Child Care and Development Fund (CCDF) Plan

for

State/Territory Nevada

FFY 2019–2021

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/1/2018 to 9/30/2021, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

The Child Care and Development Fund (CCDF) program provides resources to state, territory, and tribal grantees that enable low-income parents to work or pursue education and training so that they can better support their families while at the same time promoting the learning and development of their children. The CCDF program also provides funding to enhance the quality of child care for all children. On November 19, 2014, the Child Care and Development Block Grant (CCDBG) Act of 2014 was signed into law (Pub. L. 113-186). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for state and territory grantees. In September 2016, the final rule was released. The final rule makes regulatory changes to the CCDF program based on the CCDBG Act of 2014. These changes strengthen requirements to protect the health and safety of children in child care; help parents make informed consumer choices and access information to support child development; provide equal access to stable, child care for low-income children; and enhance the quality of child care and the early childhood workforce.

The Plan is the primary mechanism that the Administration for Children and Families (ACF) uses to determine state and territory compliance with the requirements of the law and rule. The Preprint provides a tool for states and territories to describe to ACF their progress on the following sections:

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

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

CCDF Plan Submission

States and territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions on the ACF-118 site could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities. (See http://www.section508.gov/ for more information.)
In responding to questions, states and territories are asked to provide brief, specific summaries and/or bullet points only with specific language that responds to the question. Do not use tables or copy and paste charts, add attachments, or paste manuals into the Plan. All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing oversight and monitoring efforts.
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. Coordination with child care resource and referral (CCR&R) systems are explained, and Lead Agencies outline the work they have done on their disaster preparedness and response plans.

1.1 CCDF Leadership

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

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

Identify the Lead Agency or joint 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)).

a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Nevada Department of Health and Human Services
Street Address: 4126 Technology Way, Suite 100
City: Carson City
State: NV
ZIP Code: 89706-2009
Web Address for Lead Agency: http://dhhs.nv.gov/

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Richard
Lead Agency Official Last Name: Whitley
Title: Director
Phone Number: 775-684-4000
Email Address: nvdhhs@dhhs.nv.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.

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: **Christell**
CCDF Administrator Last Name: **Askew**
Title of the CCDF Administrator: **Chief, Child Care and Development Program**

Address for the CCDF Administrator (if different from the Lead Agency):
Street Address: **1470 College Parkway**
City: **Carson City**
State: **NV**
ZIP Code: **89706**
Phone Number: **775-684-0630**
Email Address: **caskew@dwss.nv.gov**

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

CCDF Co-Administrator First Name: 
CCDF Co-Administrator Last Name: 
Title of the CCDF Co-Administrator: 

Address of the CCDF Co-Administrator (if different from the Lead Agency):
Street Address: 
City: 
State: 
ZIP Code: 
Phone Number: 
Email Address: 

Description of the role of the Co-Administrator: 

### 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.

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

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 other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices): Providers who are participants in the Nevada QRIS receive additional incentive dollars per child when their program achieves a quality star rating of 2 or more.

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.

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.

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.

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.

1.2.3 What processes will the Lead Agency use to monitor administrative and implementation responsibilities performed by agencies other than the Lead Agency as indicated above, such as through written agreements or monitoring and auditing processes (98.11(a)(3))? Describe those processes and any indicators or measures used to assess performance. The Lead Agency is contracted with the community-based resource and referral agencies by a Sub-Grant which requires oversight and monitoring by the Lead Agency. The Northern sub-grantee is The Children’s Cabinet and the Southern sub-grantee is The Las Vegas Urban League. All contractors are required to adhere to the program policies reflected in the Nevada Child Care Policy Manual and oversight is accomplished through a variety of auditing processes including Management Evaluations, to review contractor cases and ensure the policy manual is adhered to, and Quality Control reviews, conducted by Quality Control staff, to ensure adherence to Federal policy.

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)). 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. Information and statistical data regarding Nevada’s child care systems can be found at the following public websites: dwss.nv.gov/childcare, dpbh.nv.gov, childrenscabinet.org, and childcarelv.org/en/. Should a public agency, including public agencies from other states, request information about Nevada’s child care systems directly via email or phone, the representative...
would verify the purpose for the request, and provide the requestor with information as needed.

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)). Certify by describing the Lead Agency’s policies related to the use and disclosure of confidential and personally-identifiable information. The Lead Agency utilizes its application for assistance to provide parents with its policies related to the use and disclosure of confidential and personally-identifiable information. Page 6 under Authorization, 3rd para informs client “By signing below, you authorize the release of information about your household members to the Child Care and Development Program including, wage information, information made confidential by law or otherwise, and patient information privileged under NRS 49.225 or any other provision of law or otherwise. You release the holder of such information from liability, if any, resulting from disclosure of the required information.” Also, all staff who have access to any state system, including NCCS, must sign the following security forms: DHHS Acceptable Use Agreement, DWSS Confidentiality Agreement, Confidentiality of Federal Info, and IRS Employee Awareness Training Cert. before they are given access. Also, all staff complete annual system security training for DWSS to ensure data systems are protected.

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)(I)(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.
a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments. CCDP staff and sub-grantees have been working on the current State Plan through work groups, a variety of committees and councils, and direct contact with stakeholders statewide for input and feedback on the plan. This includes county school district staff and other local government staff, and the information received from stakeholders was used in the drafting of the plan. The draft was then presented to the Southern Nevada Early Childhood Advisory Committee, which includes staff from the Southern Nevada Health District, other local government staff, and the Statewide Early Childhood Advisory Committee for additional input. Stakeholders included parents, licensed, non-licensed, and license-exempt providers, professionals within county and state government, tribal government staff, and a variety of for profit and non-profit organizations.

b) Describe how the Lead Agency consulted with the State Advisory Council. The Lead Agency Chief is on the board of the Nevada Early Childhood Advisory Council and meets with the Council regularly. The Nevada Early Childhood Council has historically been an integral part of the development of the State Plan and will continue to be.

c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. The Lead Agency has worked directly with the Tribal Child Care Administrator and her team to help one another access resources, and to share information and provide guidance for one another as we develop each of our plans.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan. The Children’s Cabinet, The Las Vegas Urban League, Nevada Department of Education, Nevada Department of Public and Behavioral Health, The Nevada Registry, the Statewide Early Childhood Advisory Committee, the Southern Nevada Health District, The Southern Nevada Early Childhood Advisory Committee, Nevada Technical Assistance Center on Social Emotional Intervention (TACSEI), Inter-Tribal Council of Nevada, McKinney Vento, ECAC, Child Care Aware, Children’s Advocacy Alliance, Nevada Division of Child and Family Services.

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:

a) Date(s) of notice of a public hearing. 05/11/2018 Reminder: Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include specific website links if used to provide notice. The upcoming workshop and public hearing dates for the CCDP State Plan were announced at the Early Childhood Advisory Committee’s meeting on 05/04/2018 during public comment. Notification public hearing, in addition to a draft of the CCDP State Plan, were published on the DWSS Public Information Site on 05/11/18.

c) Date(s) of the public hearing(s). 06/27/2018 Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan.
Hearing site(s) or method(s), including how geographic regions of the state or territory were addressed. The public hearing was conducted in Carson City, NV with available viewing in rural and Southern Nevada.

a) How the content of the Plan was made available to the public in advance of the public hearing(s). A draft of the State Plan was available for viewing on the DWSS website and copies of the plan draft were provided to the public at the Southern Nevada ECAC and Statewide ECAC meetings, as well as emailed to interested parties upon request.

a) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Information provided by the public was received at the southern Nevada ECAC and statewide ECAC meetings, the public hearing and through direct contact with program staff. This information was reviewed and integrated into the plan as appropriate.

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)).

a) Provide the website link to where the plan, any plan amendments, and/or waivers are available.

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 Chief of the Nevada Child Care and Development Program sits on the Statewide Early Childhood Advisory Committee for Nevada and each local ECAC provides information to stakeholders through the Statewide and local ECACs.

- Working with child care resource and referral agencies. Describe: The two CCR&R agencies, The Children's Cabinet and The Las Vegas Urban League, are made aware of all programmatic changes and are consulted when the State Plan is developed and implemented.

- Providing translation in other languages. Describe:

- Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe:

- Providing notification to stakeholders (e.g., provider groups, parent groups). Describe: Any major program changes are done through the State's Public Hearing process, which includes public notification of meetings.

- Other. Describe: Making the draft plan available on both the Lead Agency’s website, www.dwss.nv.gov, and The Children’s Cabinet website, www.childrenscabinet.org

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 entities required by law or rule, along with a list of optional partners that Lead
Agenies 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; linking comprehensive services to children
in child care settings; or developing the supply of quality care for vulnerable populations. Check
who you will coordinate with and describe all that apply.

☐ (REQUIRED) Appropriate representatives of the general purpose local government, which
include counties, municipalities, or townships/towns. Describe the coordination goals
and process: CCDP coordinates with Out-of-School recreation programs which are
operated or sponsored by local government to provide child care so that parents can work
outside of regular school hours.

☐ (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: The CCDP regularly meets with the Early Childhood
Advisory Council and actively participates in the policy development surrounding the
accessibility of child care, as well as the continuity of care, including wraparound services
for Head Start programs, special needs children, families experiencing homelessness,
foster care, and CPS households.

☐ Does the Lead Agency have official representation and a decision-making role in the
State Advisory Council (or similar coordinating body)?
  ☐ No
  ☐ Yes

☐ (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: The
CCDP consults with the Inter-Tribal Council of Nevada (which represents 25 recognized
tribes in Nevada) to assist one another with the development of policies and procedures.
  ☐ 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 Section 619 for preschool).
Describe the coordination goals and process:
(REQUIRED) State/territory office/director for Head Start state collaboration. Describe the coordination goals and process: CCDP coordinates services with Head Start agencies to extend services to a full day for CCDP children.

(REQUIRED) State agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals and process: CCDP is collaborating with the Division of Public and Behavioral Health to identify families with child care barriers that are suffering from substance abuse.

(REQUIRED) State agency responsible for employment services/workforce development. Describe the coordination goals and process:

(REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK). Describe the coordination goals and process: The agency responsible for public education including State prekindergarten is the Nevada Department of Education, Office of Early Learning and Development (OELD). In addition, this office is also responsible for the Child Care & Development Funds Quality Initiatives and the Head Start State Collaboration Office. DWSS works closely with OELD to improve quality of early childhood programs, increase access for families, and provide support to child care providers. OELD initiatives include: an aligned screening tool across child care programs, pre-k, and kindergarten entry; Student unique identifiers for children on the child care subsidy program; Preschool Development Grant (PDG) seats in child care facilities for four-year-olds whose families are below the 200% fpl; Birth to 3rd Grade (B-3) initiative that includes a pilot project and professional learning specific to smoothing transitions both across the grades (horizontally) and within grades (vertically); and aligned standards across child care and pre-k programs.

(REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process: The agency responsible for Child Care Licensing is the Division of Public and Behavioral Health (DPBH). CCDP works closely with DPBH to ensure that policy is aligned between CCDP and Child Care Licensing.

(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:

(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: McKinney-Vento and CCDP are coordinating efforts to better understand how our providers interpret the meaning of “homeless” as we develop policy and procedures to ensure homeless families are prioritized in Nevada.

(REQUIRED) State/territory agency responsible for employment services and workforce development. Describe the coordination goals and process:

(REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process: The TANF program in Nevada is housed within the same Agency as CCDP. CCDP coordinates with TANF in order to link services to our most needy families in Nevada.
(REQUIRED) Agency responsible for Medicaid and the state Children’s Health Insurance Program. Describe the coordination goals and process: The agency responsible for Medicaid and Children’s Health Insurance is The Division of Healthcare, Financing, and Policy. CCDP has reached out to DHCFP regarding the development of a new consumer friendly webpage that would assist families in finding healthcare options, in addition to other needs, including child care in Nevada.

(REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process: CCDP is coordinating efforts with TASCEI in order to provide resources for providers and parents.

(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: CCDP coordinates with the Nevada Registry and our CCR&R subgrantees to link families and providers to resources for training and development.

(REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process: CCDP coordinates with Nevada’s Out-of-School providers in attaining compliance with CCDF regulations through individually focused TA and support.

(REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process: The agency responsible for emergency management in Nevada is the Division of Emergency Management (DEM). CCDP has reached out to DEM to consult and coordinate efforts to streamline our Disaster Plan and to help one another develop our policy and processes for emergencies in Nevada.

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:
- State/territory institutions for higher education, including community colleges. Describe:
- Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe:
- State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe:
- Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment. Describe:
- State/territory agency responsible for child welfare. Describe:
- State/territory liaison for military child care programs. Describe:
- Provider groups or associations. Describe:
- Parent groups or organizations. Describe:
- Other. Describe:

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 funding for CCDF child care services with funding for any of the required programs listed 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, homeless children, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for 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 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 the 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))?  
☐ No.  
☐ Yes. If yes, describe at a minimum:  
  a) How you define “combine” Funds are provided through contracts to Head Start/Early Had Start agencies to extend services to a full day for CCDP children:  
  b) Which funds you will combine CCDF and Head Start 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 Extending services to full day  
  d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level? Program level  
  e) How are the funds tracked and method of oversight Funds are provided through contracts, subgrants, memorandums of understanding, etc. Contracts and eligibility and service provisions are reviewed through State audit processes. 

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 child care program (98.55(f)).

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)? Check all that apply.

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

- □ 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.
  - o If checked, identify the source of funds: Department of Education, Division of Public and Behavioral Health, Boys & Girls Clubs of Mason Valley, Boys & Girls Clubs of Southern Nevada, Boys & Girls Clubs of Truckee Meadows, Boys & Girls Clubs of Western Nevada, City of Reno and United Way.
  - o If known, identify the estimated amount of public funds that the Lead Agency will receive: $15,192,907
- □ 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): 22%
  - o 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: In 2014 the Nevada
Department of Education received a Federal Preschool Development Grant (PDG). This has allowed the state to expand preschool seats in licensed child care centers and begin to align standards.

- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: $3,338,875

Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents: The PDG funding is for full-day seats (a minimum of 25 hours per week) and CCDF funds are used for extended hours to meet the needs of working families. Funds for extended hours are also used by Head Start grantees statewide.

☐ 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)).
The Division of Child and Family Services (DCFS) works with licensed child care facilities to provide training and mental health consultants to support child care providers caring for children with potential social-emotional needs.

The Nevada Division of Public and Behavioral Health (DPBH) provides child care licensing to ensure basic health and safety of licensed child care providers. In addition, Nevada Early Intervention Services provides training and TA to licensed child care facilities on the topic of inclusion for children with special needs.

In July of 2014 the Office of Early Care and Education was transferred from the Nevada Division of Welfare and Supportive Services (which houses the CCDP), to the Nevada Department of Education (NDE). This was done as an opportunity to promote, facilitate, and further the goals and objectives for improving early childhood learning and development in Nevada. NDE Staff oversee the State’s CCDF quality activities in order to align activities with the State’s P-12 education goals.

The Children's Cabinet provides professional development opportunities to both early childhood and out of school providers in an effort to improve the skills and knowledge of the workforce and develop a system of continual quality improvement. Community outreach efforts are provided in order to increase the general public's understanding and demand for high quality early learning opportunities for children. The Early Childhood Support Network provides modeling of high quality teacher interactions with children, and at the same time substitute teachers help licensed child care providers maintain ratios during teacher turnover and absences. Parent engagement supports and encourages parents to advocate for their children by giving them information and skills in supporting them as their children's first and most important teacher.

The Las Vegas urban League provides child care resource and referral consultations services to parents to find high quality child care. Family, Friend, and Neighbor case management and home visitation increase the quality of child care offered by non-licensed providers. Outreach is provided to newly licensed child care providers to increase the supply of providers registered on the subsidy programs.

Wraparound services are provided to a variety of before and after school programs to provide full day services and access to services for school age children.

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

☐ No. The state/territory does not fund a CCR&R system and has no plans to establish one.
☐ Yes. The state/territory funds a CCR&R system. If yes, describe the following:

What services are provided through the CCR&R system? Both entities in Nevada who specialize in CCR&R services provide consultations and associated services to parents to find high quality child care. Family, Friend, and Neighbor case management and home visitation increase the quality of child care offered by non-licensed providers. Outreach is provided to newly licensed child care providers to increase the supply of
providers registered on the subsidy programs. Services include: staff and business sites to provide services; parent/family assistance related to child care options; providing information to Spanish speaking customers; coordinating services for children with disabilities; referring parents to child care services; updating child care provider information on a regular basis; developing and maintain referral guides for families; providing assistance to child care providers including training and counseling, outreach to providers, improving the quality of child care settings, assisting providers in developing and/or revising business plans, and recruiting providers to become subsidy providers including working with children with disabilities; providing technical assistance to family, friend, and neighbor providers; coordinating training for providers; assisting providers in maintaining licensing requirements; maintaining case files for providers; educating consumers related to child care resource and referral and quality child care; collecting, analyzing, and disseminating child care related data.

c) How the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated. CCR&R services in Nevada are provided by two community entities: The Children’s Cabinet, who services the Northern and rural areas of the state, and The Las Vegas Urban League, who provides these services to Southern Nevada.

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 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: The Lead Agency is working directly with the DWSS Staff Specialist, both of Nevada’s resource and referral agencies, as well as the Early Childhood Advisory Council in developing the foundations of the NV Child Care Disaster Plan. An initial meeting held on 05/09/18 in Carson City began an examination of processes and policies that are already in place, as well as identifying our next steps, with special focus on the license-
exempt (FFN) and out of school time providers. Navigating the regional differences between Northern, Rural, and Southern NV also requires the assistance of the Nevada Department of Emergency Management, who specializes in the coordination of statewide emergency response efforts, to ensure the plan also fits into the bigger picture of disaster planning in Nevada. The Department of Public and Behavioral Health is scheduled to meet with the Lead Agency on 05/18/18 to discuss the policies and procedures in place regarding licensed providers in Nevada.

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: The Nevada plan indicates the ability for families to seek alternative care for their children in the event of an emergency, with provisions in place to ensure subsidy funding is not interrupted by issuing an adjusted certificate. Should electronic certificate issuance be interrupted, both resource and referral agencies have the ability to issue a hard copy certificate. The Lead Agency is developing a technical assistance toolkit for our license-exempt (FFN) providers, which will provide resources and guidance within arms reach for a variety of potential emergency scenarios. This is being created to establish a statewide streamlined process for this provider type, which will allow resource and referral agencies to have similar processes in training their staff on how to be prepared to assist. Additionally, policy manual enhancements, procedural documents, and updated service agreements are being drafted by the Lead Agency with the input and feedback of the CCR&R agencies in order to develop a foundationally-sound and complete implementation of these procedures.

1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services: The Department of Public and Behavioral Health maintains the requirements and coordination of post-disaster recovery of child care services for licensed providers in Nevada. The Lead Agency will gain a clear understanding of these procedures upon meeting with the personnel responsible within DPBH Child Care Licensing on 05/18/18. The CCR&R agencies are working with the Lead Agency to enhance the procedures for license-exempt (FFN) and out of school time providers in the event of an emergency, as discussed in 1.8.2. The applicable CCR&R staff will conduct a post-emergency visit to complete a health and safety checklist to ensure the provider is prepared to resume with normal business activities.

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: The Department of Public and Behavioral Health maintains the requirements and coordination of post-disaster recovery of child care services for licensed providers in Nevada. The Lead Agency will gain a clear understanding of these procedures upon meeting with the personnel responsible within DPBH Child Care Licensing on 05/18/18. The Lead Agency is developing a technical assistance toolkit for our license-exempt (FFN) providers, which will provide resources and guidance within arms reach for a variety of potential emergency
scenarios. This streamlined process guide for this provider type will include communication requirements with CCR&R, evacuation information, medical and age-specific information, shelter-in-place guidance, as well as continuity of operations procedures. This toolkit will enable resource and referral staff to easily anticipate the next steps in a given emergency situation. Additionally, policy manual enhancements, procedural documents, and updated service agreements are being drafted by the Lead Agency with the input and feedback of the CCR&R agencies in order to develop a foundationally-sound and complete implementation of these procedures.

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): The Department of Public and Behavioral Health maintains the requirements for training for licensed providers in Nevada, all of whom are required to complete training in Emergency Preparedness and Response Planning (Resulting from a Natural or Man Made Event). Per the CCDP Policy Manual, license-exempt (FFN) providers are required to take this training as well, also on an annual basis. Additional clarifications for license-exempt out of school time providers are also being published in the Manual.

