# Child Care and Development Fund (CCDF) Plan
# For
# South Dakota
# FFY 2016-2018

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## 1 Define CCDF Leadership and Coordination with Relevant Systems

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

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action the Plan describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public-private partnerships are being used to increase the supply and quality of child care services.

### 1.1 CCDF Leadership

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

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

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

Name of Lead Agency: Department of Social Services

Address of Lead Agency: 700 Governor's Drive, Pierre, SD 57501

Name and Title of the Lead Agency Official: Lynne A. Valenti, Cabinet Secretary

Phone Number: 605.773.3166

E-Mail Address: Lynne.Valenti@state.sd.us

Web Address for Lead Agency (if any): www.dss.sd.gov

### 1.1.2 Who is the CCDF administrator?

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

**a) Contact Information for CCDF Administrator:**

Name of CCDF Administrator: Patricia Monson

Title of CCDF Administrator: Division Director

Address of CCDF Administrator: 910 East Sioux - Pierre, SD 57501

Phone Number: 605.773.4766

E-Mail Address: Patricia.Monson@state.sd.us

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

Name of CCDF Co-Administrator:

Title of CCDF Co-Administrator:

Phone Number:

E-Mail Address:

Description of the role of the Co-Administrator:

**c) Primary Contact Information for the CCDF Program:**

Phone Number for CCDF program information (for the public) (if any):
(800)227.3020

Web Address for CCDF program (for the public) (if any): www.dss.sd.gov

Web Address for CCDF program policy manual (if any):
http://dss.sd.gov/childcare/childcareassistance/eligible.aspx

Web Address for CCDF program administrative rules (if any):
http://legis.sd.gov/Rules/RulesList.aspx

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

Outreach and Consumer Education (section 2)

Agency/Department/Entity Department of Social Services/Division of Child Care

Name of Lead Contact Patricia Monson

Subsidy/Financial Assistance (section 3 and section 4)

Agency/Department/Entity Department of Social Services/Division of Child Care

Name of Lead Contact Amy Gorham

Licensing/Monitoring (section 5)

Agency/Department/Entity Department of Social Services/Division of Child Care

Name of Lead Contact Carroll Forsch

Child Care Workforce (section 6)

Agency/Department/Entity Department of Social Services/Division of Child Care

Name of Lead Contact Carroll Forsch

Quality Improvement (section 7)

Agency/Department/Entity Department of Social Services/Division of Child Care

Name of Lead Contact Melissa Fluckey

Grantee Accountability/Program Integrity (section 8)

Agency/Department/Entity Department of Social Services/Division of Child Care

Name of Lead Contact Joy Fisk

## 1.2 CCDF Policy Decision Authority

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

### 1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level?

In other words, identify whether CCDF program rules and policies are established by the state or territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

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

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

- ☐ Eligibility rules and policies (e.g., income limits) are set by the:
  - ☐ State/Territory
  - ☐ County.

    If checked, describe the type of eligibility policies the county can set

  - ☐ Other local entity (e.g., workforce boards, early learning coalitions).

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

  - ☐ Other.

    Describe:

- ☐ Sliding fee scale is set by the:
  - ☐ State/Territory
  - ☐ County

    If checked, describe the type of sliding fee scale policies the county can set

  - ☐ Other local entity (e.g., workforce boards, early learning coalitions).

    If checked, identify the entity (e.g. workforce board) and describe the type of sliding fee scale policies the local entity(ies) can set

  - ☐ Other.

    Describe:

- ☐ Payment rates are set by the:
  - ☐ State/Territory
  - ☐ County.

    If checked, describe the type of payment rate policies the county can set

☐ Other local entity (e.g., workforce boards, early learning coalitions).

If checked, identify the entity (e.g. workforce board) and describe the type of payment rate policies the local entity(ies) can set

☐ Other.

Describe:

☐ Other.

List and describe (e.g., quality improvement systems, payment practices):

### 1.2.2 How is the CCDF program operated in your State/Territory?

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

a) Who determines eligibility?

☑ CCDF Lead Agency

☐ TANF agency

Describe.

☐ Other State/Territory agency.

Describe.

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

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☐ Other.

Describe.

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

☑ CCDF Lead Agency

☑ TANF agency

Describe.

South Dakota Temporary Assistance for Needy Families (TANF) is a temporary public assistance work program administered by the Department of Social Services (DSS) and the Department of Labor and Regulation (DOL). The Division of Child Care (CCS) has an ongoing relationship with both entities allowing for coordination of services and accountability for families receiving TANF benefits. DSS and DOL staff work closely with families to assess child care needs. Staff working with TANF families inform families of the option to choose child care providers who are eligible to receive CCDF payment. Staff assists families with locating and securing child care and applying for child care assistance. In addition, ongoing contracts for slots in Sioux Falls and Rapid City ensure child care availability for this vulnerable population.

☐ Other State/Territory agency.

Describe.

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

Describe.

☑ Child care resource and referral agencies

Describe.

The Helpline Center in Sioux Falls, is the only formal resource and referral agency operating in South Dakota. The Helpline Center actively provides referral services and other resources to assist families in locating child care in the Sioux Falls community. Local funding is utilized to support this program.

☑ Community-based organizations

Describe.

Regional Early Childhood Enrichment programs assist parents in obtaining information about child care upon request.

☐ Other.

Describe.

c) Who issues payments?

☑ CCDF Lead Agency

☐ TANF agency

Describe.

☐ Other State/Territory agency.

Describe.

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

Describe.

☐ Child care resource and referral agencies

Describe.

☐ Community-based organizations

Describe.

☐ Other.

Describe.

## 1.3 Consultation in the Development of the State Plan

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

(658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

### 1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply).

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

☑ [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns

Describe:

Consultations with the Sioux Falls Health Department were held on April 14, 2015 regarding CCDF changes and updates to the Memorandum of Understanding for dually registered "city" and "state" providers. The Federal Law requirements and the State Plan were discussed and input on implementation of the Plan was solicited. In addition, there are ongoing consultations throughout the year with Sioux Falls government leaders. Other general purpose local governments are consulted with throughout the year concerning city ordinance issues. These ongoing communications help to inform the state plan.

☐ [REQUIRED IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act).

Describe:

If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?

☐ Yes,

☐ No.

If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy

All the major entities in state government involved with young children have been consulted with, informed and input has been invited regarding the requirements of the new state plan as it relates to reauthorization. In addition, all provider associations and related organizations have been updated multiple times on the changes and have provided input in the development of the state plan. These entities include Department of Education (specifically 21st Century Community Learning, Child & Adult Nutrition Services, State Liaison for Homeless Education, and the Head Start Collaboration office); Department of Health, (specifically Maternal Child Health) and Department of Human Services (Developmental Disabilities) and the Department of Public Safety (State Inspection Program). Information was shared and input was gathered via various meetings throughout the year.

☑ [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes.

Describe, including which Tribe(s) you consulted with

South Dakota tribes were involved in the planning process via a phone consultation. This consultation was held on March 17, 2015. Tribes participating were: Yankton Sioux, Rosebud Sioux, Cheyenne River, Lower Brule Sioux, and Flandreau tribes. The agenda included the following: Discussion of new requirements in the law; how this will affect South Dakota as it pertains to general plan provisions; disaster preparedness; public results of monitoring and inspection; 12-month eligibility; graduated phase-out; homeless children and outreach; underserved areas; child care providers additional training requirements, background checks and frequency of inspections; quality of providers/consumer information and timelines; public hearing. Additionally, input and feedback from Tribal Child Care Coordinators was solicited regarding partnerships, tribal initiatives and next steps. Licensing specialists in each region of the state consult with tribal child care coordinators a minimum of two times per year regarding child care issues and share state and local updates, needs and concerns.

☐ Check N/A if no Indian Tribes and/or Tribal organizations in the State

☑ State/Territory agency responsible for public education.

Describe:

The South Dakota Department of Education (DOE) is the state agency responsible for public education and houses key offices/programs. Consultation on early childhood/afterschool issues, including the Early Learning Guidelines, Head Start, child care food program, homeless populations, and 21st Century Community Learning Centers is ongoing. Offices include Birth-to-Three, 21st Century Community Learning Centers, Child & Adult Nutrition Services, State Liaison for Homeless Education, and the Head Start Collaboration office. Child Care Services has met individually and in groups with representatives of these programs regarding the State Plan and has requested and received input.

☑ State agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool).

Describe:

The primary agency responsible for programs for young children with special needs is the South Dakota Department of Education. Consultation occurred with the Department of Education Birth-to-Three Inter-Agency Council to review State Plan and solicit input at each of the quarterly meetings starting in December of 2014. A strong partnership exists as this entity is responsible for the development of the Early Learning Guidelines. In addition, the state CCDF administrator is a member of the advisory council. Consultation also occurred with the State Advisory Council for Developmental Disabilities on April 24, 2015 to ensure the Council is aware of the upcoming changes. The State Administrator is an appointed member of this council. The deputy CCDF administrator is a member of the Consumer Advisory Committee for the Sanford School of Medicine - USD Center for Disabilities. On June 4, 2015 input was solicited regarding reauthorization.

☑ State/Territory institutions for higher education, including community colleges.

Describe:

Consultation with the following higher education institutions with regard to articulation agreements and the State plan has occurred: South Dakota State University, Oglala Lakota College, Black Hills State University, Sisseton Wahpeton College and Southeast Technical University. Agreements articulate the South Dakota Child Development Associate training into college credit toward an associate or bachelor's degree in early childhood.

☑ State/Territory agency responsible for child care licensing.

Describe:

Child Care Licensing is housed in the same division as all other programs associated with CCDF funding. Therefore, ongoing consultation has occurred as well as actual drafting the plan.

☑ State/Territory office/director for Head Start State collaboration

Describe:

A close partnership exists with the Head Start Collaboration Office and the State Head Start Association for ease of ongoing consultation. Presentations have been made to the State Head Start Association on reauthorization and the opportunities for future partnerships. Input was invited at this meeting which was on September 10, 2015. The Head Start Collaboration director is housed within the Department of Education - Division of Educational Services and Support/Early Learning office with the Birth-to -Three program.

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

Describe:

A consultation was held with Youth and Family Services (YFS) on March 2, 2015 to discuss the CCDBG Act of 2014, how the law impacts current procedures and processes and ideas for future partnerships. In addition, the provisions of the CCDF State Plan and the Early Head Start-Child Care Partnership grant were reviewed as YFS is an Early Head Start Partnership grantee. Arrangements have been made to prioritize applications received at the Division of Child Care to ensure services for participating families are received in a timely manner.

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

Describe:

A consultation was held with representatives of the CACFP on February 20, 2015 regarding development of the State Plan and upcoming changes for regulated child care programs through the CCDBG Act of 2014. The Division of Child Care and CACFP are routinely in communication throughout the year.

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

Describe:

The South Dakota Department of Health is responsible for the administration of the WIC program and has a statewide network of Community Health clinics. The Division of Child

Care consults and collaborates with the Community Health Nurses regarding the distribution of age-appropriate books to children from 6 months to age 5 during their well-child check-ups. The Division also has an ongoing partnership with the Department of Health with regard to the South Dakota fitCare program, which trains child care providers on effective methods to integrate nutrition and planned physical activity for children attending their programs. Consultations are ongoing to ensure alignment with the goals of both CCDF and Department of Health funding requirements.

