that Support Children and Families in Montana](#). A description of LIEAP services is included, along with a link to their website.
- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general description of the program that is applicable to all audience types, and includes links for the user to click to find out more information.

Supplemental Nutrition Assistance Programs (SNAP) Program:

- What information is provided? On the Lead Agency's website, information regarding SNAP is provided to consumers. It includes a general description of the program, how it is administered, who may qualify and benefit, income limits, and resources for the program.
- How the information is provided: The Lead Agency provides this information in a section of a web page called [Other Programs and Services that Support Children and Families in Montana](#). A description of SNAP services is included, along with a link to the State of Montana SNAP website.
- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general description of the program that is applicable to all audience types, and includes links for the user to click to find out more information.

Women, Infants, and Children Program (WIC) program:

- What information is provided? On the Lead Agency's website, information regarding WIC is provided to consumers. It includes a general description of the program, a link to a prescreening tool for eligibility, and a link to the WIC website.
- How the information is provided: The Lead Agency provides this information in a section of a web page called [Other Programs and Services that Support Children and Families in Montana](#).
- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general

description of the program that is applicable to all audience types, and includes links for the user to click to find out more information.

Child and Adult Care Food Program(CACFP):

- What information is provided? On the Lead Agency's website, there is a direct link to the [Montana CACFP website](#) where the following information is provided: how to apply to participate, civil rights information, instructions for submitting claims and a link to the claims reimbursement system, documents and resources, federal regulations, Montana CACFP policies, newsletters and media, training information, and FAQs
- How the information is provided: The [CACFP](#) has its own webpage, which includes several menu options, including applications, claims, resources, civil rights, and training.
- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general description of the program that is applicable to all audience types, and includes links for the user to click to find out more information.

Medicaid and Children's Health Insurance Program (CHIP):

- What information is provided? A description of the Healthy Montana Kids (HMK), Montana's CHIP program, along with a link to the HMK website, who administers HMK in Montana, and contact information for members.
- How the information is provided: The Lead Agency provides this information in a section of a web page called [Other Programs and Services that Support Children and Families in Montana](#).
- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general description of the program that is applicable to all audience types, and includes links for the user to click to find out more information.

Programs carried out under IDEA Part B, Section 619 and Part C:

- What information is provided? On the Lead Agency's website, information regarding IDEA Part B, Section 619 and Part C is provided to consumers. Montana Milestones administers Part C Early Intervention services in Montana. Information on the website about Montana Milestones includes: a general description of the program and its mission, and a link to the Montana Milestones website. Part B services are administered by the Montana Office of Public Instruction (OPI). On the Lead Agency's website, information regarding [IDEA Part B, Section 619](#) is provided to consumers. Information about Part B services, on the website, includes: a general description of the program and a link to the Early Childhood page within Montana OPI.
- How the information is provided: The Lead Agency provides this information in a

section of a web page called [Other Programs and Services that Support Children and Families in Montana](#).

- How the information is tailored to a variety of audiences and include any partners who assist in providing this information: The information includes a general description of the program that is applicable to all audience types, and includes links for the user to click to find out more information.

2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information.

What information is provided? The lead agency partners with CCR&R agencies to ensure information regarding research and best practices concerning children's development is available to parents, providers, and the general public. The following information is available:

Topic: Child Development and Developmental Screening

- **Target Audience:** Parents/General Public
- On the Lead Agency's website, under the [Parents and Families](#) tab, there is a direct link to a tab called [Child Growth and Development](#). On this webpage, the following is included:
 - A video illustrating the importance of Positive Guidance
 - Home Visiting Program List
 - Developmental Screening information outlining these questions:
 1. What is developmental screening?
 2. How often should developmental screening be done on my child?
 3. Who can do a developmental screening on a child?
 4. Where can I find help getting a developmental screening for my child?

Topic: Child Development and Developmental Screening

- Target Audience: Providers

- On the Lead Agency's website, under the [Early Childhood Providers](#) tab, there is a direct link to a tab called [Child Growth and Development](#). On this webpage, the following is included for providers:

- A video illustrating the importance of Positive Guidance
- Home Visiting Program List
- Developmental Screening information outlining these questions:

1. What is developmental screening?
2. Who can do a developmental screening on a child?
3. Where can I get trained in using a developmental screening tool?
4. Additional ASQ trainers in Montana
5. What is the ASQ-3™?
6. What is the ASQ:SE?
7. How often should I complete a screening on a child in my care?
8. Who completes a developmental screener on a child in my care?
9. For more information on developmental screening go to [Birth to 5: Watch Me Thrive!](#)
10. [BIRTH TO 5: WATCH ME THRIVE! An Early Care and Education Provider's Guide for Developmental and Behavioral Screening](#)

Topic: Child Health and Nutrition

- **Target Audience:** Parents/General Public/Providers

- On the Lead Agency's website, under the [Child and Adult Care Food Program](#) tab, there is a direct link to a tab called [Resources](#). On this webpage, along with other resources, the following is included:

- Feeding Children

1. Caring for Our Children: National Health and Safety Performance Standards Guidelines for Early Care and Education Programs
2. Ellyn Satter Institute
3. Ellyn Satter's Division of Responsibility in Feeding Poster

- Infant Feeding

- Recipes

- A list of programs [participating in CACFP](#) can be found on the website, as well.

Topic: Child Health and Nutrition

- **Target Audience:** Parents/General Public

- On the Lead Agency's website, under the [Other Programs and Services that Support Children and Families](#) tab, there is a direct link to a tab called [Children's Health and Nutrition](#)
- . On this webpage, the following is included:
 - ADA Brochure
 - Asthma Action Plan - American Lung Association
 - Diabetes Health Care Plan
 - Feeding Infants - A Guide for Use in the Child Nutrition Programs
 - HIPAA Brochure
 - Meal Pattern effective 10/1/17
 - Seizure Care Plan Log

Topic: Parent and Family Engagement

- **Target Audience:** General Public/Providers
- On the Lead Agency's website, under the [Early Childhood Providers](#) tab, there is a direct link to a tab called [Child Growth and Development](#). On this webpage, the following is included for providers:
 - A flyer, [Parent Involvement and Family Engagement](#)

How the information is tailored to a variety of audiences and include any partners in providing this information?

Information is shared in a variety of ways in order to reach various audiences. Formats for sharing include: written materials, flyers, brochures, and website links. The target audiences are: parents; providers; general public; agency staff; partner agencies staff; contractors; sub-recipients of contractors; local, state and federal policy makers; and state agency leadership. Information is tailored specifically to parents and early childhood providers by allowing to ports of entry on the ECSB landing page website: [Parents and Families](#) and [Early Childhood Providers](#). Child Care Resource and Referral (CCR&R agencies) also have information available to parents of eligible children, providers, and the general public in the form of rack cards, website information, and direct communication through their Provider Services staff who are knowledgeable in early childhood best practices. The Early Childhood Project ensures that all course approvals are grounded in best practices in child development and include the incorporation of the Knowledge Base and Early Learning Standards content areas.

Materials can be ordered directly from the Lead Agency's website by clicking on the [Documents and Resources](#) tab. In addition to materials that can be ordered, there are [STARS Kits](#) available online at the Lead Agency's QRIS page, [Best Beginnings STARS to](#)

[Quality](#). These kits contain resources available to anybody but are targeted to all participating STARS programs. They contain information that is specific to best practices in early childhood development, including social emotional development, family engagement, physical health, and nutrition.

Written materials that are shared, include:

- Fun Family Activities: a flip book to help families support children's learning through fun and interactive activities which are designed to fit into family day to day routines
- Montana Early Care and Education Knowledge base: this document embraces developmentally appropriate practice for children aged birth through 8
- Montana Early Learning Standards: a continuum of growth and development for children from birth to age 5

Effective Date: 10/01/2018

2.4.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and include any partners in providing this information.

Information to support social-emotional health of young children that is shared on the Lead Agency's website includes:

- [Mental Health Newsletter](#)
- Video resources [demonstrating Pyramid Model practices](#)
- The [Knowledge Base](#) and the [Montana Early Learning Standards \(MELS\)](#)

CCR&R agencies provide Pyramid Model Coaching to programs participating in STARS to Quality at STAR 3 and above. Programs at STAR 3 and above must meet many child development research based, best practice criteria, specifically in social emotional supports, family engagement, physical health of the children, family, and staff in their programs, and nutrition. Pyramid Model coaches deliver training and resources regarding social emotional practices, and programs are also required to give families the Positive Solutions for Families brochure from the Pyramid Model Consortium.

The [Knowledge Base](#) and the [Montana Early Learning Standards \(MELS\)](#) are accessible

through the Lead Agency's website and are the foundation for supporting all early learning programs and activities. Every course developed and vetted through the Early Childhood Project must meet the standards in the Knowledge Base and MELS to be considered for approval. The MELS promotes the well-being and positive development of the whole child while also promoting the importance of social and emotional health of young children. It is organized by domain and offers quick references so that parents and providers can easily communicate about each area.

During the Best Beginnings Child Care Scholarship eligibility determination process, an Eligibility Specialist within the Child Care Resource and Referral (CCR&R) agency provides information on a variety of topics, including child growth and development. If a parent indicates their child may need additional support or already has a diagnosed and documented special need the Eligibility Specialist will refer to the Special Needs policy to support the family. General information on child growth and development and examples of positive behavior intervention and supports are linked on the [ECSB Child Growth and Development website](#).

Effective Date: 10/01/2018

2.4.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public.

The Lead Agency has policy on preventing suspension and expulsion of children from birth to age twelve in the Administrative Rules of Montana, [37.80.301](#). (6) It requires providers have a policy on preventing and reducing expulsion and suspension. The policy must include reasons for expulsion, procedures for expulsion, how the provider will assist the child and parent with transitions, and the types of referrals the provider will make such as those to a community agency that could offer additional supports to the family.

The policy on preventing suspension and expulsion is available on the Early Childhood Services Bureau website for parents, providers, and the general public. The regional Child Care Resource and Referral (CCR&R) agencies in Montana meet with child care providers and child care provider associations in their regions and have shared the expulsion policy.

Regional CCR&R Professional Development Specialists are available to meet with child care providers to assist them in the writing of an expulsion policy and provide technical assistance in helping their programs to avoid the suspension and expulsion of children.

In recognition of the importance of addressing suspension and expulsion, the US Departments of Education and Health and Human Services issued a [Policy Statement on Expulsion and Suspension Policies in Early Childhood Settings](#) in 2014. This policy statement provides recommendations to States and local early childhood programs to prevent and severely limit expulsions and suspensions in early learning settings. These recommendations include the implementation of multi-tiered systems of support. Best Beginnings STARS to Quality uses training and coaching on Pyramid Model practices both at the program and classroom levels to address challenging behaviors that may lead to suspensions and expulsions.

Effective Date: 10/01/2018

[2.5 Procedures for Providing Information on Developmental Screenings](#)

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

2.5.1 Certify by describing:

Effective Date: 10/01/2018

a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).

The Lead Agency provides information on the Early Childhood Services Bureau website regarding developmental screening, procedures, and referral options for infants, toddlers, and preschoolers. It also provides the Bright Futures Well Child Visit Schedule which indicates that an infant/toddler should have a developmental screener completed at least at 9, 18, and 30 months with encouragement to screen more often if concerned. This schedule also includes in depth information on recommended screening for children from birth through 21 years of age. The website also includes information specifically on the Ages and Stages Questionnaires for families and providers, separately, including screening intervals and definitions of the ASQ-3 and the ASQ: SE.

b) The procedures for providing information on and referring families and child care providers to the 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.).

Currently, the process for providing information on and referring families to existing developmental screening services varies between programs and agencies. Information is provided on the ECSB website regarding how to access this information. Within the Best Beginnings State Advisory Council (BBAC), multiple programs within DPHHS are discussing how to best coordinate efforts between EPSDT, Section 619 & Part C, in order to reduce duplication of screening and increase training opportunities on this topic. The STARS Preschool pilot project is gathering screening data. The Lead Agency will use this data to inform decisions related to screening being implemented in STARS to Quality.

c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work.

Child Care Resource and Referral (CCR&R agencies have information available to parents of eligible children, providers, and the general public in the form of rack cards, website information, and direct communication through their Provider Services staff who are knowledgeable in early childhood best practices. During the intake process, eligibility specialists offer information when a need arises and refer parents to various resources based on the need identified as well determines if it is appropriate to apply for a special needs scholarship. Parents can access a developmental screening through their primary physician, a local health department, or local school district depending on the age of the child.

d) [How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays.](#)

Child care providers receive this information through training in and access to the Montana Early Care and Education Knowledge Base (Knowledge Base) and the Montana Early Learning Standards (MELS). The Knowledge Base is a resource that assists in understanding developmentally appropriate practice for children ages birth through 8 and the MELS is a set of standards developed through the Montana Early Learning Task Force consisting of various early learning stakeholders throughout Montana. The MELS are the standards that guide the work of early learning professionals to ensure that children from birth to age 5 have the skills and knowledge they need to achieve success as well as promoting a continuum of growth and development for children from birth to age 5. Training on MELS is available online. All trainings must go through an approval process to be sure content areas of the Knowledge Base and Early Learning Standards are incorporated into each training. In addition to these resources, the ECSB provides information for specific to child care providers on the [ECSB Child Growth and Development website](#).

e) [How child care providers receive this information through training and professional development.](#)

Child care providers receive this information through training in and access to the Montana Early Care and Education Knowledge Base (Knowledge Base) and the Montana Early Learning Standards (MELS). The Knowledge Base is a resource that assists in understanding developmentally appropriate practice for children ages birth through 8 and the MELS is a set of standards developed through the Montana Early

Learning Task Force consisting of various early learning stakeholders throughout Montana. The MELs are the standards that guide the work of early learning professionals to ensure that children from birth to age 5 have the skills and knowledge they need to achieve success as well as promoting a continuum of growth and development for children from birth to age 5. Training on MELs is available online. All trainings must go through an approval process to be sure content areas of the Knowledge Base and Early Learning Standards are incorporated into each training. In addition to these resources, the ECSB provides information for specific to child care providers on the [ECSB Child Growth and Development website](#).

f) [Provide the citation for this policy and procedure related to providing information on developmental screenings.](#)

Part C of IDEA is required to have a comprehensive Child Find system. Per Montana's conformity with the [rules and requirements of Part C of IDEA](#):

The coordination of the Part C Comprehensive Child Find System to identify infants and toddlers with disabilities, who may be eligible for Part C services, is the responsibility of each regional contractor.

- Each regional contractor is required to have developed and disseminated to all primary referral sources and, when appropriate, parents, a public awareness program focusing on early identification of infants and toddlers with disabilities and other learning or developmental risk factors.
- This includes the preparation and dissemination to all primary referral sources, especially hospitals and physicians, of information for parents on the availability of early intervention services and procedures for determining the extent such sources disseminate information to parents of premature infants or infants with other physical risk factors associated with learning or developmental complications.
- Materials for parents and professionals on the availability of early intervention Part C services include information describing:
 1. The State's early intervention program;
 2. The purpose and scope of the program;
 3. How to make referrals for evaluations and early intervention services; and
 4. How to gain access to a comprehensive, multidisciplinary evaluation and other early intervention services.

The regional contractors engage in a variety of ongoing public awareness activities including distribution of public awareness information through a variety of methods in physicians' offices, hospitals, public health departments, WIC offices, and other agencies concerned with young children with disabilities and risk conditions associated with

disabilities and public places frequented by parents of infants and toddlers and other family members.

The initial evaluation for Part C eligibility must be completed as soon as possible (within 30 days after the referral is the expected timeline) and within the 45-day timeline in order to have sufficient time to complete assessments needed for the development of the IFSP.

2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select. This information about the child care provider selected by the parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. It must also describe how CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact local resource and referral agencies or other community-based supports that assist parents in finding and enrolling in quality child care (98.33(d)). Please note that if the consumer statement is provided electronically, Lead Agencies should consider how to ensure that the statement is accessible to parents and that parents have a way to contact someone to address questions they have.

2.6.1 Certify by describing:

Effective Date: 10/01/2018

a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement.

A flyer titled, "Best Beginnings Scholarship Program: Supporting Montana Families and Providers with Child Care Financial Assistance" is given to families by their local Child Care Resource and Referral Agency. This flyer is also available electronically on the Lead Agency's website.

b) What is included in the statement, including when the consumer statement is provided to families.

The statement includes the following information for families and providers:

- Equal access for families through the Best Beginnings Child Care Scholarship Program
- Reliable compliant process for families and providers
- Child Care Resource and Referral agencies across the state
- STARS to Quality, Montana's Quality Rating and Improvement System
- Health and safety standards met by all licensed providers
- Transparent licensing inspection and monitoring information

c) Provide a link to a sample consumer statement or a description if a link is not available.

[Best Beginnings Scholarship Program: Supporting Montana Families and Providers with Child Care Financial Assistance](#)

3 Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination periods, 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 a job search of not fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. Also, procedures for the enrollment of homeless children and children in foster care, if served, pending the completion of documentation, are required.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local prekindergarten, and other collaborative programs to finish the program year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency improves access for vulnerable children and families. This section also addresses the policies that protect working families and determine a family's contribution to the child care payment.

3.1 Eligible Children and Families

At the time when eligibility is determined or redetermined, children must (1) be younger than age 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 said family); and (3)(a) reside with a parent or parents who are working or attending a job training or educational program or (b) receives, or needs to receive, protective services and resides with a parent or parents not described in (3)(a.) (658P(4)).

3.1.1 Eligibility criteria based on a child's age

Effective Date: 10/01/2018

a) The CCDF program serves children

from 0

(weeks/months/years)

through 12

years (under age 13). . Note: Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

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

No

Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity:

Physical or mental incapacity is defined as children under the age of 19 with disabilities or cognitive delays who are not able to properly manage or care for his/her person without assistance. Appropriate clinical authorities must document this

determination.

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

No.

Yes

and the upper age is 18

(may not equal or exceed age 19)

d) How does the Lead Agency define the following eligibility terms?

"residing with":

A child must live in the same household as the parent, or person who is legally responsible for the child's welfare, during the period for which child care services are requested.

"in loco parentis":

When an adult is acting in place of a parent. For example, an adult designated in a military parent's family plan would be acting "in loco parentis."

3.1.2 Eligibility criteria based on reason for care

Effective Date: 10/01/2018

a) How does the Lead Agency define "working or attending a job training and educational program" for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:

"Working":

A parent or parents must be employed at paid legal labor or self-employed earning minimum wage and meet a minimum hourly work requirement each month.

A single parent can meet minimum activity requirements, including working. The following are how a parent may meet work requirement.

- A single parent must work a minimum of 60 hours per month.
- If a single parent is attending school or training full-time, where full-time is based on the school's guidelines, the parent does not have a work activity requirement.
- If a single parent is attending school or training part-time, the parent must work a

minimum of 40 hours per month. A two-parent family can meet minimum activity requirements, including working. The following are how parents may meet work requirement.

- A two-parent family must work a minimum of 120 hours per month with either/or both parents working any combination of hours.
- In a two-parent family if both parents are attending school or training full-time, where full-time is based on the school's guidelines, there is no work activity requirement for either parent.
- In a two-parent family if one parent is attending school or training part-time and one parent is attending school or training full-time, the work activity requirement is 40 hours per month.

"Job training":

Job Training is a program designed to assist eligible families to become self-sufficient by providing needed employment-related activities and supportive services. Job training programs include, but are not limited to, Pathways and special classes which may be classified as "employment related training."

"Education":

Education may be an education program that is accredited by the State of Montana or approved training institution that is accredited by the [U.S. Department of Education](#)

"Attending job training or education" (e.g. number of hours, travel time):

A person is considered to be attending job training or education, whether part-time or full-time, when the person submits supporting documentation, which are the number of enrolled credits and fees paid.

3.1.2 Eligibility criteria based on reason for care

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

No.

If no, describe the additional work requirements:

Yes.

If yes, describe the policy or procedure:

While attending school full time, a parent meets the activity requirement based solely on education. If a parent has a cessation of education during the 12-month eligibility period, the parent is given a 90-calendar grace period.

3.1.2 Eligibility criteria based on reason for care

c) Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search)

No.

Yes.

If yes, describe the policy or procedure. (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):

3.1.2 Eligibility criteria based on reason for care

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

No.

Yes. If yes:

i. Please provide the Lead Agency's definition of "protective services":

Child Care is available for children in protective care because of the danger of neglect or abuse. The need for protective services child care is determined by the Child and Family Services Division within the Department of Public Health and Human Services. Children in protective services are designated as a household of one for the purpose of childcare subsidy and uniquely identified; therefore, the state does not attach a co-payment requirement to these minor children.

Note: Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are not working or are not in education/training activities, but this provision should be included in the protective services definition above.

ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?

No

Yes

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

No

Yes

iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?

No

Yes

3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.

Effective Date: 08/01/2019

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

Montana determines eligibility for the Best Beginnings Child Care Scholarship using the family's gross income. A family must include required household members and may include optional household members. Required household members include biological, adoptive, or step-parents of an intact family; a parent by common law marriage; a parent joined by a common child; an adult acting in loco parentis; minor siblings, age 17 and under; and a child receiving Temporary Assistance for Needy Families (TANF) cash benefits. Optional household members would be any person living in the household that is not a required household member. The gross income of all household members is used for the purposes of eligibility at initial determination. There are some income exclusions. Income exclusions may be based in part on the status of an individual in the household. For example, student loans or Low-Income Energy Assistance Payment (LIEAP) income are excluded from a household's total gross income.

b) Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

	(a)	(b)	(c)	(d)
Family Size	100% of SMI(\$/Month)	85% of SMI (\$/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI	IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI
1	3316	2819	1561	47
2	4337	3686	2114	49
3	5357	4553	2666	50
4	6377	5420	3219	50
5	7398	6288	3771	51

c) If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])(98.16(i)(3)).

N/A

Reminder: Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI guidelines are available at: <https://www.acf.hhs.gov/ocs/resource/liheap-im2017-03>.

d) SMI source and year. 2019, LIHEAP IM 2018-3 State Median Income Estimates for Optional Use in FY 2018 and Mandatory Use in FY 2019

e) Identify the most populous area of the State used to complete the chart above.

Billings is the largest municipality by population in Montana. However, Montana's Income limit is the same across the state.

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became effective? 08/01/2019

g) Provide the citation or link, if available, for the income eligibility limits.

<https://dphhs.mt.gov/hcsd/ChildCare/BestBeginningsScholarships>

3.1.4 Lead Agencies are required to ensure that children receiving CCDF funds do not have family assets that exceed \$1,000,000, as certified by a family member (98.20(a)(2)(ii)).

Effective Date: 10/01/2018

a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application).

The parent is asked a question about family assets over one million (\$1,000,000) on the application. It is a self-attestation of yes or no.

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

No.

Yes.

If yes, describe the policy or procedure and provide citation:

The \$1,000,000 asset test is waived for children in protective services. The \$1,000,000 asset test only applies to non-TANF cases in Montana. [Child Care Policy Manual, Policy Section 2-4.](#)

3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).

Montana has a child support compliance requirement. A child in a household that has an absent parent must meet the child support compliance requirement. Typically, this requirement is met by an in-compliance child support case with the Child Support Enforcement Division, a court-filed and judge-signed parenting plan, or approved good cause. There are exceptions to this requirement outlined in the [Child Care Policy Manual](#),

Effective Date: 10/01/2018

3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.

Effective Date: 10/01/2018

- Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules
- Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- Establishing minimum eligibility periods greater than 12 months
- Using cross-enrollment or referrals to other public benefits
- Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services
- Providing more intensive case management for families with children with multiple risk factors;
- Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- Other.

Describe:

3.1.7 Policies and processes for graduated phase-out of assistance at redetermination.

Effective Date: 08/01/2019

Lead Agencies are required to provide for a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income. Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.

- i. 85 percent of SMI for a family of the same size
- ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:
 - (A) Takes into account the typical household budget of a low-income family
 - (B) Provides justification that the second eligibility threshold is:
 - (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
 - (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the copayment restrictions, which do not apply to a graduated phase-out. To help families transition off of child care assistance, Lead Agencies may gradually adjust copay amounts for families whose children are determined eligible under a graduated phase-out and may require additional reporting on changes in family income. However, Lead Agencies must still ensure that any

additional reporting requirements do not constitute an undue burden on families.

Effective Date: 08/01/2019

a) Check and describe the option that best identifies the Lead Agency's policies and procedures regarding the graduated phase-out of assistance.

- N/A - The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- N/A - The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- The Lead Agency sets the second tier of eligibility at 85 percent of SMI.
Describe the policies and procedures.

Provide the citation for this policy or procedure.

- The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.

Provide the second tier of eligibility for a family of three.

The entry level for a family of three into the second eligibility level is above 150% of the Federal Poverty Guideline (FPG), and the exit level is 185% FPG. This would be a monthly income of \$2666 at entry and \$3288 at exit.

Describe how the second eligibility threshold:

i. Takes into account the typical household budget of a low-income family:

Montana's graduated phase-out has an exit level of 185% of FPL. Using 185% of FPL is the level used to ensure the participant income remains below the 85% of Montana's SMI threshold. Higher percentages of the FPL were too close or above 85% SMI. Since initial eligibility for the child care subsidy uses FPL, the same logic was used to continue to use the FPL instead of the SMI to determine entrance into graduated phase-out. The monthly copayment for graduated phase-out is between 15%-21% on Montana's sliding fee scale. The monthly copayment rises incrementally with the family's income. The monthly copayment is below 25% of the family's income, meeting the definition for affordable child care.

ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:

Using the example of a family of three, Montana's graduated phase-out would allow for an increase of gross monthly income of approximately \$621. This would be an increase of yearly income of approximately \$7450. This would allow for a gradual increase of wages for a family while remaining below 85% of the State Median Income.

iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:

Graduated phase-out families have the same change reporting requirements as all other families utilizing the subsidy program.

iv. Provide the citation for this policy or procedure:

[Child Care Policy Manual, Policy Section 6-5: Change Reporting.](#)

Other.

Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas where Implementation is Still in Progress* in the Introduction.

3.1.7 b) To help families transition from assistance, does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

No

Yes

i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out.

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? (*Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.*)

No.

Yes.

Describe:

3.1.8 Fluctuation in earnings.

Lead Agencies are required to demonstrate how their processes for initial determination and redetermination take into account irregular fluctuations in earnings (658E(c)(2)(N)(i)(II)). The Lead Agency must put in place policies that ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) from seasonal employment or other temporary work schedules, do not affect eligibility or family copayments (98.21(c)). Check the processes, if applicable, that the Lead Agency uses to take into account irregular fluctuations in earnings and describe, at a minimum, how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family copayments.

Effective Date: 10/01/2018

Average the family's earnings over a period of time (i.e. 12 months).

Describe:

Seasonal employment may be calculated most accurately over a 12-month average to include both high and low earning months. Also, if a parent has irregular income, income may be calculated by averaging up to a 12-month basis. For example, a fire fighter is a season occupation in Montana. A parent may only work three months out of the year. The three months of employment income are averaged over twelve months to give an accurate picture of monthly income.

Request earning statements that are most representative of the family's monthly income.

Describe:

Montana uses a Work Verification Form signed by the employer to determine monthly employment income. If the applicant believes the Work Verification Form does not reflect accurate employment income, an applicant can submit pay stubs or earning statements. There must be at minimum two months and up to twelve months of pay stubs to determine a monthly employment income.

- Deduct temporary or irregular increases in wages from the family's standard income level.

Describe:

- Other.

Describe:

If a parent reports an increase in income during the 12-month eligibility period, no action will be taken unless it benefits the family. The family is advised of the increased monthly copayment or change in eligibility for the next annual re-determination.

Income is determined on a case-by-case basis. When determining income does not clearly follow policy and procedure, a special case will come to the state level to determine income.

For example, self-employment varies greatly with each parent's individual business.

The state will assist the Child Care Resource and Referral (CCR&R agency with how best to determine a monthly employment income.

3.1.9 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Check the information that the Lead Agency documents and verifies and describe, at a minimum, what information is required and how often. Check all that apply.