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

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 Describe how the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language: The Lead Agency provides outreach and services in the following formats: applications for assistance provided in other languages (including application document, brochures, and provider notices); informational materials in non-English languages; bilingual case workers and access to translators; acceptance of applications at various local community-based locations; bilingual outreach staff; and, partnerships with community-based organizations.

Describe how the Lead Agency or partners provide outreach and services to eligible families with a person(s) with a disability: Information and applications for subsidy assistance is available at all Division of Welfare and Supportive Services offices, which serve individuals and families seeking Medicaid, Temporary Assistance for Needy Families, and Supplemental Nutrition Assistance Program benefits. DWSS offices are strategically located in areas with low-income populations or in proximity to shoes areas with public transportation available. Information is also made available through partner agencies such as the Division of Child and Family Services and Nevada Early Intervention Services. The Division of Welfare and Supportive Services offers information to the general public regarding applying for services and benefits offered. The Children's Cabinet and the Las Vegas Urban League also offer general information about child care subsidies through billboards, radio, newsletters, social media, community outreach events, and other public service announcement opportunities. The application for child care subsidy is also available in all Children's Cabinet and Las Vegas Urban League offices, as well as their websites. Outreach is also conducted done through radio and television slots, website information, and information brochures that are provided to families. All program offices are accessible for persons with disabilities, and program staff provide assistance to all clients as necessary.
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: The CCDP sub-grants with DPBH Child Care Licensing, with whom members of the public are able to file a complaint by various means of communication, such as: telephone, fax, website, e-mail, regular mail, news media, etc.

2.2.2 Describe the Lead Agency’s process for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring: Each complaint is assessed by a qualified person trained to determine whether the allegations present a situation that may cause substantial harm, minimal harm or no harm (but conditions are not desirable). Each allegation is further assessed to determine whether there is a regulation or law related to the allegation. Based on these assessments complaints are generally given priorities as follows:

- Immediate Response = imminent harm (same day response required)
- Priority 1 = not imminent, but possible risk involved (1-3 day response time)
- Priority 2 = no observed or perceived danger (10-15 day response time)
- Priority 3 = NAC or NRS violations noted (30 day response)

Some other factors considered during prioritization include: the age of the complaint (if the event occurred in the distant past – for example, more than one year prior to filing the complaint, the priority may be adjusted accordingly), the relevance of the information given to regulatory violations (if the information is difficult to align with regulations, the priority may be adjusted accordingly).

2.2.3 Describe the Lead Agency’s process for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring: Each complaint is assessed by a qualified person trained to determine whether the allegations present a situation that may cause substantial harm, minimal harm or no harm (but conditions are not desirable). Each allegation is further assessed to determine whether there is a regulation or law related to the allegation. Based on these assessments complaints are generally given priorities as follows:

- Immediate Response = imminent harm (same day response required)
Priority 1 = not imminent, but possible risk involved (1-3 day response time)

Priority 2 = no observed or perceived danger (10-15 day response time)

Priority 3 = NAC or NRS violations noted (30 day response)

Some other factors considered during prioritization include: the age of the complaint (if the event occurred in the distant past – for example, more than one year prior to filing the complainant, the priority may be adjusted accordingly), the relevance of the information given to regulatory violations (if the information is difficult to align with regulations, the priority may be adjusted accordingly).

2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints: All incoming complaints are inputted for intake, assigned an Inspector (as necessary), report generated for review of findings and pend supervisor closure. This complaint system is tracked and monitored by licensing Manager and Supervisor through the licensing system which details out the intake, priority, assessment, findings and approved closure. All completed complaints (Substantiated or UnSubstantiated) can be viewed by the public online.

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: All completed complaint investigations and inspections can be found online for the public to view at any time. There are some individuals who don’t have access to a computer and they are able to request hard copies through the program which will then be provided.

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. Please note that any changes made to the
web links provided below in this section after the CCDF Plan is approved are considered substantial changes and CCDF Plan Amendments will be required.

2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible: The Children's Cabinet is the Nevada "landing page" for Consumer Ed. Nevada Child Care Licensing and Washoe County Child Care Licensing have both developed search engine tools which allow access to provider-specific information about health and safety, licensing and regulatory requirements. Additionally, each website provides information on inspections for individual providers.

Links to these Licensing websites are found on the Children's Cabinet website: http://www.childrenscabinet.org/child-care-resources/for-providers/starting-a-license-child-care/

Provider-specific information can be found directly if you look at NV State Licensing http://dpbh.nv.gov/Reg/ChildCare/Child_Care_Licensing_-_Home/ and click on "Inspection/Complaint" and Washoe County CC Licensing https://www.washoecounty.us/hsa/childrens_services/child_care_and_early_childhood_services/index.php and click on "Child Care Inspection Web Portal".

All sites link to one another.

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)): The website is available in Spanish and English.

2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities: The consumer website has the ability to be zoomed for viewing the pages in larger print, and as the updated landing page is completed, additional ADA requirements will be implemented for optimal user experiences.

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.

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:

Links to these Licensing websites are found on the Children's Cabinet website: http://www.childrenscabinet.org/child-care-resources/for-providers/starting-a-license-child-care/

Provider-specific information can be found directly if you look at NV State Licensing website:
Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2: Provider-specific information can be found directly if you look at NV State Licensing website: http://dpbh.nv.gov/Reg/ChildCare/Child_Care_Licensing - Home/ and click on "Inspection/Complaint" and Washoe County CC Licensing’s website: https://www.washoecounty.us/hsa/childrens_services/child_care_and_early_childhood_services/index.php and click on "Child Care Inspection Web Portal".

Individuals or entities providing child care services to less than 5 children, are exempt from NV licensing requirements.

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 should be searchable by ZIP Code.

Provide the website link to the searchable list of child care providers:
State of Nevada Child Care Licensing: www.findchildcarenv.gov

c) Which providers are included in the searchable list of child care providers:

☐ Licensed CCDF providers
☐ Licensed non-CCDF providers

d) Describe what information is available in the search results. Specify if the information is different for different types of providers: The name of the provider, the QRIS star rating (if applicable), the address/location of the provider, provider capacity, philosophies/notes from the director/provider, licensing information/records, hours of operation, and contact information.
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.

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
- Other. Describe: ___________

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

- Licensed CCDF providers. Describe the quality information: ORIS
- Licensed non-CCDF providers. Describe the quality information: ORIS
- 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.

Certify by describing:

a) How monitoring and inspection reports are in plain language. Include a website link to a sample monitoring report, or if reports are not in plain language, describe how plain-language summaries are used to meet the regulatory requirements. Include a link to a sample report and summary. The inspection reports for licensed providers are provided in plain language.

a) How monitoring and inspection reports and/or their plain-language summaries prominently display any health and safety violations, including any fatalities or serious injuries. Nevada Child Care Licensing provides aggregate information about the number of
deaths, number of serious injuries as defined by the State and the number of incidences of substantiated child abuse in child care settings for the State. A link to the Nevada State Child Care Licensing website is found on the Children’s Cabinet website:
http://www.childrenscabinet.org/child-care-resources/for-providers/starting-a-licensechild-care/ To link directly to the aggregate information on the Nevada Child Care Licensing page go to: "Capacity, Complaint, Fatality Data" and click on 17 Bi-Annual Child Care Report.

b) The process for correcting inaccuracies in reports. If a mistake is made by DPBH, the report is reviewed for accuracy and if indeed, a mistake was made, it is noted within the report and then corrected.

c) The process for providers to appeal the findings in the reports, including the time requirements.

NAC 432A.195 Notice of violation; administrative fines; appeals. (NRS 432A.077, 432A.190)

1. If an inspection of a facility conducted pursuant to NRS 432A.180 reveals that the person who operates the facility is in violation of any provision of this chapter or chapter 432A of NRS, the Division may issue a notice of violation. The notice of violation may be issued in the form of a statement of deficiencies or a report of an inspection of the facility. The notice of violation must:
   (a) Be in writing and describe with particularity the nature of the violation;
   (b) Include the time permitted to correct the violation;
   (c) Inform the person who operates the facility of the provisions of subsections 2, 3 and 4; and
   (d) Be sent to the person who operates the facility by electronic mail or by United States mail to the last known address of the person who operates the facility.

2. The Division may impose an administrative fine in the amount of $100 for:
   (a) The failure to satisfy the requirements of this chapter or chapter 432A of NRS relating to information on the background and personal history of all persons required to be investigated during the licensing period of the facility.
   (b) The failure to correct any violation of a provision of this chapter or chapter 432A of NRS within the time frame set forth in the notice of violation. A fine may be imposed for each day a facility is in noncompliance with the notice of violation.
   (c) The failure to satisfy the applicable requirements for the ratio of caregivers to children pursuant to this chapter or chapter 432A of NRS two or more times during the licensing period of the facility.
   (d) The failure to satisfy the requirements of this chapter or chapter 432A of NRS for training of the caregivers in the facility by the end of the licensing period of the facility.
   (e) The failure to submit a completed application for reissuance before the expiration of the license of the facility, in addition to any renewal or late fee set forth in NAC 432A.200 and 432A.220.

3. The Division may impose an administrative fine of $200 in addition to any administrative fine prescribed by subsection 2 if the violation of a provision of this chapter or chapter 432A of NRS resulted in an injury to any person.
4. A licensee upon whom the Division imposes an administrative fine pursuant to this section may appeal that action pursuant to the procedures set forth in NAC 439.300 to 439.395, inclusive.

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.

NRS 432A.200 Denial, suspension or revocation of license: Notice; hearing.

1. When the Division denies, suspends or revokes a license for a child care facility, the Division shall afford reasonable notice to all parties by certified mail, which notice must contain the legal authority, jurisdiction and reasons for the action taken.

2. The aggrieved person may file notice of appeal with the Administrator of the Division or a designee of the Administrator within 10 calendar days after receipt of notice of action of the Division.

3. Within 20 calendar days after the receipt of the notice of appeal, the Administrator of the Division or a designee of the Administrator shall hold a hearing.

4. Notice of the hearing must be given no less than 5 days before the date set for the hearing.

d) How many years of reports that the state/territory posts on its website, if any, beyond the required minimum of 3 years, where available (98.33(a)(4)(iv)). DPBH recently began using the website for documenting these. It has the last 2 years of documentations, and anything older is kept in hard copy form and can be requested as it is all public record.

e) The policy for removing reports after a certain amount of time has passed (e.g., after 7 years). Documents are retained for 6 years, as required.

f) 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: __________

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. The information on serious injuries and deaths should be organized by category of care and licensing status, however, Lead Agencies are not required to breakdown the instances of substantiated child abuse by category of care and licensing status.

Certify by providing:

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. State of Nevada Department of Public and Behavioral Health Child Care Licensing receives all reports and subsequently aggregates the data for sharing with associated entities and the public.

The definition of “substantiated child abuse” used by the Lead Agency for this requirement.

1. “Abuse or neglect of a child” means, except as otherwise provided in subsection 2:
(a) Physical or mental injury of a nonaccidental nature;
(b) Sexual abuse or sexual exploitation; or
(c) Negligent treatment or maltreatment, as set forth in NRS 432B.140, of a child caused or allowed by a person responsible for the welfare of the child under circumstances which indicate that the child’s health or welfare is harmed or threatened with harm.

b) The definition of “serious injury” used by the Lead Agency for this requirement.

Mental injury defined. “Mental injury” means an injury to the intellectual or psychological capacity or the emotional condition of a child as evidenced by an observable and substantial impairment of the ability of the child to function within a normal range of performance or behavior.

Physical injury defined. “Physical injury” includes, without limitation:
1. A sprain or dislocation;
2. Damage to cartilage;
3. A fracture of a bone or the skull;
4. An intracranial hemorrhage or injury to another internal organ;
5. A burn or scalding;
6. A cut, laceration, puncture or bite;
7. Permanent or temporary disfigurement; or
8. Permanent or temporary loss or impairment of a part or organ of the body.

The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.
http://dpbh.nv.gov/Reg/ChildCare/dta/Providers/NVChildCareCapacity/

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: Direct links to The Children’s Cabinet and The Las Vegas Urban League websites are made available from the Lead Agency’s website, as well as the State of NV Child Care Licensing website. https://dwss.nv.gov/Care/Childcare/

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: Direct links to The Children’s Cabinet and The Las Vegas Urban League websites are made available from the Lead Agency’s website, as well as the State of NV Child Care Licensing website. https://dwss.nv.gov/Care/Childcare/

2.3.11 Provide the website link to the Lead Agency’s consumer education website.
www.Childrenscabinet.org
2.4 National Website and Hotline

The CCDBG Act of 2014 required the U.S. Department of Health and Human Services to establish a national website at ChildCare.gov, which includes a ZIP Code-based search of available child care providers, provider-specific information about the quality of care and health and safety compliance, referrals to local CCR&R organizations, and information about child care subsidy programs and other financial supports available to families (658L(b)). Lead Agencies must also provide a description of how they will respond to complaints submitted through the national website and hotline (98.16(hh)).

2.4.1 Describe how the Lead Agency responds to complaints submitted through the national website and hotline regarding both licensed and license-exempt child care providers. These complaints are inputted by DPBH intake staff (Administrative Assistant II) be readied for assessment and prioritization assignment by a Supervisor then investigated by a Surveyor.

2.4.2 Identify the designee responsible for receiving and responding to complaints submitted through the national website and hotline. DPBH Child Care Licensing has an Administrative Assistant II who is responsible to input them. They are then followed up on by a Supervisor and a Surveyor.

2.5 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 2.5.1 through 2.5.4, certify by describing:

2.5.1 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 Nevada CCDP subgrants with the Children’s Cabinet in northern and rural Nevada and the Las Vegas Urban League in southern Nevada to provide CRR services throughout the State. Services include staff and business sites to provide services; parent/family assistance related to child care options; providing information to Spanish speaking customers; coordinating services for children with disabilities; referring parents to child care services; updating child care provider information on a regular basis; developing and maintain referral guides for families; providing assistance to child care providers including training and counseling, outreach to providers, improving the quality of child care settings, assisting providers in developing and/or revising business plans, and recruiting providers to become subsidy providers including working with
children with disabilities; providing technical assistance to family, friend, and neighbor providers; coordinating training for providers; assisting providers in maintaining licensing requirements; maintaining case files for providers; educating consumers related to child care resource and referral and quality child care; collecting, analyzing, and disseminating child care related data.

2.5.2 The partnerships formed to make information about the availability of child care services available to families. The Lead Agency relies on The Children’s Cabinet and The Las Vegas Urban League for providing these services.

2.5.3 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 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.

- Temporary Assistance for Needy Families program: The CCDP in Nevada is co-located with the State’s TANF agency. Parents are informed of potential eligibility for other programs at the time of intake, redetermination, and as needs are identified. The Division of Welfare and Supportive Services website offers information about applying for a variety of programs. The Children’s Cabinet and Las Vegas Urban League also offer information about these services through their individual websites and through direct interaction with families.

- Head Start and Early Head Start programs: The Nevada CCDP contracts with nearly all Head Start and Early Head Start programs in Nevada. Each of these agencies is provided education of the programs available and provides referral information as necessary.

- Low Income Home Energy Assistance Program (LIHEAP): The CCDP in Nevada is co-located with the State’s LIHEAP program. Information about each available program is provided to all clients/applicants.

- Supplemental Nutrition Assistance Programs (SNAP) Program: The CCDP in Nevada is co-located with the State’s SNAP agency. Information about each available program is provided to all clients/applicants.

- Women, Infants, and Children Program (WIC) program: In southern Nevada CCDP activities are contracted through the Las Vegas Urban League, which also provides WIC services. These agencies work together to provide necessary information and referrals.

- Child and Adult Care Food Program (CACFP): Child Care staff and Child Care Resource and Referral staff provide information and referrals to parents.

- Medicaid and Children’s Health Insurance Program (CHIP): The CCDP in Nevada is co-located with the State’s Medicaid eligibility agency. Information about each available program is provided to all clients/applicants.
2.5.4 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. The Children’s Cabinet and the Las Vegas Urban League provide parents with the Ages and Stages questionnaire and the Ages and Stages Social Emotional questionnaire in order to allow parents to screen for developmental delays. Additionally, parents will be given Nevada’s Milestone Moments booklet, developed by Nevada’s Learn the Signs, Act Early program. These materials are available in English and Spanish. Nevada Department of Education, licensed, non-licensed, and licensed exempt child care providers, Nevada Early Intervention Services, Nevada Home Visitation program, Child Care Resource and Referral agencies partner to provide written materials, direct communication with families, and website based resources.

2.5.5 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 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. The Children’s Cabinet and the Las Vegas Urban League provide parents with the Ages and Stages questionnaire and the Ages and Stages Social Emotional questionnaire in order to allow parents to screen for developmental delays. Additionally, parents will be given Nevada’s Milestone Moments booklet, developed by Nevada’s Learn the Signs, Act Early program. The Ages and Stages Social Emotional questionnaire is provided to parents upon request, and a consumer education “bundle” that includes this information is provided to all CCRR and subsidy clients. Nevada PEP provides TACSEI information, training and materials to families from birth to early childhood programs to encourage families to partner with professionals that provide services to their children. Using the Backpack series and Positive Solutions for Families, we are helping parents and professionals recognize the value of teaching children social emotional skills. Helping parents form relationships with private and public schools provides a basis for stronger parent engagement practices that can sustain families involvement in their children’s education. These materials are available in English and Spanish. Nevada Department of Education, licensed, non-licensed, and licensed exempt child care providers, Nevada Early Intervention Services, Nevada Home Visitation program, Child Care Resource and Referral agencies partner to provide written materials, direct communication with families, and website based resources.
2.5.6 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 policy for the prevention of suspension and expulsion has been drafted and is available for viewing at: http://nvecac.com/wp-content/uploads/2016/10/Policy-Statement-on-Pre-k-Expulsion-Suspension-FINAL-Adopted.pdf. The CCDP intends to mirror and implement this policy in 09/2018.

2.6 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 Section 619 and Part C of the Individuals with Disabilities Education Act (IDEA), 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)).

2.6.1 Certify by describing:

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)). Information on developmental screenings is provided to all parents upon registering for the Subsidy program. Parents are given the age-appropriate ASQ-3 and ASQ:SE2 upon registration. An online parent portal to complete the ASQ-3 and ASQ:SE2 is also provided. Parents can choose to sign up and be notified to complete their children’s screening. This online screening portal link can also be used by the general public. Additionally, parents for all children in FFN settings will have the option to have their children screened by R&R staff using the BRIGANCE Screener III at the initial and annual health and safety visits. Children in licensed child care settings must have assessments at least twice a year per Nevada’s Administrative Code. The BRIGANCE screener can fulfill this requirement. Children in district PreK classrooms must have two BRIGANCE screenings, one conducted in the Fall and one in the Spring, of each school year. All BRIGANCE screening information is entered in the Online Management System (OMS) and transferred by Nevada Department of Education staff to Infinite Campus, Nevada’s K-12 Student Information System which has an early childhood district for children birth through kindergarten entry.

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.). Screening results are shared with parents along with activities to support their child’s development by R&R staff for FFN BRIGANCE screens and ASQ3 and ASQ:SE2 screens completed on paper or through the portal. If a child does not meet screening cut offs and the screening identifies red flags, the family is referred to Nevada Early Intervention Services (Part C) for children ages birth through age 2 and the school district’s child find office for children ages 3 and up.

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. Information on developmental screenings is provided to all parents upon registering for the Subsidy program by the child care resource and referral agency. Information includes What is the ASQ3 Screening and What is the ASQ:SE2 screening informational handouts. In addition to the informational handout, parents are given the age-appropriate ASQ-3 and ASQ:SE2 screening instrument upon registration and are asked to return it to their case manager. Optionally, an online parent portal link to complete the ASQ-3 and ASQ:SE2 is provided. If parents choose to use the online portal, the system will notify parents on when their child has reached the age for the next developmental screening tool. They will be able to complete online.

Parents who choose FFN care will also receive information on the BRIGANCE Screener III during their FFN enrollment appointment. At this enrollment appointment, parents can choose to have their child screened in the FFN provider environment using the BRIGANCE tool.

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. Families are given access to screening upon enrollment in Subsidy. R&R case managers follow-up with parents regarding their child’s screening results along with developmentally appropriate activities to support their child’s development. Licensed providers on QRIS can use their grant to pay for the BRIGANCE Screener III kits. The Online Management System is currently paid for by the Nevada Department of Education and the online parent portal for the ASQ is paid for through CCDF Subsidy.

e) How child care providers receive this information through training and professional development. Training for licensed providers on the BRIGANCE Screener III is provided by the Nevada Department of Education. Additionally, child care providers that are TACSEI implementation or model demonstration sites receveing training and technical assistance to use the ASQ-3 and ASQ:SE2 as this is a requirement of the TACSEI program.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings. The Children’s Cabinet Resource and Referral Policy and Procedures Manual is the current source for this information. The CCDP Policy Manual update will be forthcoming.
2.7 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.