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

Describe:

☑ State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant

Describe:

The Division of Child Care is represented on the advisory board for the Home Visiting Program. A meeting was held on December 2, 2014 where information was shared and input received regarding the pending requirements of the CCDF reauthorization. Community surveys were discussed that are being conducted for the Early Comprehensive Childhood Systems work and possible coordination opportunities to determine where needs exist. Information regarding reauthorization was again shared at the December 2, 2015 advisory meeting.

☑ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:

The agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT) is the Department of Social Services - Division of Medical Services. Communication and consultation occurred with this Division to ensure compliance with the reauthorization requirements surrounding screening, referral and access.

☑ McKinney-Vento State coordinators for Homeless Education.

Describe:

The Department of Education is the agency responsible for the McKinney-Vento Plan in South Dakota, and employees the State Coordinator for Homeless Education. Division of Child Care staff consulted with the State Homeless Education coordinator on March 20, 2015 to discuss the State Plan and seek input. Other informal communications and the

development of a plan to ensure compliance with the reauthorization requirements followed.

☑ State/Territory agency responsible for public health.

Describe:

The SD Department of Health (DOH) is the agency responsible for public health. Ongoing consultations occur with DOH on immunization standards, communicable disease prevention, Healthy South Dakota Activities and WIC. These activities inform the state plan. For example, the DOH reviews all floor plans for child care centers to ensure health and safety compliance. These reviews include new and expanding programs or those in the process of remodeling. A formal interagency agreement is in place for this process. Child care regulations regarding immunizations are based on the recommendations from DOH, funding for training and technical assistance is made available from DOH for child care providers regarding health issues in the child care setting. The WIC program often serves as the bridge that links participants to preventive health care and an entry point into the public and private health care system. WIC facilitates referrals, coordinates activities, and links participants with services such as physician and other health care services, alcohol and drug abuse treatment, well-baby care, family health, family planning, and social services programs. Referral to these services is an important part of WIC.

☑ State/Territory agency responsible for mental health.

Describe:

The Division of Behavioral Health is housed within the Department of Social Services. Consultations are ongoing as to the needs of young children and services provided by the local Community Mental Health offices. The addition or expansion of any social-emotional project requires consultation with this division.

☑ State/Territory agency responsible for child welfare.

Describe:

The Department of Social Services - Division of Child Protection Services is housed within the Department of Social Services. Several consultations have occurred involving the new reauthorization requirements primarily involving expanded central registry screenings. In addition, ongoing consultations occur regarding policies and procedures surrounding child abuse and neglect investigations involving child care providers.

☑ State/Territory liaison for military child care programs.

Describe:

The Division of Child Care's contact for military child care programs for South Dakota is the Lead Child & Youth Program Coordinator with SD National Guard (SDNG) Child & Youth Programs. Through this Program Coordinator access is available to the SD Family Assistance Center, which is within the SDNG Service Member & Family Support Office. Consultation was held November 6, 2015.

☑ State/Territory agency responsible for employment services/workforce development.

Describe:

The state agency responsible for employment services/workforce development is the Department of Labor. At a statewide meeting on March 25, 2015 changes relating to the Child Care & Development Block Grant Act of 2014 were presented to Department of Labor Staff. Input was gathered and is being used to inform planning for the next three years. A regional meeting with Department of Social Services, Division of Economic Assistance TANF/SNAP Benefit Specialists was held on October 27, 2015, to consult and seek input regarding the state plan. This particular region includes three tribal areas.

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

The State agency responsible for TANF is the Department of Social Services - Division of Economic Assistance. Communications and consultations with TANF staff occur on an ongoing basis. Because the Division of Child Care and the Division of Economic Assistance are both housed in the same department, a number of opportunities exist for interaction, consultation and input throughout the year. In addition, the Economic Assistance Division director serves on the Department of Social Services management team along with the lead agency CCDF administrator. Weekly communication opportunities exist for consultation and input in an effort to align programs to the extent practicable.

☑ State/community agencies serving refugee or immigrant families.

Describe:

A consultation meeting was held in December 2015 with Lutheran Social Services Center for New Americans in Sioux Falls to explore future coordination possibilities.

☑ Child care resource and referral agencies.

Describe:

An informal consultation was held with the Helpline Center for the Sioux Falls area. The communication was to create an awareness of the new reauthorization requirements and

to begin dialogue for future coordination efforts.

☑ Provider groups or associations.

Describe:

The following state and regional associations were presented information and consulted with regarding the requirements of the CCDF state plan: Siouxland Association of Child Care Directors (Sioux Falls area) - 2.17.15 and 4.14.15; South Dakota Association for the Education of Young Children - 4.9.15; South Dakota School-Age Care Alliance (Out-of-School-Time Directors Retreat) - 4.17.15; Family Child Care Professionals of South Dakota - 5.1.15 and their board on 1.23.16; Siouxland Child Care Directors - 7.10.15; South Dakota Head Start Association - 9.10.15; South Dakota School-Age Care Alliance (Statewide School-Age Conference) - 10.9.15; and Northern Hills Child Care Center Directors on 1/17.16.

☐ Worker organizations.

Describe:

☐ Parent groups or organizations.

Describe:

☐ Other.

Describe:

**1.3.2. Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)).**

Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, the description should include:

a) Date(s) of notice of public hearing: 11/20/2015

**Reminder** - Must be at least 20 calendar days prior to the date of the public hearing.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice.
Notice of public hearing is run as a display ad in major South Dakota newspapers. Accommodations are made for anyone with a disability and all hearing sites are accessible. A flyer is printed and e-mailed to all regulated child care providers statewide (including tribal) informing them of the public hearing and their opportunity for input. Notice is given to various child care-related associations and advocacy groups. Notice is also placed on the Division of Child Care web site: http://dss.sd.gov/childcare/

c) Date(s) of public hearing(s): 12/17/2015

**Reminder** - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were addressed The hearing is held at 910 East Sioux, Pierre SD and also via webinar.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s) The proposed plan is made available on the Division of Child Care website and hard copy by mail to those requesting.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan? Comments provided by the public are noted and taken into consideration throughout the consultation process and at the time of the hearing

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

☐ Working with advisory committees.

Describe:

☐ Working with child care resource and referral agencies.

Describe:

☐ Providing translation in other languages.

Describe:

☑ Making available on the Lead Agency website.

List the website:

http://dss.sd.gov/childcare/

☑ Sharing through social media (Twitter, Facebook, Instagram, email, etc.).

Describe:

A flyer is e-mailed to all regulated child care providers statewide (including tribal) informing them of the public hearing and their opportunity for input. Notice is given to various child care-related associations and advocacy groups. Notice is also placed on the Division of Child Care web site.

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

Describe:

E-mail notice is given to various child care-related associations and advocacy groups. Notice is also placed on the Division of Child Care web site.

☐ Other.

Describe:

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

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

### 1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O))

Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list

appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

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

Describe:

Although there is no state-level funded pre-school in South Dakota, coordination occurs regarding accessibility and continuity of care through ongoing meetings with the Department of Education including the Head Start Collaboration Office housed in the same department. This coordination will continue over the next three years and will align, when possible, to the goal of ensuring all students are proficient at reading when entering 4th grade. One strategy is to increase the quality and availability of early literacy opportunities for children ages birth to 5 in ways such as supporting early literacy programs, providing caregivers professional development in early literacy, and working with colleges and universities to emphasize early literacy strands within early childhood programs, http://www.doe.sd.gov/outcomes/reading.aspx . The Birth to Three (Part C) program considers all children enrolled to be potentially eligible for the Part B special education pre-school program. For each child transitioning from the Birth to Three program, notification is sent to both the appropriate local education agency and the state Special Education Preschool Program. The Preschool Grants Program, authorized under Section 619 of Part B of IDEA serves children age 3-5 by the local school district. Within the Division of Child Care coordination is demonstrated by allowing child care providers the opportunity to bill for the hours a child may be attending a pre-school operated by the school district including Head Start services with a goal to eliminate barriers to participation in these programs.

At the local level a partnership exists with the Rapid City Starting Strong program which is a market-based, parent-driven, voluntary program.Community scholarships are provided for 3 and 4-year-old children from low-income families.The preschool experience involves partnerships with six child care centers with the project coordination provided by the regional Early Childhood Enrichment training network.Child care centers participating can blend CCDF funding with local funding for a seamless service.This program provides the

foundation for school readiness, positive attitudes toward education, less need for remedial and special education services in schools, fewer problems with truancy and delinquency, higher graduation rates and higher earnings and success in later life.

Coordination also is in effect and ongoing with the Head Start Partnership grantee in Rapid City to ensure full-day/full-year seamless services for children who also receive CCDF funding. Plans in the next three years will be to coordinate with any Head Start grantees to encourage full-day/full-year services via child care licensing and the child care CCDF subsidy program.

☑ [REQUIRED IF APPLICABLE] Tribal early childhood programs.

Describe, including which Tribes coordinating with:

At the State Level, the Division of Child Care connects with the tribal Child Care Administrators at least once per year for program updates and to inform the coordinators of any changes that may affect their service areas. At the local level, child care licensing specialists assigned to each tribe support information sharing and collaboration with the goal of increasing the number of licensed and/or registered child care programs and to expand accessibility and continuity of care. At the current time there are 25 state regulated programs operating on tribal land which includes the following tribes: Cheyenne River Sioux, Crow Creek Sioux, Flandreau Santee Sioux, Lower Brule Sioux, Oglala Sioux, Rosebud Sioux, Sisseton-Wahpeton Sioux and Yankton Sioux. Regional Early Childhood Enrichment agencies also provide access to training and technical assistance for tribal child care programs. Collaboration with tribal Head Start programs for training is also available. Monthly coordination occurs with tribal child care administrators in regard to families who are dually eligible to ensure there is no unnecessary duplication of services.

☐ Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.

☑ [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities.

Describe:

At the state level participation and membership in several advisory groups and councils will support efforts to promote opportunities for and increase child care options for the unique needs of children with special needs. Partnerships with regional Early Childhood Enrichment (ECE) training network increases awareness and knowledge of resources and services available for families of children with special needs to include infants and toddlers. Families experiencing difficulty in finding and/or maintaining child care for an infant or toddler with special needs can receive special services on a case by case basis. The team consists of

regional ECE staff, licensing specialists, subsidy program specialists and others depending on the need. The goal is to ensure the most appropriate care setting for the child and that caregivers are properly training and compensated. Also at the local level, parenting classes are available through the ECE training system for those with children age birth to three. The classes emphasize responsive caregiving and include support for children with special needs. These classes are offered throughout the year at no cost.

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

Describe:

The Division of Child Care will follow up with local shelters and provide information, technical assistance and training as needed on available services related to child care and early education. The child care subsidy application has been updated with a description and question to reflect a client's 'homeless' category. If applicants check 'yes' on the form, their application will be given priority and caseworkers follow-up with a personal phone call. Special consideration will be given for applications with missing information, such as allowing extra time for submission, calling employers on behalf of the applicant, requesting work/school schedules, etc. An educational component will be made available through the regional Early Childhood Enrichment offices for child care providers to learn how best to serve homeless families and the services available to them. Ongoing discussions regarding the needs of children experiencing homelessness will be held with the Homeless Liaison State Coordinator, local shelters, and local School Liaison coordinators to meet the goal of linking services and increase accessibility.

☑ [REQUIRED] Early childhood programs serving children in foster care.

Describe:

Coordination of services for foster children is a priority within the Department of Social Services with the goal of ensuring child care is available for foster parents who are working and/or attending school. For foster parents, the only requirement is that they are working and there is no minimum work/school requirement. Co-payments are waived and any additional costs not covered through CCDF are paid through the Division Child Protection. The Divisions of Child Care and Child Protection work together to ensure a seamless service for children in foster care. In addition, if the foster parent moves into the adoption phase a conference call is held with the social worker, foster parent and subsidy supervisor to ensure the foster parent is aware of the program requirements. Co-payments continue to be waived, but all other program requirements must be met.