Effective Date: 10/01/2018

- Applicant identity.

Describe:

Applicants may have an interview either in person or by telephone during the initial application period. Applicants may include photo identification documents: government issued identification, passport, Montana driver's license, or a school identification card.

If the family is receiving Supplemental Nutrition Assistance Program (SNAP) benefits, the verification can be obtained from the Combined Healthcare Information and Montana Eligibility System (CHIMES). Documentation of what was used to determine the applicant's identity is included in case notes in the computer database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource

&Referral agency that maintains the confidential files for the applicant. At annual re-determination, information already on file does not need to be submitted again.

Applicant's relationship to the child.

Describe:

The applicant's relationship to the child can be determined from a variety of documentation:

1. Birth certificates;
2. Legal or court documentation;
3. Child and Family Services documentation;
4. Verification from the Combined Healthcare Information and Montana Eligibility System (CHIMES) if the family is on Supplemental Nutrition Assistance Program (SNAP) benefits; or
5. Other documentation.

Documentation of what was used to determine the applicant's relationship to the child is included in case notes in the computer database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource &Referral agency that maintains the confidential files for the applicant. The information is required at initial application, but then it is kept in the confidential file at the Child Care Resource &Referral agency. At annual re-determination, information already on file does not need to be submitted again.

Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).

Describe:

Children receiving child care assistance must be US citizens or US nationals. A variety of documentation may be used to determine this:

1. Birth certificates or passports;
2. A Social Security card (this is optional);
3. Verification from the Combined Healthcare Information and Montana Eligibility System (CHIMES) if the family is on Supplemental Nutritional Assistance Program (SNAP) benefits; or
4. Other documentation.

Documentation of what was used to determine the child's eligibility is included in case notes in the computer database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource &Referral agency that maintains the confidential files for the applicant. The information is required at initial application, but

then it is kept in the confidential file at the Child Care Resource &Referral agency. At annual re-determination, information already on file does not need to be submitted again. Any new child added to a family's case will be required to provide the new information.

[Work.](#)

[Describe:](#)

Applicants complete a Work Verification Form signed by the employer at the time of initial application, annual redetermination, or with a job change. A parent may choose to submit paystubs if the Work Verification is not an accurate representation of their current work. Self-employment is verified through a self-statement attestation which is a self-employment form filled out by the applicant.

Documentation of what was used to determine the parent's work activity requirement (including work) is included in case notes in the database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource &Referral agency that maintains the confidential files for the applicant. The information is required at initial application, but then it is kept in the confidential file at the Child Care Resource &Referral agency. At annual re-determination, the parent will be required to submit a new Work Verification Form or paystubs.

[Job training or educational program.](#)

[Describe:](#)

Applicants must submit receipt of fees paid and number of credits enrolled to prove the attendance of school. Documentation of what was used to determine the job training or education program is included in case notes in the computer database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource &Referral agency that maintains the confidential files for the applicant. The information is required at initial application, but then it is kept in the confidential file at the Child Care Resource &Referral agency. At annual re-determination, if case has a lapse ineligibility, or at the beginning of a new semester, a new receipt of fees paid and number of credits enrolled will be required.

[Family income.](#)

Describe:

Work income is determined using a Work Verification Form or paystubs. Self-employed applicants must meet Federal minimum wage requirement to qualify for childcare assistance. Self-employed individuals need to provide written documentation verifying their self-employment status at the time of application. This may be done using several types of documentation: Business License issued by the city or state; Federal Employer Identification Number (FEIN) issued by the Internal Revenue Service; or IRS Tax forms, which include Schedule C or Schedule C-EZ, 1040-ES, and Estimated Tax for Individuals. Other household income (found in [Policy Section 2-6](#)) will have varying documentation. Documentation of what was used to determine the family income is included in case notes in the computer database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource & Referral agency that maintains the confidential files for the applicant. The information is required at initial application, but then it is kept in the confidential file at the Child Care Resource & Referral agency. At annual re-determination, new income documentation will be required

Household composition.

Describe:

The application turned in by the application is used to determine the household composition. Documentation of what was used to determine the household composition is included in case note sin the computer database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource & Referral agency that maintains the confidential files for the applicant. The information is required at initial application and annual re-determination.

Applicant residence.

Describe:

Applicants submit proof of residency such as a rental agreement, utilities bill, or current Montana Driver's License.

Documentation of what was used to determine the applicant's residency is included in case notes in the computer database, Child Care Under the Big Sky (CCUBS). Paper documents are kept at the Child Care Resource & Referral agency that maintains the confidential files for the applicant. The information is required at initial application, but

then it is kept in the confidential file at the Child Care Resource &Referral agency. At annual re-determination, information already on file does not need to be submitted again

Other.

Describe:

Express Eligibility is a way for applicants to reduce the amount of documentation verification needed. Applicants participating in Supplemental Nutrition Assistance Program (SNAP) are asked if they are receiving (SNAP) benefits on their application for child care assistance. If the answer is yes, the Child Care Resource &Referral agency uses income information already documented the Combined Healthcare Information and Montana Eligibility System (CHIMES). This approach reduces the amount of document verification needed to qualify applicants. The information is checked at initial application and at annual re-determination.

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

Effective Date: 10/01/2018

Time limit for making eligibility determinations

Describe length of time:

Once the initial application is reviewed, the Child Care Resource and Referral staff must review the application packet within seven business days to ensure timely processing. The applicant has thirty calendar days to submit all required documentation.

Track and monitor the eligibility determination process

Other.

Describe:

Supervisors at each Child Care Resource and Referral complete case reviews given to them monthly by the Early Childhood Services Bureau (ECSB).

None

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

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 younger than age 6 (98.16(v); 98.33(f)).

Lead Agencies must coordinate with TANF programs to ensure 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.

Effective Date: 10/01/2018

a) Identify the TANF agency that established these criteria or definitions: The Montana Department of Public Health and Human Services, Human and Community Services Division, Public Assistance Bureau

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

"Appropriate child care":

The child care provider meets applicable state standards.

"Reasonable distance":

If the family is without either their own (or arranged) transportation, and there is no public transportation, then their home or work site must be no more than 1 mile from the childcare provider.

"Unsuitability of informal child care":

Care that does not meet applicable state licensing standards, although it may be the parent's choice.

"Affordable child care arrangements":

The total parental (caretaker relative or person acting in loco parentis) co-payment and "above and beyond" obligation does not exceed 25% of gross family income.

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

In writing

Verbally

Other.

Describe:

Families participating in the TANF program are not sanctioned due to lack of child care. When child care is not available, TANF advocates and parents negotiate alternative participation activities to maintain compliance with their employability/service plan. If a parent is involved in the TANF sanction process, the parent is informed in writing of the right to claim good cause.

d) Provide the citation for the TANF policy or procedure:

[TANF 706-1 Employment and Training Activities](#)

3.2 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).

Note:

CCDF defines "child experiencing homelessness" as a child who is homeless, as defined in

3.2.1 Describe how the Lead Agency defines:

Effective Date: 10/01/2018

a) "Children with special needs":

A child with special needs means a child who is age 18 or younger who requires additional assistance because of an emotional or physical disability and/or cognitive delay that is verified by medical records or other appropriate documentation such as written verification of the physical, emotional, or mental disability from the appropriate authority.

b) "Families with very low incomes":

A family, whose income is at or below the TANF eligibility threshold of the 2018 federal poverty guidelines.

3.2.2 Describe how the Lead Agency will prioritize or target child care services for the following children and families.

Effective Date: 10/01/2018

a) Identify how services are prioritized for children with special needs. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

If there was limited funding for child care assistance, a household containing a child with special needs or a child with disabilities is a priority. Administrative Rules of Montana 37.80.201(5), Nonfinancial Requirements for Eligibility and Priority for

Assistance, includes the priority list that would be implemented if there are insufficient funds to provide benefits to all eligible households. A household containing a child with special needs or a child with disabilities is listed as priority number two after a household receiving TANF.

b) Identify how services are prioritized for families with very low incomes. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

If there was limited funding for child care assistance, Non-TANF households are ranked by household income as a percentage of the Federal Poverty Guidelines (FPG). Administrative Rules of Montana 37.80.201(5), Nonfinancial Requirements for Eligibility and Priority for Assistance, includes the priority list that would be implemented if there are insufficient funds to provide benefits to all eligible households. A Non-TANF household is the lowest priority. The household with the lowest percentage of income, relative to FPG, has the highest priority when funding becomes available.

c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

If there was limited funding for child care assistance, a household experiencing

homelessness is a priority. Administrative Rules of Montana 37.80.201(5), Nonfinancial Requirements for Eligibility and Priority for Assistance, includes the priority list that would be implemented if there are insufficient funds to provide benefits to all eligible households. A household experiencing homelessness is listed as priority number four, after a household receiving TANF, a household containing a child with special needs or a child with disabilities, and a household headed by a teen parent.

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

If there was limited funding for child care assistance, a household receiving assistance funded by the TANF program while participating in employability activities that require child care is a priority. Administrative Rules of Montana 37.80.201(5), Nonfinancial Requirements for Eligibility and Priority for Assistance, includes the priority list that would be implemented if there are insufficient funds to provide benefits to all eligible households. A household receiving TANF is the number one priority listed.

3.2.3 List and define any other priority groups established by the Lead Agency.

Teenage parent: A teenage parent means a parent through their 20th birthday who is attending high school.

Effective Date: 10/01/2018

3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.

If there was limited funding for child care assistance, a household headed by a teenage parent is a priority. Administrative Rules of Montana 37.80.201(5), Nonfinancial Requirements for Eligibility and Priority for Assistance, includes the priority list that would be implemented if there are insufficient funds to provide benefits to all eligible households. A household headed by a teenage parent is listed as priority number three, after a household receiving TANF and a household containing a child with special needs or a child with disabilities, respectively.

Effective Date: 10/01/2018

3.2.5 Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and TA to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (addressed in section 6), and (3) conduct specific outreach to homeless families (658E(c)(3); 98.51).

Effective Date: 10/01/2018

a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained.

A family experiencing homelessness is eligible for a 90-calendar day eligibility period while families stabilize their living arrangements. In order to be eligible for 90-day eligibility period, the parent must submit two forms of documentation to prove homelessness. One form of documentation is the self-attestation from the parent on the application. The second form of documentation could be a letter from a homeless shelter or a statement from a friend or relative the family is living with. A parent must select a registered or licensed child care provider for child(ren) in the family. The 90-day eligibility

period allows the family experiencing homelessness to meet all Non-TANF eligibility requirements. This includes the following: proving residency in Montana, citizenship of child(ren), and meeting both the income and activity requirements.

Child Care Resource and Referral (CCR&R) agency are available to provide support for families experiencing homelessness by providing referrals to available community services and identifying child care providers that may meet the needs of the family.

b) Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

- Lead Agency accepts applications at local community-based locations
- Partnerships with community-based organizations
- Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
- Other

Child Care Resource & Referral agencies provide outreach information to places providing services to homeless families such as homeless shelters, and organizations that may work with homeless families such as Offices of Public Assistance, Good Will/Salvation Army stores, etc.

Note: The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

3.2.6 Lead Agencies must establish a grace period that allows homeless children and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).

Note:

Any payment for such a child during the grace period shall not be considered an error or improper payment (98.41(a)(1)(i)(C)(2)).

a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

[Children experiencing homelessness \(as defined by Lead Agency's CCDF\)](#)

The Lead Agency worked with the Public Health and Safety Division and Child Care Licensing Program of the Quality Assurance Division to establish the procedure for how a family experiencing homelessness would be able to comply with immunizations. Montana requires children to have current immunizations to attend a child care facility, but a conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. The conditional enrollment form allows a child to attend the child care facility as the child comes current with immunizations.

The grace period varies with each child's individual needs. The length of time a child requires to become current with immunizations is determined on the conditional attendance form by their physician or Health Department official.

[Provide the citation for this policy and procedure.](#)

[Administrative Rules of Montana, 37.95.140](#): Immunization, outlines that a child can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility.

[Children who are in foster care.](#)

The Lead Agency worked with the Public Health and Safety Division and Child Care Licensing Program of the Quality Assurance Division to establish the procedure for how children who are in foster care would be able to comply with immunizations. Montana requires children to have current immunizations to attend a child care facility, but a conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. The conditional enrollment form allows a child to attend the child care facility as the child comes current with immunizations.

The grace period varies with each child's individual needs. The length of time a child requires to become current with immunizations is determined on the conditional attendance form by their physician or Health Department official.

Provide the citation for this policy and procedure.

[Administrative Rules of Montana, 37.95.140](#): Immunization, outlines that a child can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility.

b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)).

If a family does not have a current immunization history for a child, a Child Care Resource and Referral (CCR&R) agency will refer the parent to the county health department or local healthcare provider. The county health department will look at imMTrax (Montana Immunization Information System) to see if the child has a history of immunizations in Montana. The local healthcare provider may look at imMTrax or contact the county health department if the local healthcare provider needs additional help getting the child's history of immunizations in Montana. If a child does not have current immunizations, the county health department or local healthcare provider will work with the family to fill out the conditional enrollment form. This form will have a plan to get the child current on immunizations.

If the county health department needs assistance with out-of-state immunization history, the county health department will contact the state health department. The parent needs to grant permission for the state of Montana to contact other states for immunization history.

The conditional enrollment form is monitored by the Child Care Licensing Program of the Quality Assurance Division when a monitoring visit occurs. Good Will/Salvation Army stores, etc.

c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?

No.

Yes.

Describe:

Immunizations are a requirement for all children attending child care facilities

monitored by the Child Care Licensing Program. The conditional enrollment period outlined by an individual child's conditional enrollment form is allowed for any children attending a child care facility.

3.3 Protection for Working Families

3.3.1 12-Month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

This change means that a Lead Agency 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 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

Effective Date: 10/01/2018

a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity.

A single or two-parent family must meet activity requirements at the time of eligibility determination. If the parent has a temporary change, the parent remains eligible until the next annual re-determination, which is at the end of the initial twelve-month eligibility period. If the parent has a cessation of work, training, or education, the parent will be

given a 90-calendar day grace period.

b) How does the Lead Agency define "temporary change?"

Temporary changes are defined as follows:

1. Any time-limited absence from work for an employed parent due to reasons such as need to care for a family member or an illness;
2. Any interruption in work for a seasonal worker who is not working between regular industry work seasons;
3. Any student holiday or break for a parent participating in training or education;
4. Any reduction in work, training or education hours, as long as the parent is still working or attending training or education;
5. Any other cessation of work or attendance at a training or education program that does not exceed three months or a longer period of time established by the Lead Agency;
6. Any change in age, including turning 13 years old during the eligibility period; and
7. Any change in residency within the State, Territory, or Tribal service area.

c) Provide the citation for this policy and/or procedure.

[Administrative Rules of Montana 37.80: Child Care Assistance; Child Care Policy Manual, Policy Section 2-1](#)

3.3.2 Option to discontinue assistance during the 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity (i.e., if the parent experiences a temporary change in his or her status as working or participating in a training or educational program, as described in section 3.3.1 of the plan).

If the Lead Agency chooses the option to discontinue assistance due to a parent's non-temporary loss or cessation of eligible activity, it must continue assistance at least at the same level for a period of not fewer than 3 months after each such loss or cessation for the parent to engage in a job search and to resume work or resume attendance in a job training or educational program. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of SMI, assistance cannot be terminated, and the child must continue receiving assistance until the next scheduled redetermination or, at the Lead Agency option, for

an additional minimum 12-month eligibility period.

Effective Date: 10/01/2018

a) Does the Lead Agency choose to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?

No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.

Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:

i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

A parent is required to report a change in work, training, or educational status within ten calendar days from the date the change occurs. If the parent has a cessation of work, training, or education, the parent will be given a 90-calendar day grace period. The parent must meet activity requirements at the end of the grace period, and if not, the family's eligibility will be discontinued. A non-temporary change means a change exceeding three months.

ii. Describe what specific actions/changes trigger the job-search period.

When a parent reports the required change in work, training, or educational status, it is evaluated to see if it is a cessation or a temporary change. If it is a cessation of work, training, or education, a 90-calendar day grace period is given.

iii. How long is the job-search period (must be at least 3 months)?

90-calendar days

iv. Provide the citation for this policy or procedure.

[Policy Section 6-5: Change Reporting](#) and [Policy 6-6: Absent Days and Continuity of Care](#)

b) The Lead Agency may discontinue assistance prior to the next 12-month

redetermination in the following limited circumstances. Check and describe any circumstances in which the Lead Agency chooses to discontinue assistance prior to the next 12-month redetermination. Check all that apply.

- Not applicable.
- Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

i. Define the number of unexplained absences identified as excessive:

Five or more consecutive unexplained absences reported by the child care facility when there is no indication that the child will be receiving care at that facility in the near future.

ii. Provide the citation for this policy or procedure:

[Administrative Rules of Montana 37.80.501 Termination of Child Care Assistance](#)

- A change in residency outside of the state, territory, or tribal service area.

Provide the citation for this policy or procedure:

To receive Best Beginnings Child Care Scholarships, the parent and the child must be living together in Montana. This policy is found in the [Child Care Policy Manual, Policy Section 1-6: Child Eligibility](#).

- Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.

A parent will be issued an intentional program violation and sanction for any of the following intentional program violations: (1) providing false employment information, including concealing employment; (2) providing false information regarding wages or other income; (3) misrepresenting or failing to disclose household membership; (4) claiming child care assistance for care provided by an ineligible provider; (5) misrepresenting the amount of child care needed or used; or (6) falsifying sign-in/sign-out records. If a parent or guardian receives a second intentional program violation, the department will require the repayment of all child care assistance payments related to the violation and the parent will be terminated from the Child Care Assistance Program. Intentional program violations and sanctions are found in

3.3.3 Change reporting during the 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.16(h)(1)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.1.7(b).

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.3.2 of the plan, they may require families to report a non-temporary change (as described in section 3.3.3 of the plan) in work, training or educational activities (otherwise known as a parent's eligible activity).

Effective Date: 10/01/2018

a) Does the Lead Agency require families to report a non-temporary change in a parent's eligible activity?

No

Yes

b) Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of SMI or that impact the Lead Agency's ability to contact the family or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).

Check and describe any additional reporting requirements required by the Lead Agency during the 12-month eligibility period. Check all that apply.

Additional changes that may impact a family's eligibility during the 12-month period.

Describe:

During the 12-month period, a parent is required to report an increase in income exceeding 85% SMI within 10 calendar days of the change occurring. The increase in income will be evaluated.

- Changes that impact the Lead Agency's ability to contact the family.

Describe:

A parent is required to report a change of mailing address, residential address, or phone number within 10 calendar days of the change occurring.

- Changes that impact the Lead Agency's ability to pay child care providers.

Describe:

A parent is required to report a change in child care provider within 1 business day.

Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families.

c) How does the Lead Agency allow for families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

- Phone
- Email
- Online forms
- Extended submission hours
- Postal Mail
- FAX
- In-person submission
- Other.

Describe:

The parent may report a change in writing and doesn't have to turn in a specific form.

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

i. Describe any other changes that the Lead Agency allows families to report.

Applicants and recipients of child care assistance may report any change to their circumstance at any time during the eligibility period.

ii. Provide the citation for this policy or procedure.

[Administrative Rules of Montana, 37.80.203](#)

3.3.4 Prevent the disruption of employment, education, or job training activities

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g. use of languages other than English, access to transportation, accommodation of parents working non-traditional hours, etc.).

Effective Date: 10/01/2018

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the

state/territory's or designated local entity's requirements for the redetermination of eligibility.

- Advance notice to parents of pending redetermination
- Advance notice to providers of pending redetermination
- Pre-populated subsidy renewal form
- Online documentation submission
- Cross-program redeterminations
- Extended office hours (evenings and/or weekends)
- Other.

Describe:

A parent can fill out and submit an online application at any time. Also, the parent can submit documentation through email, fax, by mail, and 24-hour drop boxes at all CCR&Ragencies.

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

- Postal Mail
- Email
- Online forms
- FAX
- In-person submission
- Extended submission hours
- Other.

Describe:

3.4 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Lead Agencies, however, may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).

Note: To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies only to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

3.4.1 Provide the CCDF co-payments in the chart below according to family size for one child in care.

Effective Date: 08/01/2019

a) Fill in the chart based on the most populous area of the State (area serving highest number of CCDF children).

	(a)	(b)	(c)	(d)	(e)	(f)
Family Size	Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?	The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?	Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible	What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?	The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?
1	N/A	0	N/A	0	0	0%
2	778	10	1	2114	296	14%
3	980	10	1	2666	373	14%
4	1179	12	1	3219	451	14%
5	1379	14	1	3771	528	14%

b) What is the effective date of the sliding-fee scale(s)? 08/01/2019

c) Identify the most populous area of the state used to complete the chart above.

Billings is the largest municipality by population in Montana. However, Montana's Income limit is the same across the state.

d) Provide the link to the sliding-fee scale:

<https://dphhs.mt.gov/Portals/85/hcsd/documents/ChildCare/documentsandresources/SlidingFeeScaleaug2019.pdf>

e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

N/A

3.4.2 How will the family's contribution be calculated, and to whom will it be applied?

Check all that apply.

Effective Date: 10/01/2018

The fee is a dollar amount and:

- The fee is per child, with the same fee for each child.
- The fee is per child and is discounted for two or more children.
- The fee is per child up to a maximum per family.
- No additional fee is charged after certain number of children.
- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

Other.

Describe:

The fee is a percent of income and:

- The fee is per child, with the same percentage applied for each child.
- The fee is per child, and a discounted percentage is applied for two or more children.
- The fee is per child up to a maximum per family.
- No additional percentage is charged after certain number of children.
- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

Other.

Describe:

3.4.3 Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).

Effective Date: 10/01/2018

No.

Yes, check and describe those additional factors below.

Number of hours the child is in care.

Describe:

Lower co-payments for a higher quality of care, as defined by the state/territory.

Describe:

Other.

Describe:

3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.

Effective Date: 10/01/2018

- No, the Lead Agency does not waive family contributions/co-payments.
- Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.
- Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

Children referred by Child and Family Services Division (CFSD) do not have a copayment. [The Child Care Policy Manual, Policy Section 4-1: CFSD and CCR&RCoordination](#) outlines this copayment requirement.

- Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency.

Describe the policy and provide the policy citation.

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

4.1 Parental Choice in Relation to Certificates, Grants, or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).

The lead agency offers a child care certificate through the Best Beginnings Child Care Scholarship to parents in the form of an authorization plan. As part of the eligibility process, an authorization of services is created. A parent must have a provider selected in order for this authorization of services to be created. Once the eligibility worker creates an authorization of services for a child an Authorization Plan (certificate) is created and mailed to the parent.

The Authorization Plan (certificate) includes the following information:

- Authorization Plan (certificate) identification number,
- Family's unique case number,
- Facility information, including Facility unique identification number, name, type, and address,
- Child information, including name and age, for each child in the family authorized for child care,
- Authorization (certificate) Begin and End Date,
- The payment rate (at the time the certificate was created),
- The amount of time that a child is authorized for care at the facility
- The family's copayment obligation, and
- The eligibility worker's name, phone number, and work.

Effective Date: 10/01/2018

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

Check all that apply.

Effective Date: 10/01/2018

- Certificate that provides information about the choice of providers
- Certificate that provides information about the quality of providers
- Certificate not linked to a specific provider, so parents can choose any provider
- Consumer education materials on choosing child care
- Referral to child care resource and referral agencies
- Co-located resource and referral in eligibility offices
- Verbal communication at the time of the application
- Community outreach, workshops, or other in-person activities
- Other.

Describe:

4.1.3 Child care services available through grants or contracts.

Effective Date: 10/01/2018

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

- No. If no, skip to 4.1.4.
- Yes, in some jurisdictions but not statewide.

If yes, describe how many jurisdictions use grants or contracts for child care slots.

The lead agency is piloting a Slot Care program in conjunction with Early Head Start - Child Care Partnership (EHS-CCP). Families access this support through a licensed child care facility for which they have a full range of choices when selecting a provider. Within the Early Head Start - Child Care Partnership Slot Care Pilot there are 80 slots available in 14 programs. This pilot utilizes licensed Family, Group, and Center child care programs that have partnered with Early Head Start to provide classrooms that implement the Early Head Start curriculum and serve children birth to 3 years old. The child care facility is the point of access for families utilizing slot care and the facility must be participating in STARS to Quality with at least a STAR 1 rating. The family enters into an agreement directly with the Lead Agency regarding the conditions of slot care: children must be under 3 years old and enrolled in full time care. Payments are set at a full-time monthly rate. Slot rates are not posted as this is a pilot program. Current base payment rates, for all facilities, can be found on the Early Childhood Services Bureau website. The contracts are offered in two areas based on the location of the Early Head Start grantees. The two grantees are Opportunities, Inc. and AWARE. Opportunities, Inc. serves 6 counties total but in this pilot Great Falls is the focus area. AWARE serves 13 counties and in this pilot Butte and Helena is the focus area.

Yes, statewide. If yes, describe:

i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

ii. The type(s) of child care services available through grants or contracts:

iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):

iv. The process for accessing grants or contracts:

v. How rates for contracted slots are set through grants and contracts:

vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:

vii. If contracts are offered statewide and/or locally:

4.1.3 Child care services available through grants or contracts.

b) Will the Lead Agency use grants or contracts for child care services to increase the supply and/or quality of specific types of care? Check all that apply.

- Programs to serve children with disabilities
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve children experiencing homelessness
- Programs to serve children in underserved areas
- Programs that serve children with diverse linguistic or cultural backgrounds
- Programs that serve specific geographic areas
 - Urban
 - Rural
- Other

Describe

The lead agency is piloting Slot Care Program in conjunction with Early Head Start - Child Care Partnership (EHS-CCP). This program is intended to increase the supply of care for children under the age of 3 by guaranteeing a minimum payment to facilities who participate in the Early Head Start - Child Care Partnership.

4.1.3 Child care services available through grants or contracts.

c) Will the Lead Agency use grants or contracts for child care services to increase the quality of specific types of care? Check all that apply.

- Programs to serve children with disabilities
- Programs to serve infants and toddlers

- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve homeless children
- Programs to serve children in underserved areas
- Programs that serve children with diverse linguistic or cultural backgrounds
- Programs that serve specific geographic areas
 - Urban
 - Rural
- Other

[Describe](#)

The lead agency is piloting Slot Care Program in conjunction with Early Head Start - Child Care Partnership (EHS-CCP). This program is intended to increase the supply of care for children under the age of 3 by guaranteeing a minimum payment to facilities who participate in the Early Head Start - Child Care Partnership. In order to receive this slot payment facilities must be participating in the STARS to Quality Program and must have achieved a STAR Level 1 or higher. Facilities that are participating in STARS to Quality but have not yet achieved a level are not eligible to received slot payments.

4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

[ARM 37.95.115](#) requires the licensee or registrant to allow custodial and non-custodial parental access as well as access by legal guardians (to the facility) at any time during which child care services are provided, unless there is a current court order preventing parent-child contact. In the Child Care Policy Manual, in Policy Section 1-8 Provider Eligibility, the provider must allow unlimited parental access to the parent's children and to the child care facility during normal hours of the facility's operation, whenever the children are in the provider's care.

Effective Date: 10/01/2018

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

Effective Date: 10/01/2018

No.

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

Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.

Describe:

Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2).

Describe:

A Family, Friend, and Neighbor (FFN) or Relative Care Exempt (RCE) provider must be at least 18 years old.

Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours).

Describe:

The current requirements limit care to care provided during non-traditional hours.

Restricted to care by relatives.

Describe:

Restricted to care for children with special needs or a medical condition.

Describe:

The current requirements limit care to care provided for a child with special needs or a child with disabilities.

- Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF.

Describe:

- Other.

Describe:

The current requirements limit care to providers who are providing care for teenage parents.

4.2 Assessing Market Rates and Child Care Costs

Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of child care services by geographic area, type of provider, and age of child and/or (2) an alternative methodology, such as a cost estimation model (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to model what expected costs would be incurred by child care providers and parents under different cost scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver child care services. The MRS or alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan.