2.7.1 Certify by describing:

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

The Children's Cabinet is the Nevada "landing page" for Consumer Education. Nevada Child Care Licensing and Washoe County Child Care Licensing have both developed search engine tools which allow access to provider-specific information about health and safety, licensing and regulatory requirements. Additionally, each website provides information on inspections for individual providers.

Links to these Licensing websites are found on the Children's Cabinet website:
http://www.childrenscabinet.org/child-care-resources/for-providers/starting-a-license-child-care/

Provider-specific information can be found directly if you look at NV State Licensing:
http://dpbh.nv.gov/Reg/ChildCare/Child_Care_Licensing_-_Home/  and click on "Inspection/Complaint"

and Washoe County CC Licensing:
https://www.washoecounty.us/hsa/childrens_services/child_care_and_early_childhood_services/index.php  and click on "Child Care Inspection Web Portal".

All sites link to one another.

The Children's Cabinet and Las Vegas Urban League offer child care resource and referral consultation services in the family's native language by phone, in person, and through an online referral system. Child care licensing entities, Washoe County and the State of Nevada, offer lists of licensed child care providers. The State’s Quality Rating and Improvement System website offers lists of licensed child care centers along with their participation and star rating. The Children's Cabinet and Las Vegas Urban League also offer general information about child care resource and referral services through billboards, radio, newsletters, social media, community outreach events, and other public service announcement opportunities.

b) What is included in the statement, including when the consumer statement is provided to families.
During the application and eligibility determination processes, Nevada disseminates the following information to parents:
- Information about the availability of the full diversity of child care services that will promote informed child care choices
- Availability of child care assistance, Quality of child care providers (if available), Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children’s Health Insurance Program (SCHIP) for which families may also qualify
- Individuals with Disabilities Education Act (IDEA) programs and services, research and best practices in child development, including social and emotional development, early childhood development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity).
- State policies regarding the social-emotional behavioral health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children, in early childhood programs receiving child care assistance (CCDF).

Note: This information is also available to the inquiring general public without application for services.

c) Provide a link to a sample consumer statement or a description if a link is not available. In addition to the website information provided to parents, they are also provided with the following tools in hard copy:

Quality Care Brochure:

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, 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

a) The CCDF program serves children from 0 (weeks/months/years) to 13 years (through age 12). *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 ages 13 and older but below age 19 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 or mental incapacity: A special need is defined as a physical or mental condition, which severely limits the child’s ability to care for himself/herself, or an emotional condition that places the child or others at risk.

c) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are under court supervision (658P(3); 658E(c)(3)(B))?  
   - No
   - Yes, and the upper age is ______ (may not equal or exceed age 19).

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

“residing with”: Living with a custodial parent or guardian in the domicile of the custodial parent or guardian who provides primary care and support of the child.

“in loco parentis”: Adult(s) standing in as parent(s) for children who are in need of supervision or protective services such as a blood relative with custody or a person with court ordered custody, and for families who are in transition.

3.1.2 Eligibility criteria based on reason for care

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”: An activity in which the parent(s) receive monetary compensation for their services and there is no minimum number of hours required; or a participant in the State TANF NEON work program. There is no minimum hour requirement.

“Job training”: Parent(s) attending vocational school, GED preparation, or an employment preparation program.
“Education”: Parent(s) attending an accredited community college, college, or university program. Enrollment and attendance of six or more credit semester hours is required.

“Attending job training or education” (e.g. number of hours, travel time):
“Job Training” eligibility requires 20 or more hours per week, and the client must not receive compensation for their services. If the individual receives compensation, they must be served under the “Employed” eligibility category. Travel time is allowed for clients to commute to and from the training sessions; however, it must not exceed 60 minutes each way.

“Education” eligibility requires attendance in six or more credit semester hours. Travel time is allowed for students to commute to and from class/school; however, it must not exceed 60 minutes each way.

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, define the job-search time limit, keeping in mind a minimum of 3 months is required to be provided when a parent experiences a non-temporary loss or cessation of eligible activity:

When funding allows “Job Search” to be an open Purpose of Care category for initial eligibility, Child Care Job Search is limited to four weeks in a calendar year (January through December) for these qualifying households. Note: The job search start date can start on any day of the week. The seven day (week) period will be determined by the start date entered in the computer system. Child Care staff must work with the client to determine what start date best suits the needs of the client. Certificates can be issued up to a maximum of four weeks each time the household is eligible for job search. To allow flexibility during the job search period the Certificate schedule should allow for a maximum five full-time-days with a varied schedule. Note: The four week time period is tracked in the computer system. If the provider bills and is paid for at least one day of service during an approved week.

When a household is eligible under the “Working” Purpose of Care category, and experiences a non-temporary loss or cessation of employment, they are informed that their current certificate will continue for the remainder of the original 12-months of eligibility.

c) Does the Lead Agency consider engaging in a job search or seeking employment an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination (must provide a minimum of 3 months)?

☐ No.
☐ Yes. If yes, describe the policy or procedure. Child Care Program Manual Section 430 – Job Search states: “Job search is defined as an activity that demonstrates an individual is
actively seeking potential employment. Job search purpose of care is subject to available funding and may not be offered. The CCDP Chief makes this determination and notifies the Child Care offices.” Nevada has not had “Job Search” as an available Purpose of Care category at neither the initial eligibility determination, nor at the 12-month redetermination for several years.

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”:

  Services for children who have been abused or neglected or who are at risk of abuse or neglect as determined by a professional in the field, or by a court.

  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.

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

  - No
  - Yes

  ii. 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

  iii. 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

a) How does the Lead Agency define “income” for the purposes of eligibility at the point of determination? Any type of payment which is a gain or benefit to the household.

b) Provide the CCDF income eligibility limits in the table below. 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).

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
### Table 1: Income Eligibility Limits

<table>
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<th>Family Size</th>
<th>100% of SMI (%/Month)</th>
<th>85% of SMI (%/Month)</th>
<th>(IF APPLICABLE) ($/Month) Maximum “Entry” Income Level if Lower Than 85% of Current SMI</th>
<th>(IF APPLICABLE) (% of SMI) Income Level if Lower Than 85% of Current SMI</th>
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<td>3</td>
<td>4,855.27</td>
<td>4,126.98</td>
<td>2,212.00</td>
<td>46%</td>
</tr>
<tr>
<td>4</td>
<td>5,780.08</td>
<td>4,913.07</td>
<td>2,665.00</td>
<td>46%</td>
</tr>
<tr>
<td>5</td>
<td>6,704.90</td>
<td>5,699.16</td>
<td>3,118.00</td>
<td>47%</td>
</tr>
</tbody>
</table>

**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](https://www.acf.hhs.gov/ocs/resource/liheap-im2017-03).


**e)** What was the date that these eligibility limits in column (c) became effective? **10/01/2017**

**f)** Provide the citation or link, if available, for the income eligibility limits. [https://dwss.nv.gov/pdf/ChildCareManual.pdf](https://dwss.nv.gov/pdf/ChildCareManual.pdf)

### 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)).

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

*Question #9 on the Nevada Application for Child Care Assistance states: “Does your household have assets with a value over one million dollars ($1,000,000)?” The applicant checks the box for Yes or No, and also identifies who is claiming the assets and what the type of asset is.*

**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, please identify the policy or procedure:

  Child Care Program Manual Section 104 – Special Consideration Requests
  [https://dwss.nv.gov/uploadedFiles/dwssnvgov/content/Care/Child%20Care%20Manual%20Mar%202018.pdf](https://dwss.nv.gov/uploadedFiles/dwssnvgov/content/Care/Child%20Care%20Manual%20Mar%202018.pdf)

### 3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).
Per Child Care Program Manual Section 103, in the event of identified program funding shortfalls, otherwise eligible households will be prioritized in the following order: NEON, CPS/Foster, Special Needs At-Risk, Homeless At-Risk, Special Needs Discretionary, Homeless Discretionary, and Discretionary.

Children with special needs are given first priority when a wait list is in effect. Child care can take place within the child’s home, under special consideration.

Families at the lowest income levels on the State’s income sliding fee scale are given priority when funding is limited. Waiting lists are imposed at higher income levels first.

Families in the TANF/NEON program are served with reduced eligibility verification requirements and within a seven day application processing standard. Co-payments are waived for TANF/NEON households.

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)). Examples include partnering with Head Start, prekindergarten, or other high-quality programs to create a package of arrangements that accommodates parent’s work schedules; providing more intensive case management for families with children with multiple risk factors; and including in the eligibility determination process a question about whether a child has an Individualized Education Program or Individual Family Service Plan. Describe the Lead Agency’s policies and procedures that take into consideration children’s development and learning and that promote continuity of care when authorizing child care services.

The CCDP in Nevada has contracts in place with the Nevada Department of Education, multiple Head Start and Early Head Start agencies, school-based before and after school programs, and a variety of public and private preschool programs. Interaction with these programs occurs through an ongoing dialog and opportunities to coordinate and improve the quality of services are addressed as identified. With the implementation of the CCDF Reauthorization, the Nevada CCDP is working with these agencies to expand continuity of care through linking comprehensive systems to children and developing the quality of care for vulnerable populations.

The Children’s Cabinet and the Las Vegas Urban League provide parents with the “Ages and Stages Questionnaire” and the “Ages and Stages Social Emotional Questionnaire” in order to allow parents to screen for developmental delays. Additionally, parents will be given Nevada’s Milestone Moments booklet, developed by Nevada’s Learn the Signs, Act Early program. These materials are available in English and Spanish.

Per Child Care Program Policy Section 210 – Age: “In order to provide continuity of care, no changes to the household’s eligibility or schedule will be made for a child who turns 13 (or 19 for a child with a special need) during an approved certification period. Assistance must continue for the remainder of the 12 month certification period as long as all countable household income is below the 85% SMI.”
This continuity of care also applies to other potential interruptions in the 12-month eligibility period. Unless a household leaves the state or has income that exceeds 85% SMI, all households will remain eligible for the remainder of their certification period.

3.1.7 Graduated phase-out of assistance.

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.

Lead Agencies that establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out by implementing a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

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)).

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.

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 level at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
☐ The Lead Agency sets the second eligibility threshold at 85 percent of SMI.
• Describe the policies and procedures.
  • Provide the citation for this policy or procedure.

☐ The Lead Agency sets the second eligibility threshold 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 eligibility level for a family of three. □
  • Describe how the second eligibility threshold:
    i. Takes into account the typical household budget of a low-income family: □
    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: □
    iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption: □
    iv. Provide the citation for this policy or procedure: □

b) 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)).

Describe the Lead Agency’s policy related to the fluctuation in earnings requirement, including 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. When calculating a household’s income, factors such as irregular and unpredictable income should be considered, and a best estimate of the household’s annual income should be used to determine eligibility. Using a 30-day history of actual income to determine a best estimate of future income is the
most common budgeting method; however, other methods should be used when they provide a better representation of the household’s 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.

☐ Applicant identity. Describe: Verification of identification is required at initial application. Once identification has been verified, it no longer needs to be requested for subsequent applications. Possible sources of verification are as follows (not all inclusive):

- Birth Certificate
- Driver’s License
- State Identification Card
- Hospital or public health birth record
- Military ID (active, retired, reserve, dependent, etc.)
- U.S. Passport or citizen ID card
- Baptismal record
- Adoption papers or records
- Work or school ID card
- Voter Registration card
- Child Welfare records
- Consular identification card
- Printout of NOMADS MEMB screen
- Any other document providing identifying data such as physical description, photograph or signature

☐ Applicant’s relationship to the child. Describe: Relationship must be established for all members of the child care household to determine the appropriate household size and countable income.

☐ Child’s information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: Verification of birth date, age, identification, citizenship, SSN (barring exception)

☐ Work. Describe: Pay stubs, Letter from employer on company letterhead indicating days and hours of employment, the effective/hire date and signed/dated by the employer. The individual signing the document should be knowledgeable about the employee’s wages, schedule, etc., Employment Verification, Form 2186-WA, The Work Number;

☐ Job training or educational program. Describe: Official class schedule, Other documentation from the school which indicates the start and end date of the course(s)

☐ Family income. Describe: Income is any type of payment which is a gain or benefit to a household. The household’s income is used to determine eligibility and subsidy percentage. Consider the income of any person who is a required member of the household. Current verification of countable income is required at initial application, reapplication, and any time a change in income requires an action to the ongoing case.
Household composition. Describe: The client’s statement of household composition is accepted unless the case manager has reason to question it, whereby verification would then be required. Possible sources of verification of household composition are as follows (not all inclusive): Copy of the lease listing all household members; Statement from non-relative landlord/manager listing all household members; Statement from non-relative friend/neighbor listing all household members; NOMADS printout which lists all household members living in the client’s residence and verifies all household members are currently receiving TANF, SNAP and/or Medicaid.

Applicant residence. Describe: Applicants and eligible household members must be living in Nevada to be eligible for benefits. Verification of current residency is required at each application and any time a change in residence occurs. Possible sources of verification are as follows (not all inclusive):
- Rent/Mortgage receipt listing the client’s name and current physical address
- Current utility statements/receipts (electric, gas, telephone, cable, etc.) as long as the client’s name and current physical address are listed on the document
- Current statement from non-relative landlord not living in the home
- Valid Nevada Driver’s License or Department of Motor Vehicles ID Card with current physical address
- Current employer’s statement or records (e.g. client’s physical address listed on pay stub or Employment Verification form)
- Valid foster parent license
- Current CPS placement letter as long as the placed children are still in the home
- NOMADS printout which lists the current physical address and verifies household members are currently receiving TANF, SNAP, and/or Medicaid.

Exception: For timely reapplications, if the household has not moved since the previous application, the verification of residency used with the previous application may be used as verification for the current application, with the exception of NOMADS verification. For timely reapplications, a new NOMADS printout verifying the client’s address has been verified and is currently receiving a benefit is required.

Other. Describe: Purpose of Care: To be eligible for a child care subsidy, the client and all other required adult household members and minor parents must be in an approved activity or the parent/caretaker is disabled/ incapacitated and unable to care for the child(ren). Custody: Children must be living with the person(s) applying for child care subsidy benefits. If the caretaker is not a parent then the caretaker must be either a legal guardian, a relative of specified degree or a person standing in loco parentis.

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

- Time limit for making eligibility determinations. Describe length of time Policy requires an eligibility decision to be made within thirty (30) calendar days after a completed and signed application is received in the program office. The day after the date the application is received in the program office is the first day of the 30-day period.

- Track and monitor the eligibility determination process
Management Evaluations are completed by DWSS program staff to ensure adherence to timeliness policy. Subgrantees and DWSS Quality Control perform internal audits on individual case files.

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.

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

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

- **“Appropriate child care”**: “Child care chosen by the parent which offers developmentally-appropriate practices meeting the needs of that parent and child.”
- **“Reasonable distance”**: “A parent should not be required to travel more than 60 minutes dropping the child off at the care provider’s location, and 60 minutes picking up their child.”
- **“Unsuitability of informal child care”**: “Informal child care is ‘unsuitable’ if it is not being provided legally or it does not meet basic health and safety standards as outlined in the state child care plan.” “Informal child care is unsuitable if circumstances exist that cause possible abuse, neglect, or harm as outlined in county or state statutes.” “Informal child care is unsuitable if the arrangements do not support the working schedule of a parent, are not affordable, not easily-accessible, or do not meet quality standards as defined by the parent.”
- **“Affordable child care arrangements”**: “Child care not exceeding 10-15% of the parent’s gross 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: ____________________________
d) Provide the citation for the TANF policy or procedure: 
https://dwss.nv.gov/uploadedFiles/dwssnvgov/content/TANF/EP%20Man%20Complete.pdf

- Section A-816.2.

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 Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a) (98.2).

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

a) How does the Lead Agency define “children with special needs” and include a description of how services are prioritized: A special need is defined as a physical or mental condition, which severely limits the child’s ability to care for himself/herself, or an emotional condition that places the child or others at risk. Supervisory/Managerial Child Care staff will determine if a child meets the definition as stated above. Special consideration must be requested to the CCDP DWSS Child Care Chief for those cases where the child’s special needs status is questionable.

b) How does the Lead Agency define “families with very low incomes” and include a description of how services are prioritized: “At-Risk – Subsidy benefits provided to households that have income below 130% of the Federal Poverty Level for their household size.” Families at the lowest income levels on the State’s income sliding fee scale are given priority when funding is limited. Waiting lists are imposed at higher income levels first.

a) Describe how services are prioritized for children experiencing homelessness, as defined by the CCDF: Homeless families are approved for eligibility based on the information provided on the application under a self-sufficiency purpose of care, and subsequently given an additional 90 days to obtain and provide any missing adult and child required documentation. Outreach is provided by CCDP contractors statewide.

b) Describe 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)): Families in the TANF/NEON program are served with reduced eligibility verification requirements and within a seven day application processing standard. Co-payments are waived for TANF/NEON households.

3.2.2 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).
a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained. Households who meet the definition of “homeless” will be allowed up to 90 days to provide verifications that are not readily available or easily obtainable.

a) Describe the procedures to conduct outreach for children experiencing homelessness (as defined by the CCDF) and their families. Outreach is provided by CCDP contractors statewide. This includes meeting with staff at homeless shelters to educate them on the CCDP and provide referral information and direct intervention with clients.

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)).

3.2.3 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 CCDF). Immunization requirements for CCDP can be waived for 90 days and additionally through special consideration to the Child Care Chief. Provide the citation for this policy and procedure. CCDP Policy Manual – Section 131 Verification

- Children who are in foster care. Requests for consideration to waive specific criteria of the CCDP policy may be submitted in writing to the CCDP Chief for review. Documentation, which supports the request, is required. Provide the citation for this policy and procedure. CCDP Policy Manual – Section 104 Special Consideration Requests

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)).

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

- No.
- Yes. Describe:
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; 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; any changes in age, including turning 13 years old during the 12-month eligibility period; and any changes in residency within the state, territory, or tribal service area.

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. Child Care Manual Section 165. Parents are not required to report any temporary changes including temporary job loss or temporary change in participation in a training or education activity until eligibility redetermination, unless the change takes them over 85% of SMI and makes them ineligible for the program. Employed NEON participants transition into the At-Risk program with a 365 day certificate. NEON clients involved in job search activities will be given 90 days under Job Search.

   a) How does the Lead Agency define “temporary change?” The Lead Agency does not allow changes to be made to certificates during the 12-month eligibility period, except those mentioned in CCDP Manual Section 521; therefore, no definition of a “temporary change” exists for CCDF providers. For temporary changes in income (bonuses, etc.) the Policy Manual states “in those instances when a 30-day history does not provide a clear representation of the household’s income, a history of up to 365 days should be evaluated. This includes households with irregular or sporadic income (day labor, on-call, temporary employment services).”

b) Provide the citation for this policy and/or procedure. CCDP Policy Manual - Section 521

Updating Changes

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.

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: _____

   iv. Describe what specific actions/changes trigger the job-search period: _____

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

   vi. Provide the citation for this policy or procedure: _____

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: _____

   ii. Provide the citation for this policy or procedure: _____

☐ A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure: CCDP Policy Manual - Section 521 Updating Changes

☐ 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. An intentional program violation (IPV) is an action by the accused for the purpose of establishing or maintaining program eligibility, or increasing or preventing a reduction in the benefit amount when they: Made a false or misleading oral or written statement, or misrepresent, conceal or withhold information; Committed any act that violates NRS 422A.700 or intentionally violated any rule or regulation established by the DWSS; Made an attempt to obtain, increase or continue child care benefits for themselves or others to which they would otherwise not be entitled; Received child care benefits to which they would otherwise not be entitled; Failed to comply with reporting requirements as set forth in manual sections 100 and 500; Submitted a false document to the Child Care and Development Program Staff and/or DWSS; Altered a Child Care Certificate to receive benefits to which they would not otherwise be entitled to. CCDP Policy Manual - Section 521 Updating Changes

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).

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: The family’s income exceeds 85% of the SMI.
Changes that impact the Lead Agency’s ability to contact the family. Describe: A family moves out of the state.

Changes that impact the Lead Agency’s ability to pay child care providers. Describe:

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
- Other. Describe: Fax

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.