☑ State/Territory agency responsible for child care licensing.

Describe:

The child care licensing program is located within the CCDF lead agency. Licensing specialists work specifically in the child care area and are available to provide technical assistance and support to start-up and existing programs. The goal of the licensing program is to increase the supply of child care through community development efforts working with organizations and individuals. Licensing specialists provide technical assistance in the areas of occupancy approval, fire and life safety requirements, and prevention of communicable disease, budgeting, program management, staffing and policy development. Staff work with programs on budgeting, coordination with other entities such as Child Protection Services, local governments, Department of Public Safety to ensure minimum health and safety standards are met.

☑ State/Territory agency with Head Start State collaboration grant.

Describe:

The Department of Education houses the Head Start State Collaboration Grant. The goal is to continue to increase promotion of the Pathways to Professional Development Career Lattice program and to provide stand-alone and integrated training on the Early Learning Guidelines. Another goal is to increase the number of Head Start programs that become licensed, increasing access to services for children receiving child care subsidy and opportunities to blend funding for high quality services. At the current time, 15 Head Start programs are licensed in South Dakota. The Division of Child Care continues to collaborate with this office with regard to early childhood training and support, including the Early Learning Guidelines and the Pathways to Professional Development program. A positive working relationship with the Head Start Collaboration office has existed since the early 1990s. In addition, agreements are in place between the Department of Social Services TANF and Medicaid offices and Head Start to establish a collaborative relationship between the Head Start and Early Head Start Programs.

☐ State Advisory Council authorized by the Head Start Act.

Describe:

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

Describe:

☑ McKinney-Vento State coordinators for Homeless Education or local educational agency

McKinney-Vento liaisons

Describe:

The Division of Child Care collaborates with the South Dakota Department of Education Title X Part C - McKinney-Vento Homeless Education office and the SD Housing Development Authority in efforts to ensure child care services are available for the homeless population in South Dakota. Information is provided about child care services, training and technical assistance to the shelter coordinators and Homeless Education Liaison Officers through links provided by the Homeless Education Director. The Early Childhood Self-Assessment Tool for Family Shelters, developed by the Administration for Children and Families/US Department of Health and Human Services (HHS) has been disseminated to local shelters and the Homeless Liaison Officers by the Homeless Shelter Coordinator with South Dakota Housing Authority. Opportunities to provide information at statewide meetings, conferences or webinars will be explored.

☑ Child care resource and referral agencies.

Describe:

The Helpline Center is the only traditional resource and referral agency available in South Dakota. The Division of Child Care (CCS) local licensing specialists provide an orientation to new Helpline Center staff regarding services and resources available that can be shared with families searching for child care. CCS also provides the Helpline Center with monthly updates on the status of regulated child care programs so families receive current information on the availability of the various child care options. Plans are to increase communication and coordination efforts as they relate to the new reauthorization requirements.

☑ State/Territory agency responsible for public education.

Describe:

The South Dakota Department of Education (DOE) is the state agency responsible for public education and houses key offices/programs which coordinate early childhood/afterschool issues, including the early learning guidelines, Head Start, child care food program, homeless populations, and 21st Century Community Learning Centers. Offices include Birth-to-Three, 21st Century Community Learning Centers, Child & Adult Care Food Program (CACFP), State Liaison for Homeless Education, and the Head Start Collaboration office. Collaboration and coordination with these programs will continue with regard to early childhood and school-age services.

☑ State/Territory institutions for higher education, including community colleges.

Describe:

Division of Child Care has articulation agreements with five higher education institutions: South Dakota State University (SDSU), Black Hills State University (BHSU), Southeast Technical Institute, Oglala Lakota College, and Sisseton-Wahpeton College. Each of the institutions has agreed to articulate the 120 hours of training from the South Dakota Child Development Associate Training Program and 30-hr Pathways to Professional Development Series into 10 - 12 college credits. A representative from the Division of Child Care serves on the Southeast Technical Institute Advisory Committee for the Early Childhood Specialist Program. The goal of this coordination is to ensure there is a clear path to higher education for the child care workforce which promotes continuity of care. Through increased accessibility to degree seeking programs in higher education, providers are able to increase access to ongoing professional development opportunities and gain knowledge that will enable them to increase their ability to provide nurturing and responsive care.

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

Describe:

The Division of Child Care Services (CCS) partners with the CACFP to increase the number of child care programs available to families to include for-profit and non-profit child care centers and family child care providers. The knowledge, skills, and monetary benefits of participation in the CACFP are used to recruit and retain regulated child care providers, especially in rural areas of the state. CCS shares CACFP information with all potential child care providers inquiring with CCS about starting a child care business. CCS meets regularly with CACFP program sponsors and will continue to share with the names of newly regulated providers who might be interested in participating in their program.

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

Describe:

Continuity in care for children is enhanced with a partnership with the South Dakota Department of Health (DOH) and the Division of Child Care in the delivery of the *fit*Care program. The program emphasizes a holistic approach to living a healthy lifestyle that includes child obesity prevention training focused on 4 components: nutrition, physical activity, emotional management and rest/relaxation. The *fit*Care curriculum goes beyond the traditional areas of obesity prevention education to include information on how emotions and the amount of sleep an individual receives affects their ability to make healthy choices. Providers learn how they can help children in their care to identify their moods and how their

mood and amount of rest can affect their daily choices. This also reinforces children's social and emotional learning strengthening their ongoing relationships by being better able to understand how their emotions affect other areas of their lives. In addition, the program also includes a self-assessment and on-site technical assistance to help provider's implement specific goal within their classroom. DOH provides funding directly to the five Early Childhood Enrichment (ECE) agencies who deliver the program statewide.

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

Describe:

LifeScape Family Support 360 offers a wide array of services and supports to families of individuals with a developmental disability. Supports are designed specifically for each family and are intended to help families stay together. The Division of Child Care partners with LifeScape Family Support 360 local coordinators to assist with families whose children have special needs. These families often do not meet the eligibility requirements of the regular child care program and are experiencing special challenges in obtaining affordable child care. Families qualifying under the special service needs program are eligible if their income falls below 85% of the State Median Income and a higher rate can be authorized for provider reimbursement. Family Support 360 coordinators assist families in applying for childcare assistance and work closely with the family and the Child Care Program Subsidy Specialist to identify the child's needs. If the family needs help securing child care, the Child Care Program Subsidy Specialist works with the Child Care Licensing Specialist to identify and secure child care arrangements. If special training is needed for the child care provider, the regional ECE training program can provide training support depending on the issue. Here4Youth is a child care program in Sioux Falls, which offers services to all children while specializing in the provision of quality services to those with disabilities. With a 1:5 staff to child ratio, children receive the attention they need to enjoy learning and enrichment. Here4Youth is able to meet the needs of children who may not be successful in other settings. The Division of Child Care works closely with these families and the child care program to secure a higher rate of reimbursement which may be necessary to sustain the placement and ensure continuity of care.

☑ State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant.

Describe:

The State Administrator is a member of the Home Visiting State Advisory Board. During the

regularly scheduled meetings coordination occurs on an ongoing basis regarding child care needs for the various areas served by the program. The program is operated in areas of high need to include Rapid City, Sioux Falls, Pine Ridge, Kyle, Huron, Lawrence/Butte counties, Roberts/Day/Marshall counties and Lyman/Stanley/Hughes counties. The goal of the program is improved maternal and newborn health; reduction in child abuse, neglect, or maltreatment and reduction of emergency room visits; improvements in school readiness and achievement; domestic violence awareness includes screening, referrals and safety plans; family economic self-sufficiency; and coordination and referrals for other community resources and support.

☑ Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Describe:

The agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT) is the Department of Social Services - Division of Medical Services. Ongoing communication and coordination occurs with this Division to ensure compliance with the reauthorization requirements surrounding screening, referral and access. Information about EPSDT and Medicaid programs is provided to Child Care, TANF and other families in need. Folders with program information and brochures, contact information are provided to families at local offices statewide. Information is also made available to parents receiving child care subsidy with initial and subsequent certificates.

☑ State/Territory agency responsible for public health.

Describe:

Coordination of services occurs at many levels with the state Department of Health. Numerous services are available to support pregnant and postpartum women, infants, young children and adolescents. Nearly all programs intersect with the Division of Child Care which includes coordination efforts with WIC, immunizations, growth and developmental screening and guidance, well-child check-ups and screenings, etc. The "For Baby's Sake" web site has additional information for parents of infants and young children (http://www.forbabysakesd.com/) Coordination with these programs encourages continuity of care, enhancements and alignment of quality services and linkages to comprehensive services for vulnerable populations.

☑ State/Territory agency responsible for mental health.

Describe:

The agency/division responsible for mental health is housed within the Department of Social

Services. Collaboration occurs at weekly management meetings and on an as needed basis regarding the needs of young children in child care.

☑ State/Territory agency responsible for child welfare.

Describe:

The Division of Child Protection Services (CPS) is housed within the Department of Social Services and is responsible for child welfare. Child Care Services and CPS will continue collaboration to ensure all staff in regulated child care programs are screened against the Central Registry of Child Abuse and Neglect and ensure allegations of child abuse are investigated in a timely manner to keep children safe in out-of-home care.

☑ State/Territory liaison for military child care programs.

Describe:

The Division of Child Care coordinates with representatives from the SD National Guard (SDNG) Child & Youth Programs Family Assistance Center, which is within the SDNG Service Member & Family Support Office. Military families may apply for Army Fee Assistance and can use a community child care program. In order to receive payment, an annual inspection is required which is conducted by the Division of Child Care and recognized by the military. Help in paying for child care is also available through the Division of Child Care for military families who meet the eligibility criteria. When a family indicates on the application they are in the military, and if the family approves, information on working with military families will be made available to the corresponding child care provider. Information flyers about all DSS, DOE, DOH programs have been made available which will be disseminated to military families by the Family Assistance Center's regional specialists (in person and in newsletters). The Child & Youth Program Coordinator will provide information and resources as needed, such as training for the regional ECE programs and child care providers.

☐ State/Territory agency responsible for employment services/workforce development.

Describe:

☑ State/Territory agency responsible for Temporary Assistance for Needy Families (TANF).

Describe:

The Temporary Assistance for Needy Families (TANF) program is administered by the SD Department of Social Services and the SD Department of Labor and Regulation. For non-reservation communities, the eligibility component is administered by the Department of Social Services and the Department of Labor is contracted to administer the work

component. For communities on the reservation, the Department of Social Services administers the eligibility and work components. Child Care Services has an on-going relationship with the DLR and the DSS staff that allows for the coordination of services for families receiving TANF benefits.

☐ State/Territory community agencies serving refugee or immigrant families

Describe:

Currently, the majority of the refugee or immigrant populations are located in Sioux Falls, as well as Aberdeen, Huron and Watertown in the eastern third part of the state. Community agencies serving these populations are Lutheran Social Services Center for New Americans in Sioux Falls, the Multi-Cultural Center of Sioux Falls, the Sisters of the Presentation of the Blessed Virgin Mary in Sioux Falls, the Aberdeen Area Hispanic Outreach in Aberdeen, and the Benedictine Multi-cultural Center in Watertown. Plans are to coordinate with these agencies to ensure families in need of child care are properly assisted.

☑ Provider groups or associations.

Describe:

Coordination for compliance with the various requirements of reauthorization will be handled by convening provider groups and associations in the coming months.