Note - Any Lead Agency considering using an alternative methodology, instead of a market rate survey, is required to submit a description of its proposed approach to its ACF Regional Child Care Program Office for pre-approval in advance of the Plan submittal (see <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2016-08>). Advance approval is not required if the Lead Agency plans to implement both a market rate survey and an alternative methodology. In its request for ACF pre-approval, a Lead Agency must:

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.

- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.

- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.
- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care'such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.
- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.
- Describe how the alternative methodology will use current, up to date data.
- Describe the estimated reporting burden and cost to conduct the approach.

4.2.1 Please identify the methodology(ies) used below to assess child care prices and/or costs.

Effective Date: 10/01/2018

- MRS
- Alternative methodology.

Describe:

- Both.

Describe:

4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors (98.45 (e)).

Describe how the Lead Agency consulted with the:

Effective Date: 10/01/2018

a) State Advisory Council or similar coordinating body:

The Best Beginnings Advisory Council (BBAC) was consulted during the February 2016 statewide meeting. A CCDF presentation was provided by the CCDF State Administrator, and feedback was solicited and collected. Membership of BBAC includes: child care providers for all facility types, parents of children attending child care, Early/Head Start community citizens, city/county/state government officials, policy makers, and Child Care Resource and Referral staff, Lead Agency staff, and early childhood stakeholders in Montana.

b) Local child care program administrators:

In the fall of 2015, the Lead Agency held community forums in each of the 7 CCR&R regions across the state. Over 800 people total attended the forums, and the market rate survey information, as well as other CCDF Reauthorization information, were presented. An opportunity for questions and discussion was provided by allowing attendees to address the Lead Agency as well as an opportunity to collect written questions. Feedback was collected and a summary of the questions received along with the lead agency's responses was published and available on the ECSB website.

c) Local child care resource and referral agencies:

The Lead Agency solicited feedback from CCR&R agencies through multiple avenues that included CCR&R Director meetings, Best Beginnings Advisory Council meetings, STARS to Quality conference calls and meetings, and Eligibility Supervisor and Staff conference calls.

d) Organizations representing caregivers, teachers, and directors:

In July of 2016, the STARS to Quality Institute was held in Helena. During this annual meeting for all STARS to Quality participating programs, the CCDF Administrator shared information on the market rate survey with family, group, and child care center staff representing teachers and directors; Early Head Start and Head Start staff, teachers and directors; Professional Development Specialists; Pyramid Model Coaches; and CCR&Ragency staff.

e) Other. Describe:

The Lead Agency consulted with CCDF Tribal Administrators during a meeting that occurred March 2018. During this meeting, the CCDF Administrator shared the market rate survey and feedback was solicited and collected from the 7 tribes and the Montana Tribal Relations Manager within DPHHS.

4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, 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 methods.

The Montana Department of Public Health and Human Services contracted with the Department of Agricultural Economics and Economics at Montana State University to conduct a Child Care Market Rate Survey. This survey was distributed to licensed and registered child care facilities state wide in order to solicit enough information for the collected data to be considered valid and reliable. It was published in 2017.

Of the 968 child care providers who were sent questionnaires, 632 child care providers returned questionnaires. The overall response rate for the survey was 65%. Further breaking down the response rate between licensed and registered facilities yielded a response rate of 82% for licensed facilities (202 - Child Care Centers) and a response rate of 60% for registered facilities (430 – Family and Group Child Care Facilities). The response

rate indicated that the child care data was of sufficient quantity, and a confidence interval was used, to support statistically valid and reliable results. Additionally, any statistic that had less than 10 observations or no statewide data reported was denoted.

A Statistical Analysis System (SAS) statistical routine was employed to generate the percentiles and confidence intervals. Using this statistical routine, means are weighted while percentile estimates and confidence intervals are unweighted in provider level analyses.

Effective Date: 10/01/2018

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

Effective Date: 10/01/2018

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

The Montana Child Care Market Rate Survey was conducted with and gathered data from child care providers across the state of Montana. Data was analyzed by child care regions as well as statewide, and the results compared the child care rates at each regional level and statewide.

b) Type of provider. Describe:

The Montana Child Care Market Rate Survey was conducted with all licensed and registered child care providers. This included the following providers: child care centers, family home, and group home child care providers.

c) Age of child. Describe:

The Montana Child Care Market Rate Survey was conducted using the following age increments, infant (0 to 23 months) and child (2 years old to 12 years old). Additionally, the Montana Child Care Market Rate Survey looked at other states payment practices with regards to age increments.

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

The Montana Child Care Market Rate Survey asked questions about how a child care provider defined full-time and part-time. This information helped Montana create payment practices follow the business practices of Montana's child care providers.

4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)

Effective Date: 10/01/2018

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)). by responding to the questions below.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). 01/01/2017

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. 01/31/2017

c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

The Montana Child Care Resource and Referral (CCR&R Network was informed when the Child Care Market Rate Survey was posted to the ECSB website. Also, the Child Care Market Rate Survey was featured under the "New" section of the website when it was posted. The [Executive Summary](#) is located on the ECSB website.

d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

Montana State University met with the Early Childhood Services Bureau to discuss feedback from the child care providers that was given as part of the Child Care Market Rate Survey. A meeting was held with the Montana CCR&R Network and the Early Childhood Project to discuss the Market Rate Survey results and gather feedback on how the results would affect parents, child care providers, and professional development.

4.3 Setting Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or alternative methodology, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF funds. The Lead Agency must re-evaluate its payment rates at least every 3 years.

4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.

Effective Date: 10/01/2018

a) Infant (6 months), full-time licensed center care in the most populous geographic region

Rate \$ 37.00 per full day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region

Rate \$ 31.50 per full day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75

c) Toddler (18 months), full-time licensed center care in the most populous geographic region

Rate \$ 34.00 per full day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region

Rate \$ 30.00 per full day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate \$ 33.00 per full day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 30.00 per full day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75

g) School-age child (6 years), full-time licensed center care in most populous geographic region

Rate \$ 32.50 per full day unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 75

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 29.00 per full day unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75

i) Describe how part-time and full-time care were defined and calculated.

For the purposes of payment, Montana defines part-time and full-time as follows: 1) Part-time day rate is calculated for six or less hours of care during a calendar day, and 2) Full-

time day is calculated for more than six hours and up to 12 hours during a calendar day.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 10-01-2018

k) Identify the most populous area of the state used to complete the responses above.
South East region of the state, Billings area

l) Provide the citation or link, if available, to the payment rates.

<https://dphhs.mt.gov/Portals/85/hcsd/documents/ChildCare/2016childcareproviderrates.pdf>

m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

Montana chooses to set statewide payment rates.

4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a 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 and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

Effective Date: 10/01/2018

Differential rate for *non-traditional hours*.

Describe:

Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

An additional special needs add-on rate is at the discretion of the lead agency when a family and child care provider submit paperwork for the special needs subsidy. This additional subsidy is made available for a child care provider and provides an additional reimbursement amount over the base scholarship payment. A child with special needs is paid an additional 10% over the base scholarship payment, and a child with disabilities is paid an additional 15% over the base scholarship payment.

- Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

- Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

- Differential rate for higher quality, as defined by the state/territory.

Describe:

Programs participating in Montana's QRIS program receive an additional percentage of reimbursement for scholarship children being served. The percentage of reimbursement depends on the quality level that has been achieved. A facility at a STAR 2 rating receives a 5% reimbursement bonus over the base scholarship payment. A facility at a STAR 3 rating receives a 10% reimbursement bonus over the base scholarship payment. A facility at a STAR 4 rating receives a 15% reimbursement bonus over the base scholarship payment. A facility at a STAR 5 rating receives a 20% reimbursement bonus over the base scholarship payment.

- Other differential rates or tiered rates.

Describe:

- Tiered or differential rates are not implemented.

4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access

4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):

Effective Date: 10/01/2018

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.

Families have the option of a full range of child care programs in which to enroll their child(ren). As part of the referral program, the Child Care Resource and Referral agencies share information about each child care provider including whether or not they participate in the STARS to Quality Program.

Payment rates are set at the 75th percentile of the 2016 Market Rate. Rates are set using the determined statewide rate and are the same across the state. Rates do not vary based on region.

By setting payment rates at the 75th percentile, Montana is following CCDF's recommendation to ensure equal access for eligible families compared to private-pay families.

Montana covers registration fees for a child enrolled at registered family, registered group, or licensed child care center. Montana hopes that by covering a registration charge that is also charged to private pay families, a barrier to participation is decreased.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology** . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

Payment rates are set at the 75th percentile of the 2016 Market Rate. Rates are set using the determined statewide rate and are the same across the state. Rates do not vary based on region.

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

Base payment rates enable child care providers to meet health, safety, and staffing requirements as defined by the Child Care Licensing Program's licensing requirements ([Administrative Rules of Montana 37.95](#)).

The payment rates are set based on facility types and child age ranges. Rates vary between Child Care Centers, Family programs, Group child care homes, Family Friend Neighbor care, and Relative Care Exempt providers. Training and other base requirements are different for each facility type. Additionally, rates vary between age groups; infants (0 to 2.99), children (3 to 5.99) and school-age (6 to 12.99).

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

Quality bonus payments are based on a percentage of the child care scholarship paid to a facility. The quality incentive payments increase proportionately with the reimbursement rates and incentives increase with each quality level achieved. The subsidy reimbursement rate for children from birth through 35 months is higher compared to other age groups. This higher rate supports the need and licensing requirement for a lower adult to child ratio needed to care for this age group as well as additional training that is needed.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.

- Limit the maximum co-payment per family.

Describe: .

Co-payments are set as a percentage of a family's income. A family, whose income falls below approximately 95.5% of the Federal Poverty Level pays a \$10 monthly co-payment. A family's copayment is increased by a percentage as the family's income increases. At 150% of the Federal Poverty Level, which is the maximum for entry into Montana's eligibility program, a family's co-payment is 14% of income. For those families that are in the graduated phase out of the eligibility program, income is capped at 185% of Federal Poverty Level, the copayment range increase up to a maximum of 25% of income. "Affordable Child Care" as defined by Montana, means that the total parental (caretaker, relative, or person acting in loco parentis) copayment and 'above and beyond' obligation does not exceed 25% of the family's gross income.

Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

Minimize 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 3.1.7.

For those families that move into the graduated phase of the eligibility program, copayments range from 15% to 25% of income.

Other.

Describe:

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

No

Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

Parents are responsible for any costs, including co-payments, not covered by the

Best Beginnings Child Care Scholarship or additional fees that a provider may charge. A child care provider is allowed to charge a family on the Best Beginnings Child Care Scholarship additional fees as long as the child care provider charges the same fees to a private pay family. The Lead Agency will pay for reasonable, mandatory registration fees that the provider charges to parents. A mandatory registration fee is paid only once, annually, for registering a child in a child care facility. The fee must be the usual and customary rates charged to all families. The registration fee reimbursement is only available to registered family or group and licensed child care center programs.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

The 2016 Montana Child Care Market Rate Survey includes information about additional fees charged by child care provider types. The data is grouped together by child care centers and home-based (registered family and group) providers. This shows variations in the term "additional fees." This may include children bringing food, late pick up charges, or activity/supply fee.

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

Montana does require that the first payment a family makes to a child care provider is applied to the monthly copayment. This helps to ensure a family remains eligible for the Best Beginnings Child Care Scholarship.

The Market Rate Survey requested the following information:

The full cost of attendance at child care facilities must include additional costs, such as registration fees, recurring enrollment fees, late payment, late pickup, and other fees; and, additional benefits, such as transportation, discounts, and scholarships.

Response data indicated:

Over 60% of home- and 12 center-based providers charged late payment and pickup fees. Only 17% of home-based providers charged one-time registration fees, while 35% of center-based providers charged these fees. Only 6% of home-based providers charged recurring enrollment fees, while 23% of center-based provider charged these fees. And finally, additional activity and supply fees were charged by 10% and 25% of homes and centers, respectively.

On the benefits side of the equation, less than 20% of homes and centers provided transportation. Centers were much more likely to offer multi-child and employee discounts. Family and friend discounts were offered by approximately less than 15% of homes and centers; and, other types of discounts were offered by less than 15% of homes and centers. Best Beginnings Child Care Scholarships children were in 92% of the centers and 43% of the homes.

Other important benefits for parents and providers are the provision of food, services provided at reduced costs, and reimbursements or donations from other organizations. Over 75% of homes and over 50% of centers receive Child and Adult Care Food Program (CACFP) reimbursement. Very few parents pay additional food-related fees for either type of provider. Center-based providers can take advantage of free or reduced costs for building use (22%), utilities (20%), volunteer work (27%), and furniture and equipment (15%), while home-based providers have very few of these opportunities (less than 5%). In addition, over 30% of center-based providers are Montana STARS to Quality providers; receive reimbursement or donations from local, state, federal government or private individuals. Only 15% of home-based providers participate in STARS to Quality and these providers rarely receive other reimbursements or donations.

[g\) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.](#)

The payment practices support equal access to a range of providers that are regulated and/or monitored by the Child Care Licensing program in the Quality Assurance Division of MT DPHHS. Family, Friend and Neighbor; Relative Care Exempt (RCE) Provider; and family, group and center licensed care all benefit from the payment practices set forth as payment rates are not different for these types of care. The payment schedule has increased from once per week to two times per week to allow for providers to receive payment more frequently and invoices are processed within three business days after submission to allow a timely return for payment. Child care providers may invoice for absence days if a child attends at least 85% of the authorized time and receives full-time child care. This allows the continuity of care to be maintained for both the provider and parent as well as financially supports a provider during an interruption in care. Providers are reimbursed on a half-time day (part-time) or full-time day (full-time) basis and registration fees are paid to providers who collect this fee. This fee must be charged to all families regardless of how they pay for childcare. All childcare payments are issued in

accordance with an authorization of services for the family. It includes information about the child and family, child care provider chosen by the family, amount to be owed to the provider, and payment policies. Any changes to the family's eligibility for services must be provided to the CCR&R and if the action is adverse to the family it must be shared with both family and provider immediately. The process for appeal and resolution is included and shared with a family or provider when any adverse action is taken regarding child care subsidy.

h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

Geographic area.

Describe:

Type of provider.

Describe:

The Lead Agency pays different payment rates for each of the following child care provider types: child care centers, family home providers, group home providers, and Family, Friend, and Neighbor (FFN) and Relative Care Exempt (RCE).

Age of child.

Describe:

The Lead Agency pays for two age increments: infant (birth through the end of the 35th month of age), child (age thirty six months up to their sixth birthday), and school age (age 6 through the end of the 12th year of age)

Quality level.

Describe:

Other.

Describe:

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

- Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.

Describe:

Current payment rates are set based on a 2009 Market Rate with a 2% increase in 2013, an additional 2% increase in 2014 and an additional 2% increase in 2016 and was effective January 1, 2016. The 2% increase in 2013 and 2014 resulted from legislative action.

- Based on the approved alternative methodology, payments rates ensure equal access.

Describe:

- Feedback from parents, including parent surveys or parental complaints.

Describe:

- Other.

Describe:

4.5 Payment Practices and the Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not

generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)).

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

Effective Date: 10/01/2018

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

Once a child care provider submits an invoice, the invoice is processed within three business days by the CCR&R This policy is found in the [Administrative Rules of Montana, 37.80.316](#). The Department of Public Health and Human Services processes payments through the payment system on Tuesdays and Thursdays, with exceptions that payments are not processed on holidays or the first and last day of the month. Providers receive a Statement of Remittance (SOR) and parents received an Explanation of Benefits (EOB) that tell what was paid for a child's care.

b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

Montana defines full-time child care as care certified over 30 hours per week on a regular basis. Absent days are available for children receiving full-time child care. A child earns two absent days per month, and a full-time day is defined as more than six hours and less than 12 hours. Two absent days a month provides a full payment for a child because two absent days equal more than 15% of the authorized time.

Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

Montana defines full-time child care as care certified over 30 hours per week on a regular basis. Absent days are available for children receiving full-time child care. A child earns two Absent Days per month, and a full-time day is defined as more than six hours and less than 12 hours. Two full-time days is 10 hours multiplied by 2 Absent Days equals 20 hours per month. Full-time care for a month is defined as 30 hours multiplied by 4 weeks equals 120 hours per month. 20 hours per month (2 Absent Days) divided by 120 hours per month (full-time child care) equals 16.7% of the authorized time. Two Absent Days a month provides a full payment for a child because two Absent Days equal more than 15% of the authorized time.

Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time). Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time). Part-time is defined as a half-time day, which are child care services provided six or less hours during a calendar day. Full-time is defined as a full-time day, which are more than six hours and up to twelve hours during a calendar day.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. A registration fee is paid for registering a child in a registered family, registered group, or licensed child care center, if the fee is charged to all who enroll in the facility. The payment will not exceed thirty dollars.

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:

When an authorization of services is created, an Authorization Plan is generated by the Child Care Under the Big Sky (CCUBS) computer database. The authorization plan is a notification sent to the parent and child care provider. It includes the following information: number of children authorized to receive child care assistance; number of

hours per week authorized; number of months authorized; name of the child care provider; and amount of monthly copayment that the parent must pay to the provider. The Authorization Plan includes information about payment policies included in the Administrative Rules of Montana and the Fair Hearing process when an adverse action occurs.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

If a parent reports a change to the Child Care Resource and Referral (CCR&R agency or a CCR&R agency becomes aware of change, the CCR&R agency determines whether or not the change would impact the family's eligibility status. If the reported change would be an adverse action, a 15-calendar day notice is given to both the parent and child care provider. An adverse action may include a change in the family's eligibility status. Also, a case closure notice is sent to the parent and child care provider the day a case is closed.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

A weekly error log is created by the Child Care Under the Big Sky (CCUBS) computer database for any payments that should have been made but were unable to go to the intended party for the Best Beginnings Child Care Scholarship. The weekly error log includes the payment amount, the unique identifier for the CCUBS system, and the type of payment issue such as missing W-9 form. The error log is emailed to Early Childhood Services Bureau twice per week, and follow-up is made on any payments that cannot be made from the CCUBS database when the error log is received.

g) Other. Describe:

N/A

4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?

Effective Date: 10/01/2018

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

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

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours (658 E(c)(2)(M); 98.16 (x)).

4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.

Effective Date: 10/01/2018

In licensed family child care.

The Lead Agency tracks program closures and openings through a program closure tracking form as well as through the data system Child Care Under the Big Sky (CCUBS). The information that is collected includes: Program/Facility Name, License Type, City, Closing Date, Closing reason and other identifying information that is useful to identify shortages, trends, barriers, and progress. In addition to tracking trends for all licensed child care providers, the STARS to Quality program tracks fluctuations of participation in that program. The CCR&R agency refers the parent to community resources that may benefit the child and family. The regional CCR&R agencies help with identifying areas where there is a shortage of child care providers.

In licensed child care centers.

The Lead Agency tracks program closures and openings through a program closure tracking form as well as through the data system Child Care Under the Big Sky (CCUBS). The information that is collected includes: Program/Facility Name, License Type, City, Closing Date, Closing reason and other identifying information that is useful to identify shortages, trends, barriers, and progress. In addition to tracking trends for all licensed child care providers, the STARS to Quality program tracks fluctuations of participation in that program. The CCR&R agency refers the parent to community resources that may benefit the child and family. The regional CCR&R agencies help with identifying areas where there is a shortage of child care providers.

Other.

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

Effective Date: 10/01/2018

a) Children in underserved areas. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

Recruitment of providers.

Describe:

- Tiered payment rates (as discussed in 4.3.2).

Describe:

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Programs that participate in STARS to Quality receive training and technical assistance for Program and Business Administration Scales, which are used as a tool to improve business practices.

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

The CCR&Ragency refers the parent to community resources that may benefit the child and family. The regional CCR&Ragencies help with identifying areas where there is a shortage of child care providers. The Lead Agency tracks program closures and openings through a program closure tracking form as well as through the data system Child Care Under the Big Sky (CCUBS). The information that is collected includes: Program/Facility Name, License Type, City, Closing Date, Closing reason and other identifying information that is useful to identify shortages, trends, barriers, and progress. In addition to tracking trends for all licensed child care providers, the STARS to Quality program tracks fluctuations of participation in that program. The regional CCR&Ragencies help with identifying areas where there is a shortage of child care providers for children in underserved areas.

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

b) Infants and toddlers. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

Within the Early Head Start - Child Care Partnership Slot Care Pilot there are 80 slots available in 14 programs. This pilot utilizes licensed Family, Group, and Center child care programs that have partnered with Early Head Start to provide classrooms that implement the Early Head Start curriculum and serve children birth to 3 years old.

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

CCR&Ragencies are required to provide technical assistance to any programs requesting support. CCR&Ragencies deliver the Certified Infant Toddler Caregiver course and visit programs serving infants and toddlers during the two observations required by the course. Technical assistance is offered to the individual taking the course as well as to the program director. As part of the course requirements, a director must agree to allow any individual in taking the course to allow an observation in their classroom to observe specific strategies are implemented as required by the course. The Director must support this process. CCR&Ragencies also provide technical assistance outside of the course to any program requesting support, which includes anything from classroom/program environments to program management to challenging behaviors.

Recruitment of providers.

Describe:

CCR&Ragencies are responsible for recruitment of new providers in their regions. A focus of recruitment for infant and toddler providers has been identified across all regions. Not only are regions aware of the lack of not only quality infant and toddler care but a lack of infant and toddler care, overall. Many agencies recruit heavily while delivering the Certified Infant Toddler Caregiver course in order to ensure that individuals interested in opening a child care business to serve infants and toddlers demonstrate a passion for and are trained to provide care for this specific age group.

Tiered payment rates (as discussed in 4.3.2) .

Describe:

A child, through their 36th month, is considered an infant/toddler and receives a higher reimbursement rate than children older than 36 months.

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

The Infant/Toddler workgroup, a workgroup created to support infant/toddler initiatives that was formed out of the Best Beginnings Advisory Council membership, tracks data specific to infants and toddlers in Montana using multiple

formats and sources. This data includes: number of programs in STARS to Quality, Early Head Start, licensed child care, and the Child and Adult Care Food Program (CACFP) serving infants and toddlers; trends in licensed care serving infants and toddlers; infant and toddlers receiving child care subsidy, and waitlist data for programs serving infants and toddlers. This work group is very active and strives to make data-informed decisions in order to better serve this population. The regional CCR&R agencies help with identifying areas where there is a shortage of child care providers for serving infants and toddlers.

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

c) Children with disabilities. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

Families of children with special needs and children with disabilities are a priority status for a child care scholarship. Child care providers are required to make a reasonable accommodation for children with special needs. Families must meet eligibility requirements for a Best Beginnings Child Care Scholarship. Child Care Resource and Referral (CCR&R staff assist the family in determining eligibility and completing the required paperwork. The PDS provides a list of community resources to the parent during this process. The list is tailored to each region and may include information about special education contacts at the local public school, local OPA office, specifics regarding any local medical supports such as Occupational or Physical Therapists, etc.

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2).

Describe:

Additional funding for special needs care is provided solely at the discretion of the Early Childhood Services Bureau. The Lead Agency uses the Child Care Under the Big Sky (CCUBS) computer system to track the number of children approved for additional reimbursement as a child with special needs or a child with disabilities.

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

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

d) Children who receive care during non-traditional hours. Check and describe all that apply

Grants and contracts (as discussed in 4.1.3).

Describe:

- Family child care networks.

Describe:

- Start-up funding.

Describe:

- Technical assistance support.

Describe:

- Recruitment of providers.

Describe:

A Relative Care Exempt (RCE) provider or Family, Friend, and Neighbor (FFN) can receive payment to provide care in a child's home. This type of care provider may make it easier to find a child care provider in an area that is in short-supply of options.

- Tiered payment rates (as discussed in 4.3.2) .

Describe:

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Each CCR&R provides technical assistance to all child care provider types including RCE and FFN that may serve children in their own home. Information may include staffing patterns and budget management.

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

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

e) Other. Check and describe all that apply:

Grants and contracts (as discussed in 4.1.3).

Describe:

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2).

Describe:

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

N/A

4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.

Effective Date: 10/01/2018

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

The Lead Agency defines areas with significant concentrations of poverty and unemployment based on various data and resources within local, regional, and state areas. The following resources are used:

- **Census data** - The Census and Economic Information Center provides current, easily accessible, and thorough economic and demographic analysis, maps, data, and expert assistance to meet the needs and requests of Montanans. Information regarding demographics, economics, education, energy, housing, and boundaries which also includes the American Community Survey is accessed through this agency.
- **Montana Kids Count** - Montana KIDS COUNT is the leading resource for data on child and family wellbeing in the state. They are a member of the national KIDS COUNT Network, and is housed in the Bureau of Business and Economic Research at the University Montana. They are a non-profit, non-partisan organization that compiles data from public sources and publishes it online and in the Montana KIDS

COUNT Data Book. Montana Kids Count also shares current, comprehensive data on child and family wellbeing in each of Montana's 56 counties. The data addresses six domains: demographics, health, education, family and community, economic wellbeing, and safety and risk behaviors.

- **CCR&RAgencies** - Each regional CCR&R agency submits a detail quarterly report to the Lead Agency. The report, among other data points, includes information on the caseloads of eligibility specialists. Eligibility specialist's caseloads are capped at 125 cases at one time and includes TANF cases. The number of TANF cases open or increasing can be an indication of a significant concentration of poverty in that region. The quarterly report also indicates the number of referrals for families experiencing homelessness in a region as reported through eligibility determination. If this number increases it can be an indication of a rise in families experiencing homelessness in a particular region which could indicate a myriad of other social determinates including a significant concentration of poverty and unemployment.
- **Child Care Aware of America®** - Child Care Aware® of America works with more than 400 state and local Child Care Resource and Referral agencies nationwide. Its vision is that every family in the United States has access to a high quality, affordable child care system. The child care system supports children's growth, development and educational advancement and creates positive economic impact for families and communities. The organization's mission is to advance a child care system that effectively serves all children and families. This work is strengthened by a national network of Child Care Resource and Referral agencies and diverse members and partners. To achieve this mission, the organization leads projects that increase the quality and availability of child care, undertakes research, and advocates child care policies that positively impact the lives of children and families.
- **NACCRAware** - The Lead Agency uses NAACRAware which generates child care referrals and reports, and manages provider, client, and community and group data. NACCRAware collects referral data which includes whether a family receives any type of financial assistance such as WIC, subsidy, TANF, other types of assistance that may not be directly related to finances, geographic area, and transportation needs. This information can be used to analyze significant areas of poverty, unemployment, and child care deserts.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs

Montana has adopted a slot care pilot working with two Early Head Start Grantees to guarantee a minimum monthly payment to participating providers. The additional funds are tied to attendance at 85% or higher and involve only providers currently identified as STAR 1 or higher on Montana's STARS to Quality QRIS system. Providers enter into agreements with parents for a child enrolled in a slot. Child Care Resource and Referral

(CCR&R agencies implement recruitment strategies to increase the number of high-quality providers by encouraging programs to participate in STARS to Quality. All programs that participate in STARS to Quality must serve a percentage of children with high needs based on their STAR level.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children, whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements are in effect for all child care staff members that are licensed, regulated or registered under state/territory law and all other providers eligible to deliver CCDF services.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.

Effective Date: 10/01/2018

Center-based child care.

Describe and Provide the citation:

Child care center is an out-of-home place in which child care is provided to 13 or more children on a regular basis. [52-2-721, MCA](#)

Family child care.

Describe and Provide the citation:

Family child care home means a private residence in which child care is provided to three to six children on a regular basis. In addition to the previous definitional language found at [52-2-703, MCA](#), the term also means, a child care facility providing care to no more than three children under two years of age unless care is provided exclusively for

children under age two. For facilities providing care exclusively for children under age two, family child care home means a place in which care is provided for up to four children under the age two. No other children shall be in attendance. [52-2-721, MCA](#)

In-home care (care in the child's own home).