Households are advised of their responsibility to report the changes listed below:
- Household composition;
- Examples: required household member moves in or out, marital status changes, etc.
- Residence and/or mailing address;
- Child care provider;
- Schedule changes;
- A new or increased source of income.

ii. Provide the citation for this policy or procedure. CCDP Policy Manual – Section 511

What to Report

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 in families 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 that information 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.

a) Describe 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. List relevant policy citations. Child Care Manual Section 540. Applications and other required documentation may be submitted in person, by mail, email, or fax. Reapplications for TANF/NEON clients are submitted by DWSS workers directly to child care eligibility workers without requiring additional verification from parents. Eligibility for families participating in wraparound services for Early Head Start and Head Start is only redetermined when the child transitions from Early Head Start to Head Start or when the child ages out of Head Start.

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

- [ ] Mail
- [ ] Email
- [ ] Online forms
- [ ] Fax
- [ ] In-person
- [ ] 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 3.1.4 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.
a) Fill in the chart based on the most populous area of the State (area serving highest number of CCDF children).

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lowest “Entry” Income Level Where Family Is First Charged Co-Pay (Greater Than $0)</td>
<td>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?</td>
<td>The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?</td>
<td>Highest “Entry” Income Level Before a Family Is No Longer Eligible</td>
<td>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?</td>
<td>The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>$1005/mo</td>
<td>5%</td>
<td>3.39%</td>
<td>$2555/mo</td>
<td>80%</td>
<td>21.36%</td>
</tr>
<tr>
<td>2</td>
<td>$1353/mo</td>
<td>5%</td>
<td>2.52%</td>
<td>$3341/mo</td>
<td>80%</td>
<td>16.33%</td>
</tr>
<tr>
<td>3</td>
<td>$1702/mo</td>
<td>5%</td>
<td>2.00%</td>
<td>$4127/mo</td>
<td>80%</td>
<td>13.22%</td>
</tr>
<tr>
<td>4</td>
<td>$2050/mo</td>
<td>5%</td>
<td>1.66%</td>
<td>$4913/mo</td>
<td>80%</td>
<td>11.10%</td>
</tr>
<tr>
<td>5</td>
<td>$2398/mo</td>
<td>5%</td>
<td>1.43%</td>
<td>$5699/mo</td>
<td>80%</td>
<td>9.57%</td>
</tr>
</tbody>
</table>

*NV utilized an Infant in Clark County, attending a licensed center for 22 FT days/month. $31/day x 22 FT days = $682. The co-pay percentage is then taken from this figure.

b) What is the effective date of the sliding-fee scale(s)? 10/01/2017
c) Provide the link to the sliding-fee scale:
Child Care Program Manual Section 170 – Sliding Fee Scale
https://dwss.nv.gov/uploadedFiles/dwssnvgov/content/Care/Child%20Care%20Manual%20Mar%202018.pdf
d) 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.

☐ 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)).
No.
Yes, check and describe those additional factors below.
Number of hours the child is in care.
Describe: Co-payments are calculated by the method outlined in the following example:
Family with a 2 y.o. child who is income eligible for 90% subsidy, a 10% copay. Family arranges enrollment @ a center in Clark County for 23 days per month.
23 FT x $28 = $644 x 90% = $579.60
$644 - $579.60 = $64.40 Co-Pay

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.
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. The poverty level used by the Lead Agency for a family size of 3 is $______.
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. _____.
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. _____.

3.4.5 Does the Lead Agency 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:
a) 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? Due to limited child care capacity in the state of Nevada. If we were to stop allowing this practice, we would not have enough providers. We are in the process of enrolling all of our child care providers into the QRIS, which we are hoping will remedy this issue.

b) 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 CCDP is aware that the majority of providers who receive CCDF dollars do charge rates that are in excess of their reimbursement rate; however, as more providers enroll in QRIS, we anticipate the amount of centers charging in excess of the current reimbursement rate will significantly decrease.

c) 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. As CCDP enrolls each of our licensed providers into Nevada’s mandatory QRIS, we have determined that due to the significant increase in the reimbursement rate based on star levels, we will see a significant decrease in providers charging families an additional fee.

3.4.6 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? Check all that apply.

☐ Limit the maximum co-payment per family. Describe:

☐ 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 describe.

☐ 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 3.1.5. Describe: If at the 12-month eligibility redetermination, the new income projection reduces the household to a subsidy percentage that is not currently being served because of funding shortages, but remains under 85% of SMI, eligibility will continue for an additional 365 days at the new subsidy percentage.

☐ Other. Describe:

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.
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)).

A provider must be selected prior to the issuance of the certificate. Information included on the certificate includes: the provider name, location, telephone number, and provider id; program information, including applicant name, UPI, dates for which care is authorized (12 months), case manager name and contact information; child information, such as name, DOB, UPI, approved subsidy percentage, the daily rate, the reimbursement rate per day for full-time and part time, as well as the authorized schedule.

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.

☐ 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.

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. 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: The CCR&R staff ensure the parent is provided with and understands all available options for the type of care they are seeking.

ii. The type(s) of child care services available through grants or contracts: School age before and after school care, as well as during school breaks.

i. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers): School-age care is provided by non-profit agencies including Boys &Girls Clubs and city/county recreational programs. Wraparound services are provided by Head Start and Early Head Start agencies.

ii. The process for accessing grants or contracts: Families apply for subsidy directly through contracted agencies. For Head Start, the subsidy program accepts the Head Start application.

iii. How rates for contracted slots are set through grants and contracts: When initially developed, the rates were set through a funding formula that included geographical area, their average daily program attendance, and the free and reduced lunch rates of the schools in their service delivery area. This was multiplied by the working population and the result was the number of children that could be funded for each agency. Contract amounts were calculated by using the daily reimbursement rate for the geographical area, type of care, and age of child multiplied by the number of children to be served and then multiplied by the number of days in the year care was provided. This amount was dependent upon the total amount available per geographical area, which was determined based on percentage of overall need. Now, funding is based on this historical precedent, and will be reevaluated as funding comes available in the future.

iv. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality: New contracts are evaluated on a case-by-case basis. For example, the vast majority of school-age care in Nevada is offered by license exempt before and after school programs. These are recreational or non-recreational, operate more than 10 hours per week, are offered on a continuous basis, provide supervision of children who are school age, and provide regularly scheduled, structured and supervised activities (i.e., Boys &Girls Clubs, City/County Parks and Recreation Safe Key and Latch Key programs). These programs may be offered before and after school, on the weekend, during summer, holiday, and track breaks in the school calendar. Supporting these programs to maintain and build the supply of school-age care is critical in Nevada.

v. If contracts are offered statewide and/or locally: Contracts are offered statewide.

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 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

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)). This requirement is in the provider service agreement. The Service Agreement (IX.B.3) states, "As with all enrolled families, providers will allow unlimited access to parents during normal hours of operation and when children are in the care of the provider."

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?
- 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: In-home providers must care for at least two children on the subsidy program to meet this requirement. Providers caring for only one child must care for the child in the provider’s own home to meet the FLSA.
  - 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: Providers must be 18-years of age to become a family, friend or neighbor provider, regardless of where the care is provided. A government-issued ID is required to verify age.
  - Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: __________________________.
  - Restricted to care by relatives. Describe: An exemption is allowed that the provider may live in the home of a child with special needs (Manual Section 601 and 211 (special needs requirements)).
  - Restricted to care for children with special needs or a medical condition. Describe: An exemption is allowed that the provider may live in the home of a child with special needs (Manual Section 601 and 211 (special needs requirements)).
  - Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe: All Family, Friend, and Neighbor providers must meet the same Health & Safety requirements, regardless of where the care is provided.
provided. There are no exemptions for in-home care. All FFN providers are subject to a health and safety inspection of the care setting within 45 days of enrollment and must meet all mandatory pre-service training requirements within 90 days: Prevention and control of infectious diseases, Prevention of sudden infant death syndrome and use of safe sleeping practices. The administration of medication, consistent with standards for parental consent, The prevention of and response to emergencies due to food and allergic reactions, Building and physical premise safety, Prevention of shaken baby syndrome and abusive head trauma. Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), the handling and storage of hazardous materials and the appropriate disposal of biocontaminants, appropriate precautions in transporting children (for providers that offer transportation), First aid and cardiopulmonary resuscitation, Nutrition and physical activity (optional). After the first year, FFN providers are required to take a minimum of 24 hours of early education and child care training annually.

☐ Other. Describe: □□□□

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 costs.

☐ 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 other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors prior to developing and conducting the MRS or alternative methodology.

Describe how the Lead Agency consulted with the:

a) State Advisory Council or other state-designated cross-agency body:

b) Local child care program administrators:

c) Local child care resource and referral agencies: The State CCR&R agencies (The Children’s Cabinet and Las Vegas Urban League) are the entities that collaborate to conduct the market rate survey on behalf of the State.

d) Organizations representing caregivers, teachers, and directors:

Other. Describe: The instrument was shared with the Children’s Advocacy Alliance in 2016 for their feedback. The following technical report is used as guidance in designing and implementing the market price research to ensure the price findings are accurate: Grobe, D., Weber, R. B., Davis, E. E., Kreader, J. L., Pratt, C. C. (2008, September). Study of market prices: Validating child care market rate surveys. Corvallis, OR: Oregon State University Family Policy Program, Oregon Child Care Research Partnership.

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. **Use Research Base for Conducting the Market Price Survey.** The following technical report is used as guidance in designing and implementing our market price research to ensure that the price findings are accurate. Grobe, D., Weber, R. B., Davis, E. E., Kreader, J. L., Pratt, C. C. (2008, September). Study of market prices: Validating child care market rate surveys. Corvallis, OR: Oregon State University Family Policy Program, Oregon Child Care Research Partnership.

1. **Set Frequency & Timeline.** The survey is sent every three (3) years. Providers are asked to report rates for one point in time (e.g., as of April 1, 2018). September and January rates are purposefully avoided as these are the months that providers are most likely to change their prices. A timeline of approximately 3-4 weeks is given to return the survey.

2. **Determine Survey Size.** We use 100% of the Licensed Population and Tribally-Regulated Child Care Centers. Current licensing lists are obtained from the State of Nevada Child Care Licensing Bureau and Washoe County Social Services. Lists are also obtained from Administration for Child and Families (ACF) Region IX Tribal Child Care Technical Assistance Center (Tri-TAC), and the ACF Tribal Head Start locator. We only include the Priced Child Care Market in our market price analysis. Grobe, et.al. (2008) defines this market as providers who charge parents a price and the price is established through an arm’s length transaction. In an arm’s length transaction, the buyer and seller do not have a prior relationship or shared membership that is likely to affect the price charged. If a child care provider does have child care prices that they charge the open market, they are not included in the market price portion of the survey. Only their program attribute information is updated in our Referral Database.

3. **Follow Data Collection Methodology.** Nevada Child Care System (NCCS, Subsidy Database) and NACCRRAware (Resource & Referral Database) are used to guide the survey instrument design to capture all characteristics of the child care program with an extra focus on formatting to improve the capturing of providers’ rates across various age levels, schedules offered, and frequency of price charged (e.g., hourly, weekly, monthly).
   - A cover letter is sent with the survey explaining that the information will be used to:
     - Update provider information in our referral database to ensure that child care referrals are accurate;
     - Gather current rates by provider type, geographical area, and care level to assist the Nevada Division of Welfare and Supportive Services (DWSS) in reviewing the current State Subsidy Reimbursement Rate;
     - Provide the source data for the Child Care Demographics and Economic Development reports. Providers are offered a thank you gift of their choice (e.g., children’s scissors, clay, glue sticks) and/or raffle entry (e.g., $150, $250 or $350 gift certificate to an early learning vendor) for completing the survey.
   - A multi-contact method is utilized to increase the response rate of our survey:
     - A post card is mailed as well as an announcement in our E-newsletter one month prior to the survey release;
     - Initial survey is mailed with postage-paid, self-addressed, return envelope.
iii. One week after the initial survey is mailed, a follow-up postcard is sent to thank the provider if they have already responded to the survey or encourage them to complete the survey.

iv. Three weeks after initial mailing, reminder postcard sent with contact to obtain additional survey.

v. Three weeks after initial mailing, telephone calls are made using the phone survey narrative and instrument. Providers are encouraged to complete the survey over the phone or return the survey that was mailed to them.

vi. Five weeks after the initial survey, second survey sent.

vii. Six weeks after survey calls resume - An attempt to gather at least the market rates is made over the phone.

viii. A third mailing using Priority Mail might be considered if the response rate is below 65%.

- A 65% response rate of the total population or higher ensures that non-responses are randomly distributed.
- Data is collected within a 3 month timeframe to ensure information is captured in one period of time.
- The average, range and 75th percentile price are identified by geographical area, type of care, and age level.
- The unit of analysis is by facility and prices are not weighted by the number of slots in each age level.
- The results are promptly reported to DWSS (within one month of the survey closing).

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

a) Geographic area (e.g., statewide or local markets). Describe: Rate results are aggregated by geographical area: Washoe County (Urban), Carson/Douglas County (Capital Area), Clark (Urban), Rural (the balance of all other counties in Nevada).

b) Type of provider. Describe: Rates are analyzed separately within each geographical area for centers, family child care, and group family child care.

c) Age of child. Describe: Rates are analyzed separately within each geographical area and provider type for infants (0-11 months), toddlers (1 year through 2 years), PreK (3 years through 5 years), and School-Age (6 years through 12 years)

d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level. The Nevada MRS also enables the Lead Agency to request analytics of the QRIS star level rating for our participating 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. The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public.

4.2.3 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)).

Survey results were shared in the statewide CCR&Re-newsletter that is sent to all licensed providers in the state and other key stakeholders (members of the Nevada Association for the Education of Young Children; Nevada Early Childhood Advisory Council; Child Care Licensing; representatives from other state and local agencies; Elected Officials; parents with children on the subsidy program and those who have received a CCR&Rconsultation). The CCR&RConsumer Education packets are updated to include the new rate information. This information is shared with all parents in Nevada who receive a child care consultation through the CCR&Ragencies. Additionally, the rates are available on https://dwss.nv.gov/pdf/CC_FactSheets.pdf


e) 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).


f) Date the report containing results was made widely available—no later than 30 days after the completion of the report. TBD

g) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted. This information will be available to the public within the NV Child Care State Plan.

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

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. If the Lead Agency conducted an MRS (only or in combination with an alternative methodology), also report the percentiles based on the most recent MRS. 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).

a) Infant (6 months), full-time licensed center care in the most populous geographic region
    Rate $31 per day unit of time (e.g., hourly, daily, weekly, monthly)
    Percentile of most recent MRS: TBD

e) Infant (6 months), full-time licensed FCC home in the most populous geographic region
    Rate $30 per day unit of time (e.g., hourly, daily, weekly, monthly)
    Percentile of most recent MRS: TBD

f) Toddler (18 months), full-time licensed center care in the most populous geographic region
    Rate $28 per day unit of time (e.g., hourly, daily, weekly, monthly)
    Percentile of most recent MRS: TBD

g) Toddler (18 months), full-time licensed FCC care in the most populous geographic region
    Rate $27 per day unit of time (e.g., hourly, daily, weekly, monthly)
    Percentile of most recent MRS: TBD

h) Preschooler (4 years), full-time licensed center care in the most populous geographic region
    Rate $23 per day unit of time (e.g., hourly, daily, weekly, monthly)
    Percentile of most recent MRS: TBD

i) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region
    Rate $26 per day unit of time (e.g., hourly, daily, weekly, monthly)
    Percentile of most recent MRS: TBD

j) School-age child (6 years), full-time licensed center care in most populous geographic region
    Rate $19 per day unit of time (e.g., hourly, daily, weekly, monthly, etc.)
    Percentile of most recent MRS: TBD

k) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
    Rate $23 per day unit of time (e.g., hourly, daily, weekly, monthly)
    Percentile of most recent MRS: TBD

a) Describe how part-time and full-time care were defined and calculated. Infant, toddler, and preschool children - part time is 15 minutes to 4 hours 29 minutes and full time is 4 hours 30 minutes and greater. For school age children - part time is 15 minutes to 2 hours and 59 minutes and full time is 3 hours or more.

b) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). 10/01/2018
c) Provide the citation or link, if available, to the payment rates.
https://dwss.nv.gov/uploadedFiles/dwssnv.gov/content/Care/Child%20Care%20Manual%20Mar%202018.pdf

d) 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)). N/A

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.

- Differential rate for non-traditional hours. Describe:
- Differential rate for children with special needs, as defined by the state/territory. Describe:
- Differential rate for infants and toddlers. Describe:
- Differential rate for school-age programs. Describe:
- Differential rate for higher quality, as defined by the state/territory. Describe: Currently, all licensed centers who receive CCDF dollars are required to participate in the NV QRIS. For each star level attained by the provider, their reimbursement rate increases, with the 5th (highest) star level being set equal to the 75th percentile of the 2015 MRS.
- 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)):

a) Describe how a choice of the full range of providers pursuant to 98.30(e)(1) is made available; the extent to which child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices. CCR&R consumer education packets are shared with parents during the initial eligibility process and the full range of available providers is made available to parents when identifying their child care needs.

b) Describe how payment rates are adequate and have been established based on the most recent MRS or alternative methodology. The current payment rates in Nevada are based on the 2015 MRS, and are not indicative of the current rate updates being made by the Lead Agency. Updated rates are intended to be in place following the completion of the 2017 MRS.
c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

Increasing the reimbursement rates

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.

e) How co-payments based on a sliding fee scale reported in 3.4.1 are affordable (response provided in 3.4.6).

f) Describe how Lead Agencies’ payment practices described in 4.5 support equal access to a range of providers.

g) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

- Geographic area. Describe:
- Type of provider. Describe:
- Age of child. Describe:
- Quality level. Describe:
- Other.

h) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access:

- Payment rates are set at the 75th percentile or higher of the most recent survey. 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)(i); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

4.5.1 Certify by describing the payment practices that the Lead Agency has implemented for all CCDF child care providers,

   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. If implemented describe the policy or procedure.
      - Paying within no more than 21 calendar days of the receipt of a complete invoice for services. If implemented describe the policy or procedure.

   e) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by:
      - Paying based on a child’s enrollment rather than attendance. If implemented describe the policy or procedure. Child care payments are generally made based on a client’s schedule. Those clients that are reimbursed based on actual attendance (varied schedule, before and after school programs) are allowed 21 absences per year, for any reason.
      - Providing full payment if a child attends at least 85 percent of the authorized time. If implemented describe the policy or procedure.
      - Providing full payment if a child is absent for 5 or fewer days in a month. If implemented describe the policy or procedure. Payments are generally made based on a parent’s approved schedule. The exceptions are varying schedules and before and after school programs. When a family works a varied schedule, policy allows 21 absence days per year to ensure payments to providers and stability for families. Before and after school programs frequently cannot take payments for days the child was not in attendance, so policy reflects this practice.
      - 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.

   f) Reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies, which 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)).
      - 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). Rates are paid on a full-time or part-time
Because school-age children have schedules that include public school hours, the hours that constitute full-time and part-time are different:

**Infant, Toddler, and Preschool Children**
- **Part-time** = 15 minutes to 4 hours and 29 minutes
- **Full-time** = 4 hours, 30 minutes and greater

**School Age Children**
- **Part-time** = 15 minutes to 2 hours and 59 minutes
- **Full-time** = 3 hours or more

☐ Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. **The CCDP pays up to $40 for annual fees**

### g) 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:

### h) 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: **CCDP contractors have 10 days to update cases due to any changes to the family’s eligibility and issue a new certificate to the child care provider or notify the provider that the case is terminated.**

The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: **Providers have 60 calendar days from the issuance of payment to request an adjustment if they disagree with the amount of their payment. All payment adjustment requests must be resolved and responded to in writing by the Child Care office within 30 calendar days of the request. Child Care contractors must resolve all provider underpayments in the next available reimbursement period from the date the underpayment is validated. If an underpayment is discovered through a Management Evaluation (ME) or Quality Control (QC) review, the underpayment must be validated by the contracting agency. If the underpayment was due to a mistake of the contracting agency, the supplemental payment must be issued with the next available reimbursement period after validations.**

If an overpayment is found by a contractor or through a ME or QC review, the overpayment must be validated by the contractor within 60 calendar days from the date the overpayment is discovered:

**Child Care contractors are primarily responsible for the collection of all provider overpayments. Recovery is accomplished through retention of future provider payments until the debt is retired in whole. If the provider suggests that repayment of the debt will cause a hardship they may seek special consideration from the DWSS Child Care Chief. To do so, the provider must submit a written request to the DWSS Child Care Chief fully disclosing the circumstances which warrant special consideration.**
If the provider’s contract is terminated prior to full repayment of the overpayment, the Child Care contractor must refer the debt to the appropriate DWSS Investigations & Recovery (I&R) office for continuation of the recovery action.