☐ Worker organizations.

Describe:

☑ Parent groups or organizations.

Describe:

The South Dakota Parent Connection connects families caring for children/youth with the full range of disabilities or special health care needs to information, training and resources. Individual assistance, workshops, printed materials and online resources are available to families as well as professionals. A Family Resource Guide provides information on local, state, and national resources available to meet the needs of SD families raising children with disabilities and/or special health care needs. The state child care administrator and staff from SD Parent Connection sit on various advisory boards together where information is shared. Plans are to increase coordination to the greatest extent possible with Parent Connection to identify ongoing needs and availability of services.

☑ Other.

Describe:

Sioux Falls Child Care Workforce Alliance was established in 2016 through a grant awarded

to Sioux Falls area child care program by the South Dakota Community Foundation. The grant activities focuses on the creation of a city-wide alliance that will identify solutions to attract, develop, and retain a child care workforce to meet the Sioux Falls industry needs. The Division of Child Care will continue to participate as a resource partner for this organization.

## 1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii)) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

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

☑ Yes, If yes, describe at a minimum:

How do you define "combine"

Pooled together into one.

Which funds will you combine

Title XX and CCDF

Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

The goal is to allow for-profit child care centers to participate in the Child & Adult Care Food Program. Since 1999, South Dakota has pooled Title XX funding to recognize the role proprietary providers play in serving low-income children. Section 17(a) of the National School Lunch Act, as amended, allows a proprietary organizations to participate in the CACFP. Participating for-profit child care centers can be reimbursed for nutritious meals served to enrolled children. This participation on the part of the child care center enhances the nutritional value of meals served to all enrolled children and increases the availably and sustainability of quality child care to low-income families.

Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)

The funding is combined at the state level so that for-profit child care programs who receive Title XX funds for at least 25 percent of enrolled children or licensed capacity (whichever is less) can participate.

How are the funds tracked and method of oversight

The Department of Education, Child & Adult Nutrition Services monitors programs to ensure the 25 percent requirement is met. Currently 13 for-profit centers, including 15 sites are operating in South Dakota. Monitoring visits are completed unannounced at each agency at least once every three years.

☐ No.

## 1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community-

based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

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

**State/Territory Level**

1. In South Dakota, a partnership exists with the Department of Education (DOE) 21st Century Community Learning Centers (21st CCLC). The goal of this partnership is for programs to become state licensed; receive information about subsidy and training & technical assistance through the Division of Child Care and the ECE system. Programs provide services to school-age children before and after school and during the summer months. Methods include the provision of funding through DOE to establish afterschool and summer programs for children in K-6th. Information on state licensing requirements, the child care subsidy program and training/technical assistance through the ECE system is made available by DOE and the Division of Child Care. As partners, representatives of both agencies provide resource support, guidance and recommendations to the SD Afterschool Partnership (statewide Mott network) and the SD School-Age Care Alliance. The outcome goal is to increase the number and quality of afterschool and summer programs for 5-12 year-olds. The Department of Education 21st Century program currently provides funding to support over 80 afterschool programs statewide.
2. Partnerships are in place with the South Dakota Child Care & Head Start Associations, including Family Child Care Professionals of SD (FCCPSD), SD Association of Child Care Directors (SDACCD), SD Association for the Education of Young Children (SDAEYC), SD School Age Care Alliance (SoDakSACA) and SD Head Start Association (SDHSA). The goal of these partnerships is for SD providers to become more aware of licensing rules and regulations and quality improvement methods and opportunities. Methods include providing information to the state child care associations in the form of workshop presentations at state conferences, providing articles about licensing, quality, etc. in their association newsletters, and participate as resource partners to their association boards and/or committees. The outcome would be cohesive sharing of information and support for quality improvement activities.

3. A partnership exists between CypherWorx, Inc., South Dakota State University/Family Resource Network and the Division of Child Care regarding online training for afterschool providers. The goal of this partnership is an online training program specific to South Dakota Out-of-School Time (OST) providers with an option to earn the state OST Credential. The method will include CypherWorx developing a SD-specific online 'portal' allowing child care providers in South Dakota to access all courses, including the OST Credential courses with a link back to our state's Early Childhood Training System. The Family Resource Network (regional ECE program) will be the state point of contact for the portal. The anticipated outcome would be increased access to affordable OST-specific training making it easier to earn the South Dakota state OST credential. Increased staff holding OST credentials statewide increases the competence of school-age staff and thus the quality of school-age programs.
4. A partnership exists with South Dakota Department of Health & Sanford Health System. The goal is that early childhood caregivers will have the knowledge and tools to provide an environment that promotes a healthy lifestyle for children in their care. The method includes the continuation of the fitCare program. The fitCare initiative emphasizes a holistic approach to living a healthy lifestyle and considers being fit as the ability to interplay between nutrition, physical activity, emotional management and rest to achieve a healthy lifestyle. The fitCare program consists of 3 parts, training, self-assessment, and technical assistance delivered through the Early Childhood Enrichment System (ECE) statewide. The overall outcome is caregivers are educated by the ECE staff on the fit concept and are able to work with individual staff to affect behavior change in individual practice.
5. The Division of Child Care continues to partner with five Early Childhood Enrichment (ECE) offices with a goal to provide training and technical assistance to child care and afterschool programs statewide. The method includes a contract for services with each of the ECE offices to provide ongoing training and technical assistance services to our care providers. The outcome anticipated is that child care and afterschool providers in South Dakota have accessible training opportunities and technical assistance to meet licensing requirements and ultimately, higher quality care.
6. The Division of Child Care is partnering with the South Dakota Department of Education (DOE) with the goal to revise and expand Early Learning Guidelines from birth to age 5. Staff members from DOE and the Division of Child Care serve together on the Early Learning Guidelines Oversight Committee. The method includes the convening of the Early Learning Guidelines Review Panel which meets on a bi-monthly basis via Dakota Digital Network (DDN). The group is divided into two subgroups, one that works on revising the 3-5 guidelines and the other to work on the development of infant and toddler guidelines. Review panel members include staff from the DOE and the Division of Child Care, Early Child Enrichment agency staff, higher education, Head Start, and parents. A waiver in this area has been requested for September 30, 2017 and if approved the outcome will be the completion of comprehensive birth to age 5 Early Learning Guidelines.
7. The Division of Child Care will partner with the SD Afterschool Partnership (statewide afterschool network) with a goal of creating and sustaining quality afterschool programs. In

the next three years, the methods will include exploring opportunities to work together on possible projects such as adopting volunteer quality afterschool criteria, establishing an afterschool program self-assessment tool, and establishing an information center on best practices & sustainability. The projected outcome would be higher quality afterschool programs which are long-running and self-sustained.

**County/Local Level**

1. Starting Strong is a partnership with the regional ECE program also known as Early Childhood Connections in Rapid City. Several local partners work toward the goal of providing a high-quality preschool experience for children whose families have socio-economic challenges, research-based risk factors and who reside within the Rapid City Area School district boundaries. The method used allows parents of eligible children to choose a quality preschool from among approved programs operating within child care centers that provide transportation, nutrition and qualified teachers. The hoped-for outcome is that children obtain high-quality early education and enter school ready to learn.
2. Another partnership exists with Early Childhood Connections and Behavior Management Systems in Rapid City. The goal is to promote the social-emotional and behavioral health of young children in partnership with families and to prevent and/or limit expulsion and suspension practices in early childhood settings. Methods include offering technical assistance and coaching, observations and assessments to child care programs to increase the caregiver's ability to manage difficult behaviors and provide families with access to mental health services. This includes support of children with challenging and/or aggressive behaviors often at risk of suspension or expulsion. The anticipated outcome is children are able to remain in the most appropriate environment while services and strategies are provided to improve areas of delay, and provide continuity and consistency of care.
3. The Division of Child Care partners with South Dakota Department of Health and Sanford Children's CHILD Services, Sioux Falls (regional ECE program) to deliver the Physical Activity Technical Assistance program as a compliment to the fitCare program. The goal is for child care programs to utilize evidence-based, age-appropriate physical activity policies that ensure children of all ages have optimal physical activity as part of their child care experience. Activities include intensive work with child care program directors on policy development and implementation. The overall goal is to reduce childhood obesity.
4. The Division of Child Care partners with The Right Turn - Early Childhood Training Network (regional ECE program) which works closely with the following entities with the goal of leveraging existing service delivery systems to increase the supply and quality of child care services through various methods: a) SD Vocational Rehabilitation Services to recruit, train and support individuals with disabilities for successful careers in the child care industry; b) SD Discovery Center to promote Harvest of the Month (http://www.sdharvestofthemonth.org/) to encourage children to get excited about eating more fruits and vegetables; c) Capital Area United Way, who provides funding to purchase quality educational toys and materials for a lending library and sponsors free and reduced cost "babysitter" training for area youth; d) an established career pathway to future child

care professionals by referring students from the Adult Education and Literacy program to the Child Development Associate training program; e) American Red Cross to provide disaster relief assistance to families when needed; and f) staff participate in an Early Childhood Advocacy Group facilitated by the SD Head Start Association. The outcome is improving the availability of quality child care programs.

5. The Division of Child Care partners with Sanford CHILD Services (regional ECE program) working closely with the local Association of the Education of Young Children to bring a national speaker to a one day educational event for child care providers. The goal of this partnership is to provide child care providers an opportunity to have access to national professionals and their knowledge of caring for young children. This event draws over 800 child care providers. The outcome of this event is a knowledge gain that child care providers can put into practice in their care of young children.
6. The Division of Child Care will partner with the University of South Dakota (USD) Nursing Program to deliver training on Safe Sleep Practices for Infants. The USD Nursing Program received a grant from the Bush Foundation through the Sioux Falls Community Foundation to provide training on safe sleep practices for infants to city registered family child care providers in the city of Sioux Falls. Following the training each family child care provider will be eligible to receive one pack n play. This project is based on a similar training model where the Division of Child Care and the Department of Health partnered to deliver safe sleep training as a result of a state task force on infant mortality.
7. Other partners at the local level include a partnership with the South Dakota Lions Vision Program and Sanford CHILD Services (regional ECE program). The ECE coordinates these screenings for children in child care. The goal of this partnership is to provide young children an opportunity to access vision screening in the convenience of their child care setting. In addition, another partnership is in place with the Northern Plains Eye foundation to provide free vision screenings at child care centers in Rapid City in partnership with Early Childhood Connections (regional ECE program). The ECE program assists in arranging dates and other details of the program. The outcome of these services is that children will be referred as needed for further assistance with potential vision issues.

**Program Level**

1. The Division of Child Care partners with two child care centers in the state for the contacting of slots. The goal of this partnership is to provide child care options for families needing emergency care who are eligible for TANF. The method includes: Local TANF staff refer families who have not yet secured a formal child care arrangement. In addition, 21 child care centers participate in a special program specific for TANF families where the Division of Child Care can pay the full weekly rate of care. No additional costs can be passed on to the family. The outcome of this partnership is to increase the number of programs available to this vulnerable population and ensure accessibility to care.

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

## Systems

States may use funds to support or establish Child Care Resource and Referral (CCR&R systems (also see section 7.4). If they do, there are specific requirements for CCR&Rs (658E(c)(3)(B)(iii)) These include:

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

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

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

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

If yes, the local or regional referral agency is required to do all of the activities listed here.