Describe and provide the citation (if applicable):

A parent or legal guardian selects an individual- often a family member, friend, or neighbor to care for all the children in one family or up to 2 unrelated children. The provider must pass Montana and FBI criminal background checks and Child Protective Services background checks but are not otherwise regulated or monitored by the State of Montana. [52-2-710, MCA](#)

5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).

Effective Date: 10/01/2018

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. Relative Care Exempt (RCE) providers are the only providers exempted from licensing requirements. RCE providers must meet background check criteria, complete an approved health and safety orientation course, and sign a health and safety checklist attestation.

5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption

Effective Date: 10/01/2018

Center-based child care.

If checked, describe the exemptions.

Family child care.

If checked, describe the exemptions.

In-home care.

If checked, describe the exemptions.

Relative Care Exempt providers are exempt from licensing and inspections. In terms of Relative Care Exempt providers, "relative" means the child is the brother, sister, first cousin, nephew, niece, grandchild, or great grandchild of the person providing child care and includes a child in a step, foster, or adoptive relationship.

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories.

Effective Date: 10/01/2018

a) Licensed CCDF center-based care

1. Infant

-- How does the State/territory define infant (age range):

Birth through 18 months

-- Ratio:

4:1 (this ratio goes through 24 months)

-- Group size:

max 12 (this group size max goes through 24 months)

-- Teacher/caregiver qualifications:

Teacher/caregiver qualifications: must complete facility overview on-the-job training; be current on the ECP Practitioner Registry; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation.

2. Toddler

-- How does the State/territory define toddler (age range):

19 - 36 months

-- Ratio:

8:1 (this ratio is used for children 24 months through 48 months of age)

-- Group size:

max 16 (this group size max is used for children 24 months through 48 months of age)

-- Teacher/caregiver qualifications:

Must complete facility overview on-the-job training; be current on the ECP Practitioner Registry; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation.

3. Preschool

-- How does the State/territory define preschool (age range):

36 months up to 6th birthday

-- Ratio:

10:1

-- Group size:

max 24

-- Teacher/caregiver qualifications:

Must complete facility overview on-the-job training; be current on the ECP Practitioner Registry; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation.

4. School-age

-- How does the State/territory define school-age (age range):

5 - 12 years

-- Ratio:

1:14

-- Group size:

max 32

-- Teacher/caregiver qualifications:

Must complete facility overview on-the-job training; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation. Teachers must complete 8 hours of annual training.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers

N/A

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

If age groups are mixed, the lowest ratio of the youngest child must be met. The regulations do not allow for children under 19 months of age to be mixed with children over 24 months of age.

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.

The director must be at least 18 years of age, be current on the ECP Practitioner Registry, successfully completed teacher orientation, have one of the following: (i) current ECP Practitioner Registry level 4 or higher; (ii) current ECP Practitioner Registry level 3, plus two years of experience in a licensed child care facility or Head Start; (iii) current ECP Practitioner Registry level 2, plus three years of experience in a licensed child care facility or Head Start; or (iv) a bachelor degree or higher in any field, plus completion of the 60-hour infant-toddler training and the 60 hour preschool course, or 120 hours of alternate training approved by the department; or (v) a combination of education and experience may be considered. This option must be approved by the Child Care Licensing manager. The director must successfully complete the Program Management Essentials course within 60 days of becoming a director.

b) Licensed CCDF family child care provider

1. Infant

-- How does the State/territory define infant (age range):

Birth through 18 months

-- Ratio:

There shall be no more than three children under the age of two with 1 teacher, or six children under two with two teachers, unless care is provided exclusively for children under the age of two. A group child care facility that cares exclusively for children under the age of two must have no more than four children present unless there are two teachers.

-- Group size:

6

-- Teacher/caregiver qualifications:

Teachers must complete facility overview on-the-job training; be current on the

ECP Practitioner Registry; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation.

2. Toddler

-- How does the State/territory define toddler (age range):

19 - 36 months

-- Ratio:

There shall be no more than six children under the age of two, unless care is provided exclusively for children under the age of two. A group child care facility that cares exclusively for children under the age of two must have no more than four children present unless there are two caregivers.

-- Group size:

12

-- Teacher/caregiver qualifications:

Teachers must complete facility overview on-the-job training; be current on the ECP Practitioner Registry; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation.

3. Preschool

-- How does the State/territory define preschool (age range):

4 years

-- Ratio:

1:6

-- Group size:

12

-- Teacher/caregiver qualifications:

Teacher/caregiver qualifications: must complete facility overview on-the-job training; be current on the ECP Practitioner Registry; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation.

4. School-age

-- How does the State/territory define school-age (age range):

5 and older

-- Ratio:

1:6

-- Group size:

12

-- Teacher/caregiver qualifications:

Teacher/caregiver qualifications: must complete facility overview on-the-job training; have current certification for infant, child, and adult CPR and infant choking response, and standard first aid; and successfully complete required early childhood teacher orientation. Teachers must complete 8 hours of annual training.

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes

N/A

c) In-home CCDF providers:

1. Describe the ratios

Family, Friend and Neighbor providers (FFNs) may provide care to only one family or are limited to no more than 2 children from separate families.

2. Describe the group size

Family, Friend and Neighbor providers (FFNs) may provide care to only one family or

are limited to no more than 2 children from separate families.

3. Describe the maximum number of children that are allowed in the home at any one time.

Family, Friend and Neighbor providers (FFNs) may provide care to only one family or are limited to no more than 2 children from separate families.

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

Family, Friend and Neighbor providers (FFNs) may provide care to only one family or are limited to no more than 2 children from separate families.

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day

N/A

5.2 Health and Safety Standards and Requirements for CCDF Providers

5.2.2 Health and safety standards for CCDF providers.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care providers receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note: This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

Effective Date: 10/01/2018

1. Prevention and control of infectious diseases (including immunization)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: All children enrolled in MT licensed facilities must be immunized. All teachers must learn and implement practical steps to reduce illness in child care settings.

Content covered: Illness policies, immunization forms, environmental sanitization.

Practices required: Facilities are required to have illness policies that exclude children with specific symptoms of illness or that are otherwise suspected of having a communicable disease, conduct daily health checks when a child arrives at the facility, and have immunization forms on file for staff and children. All staff must practice proper handwashing, proper diaper changing practices, proper laundry and bedding storage, safe food handling and other environment sanitization. Child care centers are required to receive an inspection annually by the county health department sanitarian and the immunization nurse. Licensing compliance is monitored by reviewing files, facility policies, and through observation during onsite visits. All teaching staff must complete "Prevention and Control of Infectious Diseases & Immunizations" as part of health & safety orientation training within 90 days of hire.

-- List all citations for these requirements, including those for licensed and license-exempt programs

[ARM 37.95.139](#), [37.95.140](#), [37.95.184](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

Relative care is exempt from this requirement. All children under 2 years of age must have a pediatric health statement from a physician prior to enrollment. [ARM 37.95.128](#)

.

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Child care facilities must employ practices known to promote a safe sleep environment.

Content covered: Safe sleep environment and practices.

Practices required: Infants laid down for sleep must be placed on their backs on a firm surface with no incline and with no blankets or loose items other than a pacifier in the crib. Sleep sacks may be used as long as arms are not confined. Infant's heads and faces must not be covered. Infants must not be allowed to sleep in car seats, swings, or other apparatus. Any variations to sleep position must be supported with medical documentation. All cries must be investigated. All facilities that provide care to children under age 2 must develop a written policy for safe sleep. Infant teachers must sign an acknowledgement of the facility's safe sleep policy. All teachers must take safe sleep training ("Infant Safety Essentials") within 30 days of hire.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.1005](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

This requirement is only applicable to providers that are approved to care for children under 5 years of age.

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

3. Administration of medication, consistent with standards for parental consent

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: No child care employee, owner, or operator may administer any medication to a child without the written authorization of the parents including the child's name, dates for which the authorization is applicable, dosage instructions, and the signature of the child's parent or guardian. Child care facilities must store all medications safely and appropriately.

Content covered: Medication administration and storage.

Practices required: Regulations are in place that require providers to have a written medication administration policy that includes parental consent and a medication storage policy. Any medication brought into the facility by the parent or legal guardian of a child shall be dated and shall be kept in the original container labeled with the child's information, and stored at proper temperatures in a location inaccessible to the children in care or in a locked box. Written authorization must include dosage instructions. If medications are administered at the facility, the provider must also maintain a medication administration log. Parents of children with chronic health conditions must also complete a Special Health Care Needs Form which must be kept on file at the facility. All teaching staff must complete "Medication Administration in Child Care: Part I" within 90 days of hire.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.181](#), [37.95.182](#), [37.95.141](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

4. Prevention of and response to emergencies due to food and allergic reactions

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Providers will take steps to prevent food and allergic reactions. Providers will know how to respond to food and other allergic reactions.

Content covered: Child allergies, child files and documentation, emergency response and first aid policies.

Practices required: Regulations are in place that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. Prior to a child being enrolled or entered into a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. All teaching staff must complete "Medication Administration in Child Care: Part I" within 90 days of hire. This course includes content related to prevention of and response to food and allergic reactions.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.139](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm.

Content covered: Indoor and outdoor environment

Practices required: Regulations are in place that require providers to maintain safe indoor and outdoor environments free from hazards. Providers are required to store cleaning and other hazardous materials out of reach. Guns must be safely and securely stored. Pets must be friendly and vaccinated. Extension cords must not be used for permanent wiring. Indoor and outdoor play areas must be reasonably clean and free from hazards. Toys and equipment must be safe and well maintained. Emergency numbers must be posted. The building must have approved and unobstructed exits. Children must have a smoke-free environment. Standing water must not be accessible to children. Outdoor play areas must have a 4-foot fence with no gaps greater than 4 inches. All teaching staff must complete "Protecting Children from Harm" within 90 days of hire.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.121](#), [ARM 37.95.127](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Providers must use appropriate forms of discipline and child guidance.

Content covered: Prevention of shaken baby syndrome/abusive head trauma.

Practices required: Regulations are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. All teaching staff must complete "Infant Safety Essentials" within 30 days of hire. This training includes prevention of shaken baby syndrome and how to plan for successfully handling instances when a child is crying inconsolably.

- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.163](#), [ARM 37.95.171](#)

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

- Describe any variations based on the age of the children in care

None

- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-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)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations;

and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Providers will develop written emergency disaster plans for responding to natural and human-caused disasters.

Content covered: Emergency preparation and emergency drills

Practices required: Regulations are in place that require providers to have procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions. All teaching staff must complete "YIKES Disaster Planning" course within 90 days of hire.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.124](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Child care facilities must be free from environmental hazards. Providers must properly use, store, and dispose of hazardous materials.

Content covered: A child care professional's first responsibility is to protect children from harm. To do that, they must recognize what the hazards and risks are in the environment, what policies and regulations apply to safety in child care, and understand their role in protecting children from harm.

Practices required: Regulations are in place that require providers to practice safe handling and storage of hazardous materials, including the disposal of bio-contaminants and other infectious materials. Cleaning materials, flammable liquids, detergents, aerosol cans, and other poisonous and toxic materials must be kept in their original containers and in a place inaccessible to children. They must be used in such a way that will not contaminate play surfaces, food, food preparation areas, or constitute a hazard to the children. Bio-contaminants including blood, bodily fluids, and other infectious materials must be properly disposed of. All teaching staff must complete the on-line course "Protecting Children from Harm" within 90 days of hire. This training covers handling and storage of hazardous materials and disposal of bio-contaminants.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.121](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

9. Precautions in transporting children (if applicable)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Providers must who choose to transport children must implement policies

and practices that protect children from harm during transport.

Content covered: Supervision, attendance, parent permission, safety restraints.

Practices required: Providers must have written consent from parents to transport children. Providers must develop a written transportation policy outlining safe transport practices and how all children will be supervised and accounted for during the transitions to and from the vehicle. This policy must be made available to parents. Transportation plans must be available to the parents. Drivers must be at least 18 years of age and possess a valid driver's license. Vehicles must be locked while in motion. Children must have safety restraints required by law according to age and weight and may not be double buckled. Children must never be left unattended in a vehicle. There must be at least one adult in addition to the driver for each four children under age two being transported. An adult must accompany each child to and from the vehicle to the child's home or authorized drop-off. All teaching staff must complete "Protecting Children from Harm" within 90 days of hire. This training includes safe transportation practices.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.132](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: All early childhood teachers, directors, substitutes and assistant teachers

must have a current infant, child, and adult CPR and pediatric first aid certification.
Content covered: Infant, child, and adult CPR and pediatric first aid.

Practices required: Regulations are in place that require all teachers in a child care setting to be current in pediatric first aid and cardiopulmonary resuscitation (CPR) certification for child, infant, and adult. This training must be successfully completed within 30 days of hire and before providing unsupervised care to children.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.106](#), [37.95.145](#), [37.95.163](#), [37.95.622](#), [37.95.704](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

11. Recognition and reporting of child abuse and neglect

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Standard: Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect.

Content covered: Child care professionals should recognize possible signs of abuse and neglect and know the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect.

Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child

abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. All teaching staff must complete "Child Abuse and Neglect: Mandatory Reporting" training within 90 days of hire.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Licensed providers: [ARM 37.95.171](#); License-exempt: [ARM 37.95.103](#)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care

None

-- Describe if relatives are exempt from this requirement

N/A

b) Does the Lead Agency include any of the following optional standards?

No, if no, skip to 5.2.3.

Yes, if yes provide the information related to the optional standards addressed.

1. Nutrition

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Regulations are in place that require providers to provide meals that meet the USDA meal requirements. In addition, the regulations specify the number of meals required throughout the day.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.215](#) and [ARM 37.95.711](#).

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

Centers are required to have a registered dietician approve the menus.

-- Describe any variations based on the age of the children in care.

None

--Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

2. Access to physical activity

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The regulations require developmentally appropriate activities including physical growth. Outdoor play is required each day.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.715](#) and [ARM 37.95.602](#).

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care.

None

--Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

3. Caring for children with special needs

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The regulations require a Special Needs Health Care Plan for children with special needs. This plan should be utilized in order to meet the needs of the child. In addition, the requirements also do not allow for discrimination based on disabilities.

-- List all citations for these requirements, including those for licensed and license-exempt providers

[ARM 37.95.103](#), [37.95.108](#).

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care.

None

--Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).

Describe:

The regulations indicate that screen time should be limited to child-appropriate programs and should not be excessive.

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The regulations require that providers develop and post a schedule of activities that limits screen time to child appropriate programs and is not excessive.

-- List all citations for these requirements, including those for licensed and license-exempt providers

ARM 37.95.715, 37.95.720. Montana Law (MCA 52-2-702)

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

None

-- Describe any variations based on the age of the children in care.

None

--Describe if relatives are exempt from this requirement

Relative care is exempt from this requirement.

5.2.3 Health and safety training for CCDF providers on required topics.

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Effective Date: 10/01/2018

Pre-Service or Orientation Training Requirements

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:

19 hours

2. Licensed FCC homes:

19 hours

3. In-home care:

8 hours

4. Variations for exempt provider settings:

N/A

b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

90 days

c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

If a provider exclusively serves children ages 5 and older, they do not have to take Infant Safety Essentials, which includes safe sleep practices and prevention of shaken baby syndrome/abusive head trauma.

d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

Pre-service orientation training is offered online with the exception of CPR/First Aid, which is offered in-person only. For the online components, providers are able to work with their CCR&R for assistance should accommodations be necessary.

e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

1. Prevention and control of infectious diseases (including immunizations)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 3. Administration of medication, consistent with standards for parental consent

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: Licensed providers: [ARM37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#), License-exempt providers: [ARM 37.95.103](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are not exempt from this requirement.

5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.163](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring for children with special needs, etc..

Regulations require new staff to complete a facility-specific orientation (on-the-job training).

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.622](#) and [37.95.704](#)

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Relatives are exempt from this requirement.

Ongoing Training Requirements

5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.

Effective Date: 10/01/2018

a) Licensed child care centers:

[ARM 37.95.162](#) requires 16 hours of annual training hours for the director and all

teaching staff. This training must include 4 hours of health and safety training every three years.

b) Licensed FCC homes:

[ARM 37.95.162](#) requires 16 hours of annual training hours for teaching staff. This training must include 4 hours of health and safety training every three years.

c) In-home care:

[ARM 37.95.103](#) requires 8 hours of annual training hours for FFN providers. This training must include 2 hours of health and safety training every three years.

d) Variations for exempt provider settings:

Annual training is not required for Relative Care Exempt providers.

5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

Effective Date: 10/01/2018

1. Prevention and control of infectious diseases (including immunizations)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Licensed providers: [ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention and control of infectious diseases.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention and control of infectious diseases.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention of sudden infant death syndrome and the use of safe-sleep practices. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- Infant Safety essentials - (orientation course)
- Safe Sleep - (2 hour - on-line)

-- How often does the state/territory require that this training topic be completed by

caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention of sudden infant death syndrome and the use of safe-sleep practices.

3. Administration of medication, consistent with standards for parental consent

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the administration of medication, consistent with standards for parental consent. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- Medication Administration in Child Care Part I
- Medication Administration in Child Care Part II
- Medication Administration in Child Care Refresher

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the administration of medication, consistent with standards for parental consent.

4. Prevention and response to emergencies due to food and allergic reactions

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM.37.95.162](#); License-exempt providers: [ARM.37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention and response to emergencies due to food and allergic reactions. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- Medication Administration in Child Care Part I - (orientation course)
- Medication Administration in Child Care Part II
- Medication Administration in Child Care Refresher
- Food Safety in Child Care

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention and response to emergencies due to food and allergic reactions.

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- Protecting Children from Harm
- Outdoor Environments. This course explores different types of playgrounds, designing safe and healthy playgrounds and creating outdoor learning centers.
- Montana Preschool Teacher Education (60 hours - classroom)

1. Diversity (5 Hours)

2. Health and Well-being (6 Hours)

3. Child Growth & Development (6 Hours)
4. Environmental Design (6 Hours)
5. Child Guidance (6 Hours)
6. Family & Community Partnerships (5 Hours)
7. Program Management (5 Hours)
8. Curriculum (6 Hours)
9. Observation, Documentation, and Assessment (5 Hours)
10. Professionalism (5 Hours)
11. Personal Dispositions (5 Hours)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention of shaken baby syndrome, abusive head trauma, and child maltreatment. CCR&Rs are required to provide professional development opportunities for providers that are

evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- Infant Safety essentials - (orientation course)
- Infant/Toddler Training - (60 hours - classroom)
- Child Abuse and Neglect: Mandatory Reporting

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the prevention of shaken baby syndrome, abusive head trauma, and child maltreatment.

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes emergency preparedness and response planning for emergencies resulting from a natural disaster or a

human-caused event. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- YIKES Disaster Planning: Emergency Preparedness

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event.

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the handling and storage of hazardous materials and the appropriate disposal of bio-contaminants. CCR&Rs are required to provide professional development opportunities for providers that are

evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following course in this topic:

- Protecting Children From Harm

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes the handling and storage of hazardous materials and the appropriate disposal of bio-contaminants.

9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes appropriate precautions in transporting children. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- Protecting Children from Harm - (orientation course)
- Getting' Out There: The How, Why, and Where of Field Trips. This training covers important how-to's for keeping children safe and the field trip enjoyable for everyone

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes appropriate precautions in transporting children.

10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.163](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete this training every two years.

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete this training every two years.

11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes recognition and reporting of child abuse and neglect. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following course in this topic:

- Child Abuse and Neglect: Mandatory Reporting

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes recognition and reporting of child abuse and neglect.

12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

[ARM 37.95.162](#); License-exempt providers: [ARM 37.95.103](#)

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes child development. CCR&Rs are required to provide professional development opportunities for providers that are evidence-based, align with the 2014 Montana Early Learning Standards, Developmentally Appropriate Practices (DAP), and the Knowledge Base. There must be a minimum of ten new courses developed/offered annually, with at least 3 of those courses specific to health and safety.

Montana offers the following courses in this topic:

- Together We Grow
- Early Childhood Essentials
- Exceptional Early Childhood Environments: Practices that engage, enrich and empower - (4 hour online)

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

Caregivers, teachers, and directors must complete the 4-hour course, "Health and Safety Overview" every 3 years. This course includes child development.

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

N/A

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers

N/A

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

N/A

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

N/A

5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.3.1 Enforcement of licensing and health and safety requirements

Lead agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

New child care facilities will be inspected prior to issuing a license or registration. Health and safety violations must be corrected prior to licensure. A 3-month provisional license or registration may then be issued. Before the 3-month provisional status can be changed to a regular full year license or registration, a licensing worker must conduct a full inspection, any health and safety violations must be corrected, and the director and teaching staff must have completed the remaining health and safety orientation training courses.

Prior to renewing a license or registration, facilities must have an annual inspection, any health and safety violations must be corrected, and the director and teaching staff must have completed health and safety orientation training. The director and teaching staff must also verify that their CPR/First Aid is current.

Effective Date: 10/01/2018

5.3.2 Inspections for licensed CCDF providers.

Lead agencies must require licensing inspectors to perform inspections-with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards-of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)). Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

Effective Date: 10/01/2018

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards

New child care facilities will be inspected prior to issuing a license or registration. The

pre-licensure inspection includes CCDF health and safety and fire standards. Once an application has been submitted, the licensor will schedule Pre-inspection with the provider. The Pre-inspection must be completed within 30 days of receiving an application. If areas of non-compliance are found during the licensing inspection, the licensing worker will issue a Statement of Deficiency. Once the Pre-Inspection has been completed, the licensing worker may issue a 3-month Provisional license or registration. During the Provisional period, the licensing worker will complete the Initial/New Inspection. This inspection will be unannounced and will consist of a full review of the regulations. If areas of non-compliance are found during the licensing inspection, the licensing worker will issue a Statement of Deficiency. The licensing worker may issue another 3-month Provisional license or registration if provider needs additional time to comply with the regulations.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers

All child care facilities will receive an annual inspection. The unannounced inspection will include review of regulations addressing key health, safety, and fire areas. Areas of non-compliance found outside of the key health and safety areas may be cited if they are observed during the licensing inspection. If areas of non-compliance are found during the licensing inspection, the licensing worker will issue a Statement of Deficiency.

3. Identify the frequency of unannounced inspections:

- Once a year
 More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

1. Annually, Prior to the renewal date of the license, the Child Care Licensor will review the facility record, health and safety standards, and fire standards, as well as information in the Child Care Under the Big Sky(CCUBS) data base and apply the eligibility criteria outlined in [CCL-019 Key Indicator System Policy](#) to determine if the licensee is eligible for a key indicator survey.

2. If the licensee meets each of criteria outlined in [CCL-019](#)Licensing Key Indicator System Policy then the licensee is eligible for a key indicator survey. Key indicators may be found in Appendix A of [CCL-019 Key Indicator System Policy](#)
 3. If the Child Care Licensur is unclear whether a facility is eligible for a key indicator survey, he/she should consult the Lead Worker or Program Manager.
 4. The Child Care Licensur selects the appropriate licensing tool for the key indicator survey or full survey, as applicable.
- B. Conducting the Licensing Indicator Survey
1. Upon arriving at the facility, a complete walk through of the entire facility is to be conducted.
 2. During the walk through, if the Child Care Licensur observes gross non-compliance or identifies a deficiency which significantly affects or threatens the health or safety of a child in care, then the key indicator survey is abandoned and full monitoring will be conducted.
 3. The Child Care Licensur must focus on reviewing and assessing compliance with the licensing indicator regulations. It is critical to stay within the scope of the indicator survey and assess compliance with the licensing indicator regulations and not drift into completing a full survey.
 4. The Child Care Licensur must observe child care practices and ask questions in order to determine compliance. As necessary the Child Care Licensur will refer to interpretive guidelines to assist with measuring compliance with each regulation on the indicator survey tool.
 5. During the indicator survey, if more than five violations of indicator regulations are found, the indicator survey is ended and a regular annual survey is conducted.
 6. During the indicator survey, if a deficiency which significantly affects or threatens the health or safety of a child in care is observed, the Child Care Licensur should go into a full survey. Examples include incidents of elopement, injury of a child in care that resulted in a deficiency, and use of inappropriate discipline.
 7. If during the assessment of the indicator regulations additional non-compliance is observed which is not on the indicator survey tool, it should not be cited.
 8. During and after the survey, the Child Care Licensur will provide consultation and technical assistance as needed on regulations and whatever issues are relevant to the provider.
 9. The Child Care Licensur documents his/her findings that resulted in the inspection being moved to a full survey. The Licensur may consult with the Program Manager or Lead Worker for additional guidance.
 10. Document findings of noncompliance and issue the Statement of Deficiency in accordance with [DPHHS Policy Section CCL-017](#).

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards

New child care facilities will be inspected prior to issuing a license or registration. Once an application has been submitted, the licenser will schedule Pre-inspection with the provider. The pre-licensure inspection includes CCDF health and safety and fire standards. The Pre-inspection must be completed within 30 days of receiving an application. If areas of non-compliance are found during the licensing inspection, the licensing worker will issue a Statement of Deficiency. Once the Pre-Inspection has been completed, the licensing worker may issue a 3-month Provisional license or registration. During the Provisional period, the licensing worker will complete the Initial/New Inspection. This inspection will be unannounced and will consist of a full review of the regulations. If areas of non-compliance are found during the licensing inspection, the licensing worker will issue a Statement of Deficiency. The licensing worker may issue another 3-month Provisional license or registration if provider needs additional time to comply with the regulations.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

All child care facilities will receive an annual inspection. The unannounced inspection will include review of regulations addressing key health, safety, and fire areas. Areas of non-compliance found outside of the key health and safety areas may be cited if they are observed during the licensing inspection. If areas of non-compliance are found during the licensing inspection, the licensing worker will issue a Statement of Deficiency.

3. Identify the frequency of unannounced inspections:

- Once a year
 More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

1. Prior to the renewal date of the license, the Child Care Licensur will review the facility record as well as information in the Child Care Under the Big Sky (CCUBS) data base and apply the eligibility criteria outlined in [CCL-019 Key Indicator System Policy](#) to determine if the licensee is eligible for a key indicator survey.
2. If the licensee meets each of criteria outlined in [CCL-019 Licensing Key Indicator System Policy](#) then the licensee is eligible for a key indicator survey. Key indicators may be found in Appendix A of [CCL-019 Key Indicator System Policy](#)
3. If the Child Care Licensur is unclear whether a facility is eligible for a key indicator survey, he/she should consult the Lead Worker or Program Manager.
4. The Child Care Licensur selects the appropriate licensing tool for the key indicator survey or full survey, as applicable.

B. Conducting the Licensing Indicator Survey

1. Upon arriving at the facility, a complete walk through of the entire facility is to be conducted.
2. During the walk through, if the Child Care Licensur observes gross noncompliance or identifies a deficiency which significantly affects or threatens the health or safety of a child in care, then the key indicator survey is abandoned and full monitoring will be conducted.
3. The Child Care Licensur must focus on reviewing and assessing compliance with the licensing indicator regulations. It is critical to stay within the scope of the indicator survey and assess compliance with the licensing indicator regulations and not drift into completing a full survey.
4. The Child Care Licensur must observe child care practices and ask questions in order to determine compliance. As necessary the Child Care Licensur will refer to interpretive guidelines to assist with measuring compliance with each regulation on the indicator survey tool.
5. During the indicator survey, if more than five violations of indicator regulations are found, the indicator survey is ended and a regular annual survey is conducted.
6. During the indicator survey, if a deficiency which significantly affects or threatens the health or safety of a child in care is observed, the Child Care Licensur should go into a full survey. Examples include incidents of elopement, injury of a child in care that resulted in a deficiency, and use of inappropriate discipline.
7. If during the assessment of the indicator regulations additional non-compliance is observed which not on the indicator survey tool, it should not be cited.
8. During and after the survey, the Child Care Licensur will provide consultation and technical assistance as needed on regulations and whatever issues are relevant to the provider.