If the provider initiates a new contract with Child Care contractor prior to full recovery of the debt by DWSS I&R the Child Care office must suspend approval of the contract until the remaining overpayment balance is paid. The provider retains the right to seek hardship consideration using the process. If a hardship is granted, the Child Care contractor must submit a written request to DWSS I&R seeking to reclaim the debt and assume responsibility for collection of the outstanding balance through reimbursement reduction.

4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?

☐ 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 For each of the following types of providers, identify any shortages in the supply of quality child care providers, the data sources used to identify shortages, and the method of tracking progress to support equal access and parental choice.

a) Children in underserved areas: __________
   i) Infants and toddlers: __________
   j) Children with disabilities (include the Lead Agency definition in the description): __________
   k) Children who received care during non-traditional hours: __________
   l) Other. Please describe any other shortages in the supply of high-quality providers. __________

4.6.2 Based on the analysis in 4.6.1, describe what method(s) is used to increase supply and to improve quality for the following.

a) Infants and toddlers. Check all that apply.
   ☐ Grants and contracts (as discussed in 4.1.3)
   ☐ Family child care networks
   ☐ Start-up funding
   ☐ Technical assistance support
   ☐ Recruitment of providers
   ☐ Tiered payment rates (as discussed in 4.3.2)
   ☐ Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
m) Children with disabilities. Check all that apply.
   - Grants and contracts (as discussed in 4.1.3)
   - Family child care networks
   - Start-up funding
   - Technical assistance support
   - Recruitment of providers
   - Tiered payment rates (as discussed in 4.3.2)
   - Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
   - Other. Describe: 

n) Children who receive care during non-traditional hours. Check all that apply.
   - Grants and contracts (as discussed in 4.1.3)
   - Family child care networks
   - Start-up funding
   - Technical assistance support
   - Recruitment of providers
   - Tiered payment rates (as discussed in 4.3.2)
   - Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
   - Other. Describe: 

o) Other. Check and describe:
   - 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)
   - Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging. Describe: 
   - Other. Describe: 

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.

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

p) 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.
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 child care services in the state/territory. States and territories may allow licensing exemptions, but they must describe how such exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care. Lead Agencies also must certify that there are in effect health and safety requirements applicable to providers serving CCDF children. 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 to ensure that providers are complying with the health and safety requirements.

This section covers licensing requirements, health and safety requirements and training, and monitoring and enforcement procedures to ensure that child care providers comply with licensing and health and safety requirements (98.16(n)) as well as exemptions (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)). Criminal background check requirements are included in this section (98.16(o)).

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 CCDF 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); 98.409(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory and note if 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)).

5.1.2 Which providers in your state/territory are subject to licensing under this CCDF category? Check all that apply and provide a citation to the licensing rule.

- Center-based child care. Provide a citation: 
- Family child care. Provide a citation: 
- In-home care. Provide a citation: 

☐ Center-based child care. Provide a citation: 
☐ Family child care. Provide a citation: 
☐ In-home care. Provide a citation: 

[Note: The provided text contains checkboxes for different types of child care settings, but the placeholders for citations are not filled in.]
5.1.3 Are any providers in your state/territory that fall under this CCDF category exempt from licensing (98.40(2)(i) through (iv))? If so, describe exemptions based on length of day, threshold on the number of children in care, or any other factors applicable to the exemption.

☐ 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.  

5.1.4 Describe how any exemptions identified above do not endanger the health, safety, or development of children in:

a) Center-based child care if checked in 5.1.3.  

b) Family child care if checked in 5.1.3e.  

c) In-home care if checked in 5.1.3.  

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.

a) Licensed CCDF center-based care

1. Infant

  • How does the State/territory define infant (age range): 0 – 11 months
  • Ratio:
    o 1:4 for children 0-8mos  
    o 1:6 for children 9-11 mos
  • Group size:
    o 8 for children 0-8mos  
    o 12 for children 9-11 mos

Teacher/caregiver qualifications: Teacher/caregiver qualifications are based on Provider Type, not age, aside from some trainings (e.g. SIDS). The following are the requirements for Licensed providers (center based and family child care based): NRS 432A.1773 Licensee or person responsible for daily operation, administration or management of child care facility: Registration required; qualifications.

1. A licensee of a child care facility, or a person appointed by the licensee, who is responsible for the daily operation, administration or management of a child care facility must:

(a) Be at least 21 years of age and:

(1) Hold an associate’s degree or a higher degree in early childhood education and have at least 1,000 hours of verifiable experience in a child care facility;
(2) Hold an associate’s degree or a higher degree in any field other than early childhood education, have completed at least 15 semester hours in early childhood education or related courses and have at least 2,000 hours of verifiable experience in a child care facility;

(3) Hold a high school diploma or, if approved by the Administrator of the Division of Public and Behavioral Health, a general educational development certificate, have completed at least 15 semester hours in early childhood education or related courses and have at least 3,000 hours of experience in a child care facility;

(4) Hold a current credential as a “Child Development Associate” with an endorsement for preschool age children or infants or toddlers, as appropriate, which has been issued by the Council for Professional Recognition, or its successor organization, and have at least 2,000 hours of verifiable experience in a child care facility; or

(5) Have a combination of education and experience which, in the judgment of the Administrator of the Division of Public and Behavioral Health, is equivalent to that required by subparagraph (1), (2), (3) or (4);

(b) Have at least 1,000 verifiable hours in an administrative position or have completed a course or other training in business administration; and

(c) Within 90 days after the licensee or person appointed by the licensee commences service as the director of a child care facility, apply to the Nevada Registry or its successor organization, and annually renew his or her registration before the date on which it expires.

2. As used in this section, “Nevada Registry” means the organization that operates the statewide system of career development and recognition created to:

(a) Acknowledge and encourage professional achievement in the early childhood care and education workforce in this State;

(b) Establish a professional development system in this State for the field of early childhood care and education;

(c) Approve and track all informal training in the field of early childhood care and education in this State; and

(d) Act as a statewide clearinghouse of information concerning the field of early childhood care and education.

(Added to NRS by 2013, 736)

NRS 432A.1775 Employees of certain facilities to complete training.

1. Each person who is employed in a child care facility that provides care for more than 12 children, other than in a facility that provides care for ill children, shall complete:

(a) Before January 1, 2014, at least 15 hours of training;

(b) On or after January 1, 2014, and before January 1, 2015, at least 18 hours of training;

(c) On or after January 1, 2015, and before January 1, 2016, at least 21 hours of training; and

(d) On or after January 1, 2016, 24 hours of training each year.
2. Except as otherwise provided in subsection 1, each person who is employed in any child care facility, other than in a facility that provides care for ill children, shall complete at least 15 hours of training each year.

3. At least 2 hours of the training required by subsections 1 and 2 each year must be devoted to the lifelong wellness, health and safety of children and must include training relating to childhood obesity, nutrition and physical activity.

**NAC 432A.306 Requirements for caregivers. (NRS 432A.077)**

1. Every caregiver in a child care facility must:

   (a) Be at least 16 years of age;

   (b) Be able to summon help in an emergency;

   (c) Be emotionally and physically qualified to carry out a program which places emphasis on the development of children; and

   (d) Except as otherwise provided in subsection 5, within 90 days after the caregiver commences employment in the child care facility, apply with The Nevada Registry or its successor organization, and annually renew his or her registration before the date on which it expires.

2. Not more than 50 percent of the caregivers in a child care center, a child care institution or an early care and education program may be under 18 years of age. Any caregiver who is under 18 years of age and is employed in such a facility must:

   (a) Have completed a course in the development of children which is approved by:

      (1) The Nevada Registry or its successor organization, or any other agency designated by the Director of the Department to approve such courses; or

      (2) If the course has not been approved by The Nevada Registry or its successor organization, and the Director of the Department has not designated another agency to approve such courses, the Division or the local licensing agency; or

   (b) Be currently enrolled in such a course.

3. A child care facility may not be operated unless a person who is 18 years of age or older is on the premises of the facility.

4. A volunteer for a child care facility, regardless of his or her age, and a member of the staff of the facility who is under 18 years of age may not provide direct care to a child at the facility unless the care is provided under the supervision of an employee of the facility who is 18 years of age or older.

5. A caregiver in a child care institution is not required to initially apply with or annually renew his or her registration with The Nevada Registry or its successor organization.
2. Toddler
   • How does the State/territory define toddler (age range): 12 months – 35 months
   • Ratio:
     o 1:6 for children 12 months – 23 months
     o 1:9 for children 24 months – 35 months
   • Group size:
     o 12 for children 12 mos – 23 months
     o 18 for children 24 months – 35 months
   • Teacher/caregiver qualifications: see above

3. Preschool
   • How does the State/territory define preschool (age range): 3 years – 5 years & 11 mos
   • Ratio:
     o 1:12 for children 35 months – 47 mos
     o 1:13 for children 48 months – 59 months
     o 1:18 for children 5 years – 5 years & 11 months
   • Group size:
     o 24
     o 26
     o 36
   • Teacher/caregiver qualifications: see above

4. School-age
   • How does the State/territory define school-age (age range): 6 years to 12 years
   • Ratio: 1:18
   • Group size: 36
   • Teacher/caregiver qualifications: see above

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers.

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

7. Describe the director qualifications for licensed CCDF center-based care: see above

q) Licensed CCDF family child care provider

1. Infant
   • How does the State/territory define infant (age range): 0 – 11 months
   • Ratio:
     o 1:4 for children 0-8mos
     o 1:6 for children 9-11 mos
   • Group size:
2. Toddler

- How does the State/territory define toddler (age range): 12 months – 35 months
- Ratio:
  - 1:6 for children 12 months – 23 months
  - 1:9 for children 24 months – 35 months
- Group size:
  - 12 for children 12mos – 23 months
  - 18 for children 24 months – 35 months
- Teacher/caregiver qualifications: see above

3. Preschool

- How does the State/territory define preschool (age range): 3 years – 5 years & 11mos
- Ratio:
  - 1:12 for children 35 months – 47 mos
  - 1:13 for children 48 months – 59 months
  - 1:18 for children 5 years – 5 years & 11 months
- Group size:
  - 24
  - 26
  - 36
- Teacher/caregiver qualifications: see above

4. School-age

- How does the State/territory define school-age (age range): 6 years to 12 years
- Ratio:
  - 1:18
- Group size: 36
- Teacher/caregiver qualifications:

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes.

r) In-home CCDF providers:

1. Describe the ratios. N/A
2. Describe the group size: Washoe County, 2; State 4.
3. Describe the threshold for when licensing is required. Inside Washoe County, more than 2 children requires licensure. Outside of Washoe County, more than 4 children requires licensure.
4. Describe the maximum number of children that are allowed in the home at any one time.

5. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size.

6. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day.

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)).

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.

1. Prevention and control of infectious diseases (including immunization) *Alex email CC & LVUL regarding relative requirements
   - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) For licensed centers: Each person who is employed in a child care facility shall complete 2 or more hours of training in the recognition of signs and symptoms of illness, which must include, without limitation, training in the prevention of exposure to bloodborne pathogens; FFN providers must complete 24 hours of annual trainings, including the prevention and control of infectious diseases (including immunization).
   - List the citation for these requirements. NAC 432A.323 (1)(d); CCDP Policy Manual Section 622.2 & 622.3
   - 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.

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.) For licensed centers: Each person who is employed in a child care facility shall complete at least 2 hours of training concerning sudden infant death syndrome; FFN providers must complete 24 hours
of annual training, including Prevention of Sudden Infant Death Syndrome and use of safe sleeping practices.

- List the citation for these requirements. NAC 432A.323 (1)(f)(1); CCDP Policy Manual Section 622.3
- 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. Mandatory for providers caring for children up to 12 months.
- Describe if relatives are 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.) For licensed centers: Each person who is employed in a child care facility shall complete 2 or more hours of training in the administration of medication, which must include without limitation, training in the prevention of and response to food and other allergies; FFN providers must complete 24 hours of annual training, including the administration of medication, consistent with standards for parental consent, as well as the prevention of and response to emergencies due to food and allergic reactions.
- List the citation for these requirements. NAC 432A.323 (1)(g); CCDP Policy Manual Section 622.3
- 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.

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.) For licensed centers: Each person who is employed in a child care facility shall complete 2 or more hours of training in the administration of medication, which must include without limitation, training in the prevention of and response to food and other allergies; FFN providers must complete 24 hours of annual training, including the administration of medication, consistent with standards for parental consent, as well as the prevention of and response to emergencies due to food and allergic reactions.
- List the citation for these requirements. NAC 432A.323 (1)(g); CCDP Policy Manual Section 622.3
- 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.

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.) For licensed centers: Each person who is employed in a child care facility shall complete 2 or more hours of training in building and physical premises safety, which must include without limitation, training in the storage of biocontaminants and other hazardous materials; FFN providers must complete 24 hours of annual training, including building and premises safety, as well as the handling and storage of hazardous materials and the appropriate disposal of biocontaminants.

• List the citation for these requirements. *NAC 432A.323 (1)(h)*; CCDP Policy Manual Section 622.3

• 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.

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.) For licensed centers: Each person who is employed in a child care facility shall complete 1 hour of training in the prevention of shaken baby syndrome and abusive head trauma; FFN providers must complete 24 hours of annual training, including prevention of shaken baby syndrome and abusive head trauma.

• List the citation for these requirements. *NAC 432A.323 (1)(f)(2)*

• 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. Mandatory for providers caring for children up to 12 months

• Describe if relatives are 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.) For licensed centers: Each person who is employed in a child care facility shall complete 2 or more hours of training in emergency preparedness and response planning for emergencies resulting from a natural or man-made event; FFN providers must complete 24 hours of annual training, including emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility).
- List the citation for these requirements. **NAC 432A.323(1)(i); CCDP Policy Manual Section 622.3**
- 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.

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.) For licensed centers: Each person who is employed in a child care facility shall complete 2 or more hours of training in building and physical premises safety, which must include without limitation, training in the storage of biocontaminants and other hazardous materials; FFN providers must complete 24 hours of annual training, including building and premises safety, as well as the handling and storage of hazardous materials and the appropriate disposal of bio contaminants.
- List the citation for these requirements. **NAC 432A.323 (1)(h); CCDP Policy Manual Section 622.3**
- 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.

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.) For licensed centers: If the facility provides transportation, 1 or more hours of training in precautions to be taken when transporting children for each person who will provide such transportation; FFN providers must complete 24 hours of annual training, including appropriate precautions in transporting children (for providers that offer transportation).
- List the citation for these requirements. **NAC 432A.323 (1)(j); CCDP Policy Manual Section 622.3**
- 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.

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.) For licensed centers: Each person who is employed at a child care facility shall obtain certification in the administration of cardiopulmonary resuscitation within 90 days after the person commences employment in the facility; FFN providers must complete 24 hours of annual training including, first aid and cardiopulmonary resuscitation.
- List the citation for these requirements. **NAC 432A.322; CCDP Policy Manual 622.3**
• 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. **If care is provided to infants, infant CPR training is mandatory.**
• Describe if relatives are 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.) **For licensed centers:** Each person who is employed at a child care facility shall complete 2 or more hours of training in the recognition and reporting of child abuse and neglect; FFN providers must complete 24 hours of annual training including, recognizing and reporting suspected child abuse, neglect, and exploitation.
• List the citation for these requirements. **NAC 432A.323 (1)(e); CCDP Policy Manual 622.2 & 622.3**
• 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.

a) The Lead Agency may also include optional standards related to the following:

1. Nutrition

• Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.) **For licensed centers:** Each person who is employed at a child care facility shall complete 2 or more hours of training in lifelong wellness, health and safety of children, which must include, without limitation, training relating to childhood obesity, nutrition, and moderate or vigorous physical activity; FFN providers must complete 24 hours of annual training, which can include nutrition and physical activity (optional).
• List the citation for these requirements. **NAC 432A.323 (1)(k); CCDP Policy Manual 622.2 & 622.3**
• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). **None**
• Describe if relatives are 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.) **For licensed centers:** Each person who is employed at a child care facility shall complete 2 or more hours of training in lifelong wellness, health and safety of children, which must include, without limitation, training relating to childhood obesity, nutrition, and moderate or vigorous physical activity; FFN providers must complete 24 hours of annual training, which can include nutrition and physical activity.
• List the citation for these requirements. **NAC 432A.323 (1)(k); CCDP Policy Manual 622.2 & 622.3**
• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). None
• Describe if relatives are 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.) If the facility is a special needs facility, the training required pursuant to subsections 1, 2, and 3, must also be designed to provide information on the characteristics of handicapping conditions, and appropriate programs for children with special needs; FFN providers must complete 24 hours of annual training, including care plan for children with special health care needs.
• List the citation for these requirements. NAC 432A.323 (6); CCDP Policy Manual 622.2 & 622.3
• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). None
• Describe if relatives are 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:

• Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.) □□□□
• List the citation for these requirements. □□□□
• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). □□□□
• Describe if relatives are 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.

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: 24
2. Licensed FCC homes: 24
3. In-home care: 24
4. Variations for exempt provider settings: N/A

s) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer) 90 days for all provider types

t) 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. NAC 432A.323 (1)(d); CCDP Policy Manual Section 622.2 & 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
   - Provide the citation for this training requirement. NAC 432A.323 (1)(f)(1); CCDP Policy Manual Section 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

3. Administration of medication, consistent with standards for parental consent
   - Provide the citation for this training requirement. NAC 432A.323 (1)(g); CCDP Policy Manual Section 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

4. Prevention and response to emergencies due to food and allergic reactions
   - Provide the citation for this training requirement. NAC 432A.323 (1)(g); CCDP Policy Manual Section 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

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. NAC 432A.323 (1)(h); CCDP Policy Manual Section 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
   - Provide the citation for this training requirement. NAC 432A.323 (1)(f)(2)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

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. NAC 432A.323(1)(i); CCDP Policy Manual Section 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
   - Provide the citation for this training requirement. NAC 432A.323 (1)(h); CCDP Policy Manual Section 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

9. Appropriate precautions in transporting children (if applicable)
   - Provide the citation for this training requirement. NAC 432A.323 (1)(j); CCDP Policy Manual Section 622.3
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     - Yes
     - No

10. Pediatric first aid and CPR certification
    - Provide the citation for this training requirement. NAC 432A.322 and 432A.323c; CCDP Policy Manual 622.3
    - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
      - Yes
      - No

11. Recognition and reporting of child abuse and neglect
• Provide the citation for this training requirement. **NAC 432A.323 (1)(e); CCDP Policy Manual 622.2 & 622.3**

• Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
  - Yes
  - No

12. Child development (98.44(b)(1)(iii))

• Provide the citation for this training requirement. List the citation for these requirements. **Nutrition and Physical Activity: NAC 432A.323 (1)(k); CCDP Policy Manual 622.2 & 622.3**

• Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
  - Yes
  - No

13. Describe other requirements

• Provide the citation for other training requirements. ****

• Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
  - Yes
  - No

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.

a) Licensed child care centers: **24**

u) Licensed FCC homes: **24**

v) In-home care: **24**

w) Variations for exempt provider settings: **N/A**

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).

1. Prevention and control of infectious diseases (including immunizations)

• Provide the citation for this training requirement. **CCDP Policy Manual 622.3**

• **NAC 432A.323d**

• How often does the state/territory require that this training topic be completed?
  - Annually.
  - Other. Describe ****

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
• Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
  • **NAC 432A.323f**
  • How often does the state/territory require that this training topic be completed?
    - [ ] Annually.
    - [ ] Other. Describe [ ]

3. Administration of medication, consistent with standards for parental consent

• Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
  • **NAC 432A.323g**
  • How often does the state/territory require that this training topic be completed?
    - [ ] Annually.
    - [ ] Other. Describe [ ]

4. Prevention and response to emergencies due to food and allergic reactions

• Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
  • **NAC 432A.323g**
  • How often does the state/territory require that this training topic be completed?
    - [ ] Annually.
    - [ ] Other. Describe [ ]

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. **CCDP Policy Manual 622.3**
  • **NAC 432.323h**
  • How often does the state/territory require that this training topic be completed?
    - [ ] Annually.
    - [ ] Other. Describe [ ]

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

• Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
  • **NAC 432A.323f2**
  • How often does the state/territory require that this training topic be completed?
    - [ ] Annually.
    - [ ] Other. Describe [ ]

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. **CCDP Policy Manual 622.3**
  • How often does the state/territory require that this training topic be completed?
8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

- Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
- **NAC 432A.323h**
- How often does the state/territory require that this training topic be completed?
  - □ Annually.
  - □ Other. Describe ______

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
- **NAC 432A.323j**
- How often does the state/territory require that this training topic be completed?
  - □ Annually.
  - □ Other. Describe ______

10. Pediatric first aid and CPR certification

- Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
- **NAC 432A.322 and 432A.323c**
- How often does the state/territory require that this training topic be completed?
  - □ Annually.
  - □ Other. Describe ______

11. Recognition and reporting of child abuse and neglect

- Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
- **NAC 432A.323e**
- How often does the state/territory require that this training topic be completed?
  - □ Annually.
  - □ Other. Describe ______

12. Child development (98.44(b)(1)(iii))

- Provide the citation for this training requirement. **CCDP Policy Manual 622.3**
- **NAC 432A.323b**
- How often does the state/territory require that this training topic be completed?
  - □ Annually.
  - □ Other. Describe ______
13. Describe other requirements.