See also related follow-up questions in Section 7.1 and 7.4. Does the CCR&R system provide all services identified below:

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

## 1.8 Disaster Preparedness and Response Plan

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

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

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

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/16

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The Department of Social Services (DSS) Continuity of Operations Plan (COOP) is in place and provides over-arching guidance across all departmental divisions. Within the DSS COOP there are provisions for: Concept of Operations (including Planning, COOP execution and implementation, mission-essential functions, etc.); and Procedures (including personnel coordination, vital records and resources, telecommunications, site support procedures, etc.). Included in the over-arching DSS COOP are provisions that support the establishment of temporary child care options to ensure safe environments for the continuation of child care services for those working during an emergency event; and for the continuation of payment to child care providers for care of children while parents work. Each DSS division addresses the needs of families and children in their own division-driven COOP. The Division of Child Care Services (CCS) COOP, currently under development, outlines the framework to support child care providers and assist in the provision of safe and healthy child care alternatives for families in the event of an emergency or disaster. The specific steps Child Care Services will take in assisting providers in the event of an emergency are yet to be completed. In addition, a Response Plan template has been created to assist child care providers in developing an Emergency Preparedness and Response Plan for their program. The Response Plan template includes provisions for evacuation, relocation, shelter-in-place, lock-down, communication and reunification of families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.

Unmet requirement - Identify the requirement(s) to be implemented Guidelines for continuing CCDF assistance and child care services after a disaster (which may include provision of temporary child care, and temporary operating standards for child care after a disaster)

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

The Child Care Services COOP currently includes overarching provisions for activating the Plan at the time of an emergency including provisions for supporting the establishment of temporary child care options to ensure safe environments for the continuation of child care servicesduring an emergency event; and to ensure payment is made to child care providers for care of children while parents work. Child Care Services will add the following action steps to the current CCS COOP to ensure these over-arching provisions are carried out in an efficient manner to support providers after an emergency: mobilizing staff to emergency areas to determine facility damage and community needs as a results of the emergency; activate the Emergency Operations Center as the hub for calls, questions, and as a means for providers to communicate with Child Care Services staff who may not be immediately available; assist in facilitating temporary child care options by inspecting proposed facilities to ensure safety of children; make visits to child care facilities to check on providers; assure continuation of services such as complaint visits, etc. by using other Department staff if necessary; and communicate the needs of local child care providers to emergency personnel for additional assistance.

Projected start date for each activity: 07/01/2015
Projected end date for each activity: 07/15/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Public Safety

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

Convene stakeholders to discuss the Child Care Services COOP goals and action steps and seek input to the draft plan.Stakeholders include personnel from the Department of Health; Department of Public Safety; Emergency Management, the

Early Childhood Enrichment programs, and child care providers.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/01/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Health, Department of Public Safety, Emergency Management, Early Childhood Enrichment programs, child care providers

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

The draft of the Child Care Services COOP includesprovisions that support the establishment of temporary child care options to ensure safe environments for the continuation of child care services during an emergency event; provisions for the continuation of payment to child care providers for care of children while parents work; and action steps to meet those provisions. Child Care Services will evaluate the feedback from the stakeholder meeting and finalize the plan based on input gathered. The COOP will be placed on the Department of Social Services web page. State and local entities will be informed of the plan and how to access.

Projected start date for each activity: 08/02/2016
Projected end date for each activity: 09/15/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Administrative rules will be updated to include a requirement for a written emergency preparedness and response plan that includes the following areas: procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accomodation of infants and toddlers, children with disabilities and children with chronic medical conditions. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

A webinar will be offered for all child care providers to reviewthe new Administrative Rule related to the need for an emergency preparedness and response plan that includes all the required procedures.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

A webinar will be held for center directors and family child care providers who will be responsible for implementing the procedures required in law and Administrative

Rule. This webinar will focus on the different required procedures through development of an emergency preparedness plan. The sample template developed by CCS will be shared with all participants.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 08/31/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
CCS will notify providers of resources availableon the CCS website that include: tips to assist in preparing for an emergency; security awareness tips for child care providers; the CCS Emergency Preparedness Plan template, and more.

Projected start date for each activity: 08/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Administrative rules will be updated to require procedures for staff and volunteer emergency preparedness training and practice drills.

Projected start date for each activity: 06/01/15
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Administrative Rule change requires staff and volunteers attend orientation training in emergency preparedness within 90 days after employment.

Projected start date for each activity: 06/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

## 2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12. The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

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

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

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care services. (658D(b)(1)(A)), 658E(c)(2)(E)(i)(1))

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

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

Every two years child care providers are surveyed to determine the local market rates for child care. The survey also gathers information by county as to the type of care offered such as evening, holiday, infant, overnight, drop-in, etc. It also identifies how often providers have openings lasting longer than one month for infant, toddler, preschool and school-age care. This information is compiled to determine where in the state there may be a lack of services. If it is determined a lack of child care exists in a particular area, efforts are made to recruit additional child care providers. In addition, a survey of families who have been receiving child care services has been conducted. If trends are noted in a particular county, efforts are made to identify possible barriers and find solutions.

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

The Department of Social Services has full-time and itinerant offices located in 63 communities throughout South Dakota. Each office makes efforts in their direct work with families to ensure their child care needs are met and make referrals accordingly. As many as 99% of the families receiving child care assistance are also known to TANF, SNAP or Medicaid. All partners such as the regional ECE offices, Helpline Center (211), Birth-to-Three program, Head Start, etc. serving vulnerable or low-income populations assist with informing families regarding child care and are aware of who in the state to contact.

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

The Department of Social Services web site has each division highlighted which includes the Division of Child Care and the associated services. Brochures and pamplets are also available at local DSS offices and with other partner programs. Each parent of a newborn also receives a packet of information (Bright Start box) with services and child development information mailed directly to their home.

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

☑ Electronically via online application, mobile app or email.

Provide link http://dss.sd.gov/childcare/childcareassistance/apply.aspx

☐ In-person interview or orientation.

Describe agencies where these may occur:

☐ Phone

☑ Mail

☐ At the child care site

☐ At a child care resource and referral agency.

☐ Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations.

Describe:

☐ Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time).

Describe:

☑ Other strategies.

Describe:

Parents can also apply for assistance via fax 24/7. This is a popular option in South Dakota, as many child care programs assist families by faxing applications directly for processing.

## 2.2 Consumer Education Website

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

### 2.2.1 The State/Territory certifies that it collects and disseminates the following

**information to parents, providers and the general public:**

- information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP) for which families may also qualify.
- Individuals with Disabilities Education Act (IDEA) programs and services,
- Research and best practices in child development, including social and emotional development, early childhood development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity), and
- State/Territory 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).

☑ Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.7 below.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

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

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

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

The Department of Social Services has full-time and itinerant offices located in 63 communities throughout South Dakota. Each office makes efforts in their direct work with families to ensure their child care needs are met and make referrals accordingly. As many as 99% of the families receiving child care assistance are also known to TANF, SNAP or Medicaid. This is significant because it makes it easier to coordinate resources and share information. It also makes it easier to meet the individual needs of the families. For families applying for TANF or SNAP, an in-person interview is required to ensure the full diversity of services are available. When a need for child care is identified, local staff assist with application completion and if necessary questions for non-English speaking individuals are handled through Interpretalk. At the current time, DSS has a full range of brochures and applications printed in Spanish. All documents are written at an 8th grade reading level or lower.

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

A special booklet is printed on a regular basis with detailed information on how to choose child care and information on agencies that can assist. This booklet is used by numerous agencies throughout the state for families with child care needs. A special mailing to all

parents of newborns also includes this booklet. Direct communications occur at the local level when families inquire about their child care needs. When applying for SNAP and TANF an in-person family assessment is conducted and referrals for various services are made which includes child care. Each of the 63 Department of Social Services offices also make available a local directory with a listing of services. The CCS web site contains a searchable database listing all regulated child care providers in the state and is found at the following web site: https://apps.sd.gov/ss45provinfo/search.aspx.

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

Partners include, but are not limited to the following: Department of Education to include the Head Start Collaboration Office; Birth to Three Program (Part C), 21st Century Community Learning Centers, Child & Adult Care Food Program and Homeless Liaison; Department of Health to include Maternal Child Health and Nurse Home Visiting; Department of Social Services to include the Divisions of Child Protection, Economic Assistance and Behavioral Health; Department of Public Safety and regional ECE programs.

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

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

Various web sites are available with information about how to choose quality child care such as the following: http://www.sdbrightstart.com/; http://www.naccrra.net/parents. Statewide offerings of parenting classes also discuss how to choose quality child care or what to look for in choosing quality.

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

Written materials such as the Choosing Child Care in South Dakota booklet is a handy tool for parents to use when looking for child care arrangements and is available for download at: http://dss.sd.gov/formsandpubs/docs/CCS/choosingchildcareinSD.pdf . For agencies that would like to distribute, a free hard copy of this booklet can also be ordered from Department

of Social Services' webpage under 'Forms and Publications': http://dss.sd.gov/formsandpubs/.

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

Partners include, but are not limited to the following: Department of Education to include the Head Start Collaboration Office; Birth to Three Program (Part C), 21st Century Community Learning Centers, Child & Adult Care Food Program and Homeless Liaison; Department of Health to include Maternal Child Health and Nurse Home Visiting; Department of Social Services to include the Divisions of Child Protection, Economic Assistance and Behavioral Health; Department of Public Safety and regional ECE programs.

### 2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs.

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

a) Temporary Assistance for Needy Families (TANF)

The Division of Child Care provides information to parents receiving child care assistance at the time of initial approval which provides a brief description of services available and web links to the applicable brochures. When applying for SNAP and TANF an in-person family assessment is conducted and referrals for various services are made which includes child care. Each of the 63 Department of Social Services offices also makes available a local directory with a listing of services.

b) Head Start and Early Head Start Programs

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description and web links for the Head Start and Early Head Start Programs. When applying for SNAP and TANF an in-person family assessment is conducted and referrals for various services are made which includes child care. Each of the 63 Department of Social Services offices also makes available a local directory with a listing of services.

c) Low Income Home Energy Assistance Program (LIHEAP)

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description and web links for the Low Income Home Energy Assistance Program (LIHEAP). When applying for SNAP and TANF an in-person family assessment is conducted and referrals for various services are made which includes child care. Each of the 63 Department of Social Services offices also makes available a local directory with a listing of services.

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

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description and web links for the SNAP program. When applying for TANF or SNAP an in-person family assessment is conducted and referrals for various services are made which includes child care. Each of the 63 Department of Social Services offices also makes available a local directory with a listing of services.

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

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description of the service and web links for the WIC program, which is administered by the South Dakota Department of Health.

f) Child and Adult Care Food Program(CACFP)

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description and web links for the Child and Adult Care Food Program (CACFP), which is administered by the South Dakota Department of Education.

g) Medicaid

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description and web links to for all Medical Assistance Programs, including Medicaid from the Department of Social Services. When applying for SNAP and TANF an in-person family assessment is conducted and referrals for various services are made which includes child care. Each of the 63 Department of Social Services offices also makes available a local directory with a listing of services.

h) Children's Health Insurance Program (CHIP)

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description and web links for the state CHIP program administered by the Department of Social Services. When applying for SNAP and TANF an in-person family assessment is conducted and referrals for various services are

made which includes child care. Each of the 63 Department of Social Services offices also makes available a local directory with a listing of services.

i) Individuals with Disabilities Education Act (IDEA)

The Division of Child Care provides information to parents receiving child care assistance at time of initial approval which provides a brief description and web links to the US Department of Education's website on the Individuals with Disabilities Education Act (IDEA).

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

.

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

.