9. The Child Care Licensor documents his/her findings that resulted in the inspection being moved to a full survey. The Licensor may consult with the Program Manager or Lead Worker for additional guidance.
10. Document findings of noncompliance and issue the Statement of Deficiency in accordance with [DPHHS Policy Section CCL-017](#).

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers
[CCL-019](#)

c) Licensed in-home CCDF child care

N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers
[Quality Assurance Division / Licensure Bureau / Child Care Licensing Program](#)

5.3.3 Inspections for license-exempt CCDF providers

Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B)) from this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

Effective Date: 10/01/2018

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

Montana does not have license-exempt centers.

Provide the citation(s) for this policy or procedure

N/A

b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

Montana does not have license-exempt family child care.

Provide the citation(s) for this policy or procedure

N/A

c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used

In-home child care providers receive an annual inspection. The announced inspection will include review of regulations addressing key health, safety, and fire areas. Areas of non-compliance found outside of the key health and safety areas may be cited if they are

observed during the licensing inspection. If areas of non-compliance are found during the licensing inspection, the licensing worker will issue a Statement of Deficiency. Pre-licensure inspections are not required for in-home CCDF child care. FFN applicants are required to submit attestations that they understand the health and safety requirements. Compliance is validated at the time of the inspection.

Prior to the renewal date of the license, the Child Care Licensuror schedules the inspection. The Child Care Licensuror uses the Initial Health & Safety checklist for the inspection tool.

- The Child Care Licensuror must focus on reviewing and assessing compliance with the licensing indicator regulations.
- The Child Care Licensuror must observe child care practices and ask questions in order to determine compliance. As necessary the Child Care Licensuror will refer to interpretive guidelines to assist with measuring compliance with each regulation on the indicator survey tool.
- If during the assessment of the indicator regulations, additional noncompliance is observed not on the indicator survey tool it should not be cited.
- During and after the survey, the Child Care Licensuror will provide consultation and technical assistance as needed on regulations and whatever issues are relevant to the provider.
- The Child Care Licensuror documents his/her findings. The Licensuror may consult with the Program Manager or Lead Worker for additional guidance.
- Document findings of noncompliance and issue the Statement of Deficiency in accordance with Policy Section CCL-017

[Provide the citation\(s\) for this policy or procedure](#)

[DPHHS Policy Section CCL-017 ; CCL-006](#)

d) [Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home \(98.42\(b\)\(2\)\(iv\)\(B\)\). Does your state use alternate monitoring procedures for monitoring in-home care?](#)

No

Yes. If yes,

describe:

e) [List the entity\(ies\) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers](#)

[Quality Assurance Division / Licensure Bureau / Child Care Licensing Program](#)

5.3.4 Licensing inspectors.

Effective Date: 10/01/2018

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)).

The Montana Department of Administration has requirements in place under [ARM2.21.3702](#) that identify the process for recruitment and selection. The Child Care Licensing Program has a current job description for licensing inspectors that identifies the qualifications required for the position. This includes a Bachelor's degree in social and behavioral sciences, early childhood education, elementary and secondary education, business and public administration. In addition, the position also requires 3-4 years of job-related experience. The job description requires communication skills with the ability to communicate on different levels with a wide variety of individuals from varying socioeconomic backgrounds, including children of all ages, child welfare professionals, providers and staff with less than an eighth-grade education to master's level education and concerned families. Upon hire, licensing inspectors receive information on working with tribal agencies. Additional resources are also available through the department and accommodations would be made for language or cultural issues. The qualifications for this position also require knowledge of early childhood development, physical disabilities and other special needs and ability to research new problems and identify needed authoritative resources.

b) Provide the citation(s) for this policy or procedure

[ARM 2.21.3702](#)

5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

Effective Date: 10/01/2018

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

Each licensing worker is assigned a caseload based on the service area and the counties within that service area. The caseload may vary from area to area due to the number of providers in the area as well as the travel that is required. Each licensor is responsible for establishing their own survey schedule and shall submit quarterly progress report of the visits/inspections to the Program Manager and/or Bureau Chief. The reports shall be submitted via e-mail. The Child Care Licensing Program will review the provider to licensor ratio on a quarterly basis to ensure that the ratio does not exceed 120 facilities per licensing worker. In order to assist areas with higher ratios, the Program Manager may utilize licensing workers in other service areas to conduct licensing inspections. Overall, the workload and completion of assigned duties will be assessed quarterly by the Program Manager and any concerns will be reported to the Licensure Bureau Chief. The purpose of the Licensing Key Indicator System is to increase the efficiency and effectiveness of the licensing program and aid with high Child Care Licensing Worker caseloads by refocusing the emphasis of the licensing process. Using the licensing indicator system, less time is spent conducting annual survey visits in child care facilities with a history of high regulatory compliance and more time is spent conducting more in-depth surveys and providing technical assistance to child care facilities with a history of low regulatory compliance. The licensing indicator system complements, but does not replace, the current licensing program.

b) Provide the policy citation and state/territory ratio of licensing inspectors
[Child Care Licensing Policy Manual CCL-006](#)

5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?

Effective Date: 10/01/2018

Yes, relatives are exempt from all inspection requirements.

If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.

Relative Care Exempt (RCE) providers are exempt from monitoring visits, annual training and CPR/First Aid training. Relative Care Exempt providers are required to take Health & Safety Overview training. Relatives and other adults in the household will still be required to complete an annual application and background check. This will ensure that relatives do not have a criminal history that would pose a threat to health and safety of the children in care.

Yes, relatives are exempt from some inspection requirements.

If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

No, relatives are not exempt from inspection requirements.

5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements

apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks

Components	In-State	National	Inter-State
1. Criminal registry or repository using fingerprints in the current state of residency	x		
2. Sex offender registry or repository check in the current state of residency	x		
3. Child abuse and neglect registry and database check in the current state of residency	x		
4. FBI fingerprint check		x	
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)		x	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional			x
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years			x
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years			x

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43

and 98.16(o):

--The national FBI fingerprint check; and,	
--The three in-state background check provisions for the current state of residency:	
	--state criminal registry or repository using fingerprints;
	--state sex offender registry or repository check;
	--state-based child abuse and neglect registry and database.

All four components are required in order for the milestone to be considered met.

Components	New (Prospective) Staff	Existing Staff
1. Criminal registry or repository using fingerprints in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
2. Sex offender registry or repository check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
3. Child abuse and neglect registry and database check in the current state of residency	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
4. FBI fingerprint check	Milestone/Prerequisite for Waiver	Possible Time Limited Waiver for current (existing) staff
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years	Possible Time Limited Waiver for: --Establishing requirements and procedures and/or --Conducting checks on all new (prospective) staff and/or --Conducting checks on current (existing) staff	

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other

components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

In-state Background Check Requirements

5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

Effective Date: 10/01/2018

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An FBI fingerprint check is required for any new center, group, family, and FFN provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Montana participates in the NFF system, so an additional fingerprint-based in-state check is not needed. Staff members are not able to provide unsupervised care prior to satisfactory in-state criminal background check results. This rule is found in [ARM 37.95.161](#).

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An FBI fingerprint check is required for any new license-exempt FFN and Relative Care

Exempt (RCE) provider, and all persons over the age of 18 residing in the provider's home. Montana participates in the NFF system, so an additional fingerprint-based in-state check is not needed. This rule is found in [ARM 37.95.103](#).

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs: Montana currently is part of the FBI repository. The Child Care Licensing Program currently has a process in place to conduct fingerprint-based FBI checks. Montana conducts these checks for all existing staff that have lived outside of Montana within the last 5 years; the results include Montana-based convictions.
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers): Montana has ordered a Livescan fingerprint system for each of the 7 CCR&R offices, and 1 CCR&R satellite office. Montana received a quote from a vendor, and risk assessments are in process. Montana will continue discussions with Department of Justice to expand the ability to conduct the checks on a larger scale.
- Key challenges to fully implementing this requirements: Challenges include the cost of conducting the additional checks. The cost to providers will be significant at a time when reductions to existing resources are stressing them. The Department of Justice processes backgrounds statewide, and processing time will take longer due to the influx of requests once existing staff checks are conducted.

- Strategies used to address these challenges: Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues. As an effort to reduce workload for the Department of Justice, Livescan fingerprint systems have been ordered for each of the 7 CCR&R offices, and 1 CCR&R satellite office.

5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

Effective Date: 10/01/2018

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An in-state sex offender registry check is required for any new licensed center, group, family, and FFN provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state sex offender registry results. This rule is found in [ARM 37.95.161](#).

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An in-state sex offender registry check is required for any new Relative Care Exempt provider, and all persons over the age of 18 residing in the provider's home. This rule is found in [ARM 37.95.103](#).

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs: Montana currently has a state sex offender registry. The Child Care Licensing Program currently has a process in place to conduct checks using this registry.
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers): This requirement is being met for all license-exempt providers.
- Key challenges to fully implementing this requirement: Challenges include the cost of labor to conduct the checks on larger scale.
- Strategies used to address these challenges: Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues.

5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

Effective Date: 10/01/2018

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An in-state CPS check is required for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state CPS results, and CPS checks are conducted annually thereafter. In addition, Child Care Licensing is notified through the in-state provider database if an individual is involved in a CPS report. This rule is found in [ARM 37.95.161](#).

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An in-state CPS check is required for any new license-exempt provider, and all persons over the age of 18 residing in the provider's home. This rule is found in [ARM 37.95.103](#).

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

The process for existing staff is the same for new staff. This rule is found in [ARM 37.95.161](#). for licensed staff and [ARM 37.95.103](#) for license-exempt staff.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

National Background Check Requirements

5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the requirement to perform an interstate check of another State's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

Effective Date: 10/01/2018

a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An FBI fingerprint check is required for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state criminal background check results. This rule is found in [ARM 37.95.161](#).

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

An FBI fingerprint check is required for any new license-exempt provider, and all persons over the age of 18 residing in the provider's home. This rule is found in [ARM 37.95.103](#).

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs: The Child Care Licensing Program currently has a process in place to conduct fingerprint-based FBI checks for all existing staff that have lived outside of Montana within the last 5 years; the results include Montana-based convictions.
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF: The Child Care Licensing Program currently has a process in place to conduct fingerprint-based FBI checks for all existing staff that have lived outside of Montana within the last 5 years; the results include Montana-based convictions. Montana has ordered a Livescan fingerprint system for each of the 7 CCR&R offices, and 1 CCR&R satellite office. Montana received a quote from a vendor, and risk assessments are in process. Montana will continue discussions with Department of Justice to expand the ability to conduct the checks on a larger scale.
- Key challenges to fully implementing this requirements Challenges include the cost of conducting the additional checks. The cost to providers will be significant at a time when reductions to existing resources are stressing them. The Department of Justice processes backgrounds statewide, and processing time will take longer due to the influx of requests once existing staff checks are conducted.
- Strategies used to address these challenges Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues. As an effort to reduce workload for the Department of Justice, Livescan fingerprint systems have been ordered for each of the 7 CCR&R offices, and 1 CCR&R satellite office.

National Background Check Requirements

5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

Effective Date: 10/01/2018

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs: An in-state sex offender registry check is required for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state sex offender registry results. This rule is found in [ARM 37.95.161](#). When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers): License-exempt providers receive an in-state sex offender registry check and a national registry check on the public registry. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Key challenges to fully implementing this requirement Challenges include the cost of labor to conduct the checks on larger scale.
- Strategies used to address these challenges Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues.

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible

providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs: An in-state sex offender registry check is required for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state sex offender registry results. This rule is found in ARM 37.95.161. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers): License-exempt providers receive an in-state sex offender registry check and a national registry check on the public registry. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Key challenges to fully implementing this requirement: Challenges include the cost of labor to conduct the checks on larger scale.
- Strategies used to address these challenges Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues.

Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

Effective Date: 10/01/2018

a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for allnew child care staff in licensed, regulated, or registered programs: The Child Care Licensing Program currently has a process in place to conduct fingerprint-based FBI checks for all new staff that have lived outside of Montana within the last 5 years; the results include Montana-based

convictions.

- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF: The Child Care Licensing Program currently has a process in place to conduct fingerprint-based FBI checks for all new staff that have lived outside of Montana within the last 5 years; the results include Montana-based convictions. Montana has ordered a Livescan fingerprint system for each of the 7 CCR&R offices, and 1 CCR&R satellite office. Montana received a quote from a vendor, and risk assessments are in process. Montana will continue discussions with Department of Justice to expand the ability to conduct the checks on a larger scale.
- Key challenges to fully implementing this requirements Challenges include the cost of conducting the additional checks. The cost to providers will be significant at a time when reductions to existing resources are stressing them. The Department of Justice processes backgrounds statewide, and processing time will take longer due to the influx of requests once new staff checks are conducted.
- Strategies used to address these challenges Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues. As an effort to reduce workload for the Department of Justice, Livescan fingerprint systems have been ordered for each of the 7 CCR&R offices, and 1 CCR&R satellite office.

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs: The Child Care Licensing Program currently has a

process in place to conduct fingerprint-based FBI checks for all existing staff that have lived outside of Montana within the last 5 years; the results include Montana-based convictions.

- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF: The Child Care Licensing Program currently has a process in place to conduct fingerprint-based FBI checks for all existing staff that have lived outside of Montana within the last 5 years; the results include Montana-based convictions. Montana has ordered a Livescan fingerprint system for each of the 7 CCR&R offices, and 1 CCR&R satellite office. Montana received a quote from a vendor, and risk assessments are in process. Montana will continue discussions with Department of Justice to expand the ability to conduct the checks on a larger scale.
- Key challenges to fully implementing this requirements Challenges include the cost of conducting the additional checks. The cost to providers will be significant at a time when reductions to existing resources are stressing them. The Department of Justice processes backgrounds statewide, and processing time will take longer due to the influx of requests once existing staff checks are conducted.
- Strategies used to address these challenges Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues. As an effort to reduce workload for the Department of Justice, Livescan fingerprint systems have been ordered for each of the 7 CCR&R offices, and 1 CCR&R satellite office.

5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

Effective Date: 10/01/2018

a) Has the interstate sex offender registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

- i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs: An in-state sex offender registry check is required for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state sex offender registry results. This rule is found in ARM 37.95.161. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers): License-exempt providers receive an in-state sex offender registry check and a national registry check on the public registry. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Key challenges to fully implementing this requirement: Challenges include the cost of labor to conduct the checks on larger scale.
- Strategies used to address these challenges: Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues.

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs: An in-state sex offender registry check is required for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state sex offender registry results. This rule is found in ARM 37.95.161. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers): License-exempt providers receive an in-state sex offender registry check and a national registry check on the public registry. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Key challenges to fully implementing this requirement: Challenges include the cost of labor to conduct the checks on larger scale.
- Strategies used to address these challenges: Child Care Licensing and the Lead

Agency are working collaboratively to address the cost issues.

5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

Effective Date: 10/01/2018

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all new child care staff in licensed, regulated, or registered programs: An in-state sex offender registry check is required for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff

members are not able to provide unsupervised care prior to satisfactory in-state sex offender registry results. This rule is found in ARM 37.95.161. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.

- Efforts to date to complete the requirement for all new child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers): License-exempt providers receive an in-state sex offender registry check and a national registry check on the public registry. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Key challenges to fully implementing this requirement: Challenges include the cost of labor to conduct the checks on larger scale.
- Strategies used to address these challenges: Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues.

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated, or registered programs: An in-state sex offender registry check is required

for any new provider, and all new staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff, and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently. Staff members are not able to provide unsupervised care prior to satisfactory in-state sex offender registry results. This rule is found in ARM 37.95.161. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.

- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g., license-exempt CCDF eligible providers): License-exempt providers receive an in-state sex offender registry check and a national registry check on the public registry. When an individual moves to Montana and is a registered sex or violent offender, their information is transferred into the Montana registry. The Child Care Licensing Program is working with the Montana Department of Justice to gain access to NSOR through the state's criminal history database, CJIN.
- Key challenges to fully implementing this requirement: Challenges include the cost of labor to conduct the checks on larger scale.
- Strategies used to address these challenges: Child Care Licensing and the Lead Agency are working collaboratively to address the cost issues.

Provisional Employment

The CCDF final rule states 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 staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and

2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.

Effective Date: 10/01/2018

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides.

Describe and include a citation:

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

Staff members are not able to provide unsupervised care prior to satisfactory background check results. The rule is found in [ARM 37.95.161](#).

- Other.

Describe:

5.4.10 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.

Effective Date: 10/01/2018

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

Montana conducts background checks as quickly as possible and does not exceed 45 days after the child care provider submitted the request. Montana provides a letter to the child care provider indicating whether or not the individual meets eligibility requirements, which includes background check results. If they do not meet the requirements, a letter is sent to the provider to let them know the staff member is ineligible, but does not reveal specific disqualifying information. A separate letter goes to the individual with details about disqualifying crime(s).

5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option)- a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Effective Date: 10/01/2018

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

No

Yes.

Describe other disqualifying crimes and provide citation:

Individuals will be disqualified if they have been convicted of the following: prostitution, burglary, robbery, elderly abuse, exploitation of an elderly person or person with developmental disability, crime involving abuse of public trust.

[ARM37.95.176](#)

5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).

Effective Date: 10/01/2018

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

A satisfactory criminal background, motor vehicle and child and adult protective services check is required for each provider, on all staff, including caregivers, administrative staff, aides, volunteers, kitchen and custodial staff and all persons over the age of 18 residing in the facility or who stays in the facility regularly or frequently.

The department shall not grant approval to any facility for any director, caregiver, volunteer or support staff person who has been convicted of a crime identified in [ARM 37.95.176 \(1\)](#).

The department shall not grant approval to any caregiver, volunteer or support staff person who has been convicted by a court of competent jurisdiction of a crime identified in [ARM 37.95.176 \(2\)\(a\)](#), or named as a perpetrator of child abuse and neglect as identified in (2)(e) of the same rule, unless the provider (registrant/licensee) has requested an administrative reconsideration and through that process, the department has determined the individual has been sufficiently rehabilitated to warrant the public's trust.

Individuals, who have been denied approval as a caregiver in a licensed or registered

day care facility and believe that their criminal record is not accurate, can appeal the accuracy of their criminal record directly to the Department of Justice. If the individual is successful in getting an otherwise disqualifying conviction overturned or expunged, or if they are able to validate that the record is inaccurate, the department will then rescind the prohibition.

Based upon the results of the criminal background and child protective services check, the department will notify the facility provider in writing. This notification will inform the provider that the individual for whom the background check was requested either meets the qualifying criteria or does not meet that criteria.

If the individual has a disqualifying event, the written notice from the department will inform the facility provider that the individual does not meet criteria for approval and allowing that individual to provide care to children could have negative impacts upon the provider registration or license;

however, should the facility provider feel that in spite of the disqualifying event, the applicant should be given an opportunity for reconsideration, the notice will inform the facility provider the manner in which this is to be accomplished.

5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).

Effective Date: 10/01/2018

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 they are conducted by the state/territory or a third-party vendor or contractor. Lead Agencies can report that no fees are charged if applicable (98.43(f)).

Name based criminal history background checks and Child Protective History checks are conducted by Child Care Licensing at no charge. Fingerprint based FBI checks are conducted by Department of Justice for a fee that does not exceed the actual cost of processing and administration.

5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

Effective Date: 10/01/2018

- No, relatives are not exempt from background check requirements.
- Yes, relatives are exempt from all background check requirements.
- Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds

(658G(b)(1)).

6.1 Professional Development Framework

6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

Effective Date: 10/01/2018

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

Montana's [Early Care and Education Knowledge Base](#) (referred to as the 'Knowledge Base') outlines the professional standards and competencies for what early childhood practitioners need to know, understand, and be able to demonstrate. The Knowledge Base is the foundation of Montana's career development system and was first published in 1997. The Knowledge Base underwent subsequent revisions in 2004, 2008, 2013, and 2018 (current year). The Knowledge Base is used as the basis for all training and professional development approval in Montana. The Knowledge Base content area are structured around 'personal dispositions' and include:

- Observation, Documentation, and Assessment
- Program Management
- Family and Community Partnerships
- Environmental Design
- Child Growth and Development
- Child Guidance
- Diversity Curriculum Professionalism, and
- Health and well-being

Knowledge and competencies related to cultural, linguistic, ethnic, and developmental diversity are embedded throughout the document. Competencies related to diversity are

addressed directly throughout each content area. Two courses on inclusion are available for college credit and are required training in the STARS QRIS standards.

-- [Career pathways. Describe:](#)

The [Montana Career Path](#) (referred to as 'the Career Path') is a framework for professional development in early childhood education. The Career Path promotes professional development for early care and education practitioners by providing a framework for recording and recognizing experience, training, and educational accomplishments. The Career Path outlines ten levels of career development which are based on training, education and experience, ranging from a high school diploma/HiSet or GED certificate to advanced degrees in early childhood education. When a provider applies to join the Practitioner Registry, they are placed on the Career Path following verification of their transcripts, employment, and other documents submitted to the Early Childhood Project. The Career Path has been modified to accommodate new pathways several times since its adoption in 1998, including an update in 2016 to accommodate Montana's approved P-3 teacher license endorsement and in 2018 to support and reflect CCDF Licensing Rule regulations. The most recent updates include a new level prior to Level 1 called the Membership Status. The Membership Status supports individuals who are currently enrolled in high school, or who are working to complete their HiSet/GED. Training hour requirements were also adjusted at the time of the new CCDF Rule Regulation to a standard 16 hours annually across all levels on the Career Path.

-- [Advisory structure. Describe:](#)

The Early Childhood Project (ECP) is an outreach program within the Montana State University Department of Health and Human Development. ECP was founded in 1985 with the sole focus to improve the quality of programs and services for Montana's youngest children and their families through supports to the early childhood workforce. The Early Childhood Services Bureau contracts with the ECP at Montana State University to address deliverables in the Child Care and Development Plan specific to professional development and the early care and education workforce. The ECP also coordinates with state-level programs and early childhood state and federal grants to further align strategies and support the workforce through the Montana Preschool Development Grant, STARS Preschool Pilot, Part C/Early Intervention, an Early Childhood Apprenticeship partnership with the Department of Labor and Industries and early childhood system-building grants in partnership with the Office of the Governor and

the National Governor's Association. The ECP, due to its placement within higher education, has access to early childhood programs in colleges and universities across the state. This is beneficial in addressing content, curricula, student placements, and creating linkages with programs and state policy leaders. Due to the structure of ECP and role as a partner to multiple state programs, stakeholders, and providers across the state, the [Career Development Advisory Board](#) (CDAB) was established in to convene partners and address strategies specific to the workforce. The CDAB grew out of the initial task force convened to envision and plan for an Early Care and Education Career Development program in 1995. Key statewide partners are represented on this board to contribute to policy and key initiatives specific to Montana's professional development system. CDAB representation expands depending on new areas of focus. Currently, representation includes the:

- Montana Child Care Resource and Referral Network
- Tribal Child Care Administrators and/or Tribal Head Start/Early Head Start
- Early Childhood Higher Education Consortium
- Montana Association for the Education of Young Children
- Head Start State Collaboration Office
- Head Start Association
- Child Care plus+ Center on Inclusion in Early Childhood (UM)
- Child and Adult Care Food Program
- Montana Department of Labor and Industry

1. Apprenticeship Program and Training

- Montana Department of Public Health and Human Services

1. Early Childhood Services Bureau

2. Quality Assurance Division

- Office of Public Instruction
- Montana's distance learning contractor, Child Care Training

The Early Childhood Project convenes the CDAB biannually to examine current data, trends, issues and updates to the operation of the various programs it administers including the Registry, the Professional Development Approval System, incentives and awards, the Apprenticeship Program, Director Credential, grants, and annual leadership professional development events, and policies and procedures.

Although the CDAB exists to focus on work specific to the ECP and strategies to support professional development and the workforce across the state, The Best Beginnings

Advisory Council (BBAC) provides additional opportunities for outreach and contribution to workforce initiatives from a broader stakeholder perspective. The BBAC not only recognizes the importance of professional development in the field of early care and education, but also provides a space to gather information and a strong feedback loop to the ECP and CDAB. The ECP Director and the ECP Special Projects coordinator are appointed to sit on the Governor Appointed Best Beginnings Advisory Council and represent the early childhood professional development and workforce system of Montana, which is inclusive of the CDAB and other stakeholder groups convened by the ECP. The representatives from ECP report to the BBAC, advise on topics that impact professional development and workforce initiatives, and use the BBAC platform to gather ideas and input on strategies.

-- [Articulation. Describe:](#)

The Montana Early Childhood Higher Education Consortium (MECHEC) is convened bi-annually to coordinate topics specific and relevant to advancing early care and education in higher education settings. The collective voice from institutions of higher education represent an expert lens on issues, trends, and needs in early childhood professional preparation. Members of the consortium include faculty from all higher education programs, including community and tribal colleges, to ensure articulation and collaboration across the state. The MECHEC is coordinated through the ECP and a faculty member at Montana State University facilitates the meetings. Articulation is a key focus of the partnership the MECHEC offers to the state. MECHEC is designed to stand as the leadership body for articulation agreements regarding credit transfers, common coding for ECE courses offered in higher education, and new initiatives that require input and design by this group of stakeholders. For example, MECHEC collaborated to design and implementation of the Preschool to 3rd Grade (P-3) Endorsement to support providers completing their bachelor's degree. The Office of the Governor convened stakeholders, including representatives from MECHEC, who could share the design and work with additional partners to implement the P-3 Endorsement. The P-3 Endorsement was approved by the Montana Board of Education to fulfill an unmet need of licensure among early childhood educators in Montana.

-- [Workforce information. Describe:](#)

Workforce data is available from the Early Childhood Project's Practitioner Registry (referred to as the Registry). Following child care licensing rule change in February 2018,

program staff in a state licensed care setting must participate on the Registry to meet licensing compliance standards. The implementation of the new rule began July 2018. Prior to the February 2018 licensing changes, staff participation on the Registry was voluntary, with the expectation of staff participating in Montana's QRIS Stars to Quality program. Verified data is used for policy and program development related to requirements in child care licensing rule, QRIS, and The Registry. Data, such as career level advancement, number of providers in the field, and training hours are utilized in grant writing and legislative proposals to advance early care and education in MT. Compensation information is encouraged in the Registry employment verification process, though it is currently collected on a voluntary basis. The Early Childhood Project contributes to the National Workforce Registry Alliance dataset. Opportunities to work in the field of early care and education are increasing in Montana due to the Montana Preschool Development grant and the state-funded STARS Preschool pilot program. Data on the early care and education workforce is shared on a quarterly basis with the Early Childhood Services Bureau, and a new position was added at the ECP to conduct data analysis.

-- [Financing. Describe:](#)

CCDF dollars are contracted by the Early Childhood Services Bureau to the Early Childhood Project to carry out training and professional development requirements of the CCDBG, including the development and maintenance of the Practitioner Registry. All orientation training and ongoing health and safety training are offered free of charge to the provider. STARS (QRIS) training is free of charge to providers participating in STARS programs. The cost of trainings to meet the annual 16 hours of required training is the responsibility of the provider, and costs vary depending on the type of course a provider chooses to access.

b) [The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.](#)

[Continuing education unit trainings and credit-bearing professional development to the extent practicable](#)

[Describe:](#)

Credit-bearing professional development is accessible.

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

The Early Childhood Project supports this work through the facilitation and convening of the Montana Career Development Advisory Board, the Montana Professional Development Specialist Forum, the Montana Higher Education Consortium, and the Montana Director's Symposium. The ECP also coordinates closely with the state CCR&Rnetwork and engages in providing trainings and technical assistance specific to the functions of the professional development agency. The ECP attends Head Start Association and the Montana Educators of Young Children Association meetings when requested to present on the early childhood professional development system and requests feedback to improve services.

- Other

Describe:

6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.