- Provide the citation for other training requirements.
- How often does the state/territory require that this training topic be completed?
  - [ ] Annually.
  - [ ] Other. Describe ______

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. Licensed centers are inspected by the State of Nevada Department of Public and Behavioral Health Child Care Licensing, and FFN Provider locations are inspected by the CCR&R programs within The Children’s Cabinet and The Las Vegas Urban League.

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.

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. All prospective providers are subject to an initial on-site inspection once they have completed the required Licensed Application Process (LAP) training, New Facility Training (NFT), Backgrounds training. Prospective providers must also have a completed ______
background check, health inspection, fire inspection, liability insurance and early childhood education initial trainings.

2. Describe your state/territory’s requirements for annual, unannounced inspections of licensed CCDF child care center providers. State of Nevada Licensed facilities are subject to unannounced visits to ensure maintenance of compliance throughout a licensing year.

3. Identify the frequency of unannounced inspections:

☐ Once a year
☐ More than once a year. Describe Facilities are subject a minimum of 2 unannounced visits a year: a semi-annual and an annual, within a facilities licensing year.

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. Inspections of any building or premises of a facility pursuant to NRS 432A.180 may be unannounced and must be made at least two times during the 12-month licensing period or once every 6 months. Any authorized member or employee of the Division may enter and inspect any building or premises of a facility at any time pursuant to NRS 432A.180 to secure compliance with or prevent a violation of any provision of this chapter or chapter 432A of NRS.

2. In conducting inspections and investigations, the Division may call upon political subdivisions and governmental agencies for assistance. The licensee or applicant shall cooperate with the person conducting the investigation by providing access to the buildings, records required to be maintained pursuant to this chapter and staff of the facility. Failure to provide such access is a ground for revocation of a license or denial of an application for a license.

3. The Division may charge any licensee subject to a substantiated complaint for the reasonable cost of the investigation conducted as a result of the complaint. As used in this subsection, “substantiated complaint” means a complaint that results in the finding of a violation of any provision of this chapter or chapter 432A of NRS by an authorized member or employee of the Division.

5. List the citation(s) for your state/territory’s policies regarding inspections for licensed CCDF center providers NAC 432A.190, NAC 432A.260

x) 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. All prospective providers are subject to an initial on-site inspection once they have completed the required Licensed Application Process (LAP) training, New Facility Training (NFT), Backgrounds training. Prospective providers must also have a completed background check, health inspection, fire inspection, liability insurance and early childhood education initial trainings.

2. Describe your state/territory’s requirements for at least annual, unannounced inspections of licensed CCDF family child care providers. State of Nevada Licensed
facilities are subject to unannounced visits to ensure maintenance of compliance throughout a licensing year.

3. Identify the frequency of unannounced inspections:

- Once a year
- More than once a year. Describe Facilities are subject a minimum of 2 unannounced visits a year: a semi-annual and an annual, within a facilities licensing year.

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.

5. List the citation(s) for your state/territory’s policies regarding inspections for licensed CCDF family child care providers

y) 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

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 at least annual, unannounced inspections of licensed CCDF in-home child care 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. Inspections of any building or premises of a facility pursuant to NRS 432A.180 may be unannounced and must be made at least two times during the 12-month licensing period or once every 6 months. Any authorized member or employee of the Division may enter and inspect any building or premises of a facility at any time pursuant to NRS 432A.180 to secure compliance with or prevent a violation of any provision of this chapter or chapter 432A of NRS.

2. In conducting inspections and investigations, the Division may call upon political subdivisions and governmental agencies for assistance. The licensee or applicant shall cooperate with the person conducting the investigation by providing access to the buildings, records required to be maintained pursuant to this chapter and staff of the facility. Failure to provide such access is a ground for revocation of a license or denial of an application for a license.

3. The Division may charge any licensee subject to a substantiated complaint for the reasonable cost of the investigation conducted as a result of the complaint. As used in this subsection, “substantiated complaint” means a complaint that results in the finding of a violation of any provision of this chapter or chapter 432A of NRS by an authorized member or employee of the Division.
5. List the citation(s) for your state/territory’s policies regarding inspections for licensed CCDF center providers NAC 432A.190, NAC 432A.260

2) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers. State of Nevada Department of Public and Behavioral Health Child Care Licensing

5.3.3 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:

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. N/A

Provide the citation(s) for this policy or procedure. _____

aa) 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. All FFN providers are subject to a home visit within 45 calendar days of enrollment and a minimum of once a year thereafter. All home visits can either be scheduled or unannounced.

Provide the citation(s) for this policy or procedure. CCDP Policy Manual 622.2

bb) 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. N/A

Provide the citation(s) for this policy or procedure.

5.3.4 The Lead Agency 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, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). The state/territory may determine if exempt relative providers (as described in section (658P(6)(B)) do not need to meet this requirement. At a minimum, the health and safety requirements to be inspected must address the standards listed in 5.1.4 (98.41(a)). To certify, describe the policies and practices for the annual monitoring of:

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. N/A

Provide the citation(s) for this policy or procedure. _____

cc) 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. All FFN providers are subject to a home visit within 45 calendar days of enrollment and a minimum of once a year thereafter. All home visits can either be scheduled or unannounced.

Provide the citation(s) for this policy or procedure. CCDP Policy Manual 622.2

dd) 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. N/A

ee) Provide the citation(s) for this policy or procedure.

5.3.5 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors 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)).

a) To certify, describe how the Lead Agency ensures that licensing inspectors 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)). State licensed inspectors are hired based on experience and qualifications as specified within the Division of Human Resources job classification.

ff) Provide the citation(s) for this policy or procedure. The procedure to evaluate inspector qualifications can be found within the State of Nevada, Department of Administration, Division of Human Resource Management states: “Bachelor’s degree from an accredited college or university in early childhood development, education, social work, or closely related field and one year of professional experience providing developmental or educational services to children in an early childhood program which must have included program administration responsibilities; OR Bachelor’s degree from an accredited college or university in early childhood development, education, social work, or closely related field and one year of professional experience evaluating child development or early childhood education programs; OR an equivalent combination of education and experience; OR one year of experience as a Child Care Facilities Surveyor Trainee in Nevada State service.”

5.3.6 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)).

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e., number of providers 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. State of Nevada practice works to ensure that each inspector has a set number of facilities that are randomly assigned through a
rotation schedule. These assignments are closely monitored by Managers and Supervisors to determine productivity to ensure that work is balanced and completed with the required thoroughness for each facility.

gg) Provide the policy citation and state/territory ratio of licensing inspectors. The DPBH does not have a policy to cite for this ratio; however, caseloads are closely monitored to ensure that 2 visits are able to be accomplished annually, and caseloads are altered in order to maintain this schedule. The current ratio in Southern Nevada averages 46 facilities per inspector, and 23 facilities per inspector for Northern Nevada.

5.3.7 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?

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.

Per the Nevada Revised Statute (NRS): NRS 432A.024 “Child care facility” defined.

1. “Child care facility” means:
   (a) An establishment operated and maintained for the purpose of furnishing care on a temporary or permanent basis, during the day or overnight, to five or more children under 18 years of age, if compensation is received for the care of any of those children;
   (b) A child care institution; or
   (d) An outdoor youth program.

2. “Child care facility” does not include:
   (a) The home of a natural parent or guardian, foster home as defined in NRS 424.014 or maternity home;
   (b) A home in which the only children received, cared for and maintained are related within the third degree of consanguinity or affinity by blood, adoption or marriage to the person operating the facility;
   (c) A home in which a person provides care for the children of a friend or neighbor for not more than 4 weeks if the person who provides the care does not regularly engage in that activity;
   (d) A location at which an out-of-school-time program is operated;
   (e) A seasonal or temporary recreation program; or
   (f) An out-of-school recreation program.

☐ 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

5.4.1 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 and apply for the time-limited waiver by responding to questions 5.4.1a through 5.4.1h below.

As a reminder, 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 providers 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). 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. 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. This requirement does not apply to individuals who are related to all children for whom child care services are provided.

A criminal background check must include 8 specific components, which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks:

1. Criminal registry or repository using fingerprints in the current state of residency (in-state);
2. Sex offender registry or repository check in the current state of residency (in-state);
3. Child abuse and neglect registry and database check in the current state of residency (in-state);
4. FBI fingerprint check (national);
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (national);
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 (inter-state);
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years (inter-state); and
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years (inter-state).
Milestone Prerequisites for Time-Limited Waivers

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 45 CFR 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.

If the milestone prerequisites are met, then time-limited waivers may be requested for the components as outlined in the table below.

<table>
<thead>
<tr>
<th>Background Check Components</th>
<th>If milestone is met, time-limited waiver allowed for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) In-state criminal w/fingerprints</td>
<td>Conducting background checks on backlog of current (existing) staff only</td>
</tr>
<tr>
<td>2) In-state sex offender registry</td>
<td>Establishing requirements and procedures AND/OR</td>
</tr>
<tr>
<td>3) In-state state-based child abuse and neglect registry</td>
<td>Conducting background checks on all new (prospective) child care staff AND/OR</td>
</tr>
<tr>
<td>4) FBI fingerprint check</td>
<td>Conducting background checks on backlog of current (existing) staff</td>
</tr>
<tr>
<td>5) NCIC National Sex Offender Registry (NSOR)</td>
<td></td>
</tr>
<tr>
<td>6) Inter-state state criminal registry</td>
<td></td>
</tr>
<tr>
<td>7) Inter-state state sex offender registry</td>
<td></td>
</tr>
<tr>
<td>8) Inter-state child abuse and neglect registry</td>
<td></td>
</tr>
</tbody>
</table>

States and Territories will apply for the initial waiver for a one-year period (starting October 1, 2018 and ending September 30, 2019) as part of the submission of this Plan. 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. Additional 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 renewal deadline (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Use questions 5.4.1a through 5.4.1d below to describe achievement of the milestone components, use questions 5.4.1e through 5.4.1h to provide the status for the remaining checks, and as applicable, use questions 5.4.1a through 5.4.1h to request a time-limited waiver for any allowable background check requirement.

a) Briefly summarize the requirements, policies and procedures for the search of the state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides. All civil applicant fingerprinting requests received from fingerprinting agencies throughout the state are processed within the Nevada Department of Public Safety, and includes a check of the Nevada Criminal History Repository.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

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 and 98.16(o).

iii. Has the search of the state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

☐ Yes.
☐ No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 09/30/2018

Describe the status of conducting the search of the state criminal registry or repository, with the use of fingerprints for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all
licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: The majority of providers in Nevada have completed this check during their normal hiring procedures. We are confident in attesting that all licensed providers, as well as license-exempt FFN providers, and their employees, have been sufficiently checked against the Nevada Criminal History Repository as required, per the Nevada Administrative Code and CCDP Policy Manual’s requirements. Nevada’s Out of School Time and Out of School Recreation providers have differing processes for completing these checks, depending on the locality/entity. The majority of these current providers and staff have sufficiently completed the check of the Nevada Criminal History Repository as part of their hiring procedures; however, we are aware of multiple providers who have not yet required their staff to undergo a fingerprint check. This concern lies mainly with Nevada’s License-exempt, Out of School Time and Out of School Recreation (before and after and break time), License-exempt, programs who receive CCDF dollars. The CCDP is currently conducting outreach efforts to identify current procedures within each program, as well as what barriers to compliance they may be facing.

iv. List the citation: NRS432A.170 & CCDP Policy Manual – Section 600

b) Briefly summarize the requirements, policies and procedures for the search of the state sex offender registry or repository in the state where the staff member resides. All civil applicant fingerprinting requests received from fingerprinting agencies throughout the state are processed within the Nevada Department of Public Safety, and includes a check of the Nevada 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 and 98.16(o). The State of Nevada Child Care Licensing ensures that all employees/providers of licensed, regulated, and registered centers have fingerprinting completed by a local law enforcement agency. These prints are then forwarded to NV DPS for the check of the Nevada Sex Offender Registry. Licensed providers in Washoe County have this check completed by DPS as well, upon receipt of the individual’s fingerprints.

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 and 98.16(o). Providers in license-exempt (FFN) scenarios are directed by The Children’s Cabinet or The Las Vegas Urban League to complete the appropriate release forms and obtain fingerprints from their local law enforcement agency. These prints are then forwarded to NV DPS for the check of the Nevada Sex Offender Registry.
iii. Has the search of the state sex offender registry or repository been conducted for all current (existing) child care staff?
   □ Yes
   □ No. Check here to indicate request for time-limited waiver for this requirement □ and enter the expected date of full implementation of this requirement. 09/30/2018

Describe the status of conducting the search of the state sex offender registry or repository for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: The majority of providers in Nevada have completed this check during their normal hiring procedures. We are confident in attesting that all licensed providers, as well as license-exempt FFN providers, and their employees, have been sufficiently checked against the Nevada Sex Offender Repository as required, per the Nevada Administrative Code and CCDP Policy Manual’s requirements. Nevada’s License-Exempt, Out of School Time and Out of School Recreation providers have differing processes for completing these checks, depending on the locality/entity. The majority of these current providers and staff have sufficiently completed the check of the Nevada Sex Offender Registry as part of their hiring procedures; however, we are aware of multiple providers who have not yet required their staff to undergo a fingerprint check. Additionally, we are aware that some programs who are not undergoing the fingerprint check have processes in place (a private company who conducts background checks) that actually do meet this requirement and are conducting this check. The CCDP is currently conducting outreach efforts to identify current procedures within each program, as well as what barriers to compliance they may be facing.

iv. List the citation: NRS432A.170 & CCDP Policy Manual – Section 600

c) Briefly summarize the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in the state where the staff member resides. All license-exempt (FFN) providers, as well as all licensed providers and their employees are required to complete the DPBH Consent and Release Form and have a check of the Nevada Child Abuse and Neglect Registry completed by the DPBH Child Care Licensing staff. Licensed providers in Washoe County have this check completed by the staff at Washoe County Child Care Licensing.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). All license-exempt (FFN) providers, as well as all licensed providers and their
employees complete the DPBH Consent and Release Form and have a check of the Nevada Child Abuse and Neglect Registry completed by the DPBH Child Care Licensing staff. Licensed providers in Washoe County have this check completed by the staff at Washoe County Child Care Licensing.

ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). Providers in license-exempt, out of school time or out of school recreation (before and after school, and break programs) scenarios have varying processes in place regarding this component. There are providers who utilize various private background check entities, which enable them to be in compliance with this component; however, there are providers of this type who are not yet in compliance with this requirement.

iii. Has the search of the state-based child abuse and neglect registry and database been conducted for all current (existing) child care staff?
   - Yes
   - No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 09/30/2018 Describe the status of conducting the search of the state-based child abuse and neglect registry and database for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: The majority of providers in Nevada have completed this check during their normal hiring procedures. We are confident in attesting that all licensed providers, as well as license-exempt FFN providers, and their employees, have been sufficiently checked against the Nevada Child Abuse and Neglect Registry, as required, per the Nevada Administrative Code and CCDP Policy Manual’s requirements. Nevada’s License-Exempt, Out of School Time and Out of School Recreation providers have differing processes for completing these checks, depending on the locality/entity. Many these current providers and staff have sufficiently completed the check of the Nevada Child Abuse and Neglect Registry. Additionally, we are aware that some of these programs have processes in place (a private company who conducts background checks) that actually do meet this requirement and are conducting this check. The CCDP is currently conducting outreach efforts to identify current procedures within each program, as well as what barriers to compliance they may be facing.

iv. List the citation: NRS432A.170 & CCDP Policy Manual – Section 600
d) Briefly summarize the requirements, policies and procedures for the FBI fingerprint check using Next Generation Identification. All civil applicant fingerprinting requests received from fingerprinting agencies throughout the state are processed within the Nevada Department of Public Safety, and includes the 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 and 98.16(o). The State of Nevada Child Care Licensing ensures that all employees/providers of licensed, regulated, and registered centers have fingerprinting completed by a local law enforcement agency. These prints are then forwarded to NV DPS for the FBI fingerprint check. Licensed providers in Washoe County have this check completed by DPS as well, upon receipt of the individual’s fingerprints.

ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o). Providers in license-exempt (FFN) scenarios are directed by The Children’s Cabinet or The Las Vegas Urban League to complete the appropriate release forms and obtain fingerprints from their local law enforcement agency. These prints are then forwarded to NV DPS for the check of the Nevada Criminal History Repository.

iii. Has the search of the FBI fingerprint check using Next Generation Identification been conducted for all current (existing) child care staff?

- Yes
- No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 09/30/2018 Describe the status of conducting the FBI fingerprint check using Next Generation Identification for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: The majority of providers in Nevada have completed this check during their normal hiring procedures. We are confident in attesting that all licensed providers, as well as license-exempt FFN providers, and their employees, have been sufficiently checked against the FBI database using fingerprinting as required, per the Nevada Administrative Code and CCDP Policy Manual’s requirements. Nevada’s Out of School Time and Out of School Recreation providers have differing processes for completing these checks, depending on the locality/entity. The majority of these current providers and staff have sufficiently completed the FBI fingerprint check as part of their hiring procedures; however, we are aware of multiple providers who have not yet required their staff to undergo a fingerprint check. This
Concern lies mainly with Nevada’s License-exempt, Out of School Time and Out of School Recreation (before and after and break time), License-exempt, programs who receive CCDF dollars. The CCDP is currently conducting outreach efforts to identify current procedures within each program, as well as what barriers to compliance they may be facing.

iv. List the citation: NRS432A.170 & CCDP Policy Manual – Section 600

e) Describe the status of the requirements, policies and procedures for the search of the NCIC’s National Sex Offender Registry.

- [ ] Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the search of the NCIC’s NSOR check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

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 and 98.16(o).

iii. List the citation:  

In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 09/30/2019

Describe the status of implementation of requirements, policies and procedures for the NCIC’s National Sex Offender Registry. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all prospective and existing licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Currently, the Nevada Department of Public Safety is the agency who completes the check of the NCIC’s Criminal History Repository, and they do not have access to run this specific check. The Lead Agency is working with DPS directly to learn more about their processes, and identify if and when we might be able to begin conducting this check as a standard during our fingerprinting/background check procedures. There are additional restrictions and legal requirements that must be navigated carefully by DPS in order to maintain their various compliance levels.

f) Describe the status of the requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states.
1. Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state criminal registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

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 and 98.16(o).

iii. List the citation:

☐ In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. Describe the status of implementation of requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

Currently, all licensed providers in Nevada (at the State level). Providers and staff of licensed centers and license-exempt (FFN) providers complete the Consent and Release Form, as well as the Out of State Verification Form. These enable the staff at DPBH Child Care Licensing to conduct these checks. The majority of our additional provider types are not in compliance with this component. The main struggle we experience, with all provider types, is the inability for other states to openly share this information with Nevada. We understand this as, to our knowledge, Nevada does not share information either. There is a major gap between the CCDF Requirement’s expectations and the reality of information sharing, or lack thereof, that exists between states. We are attempting to understand other states’ efforts in this area and will be continuing to seek TA and eventually be able to come into compliance in this area. Additionally, we are aware that some of our license-exempt, out of school time and out of school recreation programs have processes in place (a private company who conducts background checks) that actually do meet this requirement and are conducting this check. The CCDP is currently conducting outreach efforts to identify current procedures within each program, as well as what barriers to compliance they may be facing.
g) Describe the status of the requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years.

☐ Fully implemented for all required child care providers (all licensed, regulated or registered; and all (prospective and existing) child care providers eligible to provide care for children receiving CCDF assistance). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state sex offender registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

□

ii. Describe how these requirements, policies and procedures apply to all providers eligible to care for children receiving CCDF, in accordance with 98.43 and 98.16(o).