**2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs.**

For example, does the State/Territory provide information to providers through CCR&Routreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc?

a) Temporary Assistance for Needy Families (TANF)

The Division of Child Care makes available to providers information and links to the Temporary Assistance for Needy Families (TANF) program and other services and resources available to families. The information is distributed by the ECE offices at various training opportunities, promotional visits and events attended by child care providers. Licensing specialists also make the information available during inspection visits. Providers caring for children receiving child care subsidy are supplied with resource information and are asked asked to assist in ensuring families are aware of services available in their areas. This requirement is part of the child care provider agreement and licensing specialists verify compliance during monitoring visits. A parent section on the Early Childhood Enrichment training web sites help to inform parents as well as newsletters and local parenting classes.

b) Head Start and Early Head Start Programs

The Division of Child Care makes available to providers information and links to the Head Start and Early Head Start programs and other services and resources available. The information is distributed by the ECE offices at various training opportunities, promotional

visits and events attended by child care providers. Licensing specialists also make the information available during inspection visits. Providers caring for children receiving child care subsidy will be supplied with resource information and will be asked to assist in ensuring families are aware of services available in their areas. A parent section on the ECE websites helps to inform parents as well as newsletters and local parenting classes.

c) Low Income Home Energy Assistance Program (LIHEAP)

The Division of Child Care makes available to providers information and links to the Low Income Home Energy Assistance Program (LIHEAP) and other services and resources available. The information is distributed by the ECE offices at various training opportunities, promotional visits and events attended by child care providers. Licensing specialists also make the information available during inspection visits. Providers caring for children receiving child care subsidy will be supplied with resource information and will be asked to assist in ensuring families are aware of services available in their areas. A parent section on the ECE web sites helps to inform parents as well as newsletters and local parenting classes.

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

The Division of Child Care makes available to providers information and links to the Supplemental Nutrition Assistance Program (SNAP) and other services and resources available. The information is distributed by the ECE offices at various training opportunities and events attended by child care providers. Licensing specialists also make the information available during inspection visits.

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

The Division of Child Care makes available to providers information and links to the Women, Infants, and Children (WIC) program and other services and resources available. The information is distributed by the ECE offices at various training opportunities, promotional visits and events attended by child care providers. Licensing specialists also make the information available during inspection visits. Providers caring for children receiving child care subsidy will be supplied with resource information and will be asked to assist in ensuring families are aware of services available in their areas. A parent section on the ECE websites helps to inform parents as well as newsletters and local parenting classes.

f) Child and Adult Care Food Program(CACFP)

The Division of Child Care makes available to providers information and links to the Child and Adult Care Food Program (CACFP) program and other services and resources available. The information is distributed by the ECE offices at various training opportunities and events attended by child care providers. Child Care licensing specialists also provide

information directly to child care providers regarding CACFP and encourage participation through direct communications.

g) Medicaid

The Division of Child Care makes available to providers information and links to the Medicaid programs and other services and resources available. The information is distributed by the ECE offices at various training opportunities, promotional visits and events attended by child care providers. Licensing specialists also make the information available during inspection visits. Providers caring for children receiving child care subsidy will be supplied with resource information and will be asked to assist in ensuring families are aware of services available in their areas. A parent section on the ECE web sites helps to inform parents as well as newsletters and local parenting classes.

h) Children's Health Insurance Program (CHIP)

The Division of Child Care makes available to providers information and links to the Children's Health Insurance Program (CHIP) and other services and resources available. The information is distributed by the ECE offices at various training opportunities, promotional visits and events attended by child care providers. Licensing specialists also make the information available during inspection visits. Providers caring for children receiving child care subsidy will be supplied with resource information and will be asked to assist in ensuring families are aware of services available in their areas. A parent section on the ECE web sites helps to inform parents as well as newsletters and local parenting classes.

i) Individuals with Disabilities Education Act (IDEA)

The Division of Child Care makes available to providers information and links to the Individuals with Disabilities Education Act (IDEA) and other services and resources available. The information is distributed by the ECE offices at various training opportunities, promotional visits and events attended by child care providers. Licensing specialists also make the information available during inspection visits. Providers caring for children receiving child care subsidy will be supplied with resource information and will be asked to assist in ensuring families are aware of services available in their areas. A parent section on the ECE web sites helps to inform parents as well as newsletters and local parenting classes.

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

NA

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

NA

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

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

The State makes information about research and best practices in child development in various ways, but not limited to the following: Bright Start Web site (http://www.sdbrightstart.com/); Governor's Task Force on Infant Mortality (www.forbabysakeSD.com); Healthy South Dakota (www.healthysd.gov); Division of Child Care web site (http://dss.sd.gov/childcare/); statewide parenting classes; direct emails to child care providers; distribution and training surrounding the Early Learning Guidelines; direct mailings to parents of newborns; training offerings through the ECE training system such as fitCare where a parent component is available for food serving guidelines.

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

Training handouts, information on websites, information to new parents through direct mailings, literacy information and materials through local private and community clinics, direct communication with parents, etc. all informed by such entities as the American Academy of Pediatrics and the Center for Disease Control.

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

Partners include, but are not limited to the following: Department of Education to include the Head Start Collaboration Office; Birth to Three Program (Part C), 21st Century Community Learning Centers, Child & Adult Care Food Program and Homeless Liaison; Department of Health to include Maternal Child Health Community Health offices and Nurse Home Visiting; Department of Social Services to include the Divisions of Child Protection, Economic Assistance and Behavioral Health; Department of Public Safety and regional ECE programs.

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

a) Describe how the State/Territory makes information regarding social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to 1) parents of eligible children, 2) providers and 3) the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:

i. Parents

Various social-emotional/behavioral tools are currently available to parents whose children are enrolled in a child care program working with the regional ECE training network. Parents who voluntarily agree can benefit from the parent component of any of the available tools to enhance their understanding of behavior management and guidance. Parent consultations are available for parents through the local community mental health center in one community or through a behavior action plan in another community that can be shared with the child care provider. Brochures on various subjects such as biting, getting along with others, toilet learning, temperament, etc. can also be shared with parents through this process.

ii. Providers

Child care providers serving children receiving CCDF funding will receive information regarding social-emotional resources and the prevention of expulsion of preschool-aged children. They will also be informed when they sign their annual provider agreement on steps to be taken to prevent suspension and expulsion and the resources available to assist the provider. All providers have opportunities for continuous professional development through training, coursework, coaching and mentoring that promotes social-emotional and behavioral development. The South Dakota Early Learning Guidelines provide an additional resource with a section that identifies additional strategies for children with Social/Emotional Challenges. Mental health consultation specific to the child care setting is available in at least two areas of the state. In addition, a network of infant-

toddler and inclusion specialists is available throughout the state for technical assistance to programs on these issues.

iii. General public

Information is made available to the general public regarding social-emotional/behavioral and early childhood mental health of young children via various web sites at the state and local level such as: http://dss.sd.gov/behavioralhealth/community/ and http://helplinecenter.org/

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

Partners will include local TANF and Department of Labor staff who deal directly with common customers/parents, Community Mental Health providers, local ECE programs, Head Start partners, Community Health Nurses, etc.

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

Preschool children (from birth to five) in early childhood programs receiving child care assistance?

☐ Yes.

If yes, If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.

School-age children from programs receiving child care assistance?

☐ Yes.

If yes, describe how the State/Territory makes information about that policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link

☑ No.

## 2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

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

Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

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

List the Lead Agency policy citation(s) and:

South Dakota Child Care Subsidy Manual, Section 27. The manual can be found at the following site: http://dss.sd.gov/childcare/childcareassistance/eligible.aspx

a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened

Child care assistance families are provided information at initial approval with their certificate about the Department of Social Services' various programs, including Medicaid/CHIP and Well Child Care, South Dakota's Early, Periodic, Screening, Diagnosis & Treatment (EPSDT) program. The EPSDT program is available to any child served on Medicaid or CHIP. General health check-ups are provided to newborns, and by month 1, and at 2 months, 4 months, 6 months, 9 months, 12 months, 15 months, 18 months, 24 months, 30 months, and after age 3, annually until age 21. Other types of check-ups include dental check-up by age 1 and annually thereafter; Vision check-up by age 5 and annually thereafter; hearing tests as recommended by the PCP; and tests for lead at 12 months and 24 months, and as recommended by the PCP. Other developmental screening programs available to families are also listed on a flyer and given to eligible families. 1) Health KiCC (Better Health for Kids with Chronic Conditions) is a South Dakota Department of Health (DOH) program that pays for medical services and travel reimbursement for children with chronic health conditions. 2) Children of American Indian heritage are eligible for Indian Health Service screenings, as well as the

state's screening services. 3) Children on the WIC program may also participate in screenings through the county nurse clinics, and may also be referred to the Department of Health's Newborn Hearing Screening Program and Newborn Metabolic Screening Programs. 4) The Department of Education's Birth to Three program works with families in their local communities and refers children birth to age 3 to the school for developmental screenings. Annually, the 'Child Find' program provides an opportunity for families to have their child screened and referred, if needed. 5) South Dakota school districts also sponsor 'kindergarten round-ups' for the purpose of developmental screening for children getting ready to enter school. 6) The state's 18 Head Start programs also provide developmental screening for children in their programs.

b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays

Families eligible for child care assistance may be eligible for Well Child Care - South Dakota (EPSDT screenings) and receive information on how to apply. Certain children may also qualify for services through the Birth-to-Three program and for services through the school districts. American Indian children may qualify for both the state's Well Child Care program, as well as the tribe's Indian Health Services (I.H.S.) programs. Referrals for services may be made by physicians, WIC nurses, child care providers, Birth-to-Three Regional Service Coordinators, Head Start personnel, parents, etc. If a parent or child care provider suspects a child may have development issues or delays, the Division of Child Care or regional Early Childhood Enrichment office can provide resource contact information and/or make referrals to an appropriate provider, if requested.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

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

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

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

A substantiated parental complaint is a complaint, received from a parent or other parties, that is investigated by the Department of Social Services, Division of Child Care Services (CCS) licensing staff and is found to have occurred. If the complaint is related to child abuse and neglect, the Department of Social Services, Division of Child Protection Services conducts the investigation and determines the outcome.

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

Substantiated parental complaints on regulated child care programs are listed on the Licensing Inspection Summary Report. Each Summary is maintained by Child Care Services on File Director, a computerized provider file system. The files are maintained as long as the program is operational.

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

All regulated child care providers are required to post the Inspection Summary in a visible location in the day care so the information is accessible to all parents or the public. A copy of

each Inspection Summary is also maintained on File Director, a computerized file system, and available upon request for as long as the provider is operational and the file is considered a public record. By November 19, 2017, complaint information will also be accessible online.

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

All complaints are defined and maintained in the same manner as described above, regardless of whether the complaint is from a parent or from another party.

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

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

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

- [ ] None

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

Primary language is Spanish. The State has the ability to have translation and interpretation in all primary and secondary languages through Interpretalk or A-Z World Languages.

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

Agency representatives participate as members of the Center for Disabilities Consumer Advisory Committee and the Council on Developmental Disabilities. The Center for Disabilities purpose is to enhance the lives of people with disabilities and their families through training, services, information, research and community education. The purpose of the Council on Developmental Disabilities is to assist people with intellectual and developmental disabilities and their families in achieving the quality of life they desire through advocacy, systems change and capacity building. In addition, the SD Parent connection works to connect families caring for children/youth with the full range of disabilities or special health care needs to information, training and resources as well as organizations that can provide assistance to meet their unique needs.

## 2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing processes for licensing and monitoring child care providers, processes for conducting criminal background checks, and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse.

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

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

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

2016.