The Career Development Advisory Board (CDAB), the Best Beginnings Advisory Council (BBAC), and the Montana Early Childhood Higher Education Consortium (MECHEC), whose structures are described in Section 6.1.1, are utilized to provide feedback and support the professional development framework through input on training and the education of child care providers and staff. The Montana Career Path (Career Path) is Montana's framework for professional development in early childhood education and is updated as needed to support and reflect changes in policy. For example, consultation specific to training and educational needs conducted at Career Development Advisory Board meetings advised placement of Montessori (MACTE) accreditation on the Career Path. The Career Development Advisory Board structure was utilized to review the addition of a new Membership Status to the Career Path. The Membership Status was added to support providers who did not meet current requirements of the Career Path because they were

either in high school or are in the process of obtaining their GED/HiSet. This was an identified barrier to supporting licensed care provider access the Registry and this meeting licensing regulation.

Effective Date: 10/01/2018

6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).

The Career Path is recognized as the early childhood education framework to support providers working in early care and education settings across the state to improve the quality, diversity, stability, and retention of caregivers, teachers and directors.

An incentive to advancing to higher levels on the Career Path includes opportunities for career advancement and leadership in the field of early care and education.

Financial assistance was previously provided through the Higher Education Professional Development Incentive Awards (PDIA), the CDA scholarship, and stipends to providers after placement on the Career Path to encourage and support movement along the framework.

Funding awards were eliminated in 2017 due to state general funds budget reductions.

Although funding is no longer tied to each level of the career path to support the stability, quality and retention of providers, other initiatives utilize the Career Path to provide

incentives and promote growth within their program. The following examples of the Preschool Development Grant P-3 and Leadership Financial Assistance Project, Certified Infant Toddler Caregiver Stipend, and the Apprenticeship Program demonstrate strategies to improve the quality of the workforce and provide opportunities for growth and advancement in the field of early care and education.

- Financial assistance to providers who are on the Career Path and meet grant requirements is available through the federally-funded Montana Preschool Development Grant. The [P-3 and Leadership Financial Assistance Project](#), administered through the ECP is available to those who are working towards obtaining their P-3 endorsement or master's degree in early childhood. Recipients of the financial assistance must also be working in an early childhood setting. Priority groups identified through the Preschool Development grant determine a structure for the classrooms, programs, and communities who are eligible for financial assistance.
- The Infant / Toddler Course Completion Award is available to individuals who have completed the 60-hour/4-credit Montana Infant Toddler Caregiver Course. Individuals

must be working a minimum of 15 hours per week in a licensed child care facility and training must be approved through the Early Childhood Project Training Approval System. Certified Infant Toddler Caregivers Stipends are designed to support individuals caring for infants in licensed child care centers or registered group or family child care homes. A one-time award of \$400 is available to individuals who have completed the Infant Toddler Caregiver course, are working directly with infants/toddlers for a minimum of five hours per day in a licensed facility and are working in the same facility at the time of the application and course completion. Applications are only accepted 6 months from the date of the course completion as to encourage continuity and provider retention. The stipend is designed to support individuals who are caring for infants in licensed child care centers or registered group or family child care homes by:

1. Encouraging on-going skill enhancement,
 2. Increasing their understanding of child development, and
 3. Providing a \$400 incentive award if the caregiver remains in a stable employment situation for at least 6 months. Participation in the Certified Infant Toddler stipend program entails a commitment by the caregiver to the center or home at which they are employed. If a participant leaves their employment (for any reason) before they have completed the 6-month period for which their stipend was approved, they may not continue in the program or reapply from another facility. Inclusion courses are available for all child care providers.
- The [Montana Early Childhood Apprenticeship Program \(MECAP\)](#) is a training program for people in the field of early care and education that includes on-the-job learning with the support of a mentor and completion of 20-24 credits in early childhood education. The result is that an apprentice learns both the theoretical and practical aspects of the job, earns a Child Care Development Specialist Certificate from the MT Department of Labor and Industry, and achieves Level 4 on the Montana Practitioner Registry. This program is administered by ECP in partnership with the Department of Labor and Industries. The MT Higher Education Consortium is interested in promoting and utilizing the apprenticeship program and supporting ongoing efforts by advising on coursework. Montana is currently piloting an Early Childhood Pre-Apprenticeship program for high school students exploring an early childhood career path. The Pre-Apprenticeship program participation criteria is outlined to cater to students enrolled in a high school Family and Consumer Science Early Childhood class, are linked with qualified mentor, are able to successfully complete the 60-hour Montana Preschool and 60-hour Montana Infant/Toddler Certification courses for college credit, and spend a minimum of 100 hours in an approved early childhood program. After the pilot program is completed, Montana will explore replicating this program in other communities.

The ability to demonstrate advancement on the Career Path is an important data point for programs and projects dedicated to supporting quality, diversity, stability and retention across the workforce. As all licensed care providers become current on the Practitioner Registry, where providers start on the Career Path and where they go will continue to drive

policy making decisions to improve the framework of professional development in early childhood education.

Effective Date: 10/01/2018

6.2 Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be 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 funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).

Montana's Early Learning Standards (MELS) are embedded into the STARS to Quality program and the Professional Development Approval System. An online course specific to the MELS is required training for STARS to Quality programs staff. Each newly developed course seeking approval in Montana must identify (if applicable) the Early Learning Standard and sub-domain that will be addressed prior to approval. This information is posted to the Statewide Training Calendar on the Early Childhood Project website for each scheduled event. The health and safety standards are addressed in the pre-service and orientation training requirements. Increasing requirements for annual ongoing training hours with a phase-in strategy enable practitioners to adjust to the increase in annual training hours. Prior

to February 2018, providers who have been voluntarily participating in the Practitioner Registry had an annual training requirement of 24 hours therefore many providers are already achieving many hours above and beyond what child care licensing requires. The new child care licensing regulations require participation on the Registry and 16 hours of annual training regardless of level on the Career Path. Orientation hours for new providers include health and safety professional development training within 90 days of hire. For STARS to Quality programs, enhancements have been made to the continuum of training available to all practitioners. The new requirements provide MT with further ability to increase quality of professional development across early care settings.

Montana requires Pyramid Model training as part of the STARS to Quality framework which is available through the CCR&R agencies statewide to all practitioners. All education staff are required to complete the following: The two-hour Introduction to the PM course which is available face-to-face and online; Module 1 (6 hours) that addresses birth -five nurturing and responsive relationships and high quality supportive environments; Module 2 (6 hours) that addresses birth - five targeted social emotional supports and Introduction to Module 3 (2 hours) that addresses intensive intervention and supports for children and families. The Behavior Support Team within the program is required to complete the full Module 3 (8 hours) birth to five. Additionally, the coaching system within STARS to Quality expects fidelity to the Pyramid Model. The coaching system includes statewide coordination, onsite program coaching for directors, program staff and individual classroom teachers using Pyramid Model tools such as TPOT, TIPITOS, Benchmarks of Quality and Inventory of Practices. This statewide coaching system was launched in April 2016 when the new Child Care Resource and Referral (CCR&R) contracts were granted.

Montana's Professional Development Approval System (PDAS) provides approved training aligned with Montana's Early Care and Education Knowledge Base and MT's Early Learning Standards (MELS), both of which address family cultural and linguistic diversity and children with disabilities, to all providers in Montana through the Statewide Training Calendar. The core of Montana's Early Care and Education Knowledge Base includes content areas specific to "Personal Dispositions" which addresses teacher health and well-being as does the area of "Professionalism". Local and state trainings address research, best practice, and strategies to reduce stress and promote well-being related to work in the early childhood field. The increased efforts in Montana to implement social and emotional supports at the classroom level through coaching and reflective practice are occurring throughout STARS programs as an integral component of the quality framework. Resources and documents are developed in partnership with tribal organizations receiving CCDF funds, and MT Early

Learning Standards and other relevant Special Events, Conferences, and Courses are also posted on the Early Childhood Project website under “Find Training”. Each CCR&R also provides a website with information about local training that has been approved through the Early Childhood Project’s PDAS.

Montana has a mixed delivery system for training, which includes in person and online. This mixed delivery system allows all provider types, including those serving school-age children, serving Native American children, or serving children in rural areas, to be able to attend trainings online and at a time that is convenient for them. Montana's contractor for distance learning courses through [Child Care Training](#) has software available to translate courses submitted in English into other languages for facilitation and grading purposes. Courses focused on inclusion methods are available to early care providers and students and are as follows:

- Inclusion I Foundations: Course on Inclusion in Early Childhood provides the foundations for inclusion. Topics include Introduction to Inclusion, Recognizing Young Children's Strengths and Needs, Creating an Accessible Environment, Building Partnerships with Parents and Families, and Being Part of the Team. The course is 15 weeks and is offered as 15 hours of state-approved training or for one academic credit.
- Inclusion II Strategies: Course on Inclusion in Early Childhood provides basic strategies for inclusion. Topics include: Maintaining a Safe and Healthy Environment, Arranging the Environment for Learning, Increasing the Playability of Toys and Play Materials, Guiding the Behavior of Young Children, Facilitating Young Children's Communication, Positioning Young Children, and Inclusion and Beyond. The course is 15 weeks and is offered to satisfy 30 hours of state-approved training or for two academic credit. Child Care Training and the Child Care Resource and Referral agencies coordinate and are responsive to tribal communities. Online services continue to be a challenge for online accessibility.

Effective Date: 10/01/2018

6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

Montana's approved training posted on the Early Childhood Project website's Statewide Training Calendar is available to all practitioners, including tribal early childhood programs. The Early Childhood Project and the Early Childhood Services Bureau are working in

partnership with tribes to understand how early childhood professional development trainings and courses can be tailored to support the cultural adaptations in communities across the state. The Early Childhood Project staff are available to work in partnership with providers and tribal organizations to access the Practitioner Registry, trainings and professional development resources. Tribes partner with CCR&Rs at the regional level to access required trainings, and the Early Childhood Project provides outreach to support new child care providers in joining the Practitioner Registry. Recent conversations have supported working in partnership with tribal partners and CCT to encourage increasing trainers within tribal communities to assure training delivery in culturally and linguistically responsive.

The Early Childhood Higher Education Consortium meets two times per year to convene Montana's four and two-year colleges, which includes tribal colleges. Higher education partners share and discuss the information they are hearing and experiencing from their students regarding trainings, courses, course content and career development overall. Institutions of higher education work collaboratively to identify opportunities to promote access for students, including students who are working in tribal communities and/or are providers supported through Indian tribes or tribal organizations receiving CCDF funds. Feedback on program and policy change are encouraged through the Career Development Advisory Board and the Best Beginnings Advisory Council to understand how our early childhood professional development system can be proactive in supporting language and cultural inclusion practices. The Director of the Early Childhood Project is a member of the American Indian and Alaska Native Head Start Collaboration (AIANHSCO) Advisory Board and co-leads the professional development workgroup. A core focus of this work and partnership is to increase access to language inclusion resources among Tribal Head Start, Early Head Start and Child Care sites across the state. The Montana Head Start Collaboration Office Director, the AIANHSCO Director work in partnership with tribes and statewide early care and education partners to support the professional development and school readiness goals of tribal child care, Head Start and Early Head Start through increased coordination with tribal colleges. The first annual Early Childhood Indigenous Language and Games Summit was held in June 2018. The summit convened early childhood partners from all tribes in Montana to focus on language immersion integration of native games to support family engagement, school readiness goals, as well as training and professional development strategies in classrooms. The Summit is expected to continue annually.

6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:

Effective Date: 10/01/2018

a) with limited English proficiency

The CCR&Rs Early Childhood Project, Child Care Licensing and other state partners working with providers coordinate to meet the needs of providers through language supports as needed. The Early Childhood Project (ECP) Policies and Procedures are available on their website and outline the following:

- ECP staff has access to campus training on diversity, cultural sensitivity, and customer service and treat all program participants and partners with respect. Staff meetings are held monthly where staff may discuss issues, concerns, and interactions with participants.
- ECP staff is sensitive to language needs and special accommodations necessary to assist all early childhood professionals to fully participate in programs. ECP staff will seek external assistance to successfully work with participants. TDD services are available through Montana State University-Bozeman. The Best Beginnings Advisory Council facilitates conversations specific to the early care and education workforce, including the recruitment of providers with language diversity across the state. Increasing access to trainings in multiple languages is supported and Montana will work to be responsive to changing language needs of children, families and providers across the state.

b) who have disabilities

Accommodations in accordance to the Americans with Disabilities Act are available to providers with disabilities for trainings and participation on the Practitioner Registry. The CCR&Rs Early Childhood Project, Child Care Licensing and other state partners working with providers coordinate to meet the needs of providers through accessibility accommodations as needed. The Early Childhood Project (ECP) Policies and Procedures are available on their website and outline the following:

- The ECP shall assure quality services and comply with the American with Disabilities Act (ADA) of 1990. The Early Childhood Project reviews all content that goes out to the public to assure it meets specific requirements: diversity of families in imagery, language, accessibility in written text, pictures and videos.

6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care 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 developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).

The Montana professional development and training requirements are regularly updated or reviewed to assure providers who care for children receiving child care subsidies, including children of various age groups, Native Americans and Alaska Natives, English-language learners, as well as children with developmental delays and disabilities are supported to best meet the needs of children and families. The infant and toddler certification, the preschool certification, inclusion courses, the Apprenticeship program and the child care development specialist credential are all continuing education services provided to child care practitioners across the state. An online course is available to providers called The Best Beginnings Scholarship Program Basics for Providers, which provides information to providers about the Best Beginnings Scholarship Program.

Montana's Professional Development Approval System provides approved training aligned with Montana's Early Care and Education Knowledge Base and MT's Early Learning Standards (MELS), both of which address family cultural and linguistic diversity and children with disabilities, to all providers in Montana through the Statewide Training Calendar.

Montana has a mixed delivery system for training, which includes in person and online. This mixed delivery system allows all provider types, including those serving school-age children, serving Native American children, or serving children in rural areas, to be able to attend trainings online and at a time that is convenient for them. Montana's contractor for distance learning courses, Child Care Training, has software able to translate courses submitted in other languages into English for facilitation and grading purposes.

The MT Early Care and Education Knowledge Base "Standard 4: Using Developmentally Effective Approaches" outlines specific approaches to English-language learners, developmentally appropriate approaches, and tools to connect with children and families to positively influence each child's development and learning. Key elements of Standard 4 are focused within the content area of "Child Guidance" and "Diversity" although it is important to

note elements of these areas are dispersed throughout the Knowledge Base Assessment areas. As stated in the Knowledge Base, “Diversity encompasses the wide range of children’s developmental ages and stages as well as families’ traditions, attitudes, language(s), and beliefs. The area of Diversity describes knowledge and skills that are essential to fully embrace and celebrate these qualities and to embed them in daily practice to support children’s optimal development and learning.” Specific competencies related to language include the degree to which providers support English Language Learners in their home languages while also assisting them to learn a new language and in the area of “Child Growth and Development” the degree to which the provider considers factors that potentially influence cognitive learning and brain development when setting expectations for each child, such as individual capacity, temperament, maltreatment, disability, family, language, culture, and community.

The Montana Early Learning Standards and other relevant Special Events, Conferences, and Courses are also posted on the Early Childhood Project website under Find Training. Each CCR&R also provides a website with information about local training that has been approved. Awards are available to child care providers who complete the Infant Toddler Caregiver Education Course (60 hours or 4 college credits/each) and receive certification. Inclusion courses are available for all child care providers. Inclusion I Foundations: Course on Inclusion in Early Childhood provides the foundations for inclusion. The two Inclusion Courses (available for college credit) are required for QRIS (or STARS) providers. Topics include: Introduction to Inclusion, Recognizing Young Children's Strengths and Needs, Creating an Accessible Environment, Building Partnerships with Parents and Families, and Being Part of the Team. The course is 15 weeks and is offered as 15 hours of state-approved training or for one academic credit. Inclusion II Strategies: Course on Inclusion in Early Childhood provides basic strategies for inclusion. Topics include: Maintaining a Safe and Healthy Environment, Arranging the Environment for Learning, Increasing the Playability of Toys and Play Materials, Guiding the Behavior of Young Children, Facilitating Young Children's Communication, Positioning Young Children, and Inclusion and Beyond. The course is 15 weeks and is offered to satisfy 30 hours of state-approved training or for two academic credits.

Effective Date: 10/01/2018

6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

Effective Date: 10/01/2018

a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

The Lead Agency provides an online training for providers on identifying and serving homeless children and their families. The course developed by the Center for Early Childhood Professional Development through the University of Oklahoma and Oklahoma Child Care Services has been tailored to the needs of providers in Montana. The course is called "[Insecure Housing and the Effects on Children](#)" and is designed to help child care providers understand, define and identify children and families experiencing homelessness, as it is defined according to McKinney-Vento. The course also explains how being homeless affects the child's health and development and provided guidance strategies to support young children experiencing homelessness. Information and resources for homelessness are available on the Early Childhood Services Bureau website.

b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

The Early Childhood Services Bureau partners with the Office of Public Instruction McKinney-Vento Liaison State Coordinator to disseminate information and collect data to support access of services among children and families experiencing homelessness. Early Childhood Coalitions across Montana coordinate with community-level organizations to address homelessness and provide connections to child care services. Head Start and Early Head Start programs collect data on children and families experiencing homelessness and coordinate with child care providers, especially through the Early Head Start - Child Care Partnership program to provide access to high-quality care and community resources.

6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply

Effective Date: 10/01/2018

- Issue policy change notices
- Issue new policy manual
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

Providers are informed of any changes to CCDF policy and procedure through mailings and electronic means (email, website, CCR&Rwebsites, etc.). Training for CCDF requirements for providers are embedded in their orientation courses.

- Other

Describe:

Montana offers an online course for providers called "The Best Beginnings Scholarship Program Basics for Providers." In this class, providers learn about how CCDF provides supports to families through child care subsidy, and the providers' responsibilities within the subsidy policies and procedures.

6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.

Effective Date: 10/01/2018

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

The business practices trainings that MT currently offers, the Program Administration Scale (PAS) and Business Administration Scale (BAS), are available to child care programs and required for programs participating in the state QRIS STARS to Quality system. The "Building and Maintaining a Successful Child Care Business" training was developed in 2016 and focuses on policy manual development and specific business practices such as the Iron Triangle, cost of care, budgets, risk management, and hiring/retaining quality staff. This training is in the CCR&R Service Delivery Agreements and they must offer it regularly across their regions. Starting in 2018 with the implementation of the CCDF Rule, the New Director Orientation and New License/Registration Issue Process for Family Child Care, Group Child Care, and Center Child Care Centers includes the "Program Management Essentials for Directors" course completion within 60 days of licensure or change in role type. MT is currently participating in a soft launch role out of the "Strengthening Business Practices for Child Care Programs" series, developed from the National Center on Early Childhood Quality Assurance (NCECQA). Fourteen Professional Development Specialists from across all 7 CCR&R regions participated in a 2-day Training of Trainers from NCECQA, and will be offering the series to programs in their region at least one time prior to July 2018 in order to provide feedback to NCECQA specific to course content and provider satisfaction. CCR&R will be expected to continue offering these courses regularly once they are finalized through the NCECQA.

Programs participating in STARS to Quality must complete either the Program Administration (PAS) or Business Administration scale (BAS) training to achieve STAR 1, as well as complete a self-assessment. To achieve STAR 3 through STAR 5, programs have a formal PAS/BAS assessment. To achieve STAR 3, programs must meet a minimum of a 3.0 overall score and any subscales below a 3.0 must be addressed in their Quality Improvement Plan. Programs must achieve a minimum of a 4.0 at STAR 4 and address and subscale scores below a 4.0, and at STAR 5 programs must have a minimum 5.0 overall score and address any subscale scores below a 5.0. All STARS Consultants are trained in these tools so that they may offer technical assistance to prepare for the assessment.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- Fiscal management
- Budgeting
- Recordkeeping
- Hiring, developing, and retaining qualified staff
- Risk management
- Community relationships
- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- Other

Describe:

6.3 Early Learning and Developmental Guidelines

6.3.1 States and territories are required to 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, birth-to-five), describing what children should know and be able to do and covering the essential domains of early childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.

Effective Date: 10/01/2018

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

The [Montana Early Learning Standards \(MELS\)](#) feature a continuum of developmental progression without listing specific ages. The 2014 Montana Early Learning Standards

were based upon the work of the previous Montana Early Learning Guidelines (Infant and Toddler and the 3-5-Year-Old Guidelines). Children's development can be identified and observed over time on the continuum described in each of the four Core Domains and corresponding sub-domains. The forty-seven standards are applicable to all children regardless of the setting in which they are cared for, nurtured, and educated. These settings may include their own homes; family, friend and neighbor homes; family and group child care homes, child care centers, preschool programs, Head Start and Early Head Start; and public schools. The 2014 Montana Early Learning Standards reflect the effective collaboration of early childhood experts and leaders from across the state representing a variety of interests, knowledge, and experience in the care and education of young children. The Montana Early Learning Standards Taskforce led the revision effort to assure the Montana early learning and developmental guidelines are research - based, developmentally appropriate, culturally and linguistically appropriate, and are aligned with kindergarten entry. The Montana Preschool Program Guidelines: A Resource for Teaching Children Ages 3 through 5, builds upon the work of the Montana Early Learning Standards to assure clear alignment with kindergarten entry. The MELS provide a structure that frames the amazing developmental process from birth to age five as the foundation for children's success in life and learning. They are meant to:

- Provide a common language and improve communication among the professionals who impact and provide services to young children and their families;
- Build upon early childhood professionals' understanding of the continuum of children's growth and development;
- Serve as a resource for ways to enhance children's early learning experiences;
- Describe the expectations for what young children should know and be able to do across different domains of learning;
- Support the transfer of child development knowledge to improve teaching and caregiving practices and encourage individualization;
- Provide information and context for the range of skills children develop from birth to age 5. They do not provide a comprehensive or exhaustive list of every skill children might achieve in the first years of life.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

The Montana Early Learning Standards are designed to guide the work of early childhood professionals in a variety of early childhood settings. Professionals who utilize the Montana Early Learning Standards (MELS) help ensure children from birth to age five develop the skills and knowledge they need to achieve success in learning and reach

their full potential in life. The Office of Public Instruction recognizes the MELS as the curriculum framework for Montana Early Childhood Programs and built upon the MELS when developing the Montana Preschool Program Guidelines (2014). Alignment to the early learning standards, as well as P-3 Vertical Alignment are key factors in assuring the guidelines are appropriate for all children along the developmental spectrum. A comprehensive literature review and integration of best practices and evidence-based research were thoroughly integrated into the document. The following paragraphs are included in the Montana Preschool Program Guidelines and underscore the rationale for use of the MELS in curriculum development and pedagogy supports among early care professionals to foster positive early learning experiences.

- Alignment to the Standards: To understand which developmental concepts and skills children need to acquire, it will be important that curriculum is aligned to the MELS. The MELS will guide choosing, aligning, planning, and implementing developmentally appropriate curriculum across all domains of development. Furthermore, the MELS provide clarity about what children should know and be able to do in all domains of development before entrance into kindergarten. Ultimately, the MELS provide a framework to guide the work of teachers and ensure that children have the skills and knowledge they need to achieve success in learning and reach their full potential in life.
- P-3 Vertical Alignment: In a position statement published by NAEYC (2009), Copple and Bredekamp stress that children's learning experiences across the early childhood years, birth to age 8, need to be far better integrated and aligned. In 2010, the National Association of Elementary School Principals (NAESP) published a similar position statement urging states to "lead a careful, well-balanced effort to align K-3 standards to pre-K standards and vice versa." NAESP suggested alignment work would require states to expand their K-3 standards to include a focus on social, emotional, cognitive, physical, and creative learning, as well as school-related skills across the continuum. The group went on to say, "states should also promote balanced teaching strategies, a variety of types of learning opportunities, and multiple ways for children to demonstrate progress in learning in conjunction with the implementation of their standards." They further encouraged states to look at the full range of Common Core State Standards for all grades and expand them to include additional child development domains that focus on social, emotional, and physical learning. The MELS incorporates current research, particularly in the areas of brain development and cultural/linguistic diversity, including significant and meaningful integration of the Montana Indian Education for All (IEFA) Act. In addition, a crosswalk analysis of the MELS was conducted to highlight connections with other professional standards, including the Montana Common Core Kindergarten Standards for Language Arts and Math and the Next Generation Science Standards as well as the Head Start Framework.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other

Describe:

Family and Culture (Culture is embedded throughout)

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The Montana Early Learning Standards (MELS) are updated every five years. State Advisory Council members will be recruited to participate in the updating of the MELS in 2019. Several members of the State Advisory Council participated in the 2014 update process, which comprised of 17 individuals from across the state. The Montana Early Learning Standards (MELS) are applicable to children regardless of the setting in which they are cared for, nurtured, and educated. These settings may include their own homes; family, friend and neighbor homes; family and group child care homes; child care centers; preschool programs; Head Start; Early Head Start; and public schools. The MELS are implemented into trainings, higher education coursework and stand as a resource to providers across the state.

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

Montana's Early Learning Guidelines for Children 3 to 5 (2004) and Montana's Early Learning Guidelines for Infants and Toddlers (2009) were incorporated into one document that represents a continuum of growth and development for children from birth to age 5. This integrated document is called the 2014 Montana Early Learning Standards (MELS). Major changes of the 2014 integration include:

Instead of using the term "guidelines," the current document uses the term "standards." This wording aligns with similar documents used across the state to guide the education

of Montana's children, most notably K-12 Standards.

Changes were made to ensure that the MELS incorporate current research, particularly in the areas of brain development and cultural/linguistic diversity, including significant and meaningful integration of the Montana Indian Education for All Act. In addition, a crosswalk analysis of the MELS was conducted to highlight connections with other professional standards, including the Montana Common Core Kindergarten Standards for Language Arts and Math and the Next Generation Science Standards as well as the Head Start Framework.

The MELS feature a continuum of developmental progression without listing specific ages. Children's development can be identified and observed over time on the continuum described in each developmental domain.

The updates are completed through the convening of a Task Force. The Task Force was selected in part to establish both content validity and face validity. To establish content validity, it was necessary to find professionals who had substantial experience in the field of early childhood learning, an appropriate educational background, and experiences external to-but appropriately related to-early childhood learning. The MELS will be updated in 2019.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

N/A

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

- [Montana Early Learning Standards](#)
- [Montana Preschool Program Guidelines](#)

6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:

-- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,

-- 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 program effectiveness,

-- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used.

The Montana Early Learning Standards (MELS) are a tool for every early childhood and related service professional working with young children and their families, including early care and education practitioners, elementary school teachers, early interventionists, pre-service teachers, parent/family educators, family support specialists, home visitors, mental health providers, and child/family health practitioners. The MELS are also a tool for those who plan and provide early childhood professional and career development, including college instructors, high school teachers, professional development specialists, and Early Head Start/ Head Start training and technical assistance personnel.

The 2014 Montana's Early Learning Standards (MELS) are used to:

- Acknowledge the diverse value systems in which children learn and grow.
- Assist early childhood professionals in communication/collaboration with policy makers, community members, and key stakeholders.
- Develop training and education programs for adults working with children and their families Emphasize the importance of early care and education to the community.
- Help teachers focus on what children can do and reinforce the idea that children are capable learners. Help teachers meet children's developmental needs, including those of children with disabilities, at the level they require and in an individual capacity.
- Help teachers recognize the critical need to meet children's emotional/ social needs and that meeting those needs serves as the basis for a child's future learning.
- Help teachers recognize their own value and abilities Improve quality in early care and education programs and serve as a model for teaching and building secure relationships with young children Increase the flow of information among early childhood teachers, professionals, and policy makers Support teachers in learning more about child development.

They will not be used for the primary or sole basis of determining child care provider eligibility to participate in CCDF, as a reward or sanction for an individual provider, as a method for assessing program effectiveness, nor to deny child eligibility to participate in CCDF.

Effective Date: 10/01/2018

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)

- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing 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, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)) These activities can benefit infants and toddlers through school age populations.

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).

The Best Beginnings STARS to Quality team conducts STARS program evaluation surveys with participating programs. The intent of the STARS program evaluation survey is to obtain program information, including feedback about program criteria, training, and program support. The STARS program evaluation survey is conducted at least annually.

