

ADMINISTRATION FOR EFAMILIES



Reauthorization of the Child Care and Development Fund (CCDF)

CDC Networking Call February 25, 2015





What is CCDF Reauthorization?

- The Child Care and Development Block Grant (CCDBG) Act of 2014 (P.L. 113-186) was signed into law November 19, 2014. Reauthorizes the CCDF program for the first time since 1996.
- CCDF is a \$5.3 billion block grant program that provides funding to States, Territories, and Tribes to provide access to child care services for lowincome families and improve the quality of child care.
- The CCDBG Act of 2014 renews authority for CCDF through FY 2020 and represents an historic re-envisioning of the program.
- Focused on better balancing dual purposes to promote economic selfsufficiency for low-income families and support healthy development and school readiness needs of children.

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Scope of Reauthorization

- Reauthorization brings significant advancements to the program:
 - Makes child care safer by defining health and safety requirements for child care providers, requiring background checks, and inspection of facilities.
 - Provides more stability for parents and children through family-friendly eligibility policies.
 - Helps parents better understand child care choices available to them by improving accessibility and transparency of information about providers.
- Includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years.

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Key Features of Reauthorization

- Health and Safety
- Criminal Background Checks
- Monitoring
- Training & Professional
 Development
- Eligibility Policies
- Consumer Education

- Family Engagement
- Increased Quality Spending
- Infants and Toddlers
- Payment Rates & Provider Payment Practices
- Underserved Populations
- Tribal Provisions

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Keeping Children Safe and Healthy

States must establish policies and provide training in the following areas*: (658E(c)(2)(I))

- 1. Prevention and control of infectious diseases (including immunization);
- 2. SIDS and safe sleep practices;
- 3. Administration of medication;
- 4. Prevention/response to food allergies;

5. Building and physical premises safety, including identifying electrical hazards, bodies of water, and vehicular traffic;

6. Shaken baby syndrome and head trauma;

7. Emergency preparedness and response planning, for natural or man-caused event;

- 8. Storage of hazardous materials and bio contaminants;
- If applicable, precautions in transporting children; and
 First-aid and CPR.
- * States may include requirements related to nutrition and access to physical activity.

**States continue to have the option to exempt relatives from CCDF health and safety requirements.

- States must establish standards for group size limits and appropriate childto-provider ratios. (658E(c)(2)(H))
- States must provide parents information about access to developmental screening services. (658E(c)(2)(E)(ii))
- Providers must comply with child abuse and neglect reporting. (658E(c)(2)(L))
- States must explain any exemptions to licensing and why exemptions do not endanger health and safety of children in the care of such providers. (658E(c)(2)(F)(ii))



Establishing a Professional Pathway for Providers

Training & Professional Development (658E(c)(2)(G)):

- Requires establishment of professional development and training requirements to improve knowledge and skills of CCDF providers and the child care workforce.
- Professional development requirements should:
 - Include ongoing, annual training and a progression of professional development (which may include postsecondary education)
 - Include focus on social-emotional behavioral intervention models
- Incorporate State's Early Learning and Development Guidelines describing what children should know and be able to do. (Required at 658E(c)(2)(T))
- New list of quality activities specifically identifies professional development and provider accreditation as allowable quality activities.



Increased Focus on Improving Quality

Minimum Quality Spending Requirement (658G(a)):

- Phases-in increase in minimum quality set-aside from 4% to 9% over a 5-year period. In addition, requires States to spend minimum of 3% to improve the quality of care for infants and toddlers.
- Must establish outcome measures and evaluate progress of quality activities.

- Must spend quality funds on at least 1 of 10 specified quality activities:
 - Training and professional development;
 - Early learning and development guidelines;
 - Tiered quality rating system;
 - Infants and toddlers;
 - Child care resource & referral services;
 - Licensing and health and safety requirements;
 - Quality evaluation;
 - Accreditation;
 - Program standards; and
 - Other measurable quality activities as determined by the State.



Implementation and Effective Dates

- Several provisions have statutorily-mandated effective dates; other provisions became effective upon enactment.
- OCC will rely on the CCDF Plan to determine compliance with requirements in the new law. For States and Territories, the next Plan is due July 1, 2015 covering the period FY 2016-2018 (3-year Plan).
 - A Program Instruction with more detail about the upcoming Plan process and effective dates is expected to be published in December 2014.
- Waiver authority: Allows HHS to waive provisions or penalties in the law for up to 3 years (with option of 1 year extension) based on request from State identifying duplicative requirements preventing effective delivery of child care services, extraordinary circumstances, or an extended period of time for a State legislature to enact legislation to implement the statute. (658I(c))



Office of Child Care (OCC) Support Activities

OCC is excited to begin working in partnership with our State, Territory, and Tribal grantees, as well as our stakeholders throughout the country, to implement the CCDBG Act of 2014.

Resources and Support Activities:

- CCDF Reauthorization Resource Page: <u>http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization</u>
- Stakeholder input and engagement through outreach webinars and listening sessions.

- Training for CCDF Administrators in January 2015.
- Frequently Asked Questions (FAQ's) and email address: <u>ccdf.reauthorization@acf.hhs.gov</u>
- Policy guidance through Program Instructions