Provide the link to the website:

and describe how the consumer education website meets the requirements to:

a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe

b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers. Describe

c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers. Describe

d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings. Describe

e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate. Describe

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

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

November 19, 2017) 11/19/17

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Requirements already implemented include: the CCS website contains a description of health and safety requirements and licensing or regulatory requirements met by child care providers; a description of the current processes for licensing, background checks, monitoring, and offenses that prevent individuals from being a provider. Aggregate information about the number of deaths, number of serious injuries, and the number of incidences of substantiated child abuse in child care settings is posted on the website. A basic structure for the on-line licensing system has been developed including a searchable database allowing consumers to search for a provider in multiple ways including by name, city, zip code, county, type, etc. The searchable database has been promoted for the past couple of years to help ensure familiarity with the website. Access to the monitoring inspection information will be through the searchable database site. Licensing staff are currently piloting the online inspection forms that will eventually be the mechanism to place the information from the inspections on the website. A concept paper has been submitted to the South Dakota Bureau of Information Technology (BIT) that describes the design requirements for a consumer friendly, easily accessible online system that will provide inspection results in plain language.

Unmet requirement - Identify the requirement(s) to be implemented The website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate.

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

Complete required technology changes needed to make public certain information

about the results of monitoring on a website which includes a history of violations and the last date of inspection.

Projected start date for each activity: 11/30/2014
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

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

Bureau of Information Technology and Department of Public Safety

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

Licensing specialists will conduct varied testing of the system as it is developed, including continued use of the online inspection forms during their regular inspections.

Projected start date for each activity: 09/01/2015
Projected end date for each activity: 08/01/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

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

Bureau of Information Technology and Department of Public Safety

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

A final test of the online monitoring system will occur to ensure the system manages the data as designed and ensure the system is consumer friendly and easy to access.

Projected start date for each activity: 09/01/2017
Projected end date for each activity: 11/01/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

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

Bureau of Information Technology

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

The websitewill go live, providing the results of monitoring which will include a history of violations and the date of last inspection.

Projected start date for each activity: 11/01/2017

Projected end date for each activity: 11/01/2017

Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Division of Child Care

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

Bureau of Information Technology and Department of Public Safety

## 3 Provide Stable Child Care Financial Assistance to Families

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

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not

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

## 3.1 Eligible Children and Families

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

### 3.1.1 Eligibility Criteria Based upon Child's Age

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

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

☑ Yes, and the upper age is 18 (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity: CCS provides such services to children up to age 19; and is defined as a child who is physically or mentally incapable of caring for himself or herself, or is under court supervision.
☐ No

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

☑ Yes and the upper age is 18 (may not equal or exceed age 19)

☐ No.

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

a) residing with -

Living in a particular household the majority of the time in any given month.

b) in loco parentis -

An individual 18 years of age or older who is neither the child's parent or guardian nor residing with the child's parent or guardian, but who has a signed statement from the child's parent or guardian giving the individual authority to exercise parental control of the child by the court through guardianship.

### 3.1.3 Eligibility Criteria Based on Reason for Care

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

* working:

Employed a minimum of 80 hours per month with a salary equivalent to the federal minimum wage per hour or meeting TANF work requirements.

* attending job training

Any type of job training that is full or part-time and is at least 80 hours per month for non-TANF families. TANF families are required to meet the training requirements set forth by TANF criteria.

* attending education

Any type of formal education program that is full or part-time and is at least 80 hours per month for non-TANF families. Full-time and part-time is as defined by the institution when applicable. If a TANF family meets the work requirements and would like assistance for attendance at school, child care benefits will be provided. Likewise, if a non-TANF family meets the work requirements and wants to attend school, child care costs can be covered. The work requirement for non-TANF families is waived for students enrolled in and physically attending a full-time program of study or training leading to a G.E.D., or a high school diploma. If in school, client must be attending 80 hours of actual class time a month. If the client is working and attending school, the combination of actual work and

school hours must be a minimum of 80 hours a month. If attending a college, university, or technical institute a minimum of 15 semester credit hours, the recipient is meeting the minimum program requirements.

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

☑ Yes.

☐ No.

If no, describe additional requirements

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

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

1) Definition of protective services -

Any legal action designed to protect the health and safety of a child. This includes foster care and respite/special needs child care. Respite care is available for parents of children in protective services and is only for short, temporary periods of time. Child Protection Services (CPS) or the court determines protective service cases. Verification comes from CPS or the court.

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

☑ Yes.

☐ No.

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

☐ No.

### 3.1.4 Eligibility Criteria Based on Family Income

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

* Definition of income -

There are two categories of income; earned and unearned. Earned income is defined as income in cash or in-kind, before deductions, earned by an applicant or other countable adult household member for work purposes. Unearned income would be monies received for which a person does not perform a service. Countable earned income includes: wages, salaries, commissions, tips, work study, military pay, vacation or sick pay, rental income from a boarder, and self-employment. Countable unearned income includes: pensions, VA benefits, alimony, child support received, retirement, Social Security, interest income, periodic and lease income, worker compensation, unemployment benefits, TANF, inheritance, and monetary gifts. Non-countable income includes: tax refunds, Earned Income Tax Credit, work expense reimbursement, and SSI-Disability.

b) Provide the CCDF income eligibility limits in the table below. **Complete** columns (a) and (b) based upon maximum eligibility initial entry into the CCDF program. Complete Columns (c) and (d) **ONLY IF** the Lead Agency is using income eligibility limits lower than 85% of the current SMI. Complete columns (e) and (f) with the maximum "exit" eligibility level if applicable and below the federal limit of 85% of current SMI.

☐ **Note** - If the income eligibility limits are not statewide, check here

Describe how many jurisdictions set their own income eligibility limits

Fill in the chart based on the most populous area of the state.

| **Family Size** | **(a)** **100% of State Median Income (SMI) ($/month)** | **(b)** **85% of State Median Income (SMI) ($/month)** [Multiply (a) by 0.85] | **(c)** **(IF APPLICABLE) $/month Maximum "Entry" Income Level if lower than 85% Current SMI** | **(d)** **(IF APPLICABLE) % of SMI** [Divide (c) by (a), multiply by 100] **Income Level if lower than 85% Current SMI** | **(e)** **(IF APPLICABLE) $/month Maximum "Exit" Income Level if lower than 85% Current SMI** | **(f)** **(IF APPLICABLE) % of SMI** [Divide (e) by (a), multiply by 100] **Income Level if lower than 85% Current SMI** |
|---|---|---|---|---|---|---|
| 1 | 3228 | 2744 | NA | NA | NA | NA |

| Family Size | (a) 100% of State Median Income (SMI) ($/month) | (b) 85% of State Median Income (SMI) ($/month) [Multiply (a) by 0.85] | (c) (IF APPLICABLE) $/month Maximum "Entry" Income Level if lower than 85% Current SMI | (d) (IF APPLICABLE) % of SMI [Divide (c) by (a), multiply by 100] Income Level if lower than 85% Current SMI | (e) (IF APPLICABLE) $/month Maximum "Exit" Income Level if lower than 85% Current SMI | (f) (IF APPLICABLE) % of SMI [Divide (e) by (a), multiply by 100] Income Level if lower than 85% Current SMI |
|---|---|---|---|---|---|---|
| 2 | 4221 | 3588 | 2336 | 55% | 2336 | 55% |
| 3 | 5215 | 4433 | 2940 | 56% | 2940 | 56% |
| 4 | 6208 | 5277 | 3544 | 57% | 3544 | 57% |
| 5 | 7201 | 6121 | 4148 | 58% | 4148 | 58% |

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

c) SMI Source and year Federal Registry notice SMI FY 2016

d) These eligibility limits in column (c) became or will become effective on: March 1, 2016

e) Provide the link to the income eligibility limits
http://dss.sd.gov/childcare/childcareassistance/eligible.aspx

### 3.1.5 Graduated Phase-Out of Assistance

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

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

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

List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out

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

Overall Target Completion Date (no later than September 30, 2016) 9/30/16

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

South Dakota will meet this requirement by allowing two months of additional care if recipients are over the current income guidelines but under the 85% state median income guidelines. South Dakota has calculated the fiscal impact of the graduated phase out requirement and is in the process of drafting administrative rule changes that will allow eligibility past current program guidelines. Specifications have been written for the Bureau of Information and Technology (BIT) for programming needs.

Unmet requirement - Identify the requirement(s) to be implemented A graduated phase-out of assistance for families whose income has increased at the time of re-determination, but remains below the federal threshold of 85% of State median income.

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

agencies, etc.)

SD has draftedadministrative rule changes to allow eligibility past current program guidelines. The administrative rules need to be approved and finalized. This will involve the following steps:

- Submit to review staff for technical review-May 12, 2016
- Receive Department Secretary's approval-June 30, 2016
- Submit notice of hearing to newspapers-July 1, 2016
- Hold public hearing- July 29, 2016
- Meet with Legislative Interim Rules Committee - August 22, 2016
- Rules become effective - September 2016

Projected start date for each activity: 07/01/15
Projected end date for each activity: 09/30/16
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

.

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

Complete required technology changes. A concept paper has been completed to inform Bureau of Information and Technology (BIT) of the system needs and work is beginning with BIT to implement system programming changes. Consultation with BIT is ongoing and testing will be completed with BIT to ensure prorgramming is ready and in place for 9/30/16 implementation.

Projected start date for each activity: 11/01/15
Projected end date for each activity: 09/30/16
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

South Dakota Bureau of Information and Technology

### 3.1.6 Fluctuation in Earnings

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

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

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement

South Dakota Child Care Subsidy Policy Manual, Section 4 which can also be found at:South Dakota Child Care Subsidy Manual, Section 27. The manual can be found at the following site: http://dss.sd.gov/childcare/childcareassistance/eligible.aspx.

Fluctuating earned income is defined as income which varies in amount from month to month or is received at irregular intervals. This may be due to irregular employment, or considered irregular because of factors such as seasonal increases or decreases in employment or type of work (e.g., sales work on commission basis).

Irregular or fluctuating income is averaged over a period of time sufficient to take the fluctuations into consideration. As proof of income, a recipient must provide either copies of the last two pay stubs, employer verification of current wages, or the most recent income tax return. If this is not an accurate indication of a recipients anticipated annual income, a caseworker may require evidence of up to twelve (12) of the most recent months of income. South Dakota provides several ways in which to project fluctuating earnings:

- Year-To-Date (YTD) income provided on the most recent pay stub divided by the number of months applicable. For example the paystub is for pay period

ending June 28. The YTD would be divided by 6 months (January through June).
- If applying for assistance with the same source of employment for the prior calendar year, 1099 forms or w-2's can be used to prospect income or,
- Determine monthly gross income by calculating the total amount of income earned in the 12-month period preceding the date of the application and dividing the total amount by 12.

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

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

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other)

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

### 3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information.

Check the information that the Lead Agency documents. There are no federal requirements for specific documentation or verification procedures.

**Reminder** - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

☑ Applicant identity.

Describe:

Applicant identity is self-declared at the time of initial application and verified through access to other Department of Social Services programs such as DSS/Economic Assistance Program, DSS/TANF program and DSS/Division of Child Support. If no information is available, the applicant is required to provide additional verifications such as a birth certificate, Social Security card, driver license or identification card.

☑ Applicant's relationship to the child.

Describe:

Applicant's relationship to the child is self-declared at the time of initial application and verified through access to other Department of Social Services programs such as DSS/Economic Assistance Program, DSS/TANF program and DSS/Division of Child Support. If no information is available, the applicant is required to provide additional verifications such as a birth certificate or a court document.

☑ Child's information for determining eligibility (e.g., identity, age, etc.).