An assessment evaluation survey is sent to programs that receive an ERS, PAS/BAS assessment in order to receive feedback about how the state could improve communication, training, and support to programs that receive and assessment.

A coaching evaluation survey is sent to programs that receive Pyramid Model coaching support in order to receive feedback about how the state could improve communication, training, and support to programs, as well as informing our coaching model for the state. The Montana Head Start Collaboration Office conducts an annual Head Start Needs Assessment. The Needs Assessment is comprehensive of 2 data sources: 1. Survey Analysis & Findings: The survey was conducted via Survey Monkey in 2017 and distributed to all Head Start and Early Head Start directors in the State of Montana; 2. Program Information Report (PIR) Statewide Data findings conducted by the Office of Head Start. In May and June 2017, Head Start directors were invited to participate in the Head Start Collaboration Office needs assessment survey. Directors are encouraged to participate, but if they could not fill out the survey or wanted to provide more input from their program, they were encouraged to send it on to other staff. 20 people participated in the survey, all but one self-identified in the survey. All answers are de-identified in the needs assessment summary. It appears, from information provided, that all but 5 Early Head Start/Head Start programs from both Region VIII and Region XI in Montana participated in this survey.

The MT Infant Toddler Workgroup, formed through ECSB in 2017 with representatives from varying agencies across the state, developed a “Montana Infant/Toddler Data Report” as one of its first goals to inform the work of the group. This included collecting data from multiple sources as well as conducting surveys to generate additional data. The data is still being analyzed at a deeper level; however, the workgroup was able to identify goals based on the overarching data that was compiled which are outlined below. From the data gathered, it is very clear that there is a need for increased infant toddler slots in quality childcare settings. The data gathered in this report show that in MT there are only 5,125 slots available in licensed childcare, including Early Head Start. There are about 37,000 children under the age of 3 in MT. Zero to Three State Baby Facts 2015 show that 59% of mothers of infants are in the labor force in MT. Additionally, the 2016 MT Market Rate survey showed that about 37% of all licensed programs have waiting lists for children under 1 year of age for full time slots. The data also showed that there is an extremely high percentage of turnover in the workforce, 14.2% on average per quarter. Members of the workgroup developed the Compensation, Turnover, and Quality report from this data to inform the state as we work towards higher compensation for early childhood professionals.

Effective Date: 10/01/2018

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

The Best Beginnings STARS to Quality goals, based on the assessments used to collect feedback from programs, identified the following goals:

- Continued collaboration between HS/EHS programs and STARS to Quality support, which would, at a minimum, maintain the number of programs participating in STARS to Quality
- Continued focus on infant and toddler supports, with a goal of increased infant and toddler slots in STARS to Quality programs
- Evaluation of consulting and coaching process and structure within STARS to Quality

The STARS to Quality leadership team reviews visit logs and TA data to determine the effectiveness of the consulting and coaching system. One of the identified goals from this process is to:

- Provide additional consumer education for assessment tools (ERS, PAS, BAS) in order to support programs and resolve assessment questions and misconceptions

The annual Head Start Needs Assessment identified STARS to Quality as an asset; it helps maintain and improve high-quality for Head Start and Early Head Start programs. STARS to Quality was not identified as a barrier. Respondents identified a high level of collaboration between programs and STARS to Quality coaches; however, collaboration between programs and STARS to Quality consultants was identified as an area of potential growth. Findings show a high level of impact for the support of expansion and access to high quality workforce and career development opportunities. A high level of impact of collaboration with STARS to Quality is a change from last year, most likely due to the new Head Start Program Performance Standards' participation requirement in the state's QRIS system. This area will be important to monitor as the state and EHS/HS work together to implement the new HS STARS standards in QRIS. Data coordination also was high in the level of impact.

Head Start/Early Head Start goals based on Needs Assessment survey results:

- Strengthen collaboration between HS/EHS programs and STARS to Quality program support, including education of STARS to Quality program support on HS practices
- Increase connections to training and coaching within the STARS to Quality program
- STARS training to be provided frequently and locally provided, with focused efforts on reducing duplication in training that Head Start program staff already receive from other sources
- Provide additional information about child care quality improvement and licensing initiatives

- Increase linkages between Head Start, local Child Care Resource and Referral agencies, and the Early Childhood Services Bureau

From the data gained through the Infant Toddler survey and assessment, that work group has identified several goals that it will be working towards:

- Provide consumer education on the value of licensed care for families, child care providers, and the community
- Maintain and increase infant and toddler child care slots by 5%
- Increase the number of slots for infants and toddlers in STARS programs
- Increase the number of programs receiving accreditation
- Provide, support, and assess training specifically designed for infant/toddler teachers
- Provide parenting courses
- Establish baseline data and continue collecting on-going data
- Align the Montana definition of infants and toddlers in various state programs and licensing

Effective Date: 10/01/2018

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing

Effective Date: 10/01/2018

- Supporting the training and professional development of the child care workforce If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.

- CCDF funds

- Other funds

Describe:

The Montana Project LAUNCH (Linking Actions in Unmet Needs in Children's Health) grant is administered through the Lead Agency. The grant is focused on a pilot area, supporting Gallatin and Park counties, to improve systems and access to mental health services for young children and their families. The 5-year grant is in its 4th year of funding. Their multi-tiered mission includes developing a system to support social-emotional development for young children and families using the Pyramid Model.

LAUNCH providers are supported through Pyramid Model training and professional development.

Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

In addition to CCDF quality funds, state general fund supports Montana's QRIS system.

Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

A stakeholder group has been established through funds from the Head Start Collaboration grant to:

- Review the current coaching systems in different Early Childhood settings in Montana

- Define Coaching system needs for Montana
- Develop collaborative Mt Coaching System ideas
- Develop next steps for action.

This group anticipates that it will have a roadmap of needs for Montana to further review and take action to support coaching strategies in collaboration for early childhood.

Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

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 7.10 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce

Effective Date: 10/01/2018

a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

Describe:

The Montana Early Learning Standards (MELS) and the MT Early Care and Education Knowledge Base both address all areas of development and provide the foundation for all approved training and professional development in MT. The MELS were adopted as the basis of content for preschools in the public schools. The Montana Project LAUNCH (Linking Actions in Unmet Needs in Children's Health) grant is administered through the Lead Agency. The grant is focused on a pilot area, supporting Gallatin and Park counties, to improve systems and access to mental

health services for young children and their families. The 5-year grant is in its 4th year of funding. One focus in their grant is to increase access to screening, assessment, and referral to appropriate services for young children and their families.

- [Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. \(See also section 2.5.\)](#)

Describe:

MT embedded The Pyramid Model (PM) into its QRIS program and a training series of courses is required for program staff. Pyramid Model coaches are assigned to programs and work with leadership and program staff to implement the Pyramid Model. The Montana Project LAUNCH (Linking Actions in Unmet Needs in Children's Health) grant is administered through the Lead Agency. The grant is focused on a pilot area, supporting Gallatin and Park counties, to improve systems and access to mental health services for young children and their families. The 5-year grant is in its 4th year of funding. Their multi-tiered mission includes developing a system to support social-emotional development for young children and families using the Pyramid Model. LAUNCH also strives to improve service delivery through innovative approaches, such as primary care/behavioral health integration, mental health consultation in early care and education, enhanced home visiting, cross sector professional development, and increased access to parent skills training.

- [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:

All courses approved in Montana must address how cultural diversity and inclusion will be addressed in the course. MT does not have a specific course developed on this subject that is widely offered. However, ongoing training on cultural and linguistic diversity are included in each annual Professional Development Specialist Forum sponsored by the Early Childhood Project. Higher education in ECE requires a class on meeting the needs of families and a diversity class. Multiple courses on diversity have been offered, and will continue to be offered statewide. A state-wide training work group is meeting to determine the needs of training in the state, and has

identified this content as an area of need.

Salish Kootenai College, The Montana Head Start Collaboration Office, and The American Indian Alaska Native Collaboration office convened the first Montana Early Language and Indigenous Games Summit in June 2018. The Summit provided the opportunity to bring together tribal Early Childhood programs from across the state to discuss tribal language and Indigenous Games for Early Childhood professionals working in child care, Tribal Colleges, Head Start and K-12. The plan is to continue this annually through Salish Kootenai College and the American Indian College Fund. It will provide an ongoing opportunity to further develop language speakers and meld the pedagogy in Early Childhood and Language Revitalization to support the tribal early childhood programs throughout the state specifically in integrating native language and culture into early childhood curriculums.

- [Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.](#)

[Describe:](#)

All Montana courses approved by the Early Childhood Project must include the applicable subdomain and standard from the Montana Early Learning Standards, content area(s) from the Knowledge Base, as well how cultural diversity and inclusion are addressed within each course. All courses must be evidence-based and informed by research and responsive to the needs of the communities and providers for all approved trainings state-wide. Course are delivered with multiple delivery styles i.e. in-person, online, and a combination of online and in-person which we refer to as a hybrid course.

- [Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development](#)

[Describe:](#)

MT has approved some courses that address community partnerships that promote families' access to services that support learning and development. The local early childhood councils provide a means for dissemination of information about available

community resources and collaboration around cross-sector professional development. A diverse group of approved state level and community-based training sponsors offer courses for practitioners, such as county health departments, Part C Providers, school districts, family education and support agencies and other child and family non-profit organizations.

[Using data to guide program evaluation to ensure continuous improvement](#)

[Describe:](#)

The QRIS program requires assessments in the Environmental Rating Scales and the Program or Business Administration Scales and the scores are the basis for programs' Quality Improvement Plans (QIP). Programs at STAR 3 and above which are receiving Pyramid Model Coaching are using scores from both the TPOT and TIPITOS assessments to guide QIPs.

[Caring for children of families in geographic areas with significant concentrations of poverty and unemployment](#)

[Describe:](#)

Montana offers an online course, Best Beginnings Scholarship Basics for Providers. This course educates providers about supporting low income families through the Best Beginnings Scholarship Program. A course is available to all practitioners online, and is specific to insecure housing, and the effects on children and families.

Montana offers an online course to both providers and non-caregiving community members called Building Skills and Safe Spaces: Supporting Young Children Impacted by Trauma. The course provides information about trauma, how it impacts young children, and strategies for supporting children impacted by trauma, including self-care strategies for adults and child care providers.

[Caring for and supporting the development of children with disabilities and developmental delays](#)

[Describe:](#)

Montana has two Inclusion courses (both available for college credit) that are required training for QRIS programs. ECSB contracts with the Early Childhood Project to coordinate Pyramid Model training addressing challenging behavior and coaching within the STARS to Quality system.

Positive Social Emotional Development: STARS has adopted the Pyramid Model Framework as the model to promote positive social and emotional development and to prevent and address challenging behavior. There are STARS training requirements associated with the framework, coaching support for implementation, and ongoing assessments to insure the model is being implemented to fidelity. The Teaching Pyramid Observation Tool (TPOT) and Teaching Pyramid Infant Toddler Observation Scale (TPITOS) are the assessments used to determine that the Pyramid Model is being implemented to fidelity. HS/EHS are required by the HS Performance Standards to address social and emotional development.

Training on the Pyramid Model Practices: STARS uses the Center on the Social and Emotional Foundations of Early Learning (CSEFEL) Pyramid Training Modules as the foundation for training STARS programs on the Pyramid Model, modifying them and using additional resources to meet the needs of the training audience, an individual, or program. All of the required Pyramid Model trainings are approved by the Early Childhood Project as STARS qualified trainings delivered through the local CCR&R agency. Modules 1, 2, and 3 focus on tier 1, tier 2, and tier 3 of the Pyramid Model. The 8-hour Module 3 training required for the Behavior Support Team is an advanced training, all education staff are welcome to take the course, however, only the Behavior Support Team is required. All licensed providers, whether they are enrolled in STARS to Quality are welcome to attend the Pyramid Model trainings.

Supporting the positive development of school-age children

Describe:

Other

Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-

secondary education opportunities

Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education

Other

Describe:

7.3.2 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Career Path

The STARS to Quality team looks several data sets within the Practitioner Registry. STARS to Quality program staff are required to participate on the Registry, which helps the STARS to Quality team collect valuable data about professional development and education based on individuals' levels on the Career Path. [The Career Path](#) promotes professional development for early care and education practitioners by providing a framework for recording and recognizing experience, training, and educational accomplishments. The Career Path outlines eleven levels of career development based on training, education and experience in the field. The Membership Level, formerly the Early Childhood Practitioner level, was removed for a brief time and then modified and added back to the Career Path in 2018, when Child Care Licensing implemented rule that all individuals in licensed and registered programs must be current on the Career Path. Any individual developing a plan for professional growth in early care and education can chart a course on the Career Path. FFY2018 Statewide workforce statistics are through June 2018; STARS to Quality statistics are as of 8/15/2018.

Career Path Level Growth Statistics:

- Membership Level
 - STARS to Quality
- 2017: 16; 2018: 28
 - Statewide workforce
- 2017: 187; 2018: 45

- Level 1

- STARS to Quality
- 2017: 78; 2018: 378
- Statewide workforce
- 2017: 505; 2018: 828

- Level 2
- STARS to Quality
- 2017: 57; 2018: 416
- Statewide workforce
- 2017: 670; 2018: 710

- Level 3
- STARS to Quality
- 2017: 7; 2018: 121
- Statewide workforce
- 2017: 105; 2018: 187

- Level 4
- STARS to Quality
- 2017: 5; 2018: 57
- Statewide workforce
- 2017: 58; 2018: 98

- Level 5
- STARS to Quality
- 2017: 4; 2018: 66
- Statewide workforce
- 2017: 121; 2018: 121

- Level 6
- STARS to Quality
- 2017: 5; 2018: 29
- Statewide workforce
- 2017: 67; 2018: 63

- Level 7
- STARS to Quality
- 2017: 2; 2018: 25

- Statewide workforce
- 2017: 48; 2018: 48

- Level 8
 - STARS to Quality
 - 2017: 4; 2018: 63
 - Statewide workforce
 - 2017: 115; 2018: 125

- Level 9
 - STARS to Quality
 - 2017: 1; 2018: 23
 - Statewide workforce
 - 2017: 45; 2018: 60

- Level 10
 - STARS to Quality
 - 2017: 0; 2018: 2
 - Statewide workforce
 - 2017: 3; 2018: 3

Educational Growth

Number of STARS to Quality providers with increased educational levels:

- Associate's Degree: 97 additional providers between 2017 and 2018 attained this educational level
- Bachelor's Degree: 200 additional providers between 2017 and 2018 attained this educational level
- Master's Degree: 22 additional providers between 2017 and 2018 attained this educational level
- Doctorate: 2 additional providers between 2017 and 2018 attained this educational level
- Some College: 155 additional providers between 2017 and 2018 attained this educational level

STARS to Quality CDA Data

- 2018: 94 providers achieved a CDA in 2018
- 2017: 69 providers achieved a CDA in 2017

Staff Turnover

Staff turnover in STARS to Quality has reduced from 28.70% total staff turnover in 2017 to 21.89% in 2018, for a total reduction of %5.81 in turnover in the past year.

Assessments

The lead agency reviews all data collected from assessment tools:

- ERS
- PAS/BAS
- TPOT/TPITOS

For STARS to Quality, ERS baseline assessments are conducted upon a program's acceptance into STARS. This allows the STARS to Quality team to gather baseline data and track progress as the program moves up in the framework. Montana reviews STARS to Quality program movement in the framework. Beginning at STAR 3, the indicators above are embedded into the framework in order to collect data and measure program progress towards increased quality.

Data for knowledge base content area for course/training approval is collected statewide. This data is used to inform training needs within the workforce on both a statewide and regional level. Course completion is tracked for all trainings, but the specific trainings mentioned in 7.3.1 help inform the needs within the workforce, specific to quality improvement and social emotional support.

Effective Date: 10/01/2018

7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?

Effective Date: 10/01/2018

- No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
- No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
- Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

Montana's QRIS, Best Beginnings STARS to Quality, is a voluntary quality rating improvement system that aligns quality indicators with support and incentives for early childhood programs and early childhood professionals. Best Beginnings STARS to Quality is a five-tiered program aimed at improving and measuring quality in early childhood care and education programs in Montana. Programs that advance levels are eligible for financial incentives, including higher reimbursement rates over the base rate for programs that serve children receiving Best Beginnings Scholarships. In order to receive a STAR level, programs must demonstrate through an application process that they are meeting all criteria at the level applying for, as well as all levels below. Criteria throughout the STARS standards that align with Head Start and Early Head Start standards have been waived for Head Start and Early Head Start programs. There is a strong emphasis on professionalism and professional development throughout the standards, with each level building on the prior level. All programs applying for STAR 3 and above receive the appropriate Environment Rating Scale assessment (Early Childhood Environment Rating Scale-Revised, Infant Toddler Environment Rating Scale-Revised, Family Child Care Environment Rating Scale-Revised) and either the Program Administration Scale assessment (centers) or the Business Administration Scale assessment (family and group programs). Programs must be accredited or a Head Start program in order to achieve the highest level of STAR 5. STARS to Quality is administered at the state level through the Lead Agency, however, Child Care Resource & Referral agencies are contracted to administer coaching and technical assistance to participating programs. The STARS Application

site, where all programs must enter program information and submit to request assessments and apply for STAR levels, is housed on The Early Childhood Project database. STARS to Quality began with 100 programs in a field test in 2010. The field test ended in April 2014 and STARS to Quality became available statewide for any licensed program to apply at any time. For more information regarding Best Beginnings STARS to Quality, visit www.stars.mt.gov.

- Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

- Yes, the state/territory has another system of quality improvement

If the response is yes to any of the above, describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

7.4.2 QRIS participation

Effective Date: 10/01/2018

a) Are providers required to participate in the QRIS?

- Participation is voluntary
- Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).
- Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Early Head Start programs
- Head Start programs
- State prekindergarten or preschool programs
- Local district-supported prekindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Tribally operated programs
- Other

Describe:

All programs that participate in STARS to Quality must be licensed or registered. Programs must have been licensed a minimum of 6 months in order to qualify for STARS.

7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

Effective Date: 10/01/2018

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
 - Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the

same, there is a reciprocal agreement between preK programs and the quality improvement system) .

- Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
- Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).
- Programs that meet all or part of state/territory school-age quality standards.
- Other.

Describe:

7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?

Effective Date: 10/01/2018

- No
- Yes. If yes, check any links between the state/territory's quality standards and licensing requirements
 - Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
 - Embeds licensing into the QRIS
 - State/territory license is a "rated" license
 - Other.

Describe:

7.4.5 Does the state/territory provide 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 that are provided through the QRIS

Effective Date: 10/01/2018

No

Yes. If yes, check all that apply

One time grants, awards, or bonuses.

Ongoing or periodic quality stipends

Higher subsidy payments

Training or technical assistance related to QRIS.

Coaching/mentoring.

Scholarships, bonuses, or increased compensation for degrees/certificates

Materials and supplies

Priority access for other grants or programs

Tax credits (providers or parents)

Payment of fees (e.g., licensing, accreditation)

Other

Describe:

7.4.6 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Children with High Needs Served in STARS to Quality

*High needs data is self-reported through the STARS to Quality online application site.

STARS to Quality has increased child care services for high needs children from 1,700 to 3,789 between 2017 and 2018.

- Children and Family Services Division: 333 children
- Children being serviced through Best Beginnings subsidy (CCDF): 1496 children
- Children of migrant families: 9 children
- Children of teenage parent(s): 78 children
- Children who are homeless: 35 children
- Children's Mental Health Bureau: 43 children
- Enrolled Tribal member: 132 children
- Evidence that the child has special healthcare needs: 335 children
- Home Visiting Programs: 84 children
- Infants age 0-19 months: 815 children
- Other children as identified by the Early Childhood Services Bureau: 89 children
- Part B: 178 children

- Part C: 162 children

Number of programs receiving a STAR 3, STAR 4, and STAR 5

STAR levels are awarded two times per year (January and July). Once programs achieve STAR 2, they must remain at that level for one year; however, there is movement within the levels throughout the year due to program closures or choosing to no longer participate in STARS to Quality.

- 2018

1. STAR 3: 34
2. STAR 4: 18
3. STAR 5: 2

- 2017

1. STAR 3: 23
2. STAR 4: 9
3. STAR 5: 2

- 2016

1. STAR 3: 30
2. STAR 4: 12
3. STAR 5: 2

Assessments

The Lead Agency collects the scores of the Environment Rating Scales and measure progress of STAR Level 3, 4, and 5 programs within a determined time period. Programs must achieve a certain score within the Environment Rating Scales in order to advance and/or maintain levels at STAR 3 and up. The number of programs receiving STAR 3, 4, and 5 are a measure toward achieving the quality of child care. The Early Childhood Project collects scores of the TPOT and TPITOS to measure progress within a determined time period.

Effective Date: 10/01/2018

[7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers](#)

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or

needed to support and enhance the quality of infant and toddler providers, 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, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

7.5.1 What activities are being implemented by the state/territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe

Effective Date: 10/01/2018

- Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families

Describe:

- Establishing or expanding the operation of community- or neighborhood-based family child care networks.

Describe:

- Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers

Describe:

STARS to Quality requires lead teachers at STAR 3 to complete the 60-hour Certified Infant-Toddler Caregiver course. This course is available to all teachers, regardless if they are participating in STARS to Quality. Each CCR&R must offer this course a minimum of 2 times per year in their region. There is a course completion award and a 6-month continuity of care award attached to this course to encourage participation and completion. The following courses contain course objectives specific to serving infants and toddlers in care and are available to all providers: Montana Early Learning Standards, Montana blended Pyramid Model modules, Inclusion I: Foundations for Inclusion, and Inclusion II: Strategies for Inclusion.

- Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists

Describe:

A requirement of completing the 60 hour Certified Infant Toddler Caregiver course is to have 2 on-site observations in a program and to work a minimum of 45 hours directly with infants and toddlers throughout the course. The instructor goes through each observation with the student in order to further the students understanding and ability to implement best practices in regard to infants and toddlers.

- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

- Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

The STARS to Quality program uses the Infant Toddler Environment Rating Scale and the Family Child Care Environment Rating Scale to assess environments serving this age group. Programs receive a baseline score and work to improve their scores as they progress through STAR levels. Programs must use a Quality Improvement Plan (QIP) to address low scoring areas. Lead teachers must complete the Certified Infant Toddler Caregiver course at STAR 3.

- Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy

and numeracy cognitive development

Describe:

- Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being

Describe:

- Coordinating with child care health consultants.

Describe:

- Coordinating with mental health consultants.

Describe:

- Other

Describe:

An Infant Toddler work group was formed in 2017 to address the needs of infants and toddlers in the state. There are representatives from the following: Lead Agency, Early Head Start, Infant Toddler Instructors, CCR&R agencies, Part C, Early Childhood Project, MT Association for the Education of Young Children, MT Child Care Association, Child Care Licensing, MT Head Start Collaboration office, and Healthy MT Families.

A state team meets quarterly with the EHS-CCP grantees to problem solve challenges and provide support and idea sharing to promote this important collaboration between private child care providers and Early Head Start. Representatives from the EHS Grantees, Child Care Providers, Child Care Licensing, The Early Childhood Project, CCR&R CCDF Administrator, Policy Manager, Early Care and Education Manager and Head Start Collaboration Director attend the meetings.

7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures

STARS to Quality tracks data for programs receiving ITERS-R and FCCERS-R and this information will continue to be used by the Infant Toddler Work group. Data will also be tracked on the number of individuals completing the Certified Infant Toddler Caregiver course, as well as turnover data. The Infant Toddler work group will continue to work towards its goals and progress on these goals will be noted at regular meetings and through tasks completed.

ITERS Growth

STARS to Quality tracks ITERS scores to evaluate progress in services to infants and toddlers. Between 2016 and 2016, average overall scores increased from 3.25 to 4.18.

Certified Infant Toddler Caregiver Course

All CCR&Rs in MT offer a 60-hour Certified Infant Toddler Caregiver (CITC) course. This course is required of Lead Teachers working with infants and/or toddlers in STAR 3 and above programs. Following is the number of individuals that have completed this course over the past 3 federal fiscal years (FFY 2018 current to August 15, 2018):

- FFY2016: 154
- FFY2017: 166
- FFY2018: 88

With completion of the CITC course, individuals are eligible for a one-time \$500 completion award. Up until January 2018, individuals were also eligible for a Continuity of Care stipend if they remained in the same licensed program, working with infants and/or toddlers, for an 18-month period. There were 3 payments every 6 months, for a total of \$1600. In January 2018, this award was reduced to a one-time award of \$400 6 months after course completion, provided the individual is still working in the same program as when they completed the course. Following is the number of individuals awarded either the Completion award or the stipend award. Numbers may be duplicated as individuals can receive both if eligible.

Course Completion Award

- FFY2016: 138
- FFY2017: 92
- FFY2018: 91

Continuity of Care Award

- FFY2016: 81
- FFY2017: 80
- FFY2018: 30

Effective Date: 10/01/2018

7.6 Child Care Resource and Referral

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.6.1 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

The 7 Child Care Resource and Referral agencies in Montana submit quarterly reports which include a great amount of data. Reports must be submitted no later than October 15, January 15, April 15, and July 15 for the preceding quarter. Each agency reports on the following data points, as well as other information requested by ECSB:

- Number of on-site visit with new providers
- Number of new and closed providers in the region
- Recruitment methods and results
- Professional development
- Number of programs receiving TA related to specific topics (i.e. health & safety, inclusion, emergency preparedness, etc.)
- STARS to Quality QRIS data, including number of programs recruited in the region
- Meetings with Best Beginnings Scholarship families
- Eligibility determination data
- Referral data
- Consumer Education and Collaboration

1. Data reported includes: Number of visits to the agency website, events attended, electronic media publications or broadcasts, locations of written material distribution, community service events, names of organizations collaborated with as well as the type of collaboration and the results/outcomes.

Quarterly reports are reviewed by the lead agency quarterly, and clarifications and/or additional information is requested as needed. The lead agency schedules on-site contract

monitoring visits annually. These quarterly reports serve as the basis for monitoring visit, in order to expand further into the data provided. Additional information, such as movement of STARS to Quality programs and number of individuals completing the Certified Infant Toddler and Preschool courses are also discussed during these monitoring visits. Montana also has a CC&R network. The Montana Child Care Resource & Referral (MT CCR&R) Network is a statewide network of 7 community-based child care resource and referral agencies who work to improve the quality, accessibility, and affordability of child care for all Montana's families. The mission of the Network is to support member organizations, advance the early childhood profession, and improve the quality, affordability and accessibility of child care. This is done by providing training and support to member agencies; initiating projects to build child care supply and quality in urban and rural areas; educating policy makers, businesses, and the public on child care issues; advocating for child care professionals and families. The MT CCR&R Network meets quarterly, and often invites the Lead Agency to attend the meetings in order to provide updates, answer questions, and to collaborate together as a partnership.

Effective Date: 10/01/2018

[7.7 Facilitating Compliance With State Standards](#)

7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards? Describe:

The lead agency funds licensing standards including requirements for inspection, monitoring, training, and health and safety, with quality funds. Health and safety training and provider orientation support providers' compliance with regulations, and are funded with quality funds. Licensing compliance is the foundation of participation for STARS to Quality programs. Coaching and technical assistance for programs supports areas of program deficiency with licensing.

CCR&Rs are contracted to provide technical assistance for all child care providers in

Montana. Child Care Licensing and the Lead Agency have developed a support plan process; programs receive additional assistance if referred by Child Care Licensing. Examples of this technical assistance include program management skills, such as program policy writing, staff support, and environmental improvements.

Effective Date: 10/01/2018

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

Effective Date: 10/01/2018

- No
- Yes. If yes, which types of providers can access this financial assistance?
 - Licensed CCDF providers
 - Licensed non-CCDF providers
 - License-exempt CCDF providers
 - Other

Describe:

7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

Compliance of the child care regulations is determined through monitoring inspections. The child care regulations are minimum health and safety standards required in order for a facility to be licensed. All programs participating in STARS to Quality must be licensed or registered. The STARS to Quality program includes standards above and beyond the minimum standards required by child care licensing.