□

iii. List the citation:

☐

☐ In progress. Check here to indicate request for time-limited waiver for this requirement □ and enter the expected date of full implementation of this requirement. 09/30/2019

Describe the status of implementation of requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Currently, all licensed providers in Nevada (at the State level) are in compliance with this requirement. Providers and staff of licensed centers and license-exempt (FFN) providers complete the Consent and Release Form, as well as the Out of State Verification Form. These enable the staff at DPBH Child Care Licensing to conduct these checks. The majority of our additional provider types are not in compliance with this component. The main struggle we experience, with all provider types, is the inability for other states to openly share this information with Nevada. We understand this as, to our knowledge, Nevada does not share information either. There is a major gap between the CCDF Requirement’s expectations and the reality of information sharing, or lack thereof, that exists between states. We are attempting to understand other states’ efforts in this area and will be continuing to seek TA and eventually be able to come into compliance in this area. Additionally, we are aware that some of our license-exempt, out of school time and out of school recreation programs have processes in place (a private company who conducts background checks) that actually do meet this requirement and are conducting this check. The CCDP is currently conducting outreach efforts to
identify current procedures within each program, as well as what barriers to compliance they may be facing.

h) Describe the status of the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years.

- Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the state-based child abuse and neglect registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

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 and 98.16(o).

iii. List the citation:

- In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. 09/30/2019 Describe the status of implementation of requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges: Currently, all licensed providers in Nevada (at the State level, and in Washoe County) are in compliance with this requirement. Providers and staff of licensed centers and license-exempt (FFN) providers complete the Consent and Release Form, as well as the Out of State Verification Form. These enable the staff at DPBH Child Care Licensing to conduct these checks. The staff at Washoe County Child Care Licensing also conduct these checks for providers and staff at licensed centers within Washoe County. The majority of our additional provider types are not in compliance with this component. The main struggle we experience, with all provider types, is the inability for other states to openly share this information with Nevada. We understand this as, to our knowledge, Nevada does not share information either. There is a major gap between the CCDF Requirement expectations and the reality of information sharing, or lack thereof, that exists between states. We are attempting to understand other states’ efforts in this area and will be continuing to seek TA and eventually be able to come into compliance in this area. Additionally, we are aware that some of our license-exempt, out of school time and out of school recreation programs have processes in place (a private company who conducts background
checks) that actually do meet this requirement and are conducting this check. The CCDP is currently conducting outreach efforts to identify current procedures within each program, as well as what barriers to compliance they may be facing.

5.4.2 A child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective child care staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter. A prospective child care staff member may begin to work on a provisional basis for a child care provider after completing either a Federal Bureau of Investigation (FBI) fingerprint check or a search of the state/territory criminal registry or repository using fingerprints (in the state/territory where the staff member resides. However, the child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

5.4.3 Does the state/territory allow prospective staff members to begin work on a provisional basis (if supervised at all times) after completing the FBI fingerprint check or a fingerprint check of the state criminal registry or repository in the state where the child care staff member resides?

☐ No.
☐ Yes. Describe: Individuals are able to begin working as soon as they have initiated all components of the background check process.

5.4.4 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.

5.4.5 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)). The State of Nevada does not reciprocate or make available to other states, any criminal history information.

5.4.6 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)).

5.4.7 Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(h)?

☐ No.
☐ Yes. Describe:

5.4.8 The state/territory has a process for a child care staff member to appeal 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). 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)). Privacy is ensured by the communication process that is in place for DPS and its account holders (DPBH, Washoe County Sheriff’s Office, Las Vegas Metropolitan Police Dept, etc.). The request result of the background checks completed at DPS are returned to the account holder, who then notifies the individual/provider. This is provided as either a clearance or a denial – with no additional information. Within DPBH, background checks are handled through secure email, fax (faxes come through on a line that is secured to the division and in an area for approved personnel only) and regular mail. All Files are locked in a secured filing cabinets within a locked file room. Applicants information is handled as sensitive information for “authorized eyes only”. There are only certain persons within CCL allowed to handle background information within the Division and then information can only be shared with certain Division personnel. No information is allowed to be disseminated outside the Division period. Within Washoe County, The confidentiality of background requests, information taken to conduct them and the results themselves remain confidential by a number of required steps through our access to information through DPS – we are required to take numerous steps to ensure this when we make the background checks ourselves and so is the Washoe County Sheriff’s Department when they do. This includes not sharing results with any other person or agency except for the purpose requested, not allowing access to anyone who has not been trained in the requirement to handle, possess and evaluate the results or the information provided to retrieve the information, not allowing secondary dissemination except to an authorized user and to not duplicate the information or store it in the case files after they have been closed.

The individual may appeal the results of their background check with the appropriate agency (DPBH Child Care Licensing, Washoe County Child Care Licensing, Dept of Public Safety, etc.). Within DPBH, If an Applicant would like to appeal or challenge a finding they are allowed to do so. Applicants are required to contact the backgrounds department to inform of their want to challenge a finding in writing. Applicants are given various routes to help clear their background. It is allowed for an applicant to work to get their record expunged or work their program of charges towards dismissal (depending on the crime) as required by the courts. An applicant wanting to challenge a Substantiated CANS can appeal through the CPS agency and the Division will allow that process to proceed and the Division will honor the findings of said appeal. The ability to challenge is allowed for felony drug offense too. Also, it has been written into Statue that if a drug charge is more than 5 years old it will not be used against an applicant unless it is
an offense dealing with distribution and/or manufacturing, however, if it is for distribution and/or manufacturing, then the applicant would still be able to get their record expunged or work their program towards dismissal as deemed by the courts and the Division will uphold that decision and process. Within Washoe County, applicants are provided a three tier appeal process to provide new information, explain the circumstance and to have people independent of the issuing agency present to make decisions. The steps are first through the Sheriff’s Independent Review Board, next is to the Board of County Commissioners in private chambers (not a public meeting) and then through district court. The first step of an appeal by the Department is included in our regulations and consists of an internal appeal to the unit supervisor and program coordinator. Any category of denial is eligible for appeal – including a felony drug offense.

5.4.9 The State/Territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)). 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)). There are no additional fees for providers outside of the cost of fingerprints, which the provider is responsible for. CCDF will cover the cost of fingerprints for FFN providers effective 07/01/2018.

5.4.10 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 relatives, as defined by CCDF, must meet. Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

☐ 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)). 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 Describe how the state/territory developed its training and professional development Each State or Territory must describe their professional development framework for training, professional development, and post-secondary education, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care. 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. Describe how the state/territory’s framework for training and professional development addresses the following required elements:

- State/territory professional standards and competencies. Describe: The Nevada Registry published Nevada’s Core Knowledge Areas (CKA) and Core Competencies for Early Care and Education Professionals in 2007. The CKA are a set of content areas that define what caregivers should know and understand in order to provide quality experiences for children while the Core Competencies are a set of observable skills that reflect a caregiver’s knowledge of the Core Knowledge Areas. All community-based training approved by The Nevada Registry is linked to specific CKA. The CKA support the framework of the Nevada Early Care and Education Career Ladder and provide the foundation for the professional development system. They CKA are also aligned with Nevada’s Pre-K Standards.

- Career pathways. Describe: THE NEVADA EARLY CARE AND EDUCATION PROFESSIONAL CAREER LADDER is tailored specifically to the field of Early Care and Education (ECE) with 7 levels representing various combinations of formal education, training and direct experience (up to 4000 hours). Through the T.E.A.C.H. Early Childhood® Nevada Scholarship Program, early childhood professionals pursue Early Childhood Education (ECE) Certificates and Associate and Bachelor Degrees at participating Institutes of Higher Education within Nevada. The following pathways are available: Early Childhood Education Certificate; Associate of Applied Science: ECE, ECE Director/Administration, Infant/Toddler, Preschool; Associate of Arts: ECE; Bachelor of Science: ECE Administration/Non-License, ECE Pre-K-2nd Grade/License, Human Development and Family Studies.

- Advisory structure. Describe: Each quality initiative in the State of Nevada has developed an Advisory Board or committee that serves as a sounding board and helps to
guide the development of the various projects (i.e. TEACH, QRIS, The Nevada Registry, ECAC, and State and County Child Care Licensing).

- Articulation. Describe: Course titles and number are consistent between the Institutes of Higher Education. Articulation exists between ECE Associate of Arts degree pathways at community colleges and Bachelor of Science degree pathways at the universities. T.E.A.C.H. Early Childhood® Nevada facilitates a workgroup of ECE Higher Education professionals to discuss topics related to the ECE higher education pathways.

- Workforce information. Describe: The Nevada Registry publishes a biennial membership and training approval system report highlighting the demographics of the Registry membership. This report includes general demographics, wage information, educational attainment, career ladder information as well as training and trainer statistics. With over 7000 active members, this is currently the primary source of data specific to the ECE workforce. The Registry’s data is also referenced in The Children’s Cabinet’s biennial fact sheets that provide county-level data on the supply, demand, quality and availability of child care in Nevada.

- Financing. Describe: _____

The following phrases 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: Continuing education units are currently issued for inservice training approved by the Nevada Department of Education. Credit-bearing ECE courses are available through each of the institutions in the Nevada System of Higher Education and can be applied to meet the annual training requirements of Child Care Licensing (when applicable) at a ratio of 1 college credits = 15 training hours. Truckee Meadows Community College also offers four Skills Certificates that are designed as stackable credentials within the existing Early Childhood Education AA/AAS degree tracks. Students may earn the skills certificates as they progress toward an AA/AAS degree in early childhood education, or as professional development certifications for non-degree seeking students. The Skills Certificates are aligned with the NEVADA EARLY CARE AND EDUCATION PROFESSIONAL CAREER LADDER. Completion of each certificate advances individuals along the career pathway.

☐ Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory’s framework. Describe: All community based training approved by The Nevada Registry align with the established Core Knowledge Areas.

Other. Describe: _____

6.1.2 Describe how the state/territory developed its training and professional development requirements in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or with another state or state-designated cross-agency body if there is no
SAC that addresses the professional development, training, and education of child care providers and staff. The Nevada Registry’s training approval system launched in 2004 prior to the establishment of the SAC. As a result, the training and professional development requirements were not initially developed in direct consultation with the SAC. However, since that time, both the Registry Advisory Committee and the newly established Training Approval System Advisory Workgroup include representation from the SAC. Both committees help to guide, advise and support the ongoing development of the training and professional development system in Nevada.

6.1.3 Identify how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)). Check and describe all that apply.

- Financial assistance to attain credentials and post-secondary degrees. Describe: The T.E.A.C.H. Early Childhood® Nevada Scholarship Program provides financial assistance for ECE professionals to attain ECE credentials and degrees. Eighty percent (80%) of the cost of tuition and books are supported by the scholarship.

- Financial incentives linked to educational attainment and retention. Describe: The T.E.A.C.H. Early Childhood® Nevada Scholarship Program provides the following financial incentives for educational attainment and retention: 1) $50 incentive per semester to assist with costs related to tuition, travel and Internet; 2) a bonus for successfully completing a minimum of nine credits per year while receiving the college scholarship: $300 bonus for Associate degree scholarships and $400 bonus for Bachelor degree scholarships. Additionally, employers, sponsoring staff on the T.E.A.C.H. Early Childhood® Nevada Scholarship Program, provide $300 bonuses or 2% raises per year for successfully completed scholarships.

- Financial incentives and compensation improvements. Describe: ______

- Registered apprenticeship programs. Describe: ______

- Outreach to high school (including career and technical) students. Describe: T.E.A.C.H. Early Childhood® Nevada conducts outreach at high schools with ECE programs to inform high school students of the scholarship program and its eligibility criteria.

- Policies for paid sick leave. Describe: ______

- Policies for paid annual leave. Describe: ______

- Policies for health care benefits. Describe: ______

- Policies for retirement benefits. Describe: ______

- Support for providers’ mental health, such as training in reflective practices and stress-reduction techniques and health and mental health consultation services. Describe: At the annual Nevada Association for the Education of Young Children (NevAEYC) Early Childhood Conference sessions are offered that address providers’ mental health including yoga and relaxation techniques to reduce stress, self-regulation and calming, and to improve sleep.

- Other. Describe: To assist with retention, recipients of T.E.A.C.H. Early Childhood® Nevada scholarships remain employed with their sponsoring child care programs while receiving the scholarships; as well as commit to remaining employed for one year after the conclusion of the scholarships.
6.2 Training and Professional Development Requirements

The state/territory must develop training and professional development requirements, including pre-service or orientation training (to be completed within 3 months) and ongoing requirements designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF 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 requirements (98.44(b)(2)(ii)).

Health and Safety standards are at the core of training requirements for Family Friend and Neighbor providers. FFN providers must complete 30 hours of training within the first 90 days after registration on the Subsidy program. Traning must include:

- Administration of medication
- Building and physical premises safety
- Emergency preparedness and response planning
- Precautions in transporting children
- Prevention/response to food allergies
- Handling & storage of biocontaminants
- Identification of child abuse & neglect
- Nutrition and physical activity
- First-aid and CPR
- Prevention and control of infectious diseases
- Prevention of shaken baby syndrome
- SIDS and use of safe sleep practices

6.2.2 Describe how the state/territory’s training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)). All trainings are open to any provider in Nevada. There is tribal representation on The Nevada Registry Advisory Committee to help guide, advise and make recommendations concerning issues related to Nevada's professional development and training approval system. T.E.A.C.H. Early Childhood® Nevada scholarships are accessible to early childhood professionals associated with Indian tribes and tribal organizations with state licensed or tribally regulated child care programs. Currently, T.E.A.C.H. Early Childhood® Nevada collaborates with the Inter-Tribal Council of Nevada and a representative from the Inter-Tribal Council participated on the T.E.A.C.H. Early Childhood® Nevada Advisory Committee.
6.2.3 Describe how the state/territory will recruit and facilitate the participation of providers with limited English proficiency and persons with disabilities (98.16(dd)). R&R staff have Spanish-speaking staff members to register FFN providers who speak Spanish. All registration materials are available in Spanish. All information on training requirements is available in Spanish including the R&R FFN training catalog which has trainings offered in Spanish. Caring for Our Children Basics was also translated in Spanish and given to providers to prepare to their health & safety visit which is conducted by a Spanish-speaking staff member. For languages other than Spanish, Telelanguage service can be used to communicate with providers. This service is offered 24/7/365 and provides professional translation services for over 200 languages.

All R&R offices are ADA compliant and staff have training on the use of Relay Nevada (7-1-1) which is a free service that provides full telephone accessibility to people who are deaf, hard-of-hearing, deaf-blind and speech disabled. This service allows relay users to communicate with standard telephone users through specially trained relay operators. The call can be made to anywhere in Nevada 24/7/365 with no restrictions on the number, length, or type of calls. All calls are strictly confidential and no records of any conversations are maintained.

6.2.4 If the Lead Agency provides information or services to providers in other non-English languages, please identify the three primary languages offered or specify that the State has the ability to have translation/interpretation in primary and secondary languages. FFN registration and training materials are available in Spanish. For languages other than Spanish, Telelanguage service can be used to communicate with providers. This service is offered 24/7/365 and provides professional translation services for over 200 languages.

6.2.5 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)). With the exception of requiring specific training for caregivers working with infants under one year of age (Sudden Infant Death Syndrome and Shaken Baby Syndrome), Nevada’s Child Care Licensing training regulations apply to all licensed facilities, regardless of the type of setting (Child Care, Family Child Care, etc.) or the ages served. Family, Friend, and Neighbor (FFN) provider training options are available in Spanish and support is given to Spanish-speaking providers to access and complete web-based trainings. Additionally, if training requirement are specifically for infants and toddlers (i.e., SIDS and Shaken Baby Syndrome), these requirements are not enforced if the provider does not care for children in this care level. Caring for Children with Disabilities would count toward the mandatory initial training hours for FFN providers. We do not have training options specifically for Native Americans or Native Hawaiians.
6.2.6 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (658E(c)(3)(B)(i)).

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 CCDP subgrants CCDF funds to the Nevada Department of Education, who developed a survey to evaluate providers’ understanding of the McKinney-Vento Homeless Assistance Act’s definition of homeless, the effects of homelessness on children and families, the effects of homelessness on child behavior and learning, identifying the barriers of providing service to homeless children, as well as ascertain information on what additional resources would be helpful for them to better serve this population. The Las Vegas Urban League partners with Homeless Youth Alliance and participates in their Project Homeless Connect and other events in order to find and assist homeless families. Information, training and webinars are shared with staff. CCR&R staff attended Child Care for Families Experiencing Homelessness: Lessons Learned and the Road Ahead on May 2, 2018 and Serving Young Children Experiencing Homelessness: Practical Strategies for McKinney-Vento Liaisons and School-based Staff on May 8, 2018. Both webinars are from School House Connection.

b) Describe the state/territory’s training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving homeless children and their families (connects to question 3.2.2). Information, training and webinars are shared with staff. R&R staff attended Child Care for Families Experiencing Homelessness: Lessons Learned and the Road Ahead on May 2, 2018 and Serving Young Children Experiencing Homelessness: Practical Strategies for McKinney-Vento Liaisons and School-based Staff on May 8, 2018. Both webinars are from School House Connection. A survey was distributed at the 2018 Nevada Association for the Education of Young Children Early Childhood Conference to understand the topics of training and support is needed by child care providers. In addition, meetings have been held with the Nevada Department of Education McKinney-Vento liaison to discuss possible shared resources and training opportunities. We are in the process to determine if Initial online trainings offered by the Office of Head Start and Child Care can be approved by The Nevada Registry for child care training hours.

6.2.7 The 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.

- 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
The type of check-ins, including the frequency. Describe: FFN Providers must pass a Home Safety Inspection within the first 45 days of active care and annually thereafter, FFN files are kept and reviewed to ensure that Providers remain in compliance, CCR&R staff maintain regular contact with FFNs.

Other. Describe: All program requirements are outlined in the provider service agreement. Providers are also given the How to Be Successful on The Subsidy Program guide. This guide is also available in Spanish.

6.2.8 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.

a) Identify the strategies that the state/territory is developing and implementing for training and TA. There are two business series trainings available through a blended online training and cohort meetings training format. A Basic Center Management Certificate and a Budgeting and Risk Management Certificate are available. Providers who complete the series are reimbursed the cost of the training ($69).

hh) 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: Time management, developing a philosophy & mission, developing organizational structure and organizational culture, achieving a culture of improvement, assessment tools, civil right & labor laws, developing a fee structure, conducting cost-benefit analysis.

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.

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 Nevada Pre-K Content Standards are research based and aligned to the Nevada Academic Content Standards. The developmentally appropriate standards include the aligned K-12 standard to help support the Pre-K to K transition. The content standards are used for planning curriculum, assessing growth and development, and for sharing important information with families about their child’s growth and development.

b) Describe how the state/territory’s early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry. The Early Learning Guidelines provide a framework of developmental milestones to guide and support ECE Practitioners and professionals in their teaching practices. The guidelines are developmentally appropriate and help teachers to implement curriculum and improve child outcomes. The guidelines are aligned and the support the developmental growth from birth to kindergarten.

c) Check the domain areas included in the state/territory’s early learning and developmental guidelines. Check all that apply.

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other. Describe: _____

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 other state or state-designated cross-agency body if there is no SAC. The Early Learning Guidelines and the Nevada Pre-K Standards are written into the State Advisory Council’s Strategic plan that is currently going through the final edits and revisions. Aligning programs, resources and quality indicators supports best practices and better outcomes for Nevada’s children.

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. The Nevada Pre-K Content Standards were originally established in 2004 and updated in 2010. The companion crosswalk to the Nevada Academic Content Standards was completed in 2014 and provides guidance for aligning Math and Language and Literacy standards. The Early Learning Guidelines were established in 2013 and revised in 2014. Work groups are currently being developed to review and align the B-third grade standards to better support the State of Nevada’s B-3 plan.

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 Early Learning Guidelines and Pre-K Standards provide the guidance for the ECE workforce to establish appropriate outcomes for the children that they serve. The QRIS and licensing provide guidance to programs regarding the implementation of the guidelines and standards. Early Learning Guidelines were used as the basis for Nevada’s I’m Ready for K! What I know about Nevada’s Pre-K Standards and more: A booklet for my parents and teachers. This booklet contains all Nevada’s early learning and developmental guidelines written from a child’s voice. The booklet contains very specific skills that children will exhibit when they have mastered the standard area. This booklet is shared with all families on the Subsidy program, all early learning providers (including FFN providers), school district Pre-k programs, and all libraries across Nevada.

6.3.2 If quality funds are used to develop, maintain, or implement early learning 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)). This statewide program provides Nevada Registry approved training, research based resources and classroom materials provided free of charge to ECE professionals. Participants are given a pre and post evaluation to determine their knowledge of the Guidelines and Standards. Educating ECE teachers and parents on the use of the guidelines and standards is important so that they can understand how to support learning at home and improve their classroom practices to support their students outcomes.

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)).

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)). To ensure alignment a needs assessment will be completed after the adoption of the Nevada Early Childhood Advisory Council's strategic plan. Expected adoption date is June 2018 and a needs assessment will be completed over the summer. In addition to a needs assessment, all activities funded through Child Care Funds will be reviewed and move towards evidence based practices.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing.

- 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 - [Centers for Disease Control; Part B; Part C; Maternal and Child Health; Newmont Foundation (Elko only); Provider revenue generated from training classes is reinvested in training and professional development opportunities].

- 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

- 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 - [Preschool Development Grant; W.K. Kellogg Foundation; TANF]

- 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 – (W.K. Kellogg Foundation)

- 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 - [W.K. Kellogg Foundation; BUILD Initiative - Project HOPE]

- 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 – (Washoe County funds their own)

☐ 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

☐ 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

☐ 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

☐ 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
☐ Other funds - (Department of Defense via Child Care Aware of America – dollars support the training of providers to care for children with special needs)

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.

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 Children’s Cabinet receives funding to provide training across Nevada’s 8 Core Knowledge Areas including Human Growth & Development; Positive Ineractions and Guidance; Observation and Assessment; Enviornment and Curriculum; Health, Safety and Nutrition; Family and
Community Relationships; Leadership and Professional Development; and Management and Administration. In addition to CCDF funds, The Children’s Cabinet receives Centers for Disease Control through the Department of Public and Behavioral Health to address nutrition and physical activities. All trainings offered by The Children’s Cabinet are developed using the latest research in each specific area. All content includes age-specific strategies and is developmentally appropriate for each age.

- 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 5 for such behaviors. (See also section 2.5.) Describe: Nevada Technical Assistance Center for Social Emotional Interventions (TACSEI) is funded by CCDF, Maternal and Child Health, IDEA Part B, IDEA Part C, United Way of Northern Nevada and the Sierras (Elko Co.), and provider revenue funds. The Pyramid Model is the framework used by Nevada TACSEI. This tiered prevention and early intervention framework uses evidence-based practices to support children positive social emotional development. This program has resulted in a reduction of challenging behaviors as well as preschool expulsions. Nevada TACSEI services are provided through a collaborative effort of the University of Nevada, Reno; The Children’s Cabinet; and Nevada PEP. A statewide 14-member cross-sector leadership team provides Nevada TACSEI guidance.

- 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: The Children’s Cabinet receives CCDF funding to provide training to providers. Classes on how to

- 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: The Children’s Cabinet receives CCDF funding to provide training in selecting and implementing curricula and how to adapt curriculum to children’s learning styles. All classes use cross-reference to Nevada’s Early Learning Guidelines and PreK Standards. Environmental design classes are grounded in the Environment Rating Scales (ERS) and training content is aligned with Nevada’s QRIS.

- 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:

- Using data to guide program evaluation to ensure continuous improvement. Describe: The Children’s Cabinet receives CCDF funding to provide training to providers. Classes on how to
use program evaluation data to ensure continuous improvement are taught by QRIS coaches and sites’ quality improvement plans are based on ERS data. Additionally, classes on how to use child assessment data (individual and aggregate) to inform classroom practices are taught The Children’s Cabinet’s Nevada TACSEI coaches.

☐ Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe: _______

☐ Caring for and supporting the development of children with disabilities and developmental delays. Describe: The Children’s Cabinet receives CCDF funding to provide training to providers and all trainings include strategies for children with disabilities. The Children’s Cabinet’s classes use examples of children of all abilities using Universal Design concepts. Specific trainings for children with behavioral disabilities are included with The Children’s Cabinet’s TACSEI training modules and onsite coaching for TACSEI implementation sites and model demonstration sites. Intensive individualized training for severe behavior challenges is provided by Nevada Early Childhood Mental Health and is funded through the Division of Public and Behavioral Health.

☐ Supporting the positive development of school-age children. Describe: The Children’s Cabinet receives CCDF funding to training specifically for providers caring for school-age children. Trainings are offered across Nevada’s 8 Core Knowledge Areas: Human Growth & Development; Positive Ineractions and Guidance; Observation and Assessment; Environment and Curriculum; Health, Safety and Nutrition; Family and Community Relationships; Leadership and Professional Development; and Management and Administration. Examples of specific training topics include STEM/STEAM trainings; Literacy; how to develop staff to care for school-age children; bullying prevention; anger management; after school program management.

☐ Other. Describe: _______

ii) 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 [http://nvteach.org/college-information-2/]

☐ Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education
Other. Describe: In addition to providing scholarships for post-secondary education, T.E.A.C.H. Early Childhood® Nevada requires scholarship applicants to complete a Free Application for Federal Student Aid (FAFSA) each academic year.

7.3.2 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. QRI Ratings; Increase in provider’s higher education and movement on career ladder for T.E.A.C.H. Early Childhood® Nevada: 1) Number of Scholarship Recipients; 2) Number of Recipients Earning ECE Credentials and Degrees; 3) Number of credits attempted; 4) Number of credits successfully completed.

7.4 Quality Rating and Improvement System

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.

7.4.1 Does your state/territory have a quality rating and improvement system?

☐ 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. [http://www.nvsilverstatestars.org/] - Nevada’s QRIS is administered through the Nevada Department of Education, Office of Early Learning and Development. Nevada’s QRIS works with multiple partners, including: Statewide CCR&R for coaching, University of Nevada, Cooperative Extension for Assessments, and Nevada Institute for Children’s Research & Policy for evaluation.

☐ 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.

☐ If Yes, 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. Two assessment tools are used to determine a program’s QRIS rating – the Environment Rating Scales (center and family home provider model) and the CLASS (district pre-k QRIS model.) An outside evaluator, UNLV Nevada Institute for Children’s Research and Policy (NICRP), has been contracted to evaluate the impact of the star ratings on outcomes for children.

☐ No, but the state/territory is in the QRIS development phase.

☐ No, the state/territory has no plans for QRIS development.

7.4.2 QRIS participation.
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).

**THIS COULD CHANGE AFTER 2018 MARKET RATE.** Nevada’s QRIS is a 5-level (stars) rating system. Providers on subsidy with one star receive the state rate for reimbursement. Providers at 5-stars receive the 75th percentile rate. Providers at 2-start receive the state rate plus an addition 25% of the difference between the state rate and the 75th percentile rate. Providers at 3-stars receive the state rate plus an additional 50% of the difference between the state rate and the 75th percentile rate. Providers at 4-stars receive the state rate plus an additional 75% of the difference between the state rate and the 75th percentile rate. All tiered reimbursements are then rounded up to the nearest dollar. Nevada is phasing in mandatory participation for providers serving children receiving subsidy. Priority has been given to programs with the highest number of children receiving subsidy. We have currently enrolled the top 50 subsidy providers. There are currently no minimum rating requirements for programs, however if they are not meeting QRIS goals they will no longer be allowed to provide services to children receiving subsidy. All participating QRIS programs are required to sign an MOA with required timelines and participation requirements.

- Participation is required for all providers.

jj) 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 – (excluding license-exempt OST/OSR programs)
- Faith-based settings
- Tribally operated programs
- Other. Describe: _____

**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 7.4.7.

Do the state/territory’s quality improvement standards align with or have reciprocity with any of the following standards?

☐ 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).
  ☐ Other. Describe: ______
  ☐ None.

7.4.4 Do the state/territory’s quality standards build on its licensing requirements and other regulatory requirements?

☐ 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: ______
  ☐ Not linked.

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.

☐ No.
☐ Yes. If yes, check all that apply.
  ☐ One time grants, awards, or bonuses
  ☐ Ongoing or periodic quality stipends
  ☐ Higher subsidy payments
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. Subsidy reimbursement rates are dependent upon star rating levels. Grant amounts for materials and equipment are determined by license capacity. All other credits/benefits are available to all QRIS participating programs.

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.

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.

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.

☐ 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: Nevada is currently working with ZERO TO THREE to build a cadre of certified infant toddler trainers with intensive training in critical competencies in caring for infants and toddlers. Additionally in fiscal year 18, these certified trainers will train 165 early childhood professionals in the critical competencies for infant and toddlers. In fiscal year 19, ZERO TO
THREE will provide two critical competencies trainings (one in Reno and one in Las Vegas) for early childhood educators. Again in fiscal year 2020, ZERO TO THREE will provide 2 more trainings (one in Reno and one in Las Vegas) for early childhood educators. Through T.E.A.C.H. Early Childhood® Nevada, ECE professionals providing services to infants and toddlers can pursue Associate of Applied Science degrees in Early Childhood Education with an emphasis on Infants and Toddlers. Coursework includes, but is not limited to: Role Play for Infants and Toddlers; Infancy; Understanding Human Growth and Development; Guiding Infants and Toddlers; Literacy and the Young Child; Teaching the Two-Year Old; Principles of Child Guidance; Social/Emotional Development for Infants and Toddlers; Diversity in Children; Self Help Skills for Infants and Toddlers; and Infant and Toddler Curriculum. A training program has been implemented statewide for participants to earn an Infant Toddler CDA. The coursework is offered online or in-person and the program pays for all materials and fees for the participants. This is offered at no cost to the providers.

☐ 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: As part of the statewide CDA program offered through the University of Nevada Reno Cooperative Extension, infant-toddler specialist work with CDA participants and provide focused classroom observations and coaching.

☐ 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: Through Nevada Early Intervention Services a Partners Program has been implemented statewide. Through this program child care providers increase their competencies to include children with disabilities in child care programs and collaborate with other early interventions staff to provide opportunities during daily routines to support the child in achieving the outcomes on their Individualized Family Service Plan.

☐ Developing infant and toddler components within the state/territory’s QRIS, including classroom inventories and assessments. Describe: Infant toddler environment rating scale is used in all infant/toddler classrooms.

☐ 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: Nevada’s early learning guidelines are for infants and toddlers and are aligned to Nevada’s PreK Standards for children ages 3 through kindergarten entry.

☐ 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: ____________
☐ Other. Describe: ____

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. Progress will be measured by the number of participants that complete the Zero to Three Critical Competencies train the trainer requirements, students earning an associate’s degree or CDA with an emphasis on infants and toddlers, and improved Infant Toddler Environment Rating Scale scores from the QRIS.

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. _____

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: _____

7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?

☐ 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. _____

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 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. 

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 within the state/territory and the data on the extent to which the state or territory has met these measures. 

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?

- Yes, the state/territory has supports operating statewide or territory-wide. 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. **CCDF funds are used to support programs pursuing national accreditation including payment of application and annual report fees, providing technical assistance, and grants for materials.**

- Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide. Describe: 

- No, but the state/territory is in the accreditation development phase.

- 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. 

7.10 Program Standards

7.10.1 How does the state/territory support state/territory or local efforts to develop or adopt high-quality program standards relating to:

- Health. Describe the supports: 

- Mental health. Describe the supports: **Nevada uses the Pyramid Model through Nevada TACSEI to set standards for social emotional practices. CCDF funds are used to support TACSEI activities.**

- Nutrition. Describe the supports: **Nevada has nutrition standards that are taught through the Chronic Disease Prevention grant and is leveraged with CCDF funding. Standards used are based in Caring for Our Children 3rd Edition and CACFP standards.**

- Physical activity. Describe the supports: **Nevada has physical activity standards that are taught through the Chronic Disease Prevention grant and is leveraged with CCDF funding. Standards used are based in Caring for Our Children 3rd Edition.**
☐ Physical development. Describe the supports: ____

7.10.2 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. ____

7.11 Other Quality Improvement Activities

7.11.1 List and describe any other activities that the state/territory provides to improve the quality of child care services, which may include consumer and provider education activities, and describe the measurable indicators of progress 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. ____

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.

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program are informed and trained regarding program requirements and integrity. Check all that apply. Contractors have been notified of changes and meetings with staff have been conducted to review the new policies and redefine red flags. In addition, CCDP uses policy manual reviews, audit process, Quality Control reviews, Management Evaluation reviews, and Nevada Page 192 of 199 DWSS Investigations and Recovery staff are included when necessary.

☐ Issue policy manual

☐ Issue policy change notices

☐ Staff training. Describe: The Las Vegas Urban League and The Children’s Cabinet community entities provide training to their staff directly based on all current policies and procedures in place by the CCDP.

☐ Ongoing monitoring and assessment of policy implementation. Describe: The CCDP will inquire with the above-mentioned entities whenever there is a concern on case processing
and policy implementation procedures. The entities will provide refresher training and
guidance to their staff related to all policy implementation.

- Other. Describe: _____

8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management
and must ensure that financial practices follow generally accepted accounting principles (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, including the following:

- Verifying and processing billing records to ensure timely payments to providers. Describe:
  - Fiscal oversight of grants and contracts. Describe: _____
  - Tracking systems to ensure reasonable and allowable costs. Describe: _____
  - Other. Describe: _____

8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF
program. Activities can include, but are not limited to, the following:

- Conduct a risk assessment of policies and procedures. Describe: _____
- Establish checks and balances to ensure program integrity. Describe: _____
- Use supervisory reviews to ensure accuracy in eligibility determination. Describe: In addition
to supervisory case reviews of eligibility determinations, CCDP conduct on site reviews of
contractors through programmatic review processes, internal audits, Management
Evaluation Processes and Quality Control processes. These reviews are based on scopes of
work outlined in contracts/subgrants, and the Child Care Policy Manual.
- Other. Describe: _____

8.1.4 Lead Agencies are required to have processes in place to identify fraud and other program
violations to ensure program integrity. Program violations can include intentional and
unintentional client and/or provider violations, as defined by the Lead Agency. Administrative
errors refer to areas identified through the error-rate review process. Check and describe any
activities that the Lead Agency conducts to ensure program integrity.

a) Check which activities that the Lead Agency has chosen to conduct to identify unintentional
or intentional program violations.

- 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)).
- Run system reports that flag errors (include types). Describe: _____
- Review enrollment documents and attendance or billing records.
- Conduct supervisory staff reviews or quality assurance reviews.
- Audit provider records.
- Train staff on policy and/or audits.
- Other. Describe: _____
kk) Check which activities the Lead Agency has chosen to conduct to identify administrative 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).
- Run system reports that flag errors (include types). Describe: ______.
- Review enrollment documents and attendance or billing records.
- Conduct supervisory staff reviews or quality assurance reviews.
- Audit provider records.
- Train staff on policy and/or audits.
- Other. Describe: ___________.

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. Check and describe any activities that the Lead Agency uses to investigate and recover improper payments due to program violations or administrative errors, as defined by your state/territory.

a) Check activities that the Lead Agency uses to investigate and recover improper payments due to intentional program violations or fraud. 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: $0.00.
- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).
- Recover through repayment plans.
- Reduce payments in subsequent months.
- Recover through state/territory tax intercepts.
- Recover through other means.
- Establish a unit to investigate and collect improper payments and describe the composition of the unit below. Describe: The Las Vegas Urban League and The Children’s Cabinet work directly with the Lead Agency and the DWSS internal Investigations and Recovery Unit to establish debts and repayment of incorrect payments. Investigations & Recovery staff (I&R) use collateral sources to secure factual information and/or evidence to determine violator intent and program consequence.
- Other. Describe: ___________.

II) Describe the results of the Lead Agency activities regarding the investigation and recovery of fraud or intentional program violations. The I&R Unit is principally responsible for activities associated with Child Care and Development Program penalties of an accused individual suspected of program rule violations. However, any employee of the Division or the Child Care Staff may initiate penalty/disqualification action against an accused individual by completing Form 6021-AF, Administrative Disqualification/ Penalty Waiver. Staff initiating a penalty action must complete all required administrative penalty paperwork and be prepared to act in the capacity of a witness in front of the hearings officer. The Division’s
Central Office Investigations & Recovery (I&R) Unit maintains a central repository for all Nevada Child Care and Development Program IPVs. Before completion or submittal of Form 6021-AF, the worker must check for prior disqualifications by sending an email to welfinvest@dwss.nv.gov (Welfare Investigations) to ensure the appropriate penalty period is requested. The email must specify the program type (e.g., Child Care), last name, first name, date of birth, Social Security Number, and any alias of the accused individual. If past IPV penalties are identified, the I&R worker shall obtain a copy of the previous IPV waiver, hearing decision or criminal court disposition. These documents must be attached to the new IPV paperwork (Form 6021-AF) to substantiate pursuit of enhanced penalties. The IPV waiver may be used to address an accused individual’s program violations without prior submittal of the 6021-AF to the Hearing Unit. This permits accused individual acceptance of IPV penalty without the formality of the actual hearing. If this method is used, the accused individual must also sign the “Rights of the Accused and Waiver of Right to Administrative Disqualification Hearing/Acceptance of Penalty” section of Form 6021-AF acknowledging their understanding of their rights under program laws, regulation and rules. Note: If a signed IPV waiver is obtained, penalties must not be imposed until the case manager has forwarded the signed waiver, via referral to IRIS, and received notification from I&R staff. No further administrative appeal procedure exists after an accused individual waives his/her right to an administrative disqualification hearing and a disqualification penalty has been imposed. The accused individual however, is entitled to seek relief in a court having appropriate jurisdiction. To eliminate confusion and duplication of effort, all administrative penalty/disqualification requests and signed IPV waivers must be sent to the I&R Unit assigned responsibility for the submitting office. The approval of the I&R supervisor or their designee is mandatory to ensure prior penalty occurrences have been checked and case manager actions are not duplicating the actions of I&R staff. If a signed IPV Waiver or judgment of conviction is obtained, penalties shall not be imposed until the case manager has received notification from I&R staff. For open cases, penalties are imposed against current benefits as soon as administratively possible after the signed Waiver is approved by the designated I&R staff or receipt of the hearing officer’s penalty order or criminal court JOC and notification is received from I&R staff. Penalties will continue for the ordered period of time. For closed cases, the penalties will be imposed immediately after the signed waiver is approved by the designated I&R staff or, receipt of the hearing officer’s penalty order or a criminal court JOC and notification is received from I&R staff. Penalties will continue for the ordered period of time.

Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. 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: $0.00
- Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).
- Recover through repayment plans.
- Reduce payments in subsequent months.
- Recover through state/territory tax intercepts.
Recover through other means.

Establish a unit to investigate and collect improper payments. Describe: The Las Vegas Urban League and The Children’s Cabinet work directly with the Lead Agency and the DWSS internal Investigations and Recovery Unit to establish debts and repayment of incorrect payments. Investigations & Recovery staff (I&R) use collateral sources to secure factual information and/or evidence to determine violator intent and program consequence.

Other. Describe: __________

Check any activities that the Lead Agency will use to investigate and recover improper payments due to administrative errors.

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: $0.00
- Coordinate with and refer to the other state/territory agency(ies) (e.g., state/territory collection agency, law enforcement agency).
- Recover through repayment plans.
- Reduce payments in subsequent months.
- Recover through state/territory tax intercepts.
- Recover through other means.
- Establish a unit to investigate and collect improper payments and describe the composition of the unit below. The Las Vegas Urban League and The Children’s Cabinet work directly with the Lead Agency and the DWSS internal Investigations and Recovery Unit to establish debts and repayment of incorrect payments, both intentional and unintentionally, by recipients and . Investigations & Recovery staff (I&R) use collateral sources to secure factual information and/or evidence to determine violator intent and program consequence.
- Other. Describe: __________

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?

- Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified. Individuals found to have committed an intentional program violation are penalized as follows: NEON TANF clients are ineligible for benefits for a period of twelve months for the first violation, twenty four months for the second violation, and permanently for the third violation. During the ineligible period, the individuals required to participate in NEON work activities unless otherwise exempt; therefore, the individual is entitled to NEON support services, such as child care benefits. Non- TANF clients are decreased by two subsidy percentage steps for a period of six months for the first occurrence, three subsidy percentage steps for twelve months for the second occurrence.
- Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified. If an intentional program violation has
been validated by DWSS Investigations and Recovery Unit, the Chief of the Child Care and Development Program will render a decision on the appropriate action to be taken against the provider. The penalty can be either suspension for an appropriate amount of time, or termination from the program.

☐ Prosecute criminally.
☐ Other. Describe: ☐