Other measures that are used throughout the STARS to Quality program include the Early Childhood Environment Rating Scale, the Infant Toddler Environment Rating Scale, and the

Family Child Care Environment Rating Scale. These rating scales, along with the Program Administration Scale and the Business Administration Scale, are used to determine quality for programs involved in STARS. Programs accepted into STARS receive a baseline assessment and ongoing assessments. This process provides the Early Childhood Services Bureau the means to measure the progress of quality improvement in STARS to Quality programs.

Effective Date: 10/01/2018

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

7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children

Montana uses the following instruments to measure child, family, teacher, classroom, and provider improvements within the STARS to Quality programs. Programs must meet certain overall scores, as well as certain subscale scores, in order to achieve a STAR 3 and above for the Environment Rating Scales, and STAR 4 and above for the TPOT and TPITOS tools. There are trained and reliable individuals available for all of the following tools:

* TPOT - Teaching Pyramid Observation Tool (TPOT™) for Preschool Classrooms. It is an instrument designed to measure early childhood practitioners' implementation of teaching and behavior support practices associated with the Pyramid (taken from Teaching Pyramid Observation Tool for preschool classrooms manual, research edition/ by M.L Hemmerter, Ph.D., Lise Fox, Ph. D., and Patricia Snyder, Ph.D. Copyright© 2014 by Paul H. Brookes Publishing Co., Inc.).

- TPITOS - Pyramid Infant-Toddler Observation Scale (TPITOS). The TPITOS is an assessment instrument designed to measure the fidelity of implementation of practices associated with the Pyramid Model in infant and toddler care settings. The purpose of the TPITOS is to provide a classroom snapshot of the adult behaviors and classroom

environment variables that are associated with supporting and promoting the social-emotional development of infants and toddlers (taken from The Pyramid Infant-Toddler Observation Scale Manual Copyright ©2009. All rights reserved.)

- ECERS-R - The Early Childhood Environment Rating Scale - Revised (ECERS-R). The ECERS-R is a revision of the ECERS, designed to assess group programs for preschool-kindergarten aged children, from 2 through 5 years of age. The scale consists of 43 items organized into 7 subscales: Space and Furnishings, Personal Care Routines, Language-Reasoning, Activities, Interactions, Program Structure, and Parents and Staff.
- FCCERS-R -The Family Child Care Environment Rating Scale-Revised (FCCERS-R) is designed to assess family child care programs conducted in a provider's home. The Scale consists of 37 items organized into 7 subscales: Space and Furnishings, Personal Care Routines, Listening and Talking, Activities, Interaction, Program Structure, and Parents and Provider. This scale also accommodates the wider age range often found in family child care programs and provides a deeper focus on sensitivity to cultural and socioeconomic diversity.
- ITERS-R - The Infant Toddler Environment Rating Scale-Revised is designed to assess group programs for children from birth to 2 ½ years of age. The scale consists of 39 items organized into 7 subscales: Space and Furnishings, Personal Care Routines, Listening and Talking, Activities, Interaction, Program Structure, and Parents and Staff.
- The Business Administration Scale - The Business Administration Scale for Family Child Care (BAS) is a reliable and easy-to-administer tool for measuring the overall quality of business and professional practices in family child care settings. Providers use the information from the BAS to learn about the quality of their practices and take action toward positive change.
- The Program Administration Scale - The Program Administration Scale (PAS) is a valid and reliable instrument designed to measure the leadership and management practices of early childhood programs. The PAS provides valuable information to directors about the quality of their administrative practices and can be used as a springboard for program improvement efforts.

Effective Date: 10/01/2018

7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures

The Lead Agency collects the scores of all of the Environment Rating Scales and measure

progress of STAR Level 3, 4, and 5 programs within a determined time period. Programs must achieve a certain score within the Environment Rating Scales in order to advance or maintain levels from STAR 3 and up. The number of programs receiving STAR 3, 4, and 5 will be a measure toward achieving the quality of child care.

Scores collected by Pyramid Model coaches as well as the Lead Agency for TPOT and TPITOS will be a measure of progress within a determined time period.

Effective Date: 10/01/2018

7.9 Accreditation Support

7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?

Effective Date: 10/01/2018

- Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

NAEYC and NAFCC scholarships are available through ECP for all licensed child care providers in Montana until funding is depleted.

- Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

- Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

Focused on child care centers

Describe:

Focused on family child care homes

Describe:

No, but the state/territory is in the accreditation development phase

Focused on child care centers

Describe:

Focused on family child care homes

Describe:

No, the state/territory has no plans for accreditation development

7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

The Lead Agency will use the following criteria to evaluate progress in improving quality of child care programs and services in Montana:

- Number of NAEYC and NAFCC accredited programs that reach a STAR 5 level
- Number of programs accessing and using available funds through the Early Childhood Project accreditation scholarships
- Number of STARS programs accessing and using available funds through the Early Childhood Project accreditation scholarships
- Number of STARS to Quality programs seeking NAEYC and NAFCC accreditation through the accreditation RFP
- Number of new programs NAEYC or NAFCC accredited in Montana (baseline set on October 22, 2015)
- Number of STAR 5 programs in STARS to Quality

7.10 Program Standards

7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children

Directors and teachers in STARS to Quality programs must complete additional trainings related to health and safety, above and beyond the required training for Child Care Licensing. These trainings are: Food Safety Course, Oral Health, and Medication Administration II. Montana Project LAUNCH (Linking Actions for Unmet Needs in Children's Health) is funded by a federal grant received by DPHHS in September 2014. The goal is to engage Montana's early childhood partners to improve systems and access to mental health services for young children and families in our rural state while piloting evidence-based practices in Gallatin and Park Counties. LAUNCH is administered through the Lead Agency. The grant is focused on a pilot area, supporting Gallatin and Park counties, to improve systems and access to mental health services for young children and their families. The 5-year grant is in its 4th year of funding. One focus in their grant is to increase access to screening, assessment, and referral to appropriate services for young children and their families. STARS to Quality programs at STAR 2 and above must apply to participate in the Child and Adult Care Food Program (CACFP). If they are not eligible to participate, they must meet additional criteria. STARS to Quality programs receiving ECERS-R, ITERS-R, or FCCERS-R assessments are assessed on their meal service and food provided. Programs at STAR 3 must participate in Family Style meal service within their program and indicate how they do this when submitting for a STAR level. The Lead Agency partners with the Chronic Disease Bureau/Nutrition and Physical Activity program on a grant to provide training called I Am Moving; I am Learning which focuses on physical activity in child care and programs participating in STARS to Quality, STARS Preschool, and the MT Preschool Development Grant are given priority to attend the training.

7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures

I Am Moving; I Am Learning training evaluation criteria includes: number of participants, the type of programs participating, role types of participants, number of participants completing training, and the number of STARS and non-STARS programs participating. STARS to Quality trainings will continue to be available to providers in Montana whether or not they are participating in STARS to Quality and data collected and evaluated includes: number of STARS providers signing up for trainings, number of STARS providers completing training, role types of providers signing up for and completing training.

Effective Date: 10/01/2018

7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).

A basic three-hour Montana Early Learning Standards (MELS) course is required for STARS to Quality program staff and is available on-line. This course was developed to ensure MELS is integrated into the QRIS system and can be utilized to support the state's progress in improving quality overall. Additionally, course approval requires training sponsors to identify specific MELS domains and subdomains that are addressed in the course. This information is included on the Statewide Training Calendar posting of the event. Child Care Resource &

Referral agencies provide individualized technical assistance upon request. The Early Childhood Project is also available for support as trainings are being developed (i.e. training approval guide) and track the number of trainings when submitting a course for approval required to Identify the sub-domains in the early learning standards that apply to the course. The Early Childhood Project also tracks the number of participants that take the course and the number of standards exposed to, which region the training is occurring in, and the type of sponsoring agency (i.e. Head Start or a CCR&R). The targeted outcome is all early childhood provider are familiar with the standards and integrate the MELS to their curriculum. Tracking of the domains and subdomains in courses and training are used to evaluate state's progress in improving the quality of child care programs and services.

Effective Date: 10/01/2018

7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:

STARS Preschool supports programs serving 4 and 5-year-old children in a preschool setting. The funding is dedicated to increase access to preschool for 4 and 5-year-olds. Programs will include multiple delivery models, including: Public programs; Private programs; and Mixed-delivery programs through public-private partnerships. Programs will be located both in rural and urban areas of Montana. Program standards will align with Best Beginnings STARS to Quality, Head Start, and Title 10 Chapter 63 public preschool program standards. Montana Project LAUNCH (Linking Actions for Unmet Needs in Children's Health) is funded by a federal grant received by DPHHS in September 2014. The goal is to engage Montana's early childhood partners to improve systems and access to mental health services for young children and families in our rural state while piloting evidence-based practices in Gallatin and Park Counties.

The Montana early care and education community has new resources available. Two videos

were created in partnership with Bal Swan Children's Center, the Pyramid Model Consortium, The Montana Head Start Collaboration Office within DPHHS, and the Montana Early Childhood Project. They show a typical day in a toddler program and a preschool program using the Pyramid Model to fidelity. These videos were developed to highlight evidence-based teaching practices as demonstrated by a high fidelity Pyramid Model implementation site. Additionally, there are resource guides and table of contents to allow for ease of use.

The Great Beginnings, Great Families Conference is an annual conference that strives to improve health outcomes and family support systems by increasing the efficacy of maternal, early childhood and youth programs and professionals in Montana. Applications for continuing education credits are be submitted.

The Montana Preschool Development Grant (MPDG) hosts an annual Summer Institute. This event is open for MPDG program staff, as well as kindergarten teachers and principals in the MPDG communities. The purpose of the MPDG is to build, develop, and expand high-quality preschool programs so that more children from low and moderate income families enter ready to succeed in kindergarten and in life. The Summer Institute provides a week-long venue for MPDG program staff to receive professional learning opportunities in the five distinct areas: Leadership, Instruction, Assessment, Child Guidance, Learning Environments, Family & Community Engagement.

Effective Date: 10/01/2018

8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls,

program integrity and accountability apply to:

-- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF

-- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

-- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities

-- Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:

Effective Date: 10/01/2018

Train on policy manual

Describe:

Montana provides training on child care subsidy policy found in the Child Care Policy Manual and the Administrative Rules of Montana. Montana has an internal Procedure Handbook that is used by eligibility staff working with child care subsidy. Eligibility staff are located in seven Child Care Resource and Referral (CCR&R) regions throughout Montana. To ensure eligibility staff have been informed and trained the same on policy, the department has monthly phone calls with eligibility supervisors. During the monthly phone calls, policy and procedure are discussed in detail. For example, revisions to policy and procedure and identified errors in Supervisor Reviews or Improper Payment Initiative (error rate) cases are discussed. Montana seeks feedback from eligibility staff on policy and procedure during the monthly calls and through email. Montana provides training on specific policy and procedure topics to all eligibility staff through internet webinars and in person trainings.

Train on policy change notices

Describe:

Montana provides training on revisions to child care subsidy policy after a final policy revision notice becomes effective through internet webinars and in person trainings.

Ongoing monitoring and assessment of policy implementation

Describe:

During non-federal reporting year, Montana continues monthly Improper Payment (error rate) reviews. Also, Montana does a review of submitted regional supervisor reviews quarterly.

Other

Describe:

Monthly eligibility cases are selected by Montana for a second level review by the regional CCR&Religibility supervisor. These supervisor reviews mirror the Improper Payment (error rate) Process.

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

Effective Date: 10/01/2018

Verifying and processing billing records to ensure timely payments to providers

Describe:

ECSB ensures timely payments are made to providers through regular Supervisor reviews. A report is created by the ECSB Fiscal Analyst to monitor fund balances throughout the year.

Fiscal oversight of grants and contracts

Describe:

A report is created and submitted to the ECSB Fiscal Analyst every time payments are

made from the data system. This report is compared to the fund balance report to ensure appropriate funds are available.

Tracking systems to ensure reasonable and allowable costs

Describe:

All costs and contracts are tracked in the CCUBS system. Monthly tracking reports are generated, from this CCUBS data, by Fiscal Analyst and reviewed with program managers. Federal Reports are reviewed by the ECSB Fiscal Analyst as well as the Business and Financial Services Division prior to being submitted.

Other

Describe:

- ECSB and Child Care Licensing: An MOU between the Early Childhood Services Bureau (ECSB) and the Child Care Licensing (CCL) Program outlines the assurances by both parties. This MOU is renewed annually and indicates all areas for which monitoring should occur as well as the dollar amount agreed upon to carry out the tasks. ECSB meet bi-weekly to discuss and review CCDF project requirements and activities.
- ECSB and CCR&R The ECSB contracts with each CCR&R agency to carry out CCDF activities through a Service Delivery Agreement (SDA). The SDA outlines all tasks in three areas: Provider Services, Family Services, and STARS to Quality. The ECSB meets with the CCR&R Directors on a regular basis throughout the year to provide support and technical assistance. Each contract and area is monitored using a developed tool that collects data on completed tasks throughout the contract year. Provider Services (which includes STARS to Quality) is monitored separately from Family Services to decrease burden on the agencies and maintain integrity.
- ECSB and the Montana Early Childhood Project: The contract between Early Childhood Services Bureau and Early Childhood Project outlines tasks in the Scope of Work. The contract and scope of work is updated annually. Monitoring happens in a variety of methods. Regular phone calls take place between leadership of both agencies to discuss status of work. In addition, ECSB and ECP meet quarterly to discuss strategies for implementation and communication regarding Scope of Work activities and projects.
- All contracts receive an annual Risk Management Assessment (RMA) from the Contract Liaison. The RMA criteria consists of three categories:

Low Risk, Medium Risk, and High Risk. They are defined as follows:

- Low Risk: Excellent history, no findings, experienced, *small contract, proven performance. May choose to rely on the A-133 or AUP audit, other monitors, desk reviews, short on-site, and closeout. *Contracts \$100,000 and less would not require

on-site monitoring.

- Medium Risk: Less than excellent, some past findings, new grantee, large grant, some unknowns. May choose to use all of the above and add extended on-site with larger samples. Ongoing training and technical assistance will be provided.
- High-Risk: Poor performer, financial instability, prior findings, major staff changes, problems identified by other monitors.

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:

Effective Date: 10/01/2018

Conduct a risk assessment of policies and procedures

Describe:

Establish checks and balances to ensure program integrity

Describe:

The data system requires dual approval for all contracts and for any subsidy payments over 10% of authorized amount.

Use supervisory reviews to ensure accuracy in eligibility determination

Describe:

Eligibility Supervisors conduct reviews of 10% of the cases, monthly. ECSB determines which cases are reviewed.

Other

Describe:

8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review

process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

Effective Date: 10/01/2018

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

- Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, 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)).

Describe

- Run system reports that flag errors (include types).

Describe:

- Review enrollment documents and attendance or billing records

Describe:

A monthly invoice for a selected child, submitted by a child care provider, is reviewed as part of the error-rate review process. Reviewing monthly invoices aids in the identification and prevention of fraud and intentional program violations because it requires a review of actual attendance and the authorized hours of care for a child. This comparison may identify a situation where inaccurate billing is occurring with a child care provider or a required change reporting was not reported by a parent.

- Conduct supervisory staff reviews or quality assurance reviews.

Describe:

Monthly eligibility cases are selected by Montana for a second level review by the regional Child Care Resource and Referral (CCR&R eligibility supervisors. These supervisor reviews mirror the error-rate review process. Monthly supervisor reviews aid in the identification and prevention of fraud and intentional program violations because it allows for a review of more eligibility cases where potential fraud can be identified.

Audit provider records.

Describe:

During the investigative process of a program, review of provider records occurs. Records reviewed include sign-in/sign-out sheets, invoices, and authorization plans.

Train staff on policy and/or audits.

Describe:

When either a payment or an administrative error is identified during the error-rate review process, the regional CCR&Religibility supervisor is required to train all regional eligibility staff on the applicable policy and procedure. This aids in the identification and prevention of fraud and intentional program violations because the eligibility staff can apply the understanding of policy and procedure to identify similar situations in eligibility cases they work on.

Other

Describe:

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.

Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

Run system reports that flag errors (include types).

Describe:

When Administrative errors are discovered during the Administrative Review and Fair Hearing Process, all data entered in the data system are reviewed for accuracy. An error in processing an eligibility case may cause an unintentional program violation.

Review enrollment documents and attendance or billing records

Describe:

During the error-rate review process, eligibility documentation and monthly invoices are reviewed for data entered into the data system. An error identified in data entry will be corrected in the data system.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

During monthly supervisor reviews, eligibility documentation and monthly invoices are reviewed for data entered into the data system. An error identified in data entry will be corrected in the data system.

Audit provider records.

Describe:

During the investigative process of a program, review of provider records occurs. Records reviewed include sign-in/sign-out sheets, invoices, and authorization plans.

Train staff on policy and/or audits.

Describe:

Child Care Resource and Referral (CCR&R agencies use a standard case note template that is used for every entry into the data system. This allows a second review by the eligibility staff of actions taken. An error identified in data entry will be corrected in the data system.

Other

Describe:

During Federal non-reporting years, Improper Payment Initiative reviews are conducted monthly by ECSB staff.

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.

- Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security

Administration, PARIS).

Describe:

Run system reports that flag errors (include types).

Describe:

When Administrative errors are discovered during the Administrative Review and Fair Hearing Process, all data entered in the data system are reviewed for accuracy. An error in processing an eligibility case may cause an unintentional program violation.

Review enrollment documents and attendance or billing records

Describe:

During the error-rate review process, eligibility documentation and monthly invoices are reviewed for data entered into the data system. An error identified in data entry will be corrected in the data system.

Conduct supervisory staff reviews or quality assurance reviews.

Describe:

When an agency error is identified through monthly supervisor reviews, the error is corrected for the case. Also, the regional CCR&R supervisor reviews the policy and procedure applicable to the error with all eligibility staff.

Audit provider records.

Describe:

Train staff on policy and/or audits.

Describe:

When an agency error is identified through an eligibility case review, the error is corrected for the case. Also, the regional CCR&R supervisor reviews the policy and procedure applicable to the error with all eligibility staff.

Other

Describe:

The Child Care Under the Big Sky (CCUBS) data system is used to determine eligibility cases. The CCUBS data system has built in restrictions, which limits agency

errors with the use of alerts and functioning for determining eligibility and payments.

8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

Effective Date: 10/01/2018

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

ESCB policy does not pursue repayment under \$100.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

The Business and Financial Services Division (BFSD) is part of the Department of Public Health and Human Services (DPHHS). When an improper payment is determined, the Early Childhood Services Bureau (ESCB) works with BFSD to establish an accounts receivable for the improper payment. BFSD manages the payments and recovery of the improper payment.

- Recover through repayment plans.

Describe:

ECSB and BFSD can work with a parent or provider with an established improper payment to determine a repayment plan to help with the recovery of the improper payment.

- Reduce payments in subsequent months.

Describe:

- Recover through state/territory tax intercepts.

Describe:

When a parent or child care provider is in default of an improper payment, BFSD will establish a tax intercept. This ensures an improper payment can be recovered if a parent or child care provider receives a state tax refund.

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

- Other

Describe:

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

ESCB policy does not pursue repayment under \$100.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

When an improper payment is determined, the Early Childhood Services Bureau (ESCB) works with BFSD to establish an accounts receivable for the improper payment. BFSD manages the payments and recovery of the improper payment.

Recover through repayment plans.

Describe:

ECSB and BFSD can work with a parent or provider with an established improper payment to determine a repayment plan to help with the recovery of the improper payment.

Reduce payments in subsequent months.

Describe:

Recover through state/territory tax intercepts.

Describe:

When a parent or child care provider is in default of an improper payment, BFSD will establish a tax intercept. This ensures an improper payment can be recovered if a parent or child care provider receives a state tax refund.

Recover through other means.

Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

Other

Describe:

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

ESCB policy does not pursue repayment under \$100.

- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

Describe:

- Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

- Reduce payments in subsequent months.

Describe:

- Recover through state/territory tax intercepts.

Describe:

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

- Other

Describe:

If an investigation determines an improper payment is due to an error caused by ECSB or a CCR&Ragency, ECSB does not pursue repayment.

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

Effective Date: 10/01/2018

- Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe:

In its Administrative Rule, Montana can issue an Intentional Program Violation (IPV) whether an overpayment is issued or not. Clients can be disqualified from participation after the second IPV is issued. Clients can appeal the IPV through the Fair Hearing Process.

- Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

Describe:

In its Administrative Rule, Montana can issue an Intentional Program Violation (IPV) whether an overpayment is issued or not. Providers can be disqualified from participation after the second IPV is issued. Providers can appeal the IPV through the Fair Hearing Process.

- Prosecute criminally.

Describe:

- Other.

Describe:

Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories

will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

Appendix A.1: In-state criminal registry or repository checks with fingerprints requirements for existing staff. (See related question at 5.4.1 (b))

Describe the provision from which the state/territory seeks relief.

Fingerprint-based checks for existing staff

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received,

the existing workforce would be unable to provide care to children in Montana.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Name-based background checks, including Motor Vehicle checks, are currently conducted on all staff, including existing staff. The Lead Agency currently conducts in-state name-based criminal background checks prior to providing unsupervised care, and every year, thereafter. Montana will continue these name-based checks until the new rule is implemented.

Appendix A.2: In-state sex offender registry requirements for existing staff. (See related question at 5.4.2 (b))

[Describe the provision from which the state/territory seeks relief.](#)

In-state sex offender registry requirements for existing staff in licensed, regulated, or registered programs

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received, the existing workforce would be unable to provide care to children in Montana.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Montana's name-based criminal background check system, CJIN, displays any results of an individual that is a registered sexual or violent offender. While Montana is not currently conducting a search of existing staff through the Sexual and Violent Offender Registry, Montana is still receiving results through the name-based criminal history checks.

Appendix A.4: National FBI fingerprint search requirements for existing staff. (See related question at 5.4.4 (b))

[Describe the provision from which the state/territory seeks relief.](#)

National FBI fingerprint search requirements for existing staff that have not lived outside

of Montana within the last 5 years.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received, the majority of the existing workforce would be unable to provide care to children in Montana.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Montana currently conducts FBI checks for individuals that have lived outside of Montana in the last 5 years. Name-based background checks, including Motor Vehicle checks, are currently conducted on all staff, including existing staff. The Lead Agency currently conducts in-state name-based criminal background checks prior to providing unsupervised care, and every year, thereafter. Montana will continue these name-based checks until the new rule is implemented.

[Appendix A.5: National Crime Information Center \(NCIC\) National Sex Offender Registry \(NSOR\) search requirements for new or prospective staff. \(See related question at 5.4.5 \(a\)\)](#)

[Describe the provision from which the state/territory seeks relief.](#)

National Sex Offender Registry (NSOR) search requirements for new or prospective staff.

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received, the existing workforce would be unable to provide care to children in Montana.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Montana's name-based criminal background check system, CJIN, displays any results of an individual that is a registered sexual or violent offender. While Montana is not currently conducting a search of existing staff through the Sexual and Violent Offender Registry, Montana is still receiving results through the name-based criminal history checks.

Appendix A.6: National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff. (See related question at 5.4.5 (b))

Describe the provision from which the state/territory seeks relief.

National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) search requirements for existing staff

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received, the existing workforce would be unable to provide care to children in Montana.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Montana's name-based criminal background check system, CJIN, displays any results of an individual that is a registered sexual or violent offender. While Montana is not currently conducting a search of existing staff through the Sexual and Violent Offender Registry, Montana is still receiving results through the name-based criminal history checks.

Appendix A.7: Interstate criminal registry or repository check for new or prospective staff. (See related question at 5.4.6 (a))

Describe the provision from which the state/territory seeks relief.


Interstate criminal registry or repository check for any state that new staff that have lived in during the last 5 years.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables new staff to continue working under direct supervision while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited new staff from providing care under direct supervision until their background results were received, the majority of the new workforce would be unable to provide care to children in Montana.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Montana currently conducts FBI checks for individuals that have lived outside of Montana in the last 5 years. Name-based background checks, including Motor Vehicle checks, are currently conducted on all staff, including new staff. The Lead Agency currently conducts in-state name-based criminal background checks prior to providing unsupervised care, and every year, thereafter. Montana will continue these name-based checks until the new rule is implemented.

 **Appendix A.8: Interstate criminal registry or repository check for existing staff. (See related question at 5.4.6 (b))**

Describe the provision from which the state/territory seeks relief.

Interstate criminal registry or repository check for any state that new staff that have lived in during the last 5 years.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received, the majority of the existing workforce would be unable to provide care to children in Montana.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Montana currently conducts FBI checks for individuals that have lived outside of Montana in the last 5 years. Name-based background checks, including Motor Vehicle checks, are

currently conducted on all staff, including existing staff. The Lead Agency currently conducts in-state name-based criminal background checks prior to providing unsupervised care, and every year, thereafter. Montana will continue these name-based checks until the new rule is implemented.

Appendix A.9: Interstate sex offender registry or repository check for new or prospective staff. (See related question at 5.4.7 (a))

Describe the provision from which the state/territory seeks relief.

Interstate sex offender registry or repository check for new or prospective staff.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables new staff to be hired while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited hiring staff until their background results were received, the existing workforce would be unable to provide care to children in Montana.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Montana's name-based criminal background check system, CJIN, displays any results of an individual that is a registered sexual or violent offender. While Montana is not currently conducting a search of existing staff through the Sexual and Violent Offender Registry, Montana is still receiving results through the name-based criminal history checks.

Appendix A.10: Interstate sex offender registry or repository check for existing staff. (See related question at 5.4.7 (b))

Describe the provision from which the state/territory seeks relief.

Interstate sex offender registry or repository check for existing staff

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received,

the existing workforce would be unable to provide care to children in Montana.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

Montana's name-based criminal background check system, CJIN, displays any results of an individual that is a registered sexual or violent offender. While Montana is not currently conducting a search of existing staff through the Sexual and Violent Offender Registry, Montana is still receiving results through the name-based criminal history checks.

Appendix A.11: Interstate child abuse and neglect registry check for new or prospective staff. (See related question at 5.4.8 (a))

[Describe the provision from which the state/territory seeks relief.](#)

Interstate child abuse and neglect registry check for new or prospective staff

[Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children](#)

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received, the existing workforce would be unable to provide care to children in Montana.

[Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.](#)

The Child Care Licensing program conducts a check of the Montana Child Abuse registry and conducts FBI checks for all staff that have lived outside of the state within the past 5 years. Additionally, Montana's name-based criminal background check system, CJIN, displays any results of an individual that is a registered sexual or violent offender.

Appendix A.12: Interstate child abuse and neglect registry check for existing staff. (See related question at 5.4.8 (b))

[Describe the provision from which the state/territory seeks relief.](#)

Interstate child abuse and neglect registry check for existing staff

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables existing staff to continue working while the Lead Agency writes and implements a new rule. If the rule was put in place right now that prohibited existing staff from providing care until their background results were received, the existing workforce would be unable to provide care to children in Montana.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

The Child Care Licensing program conducts a check of the Montana Child Abuse registry and conducts FBI checks for all staff that have lived outside of the state within the past 5 years. Additionally, Montana's name-based criminal background check system, CJIN, displays any results of an individual that is a registered sexual or violent offender.

 **Appendix A. 13: New staff hired to work provisionally until background checks are completed. (See related question at 5.4.9)**

Describe the provision from which the state/territory seeks relief.

A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides.

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

The waiver of the provision enables new staff to work while the Lead Agency works to establish systems that will increase the time it takes to receive FBI fingerprint results. FBI results currently take a minimum of 4-6 weeks to be received in the state of Montana. The Lead Agency has ordered 8 Livescan fingerprint systems to be installed in CCR&R agencies across the state to help expedite this process. If the rule was put in place right now that prohibited new staff from providing care until their FBI background results were received, many existing facilities would be unable to provide care to children in Montana.

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

Current rules require that new staff are directly supervised at all times by approved staff pending satisfactory background check results. No new staff member has unsupervised access to children until all backgrounds results are completed.