Describe:

The child's information for determining eligibility is self-declared by the applicant at initial application and verified through access to other Department of Social Services programs such as DSS/Economic Assistance Program, DSS/TANF program and DSS/Division of Child

Support. If no information is available, the applicant will need to provide additional verifications for the children such as a birth certificate or a court document. Copies of immigration documents for all resident alien children are required.

☑ Work.

Describe:

Paystubs or an employer completed wage verification form is required to verify work or job training. This is required at eligibility determination and redetermination.

☑ Job Training or Educational Program.

Describe:

An official copy of the recipient's school schedule is required to verify an educational program. This is required at eligibility determination and redetermination.

☑ Family Income.

Describe:

Copies of pay stubs, tax returns, wage verifications and child support received or paid out are required to verify income. This is required at eligibility determination and redetermination.

☑ Household composition.

Describe:

Household composition is self-declared on the application and verified through access to other Department of Social Services programs such as DSS/Economic Assistance Program, DSS/TANF program and DSS/Division of Child Support.

☑ Applicant Residence.

Describe:

Applicant residency is self-declared on the application and verified through employer information or through access to other Department of Social Services programs such as DSS/Economic Assistance Program, DSS/TANF program and DSS/Division of Child Support.

☐ Other.

Describe:

Reminder - Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PI-CC-98-08). States may not deny child care benefits to an eligible child because the

parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start - Child Care Partnerships, or public educational standards which may include pre-k settings (http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01).

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

☑ Time limit for making eligibility determinations.

Describe length of time :

Administrative Rule 67:47:01:06 requires that the Department shall determine eligibility for child care services within ten working days after receiving a completed application.

☐ Track and monitor the eligibility determination process

☐ Other.

Describe:

☐ None

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

Per CCDF regulations, Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State TANF agency in accordance with section 407(e)(2)of the Social Security Act.
In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care.
**NOTE:** The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

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

State/Territory TANF Agency The Department of Social Services - Division of Economic Assistance

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

"appropriate child care":

The provision of care that meets minimal health and safety standards and the developmental needs of children.

"reasonable distance":

The child care provider is located in close enough proximity to the parent home or workplace to allow children to be transported without risk of harm.

"unsuitability of informal child care":

The provision of informal care is determined unsuitable when the health and safety or developmental needs of children are at risk.

"affordable child care arrangements":

Affordable child care arrangements ensure equal access can be maintained without undue financial hardship to the family.

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

- [x] In writing
- [x] Verbally
- [x] Other.

Describe:

When the parent meets with their Employment Specialist; an assessment is completed with the recipient in order to identify any barriers to employment such as child care. Once the assessment is completed, a Personal Responsibility Plan is developed with the recipient, focusing on the steps that will be taken to address barriers, focus on goals and attain gainful employment. A Personal Responsibility Agreement is also completed at this time, which addresses the Rights and Responsibilities of both the Employment Specialist and the recipient and penalties that apply for failing to comply with the Personal Responsibility Plan, as well as what constitutes good cause for not following through on the Personal Responsibility Plan. These good cause reasons are cited in ARSD 67:10:06:25(1) and reads as follows: "The department may determine that good cause

exists for an individual's noncompliance with the personal responsibility agreement or the personal responsibility plan if any of the following situations occur: (1) The individual is a single custodial parent caring for a child under six years of age and is able to prove the unavailability of child care because of distance; the unavailability or unsuitability of child care by a relative; or the unavailability of appropriate and affordable child care."

☑ List the citation to this TANF policy.

List:

http://legis.sd.gov/rules/DisplayRule.aspx?Rule=67:10

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

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

## 3.2 Increasing Access for Vulnerable Children and Families

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

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

a. Provide definition of "Children with special needs": Under the age of 19 and physically or mentally incapable of self-care (as verified by a physician, physician's assistant, nurse practitioner, psychologist, psychiatric social worker, special education teacher, physical or occupational therapist, or social worker) or who is under court supervision.

and describe how services are prioritized:

Currently, all eligible families are served in South Dakota. If South Dakota implements a waiting list, applicants with children with special needs receive priority for service.

This is per ARSD 67:47:01:29 -Department to maintain a waiting list.

If the department does not have sufficient funding to add an applicant eligible for child care assistance to the program, the department shall place the eligible applicant on a waiting list. An applicant must meet all eligibility requirements in order to be placed on the waiting list. If a waiting list is developed, the department shall assign a level of priority. The first level of priority status consists of:

(1) TANF recipients and those transitioning off TANF;

(2) Applicants with children with special needs; and

(3) Applicants with children who will be receiving or need to receive protective services.

The second level of priority status consists of applicants whose monthly gross income remains below 175% of the federal poverty level.

Within the first level of priority, eligibility is prioritized by the date the completed application is received. Within the second level of priority, eligibility is prioritized by income in ascending order lowest to highest of the federal poverty level and by date of application. A change in an applicant's circumstances may warrant a change in an applicant's level of priority on the waiting list. If at any time, an applicant on the waiting list no longer meets eligibility requirements, the applicant shall be removed from the waiting list.

An overall higher rate is allowed for providers caring for children with special needs requiring additional care. A special rate can be negotiated depending on the need which allows for a 20% income disregard and consideration of income at a maximum of 85% of the SMI.

b. Provide definition of "Families with very low incomes": Families with incomes below 100% of the Federal Poverty Level.

and describe how services are prioritized:

Currently, all eligible families are served in South Dakota. If South Dakota implements a waiting list, applicants whose monthly gross income falls below 175% federal poverty level will be prioritized by income in ascending order, lowest to highest of the federal poverty level.

This is per ARSD 67:47:01:29 -Department to maintain a waiting list. See 3.2.1, section a for complete rule. The co-payment is waived for families with income at or below the Federal Poverty Level.

c. Describe how services for families receiving Temporary Assistance for Needy Families

(TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act) The co-payment is waived for TANF families who are at or below Federal Poverty Level. Child care programs who charge a weekly rate and serve TANF families will receive a weekly rate rather than an hourly reimbursement rate. This will increase access to child care for families receiving TANF benefits and ensure no additional costs are passed onto the family. The child care provider signs a memorandum of understanding and agrees not to pass any additional costs onto the TANF family. CCDF funds will be used to meet the needs of families in transitioning off TANF. For families transitioning off TANF, there are no minimum work requirements. Their income cannot exceed established program Federal Poverty Level guidelines. The Division of Child Care Services is responsible for payment of these services to a wide range of providers available to the family such as family child care, center care or informal type care (such as a family friend or neighbor). Families who meet eligibility criteria can apply and receive assistance if working and/or attending school. Presently all families that apply are served and child care providers are paid by the Division of Child Care Services as stated above. Families at risk of becoming dependent on TANF can readily access CCDF due to their income. Child Care Services has one caseworker who handles all statewide child care cases for TANF recipients. Local Department of Labor (DOL) staff or Department of Social Services (DSS) benefits specialists work closely with the child care caseworker and TANF families to ensure child care benefits are secure. If there are questions regarding eligibility, staff communicate and facilitate calls between the families to ensure that families understand their child care benefits. Currently, all eligible families are served in South Dakota. If South Dakota implements a waiting list, applicants who are receiving TANF and those transitionting off TANF receive priority for service. This is per ARSD 67:47:01:29 - Department to maintain a waiting list. See 3.2.1, section a for complete rule.

### 3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children's learning and development in

safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

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

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe the following:

a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements

Homeless children will be allowed to receive CCDF assistance after an initial eligibility determination but before providing required documentation such as pay stubs, school schedules, etc. As children enter a child care program, a grace period is allowed to comply with immunization and other health and safety requirements to expedite enrollment.

b. Procedures to conduct outreach to homeless families to improve access to child care services

If it is determined through the application process or through interviews, that a family is homeless, the family will be asked if they would like to be referred to local services in their community. If yes, a referral will be made to a local service provider for follow-up.

c. Procedures to provide a grace period to comply with immunization and other health

and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services

Foster children in state custody are eligible for child care subsidy as long as the foster parents are working and/or attending school. Co-payments are waived to reduce any out-of-pocket costs. As children enter a child care program, a grace period is allowed to comply with immunization and other health and safety requirements to expedite enrollment. This aligns with the definition of protective services found in 3.1.3.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

## 3.3 Protection for Working Parents

### 3.3.1 Twelve Month Eligibility

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

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

In addition, this change means the State may not terminate assistance prior to the end of the 12 month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. For example, if a working parent is temporarily absent from employment due to extended medical leave, changes in seasonal work schedule, or a parent enrolled in training or educational program is temporarily not attending class between semesters, the state should not terminate assistance.

Describe the status of the State's establishment of a 12-month eligibility re-determination period for CCDF families.

☐ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination
List the Lead Agency's policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination

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

consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 9/30/16

Overall Status - Describe the State/Territory's status toward complete implementation for any requirement(s) (not yet started, partially implemented, substantially implemented, other) Other

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

South Dakota has defined how this requirement will be met and is currently working on drafting administrative rules changes needed to implement the 12-month eligibility process. A six-month "child care need" check in period has been designed and will be required. This check in will help to ensure the family is still in need of child care or other assistance. SD has has defined non-temporary changes in employment or school and will allow a period of continued child care assistance for a maximum of 3 months to allow parents to engage in job search, resume work, or attend an education or training program as soon as possible. Specifications have been written for the Bureau of Information and Technology (BIT) for programming needs.

Unmet requirement - Identify the requirement(s) to be implemented A minimum 12-month eligibility and redetermination period for CCDF families.

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

SD has drafted administrative rule changes to allow eligibility past current program guidelines. The administrative rules need to be approved and finalized. This will involve the following steps:

- Submit to review staff for technical review-May 12, 2016
- Receive Department Secretary's approval-June 30, 2016
- Submit notice of hearing to newspapers-July 1, 2016
- Hold public hearing- July 29, 2016
- Meet with Legislative Interim Rules Committee - August 22, 2016
- Rules become effective - September 2016

Projected start date for each activity: 07/01/15
Projected end date for each activity: 09/30/16
Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

.

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

Complete required technology changes. A concept paper has been completed to inform Bureau of Information and Technology (BIT) of the system needs and work is beginning with BIT to implement system programming changes. Consultation with BIT is ongoing and testing will be completed with BIT to ensure prorgramming is ready and in place for 9/30/16 implementation.

Projected start date for each activity: 11/01/15

Projected end date for each activity: 09/30/16

Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

South Dakota Bureau of Information and Technology

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

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

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

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

☑ Yes, the State/Territory terminates assistance prior to 12 months due to parent's loss of work or cessation of attendance at a job training or education program ONLY.

List the Lead Agency's policy citation(s) and describe the circumstances considered to be non-temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs

For non-temporary changes in employment or school, a period of continued child care assistance for a maximum of 3 months to allow parents to engage in job search, resume work, or attend an education or training program as soon as possible will be allowed. The circumstances considered to be non-temporary include but are not limited to: a job quit or termination, job ending due to the closing of a business, graduating from an educational or training program, or if no longer participating in a TANF approved activity. South Dakota Child Care Subsidy Policy Manual, Section 25 (Effective 9-30-2016).

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

### 3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment, education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii)) Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which

States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016.

List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment

In-person interviews are not required. Only a complete application must be submitted to determine eligibility. Eligibility start date is determined by the date the application is received in the Child Care Services office. Applications received between the 1st and the 15th of the current month can begin eligibility on the 1st of the month and applications received between the 16th and the last date of the month can begin eligibility on the 16th of the month. Applications are accepted by mail, fax, through e-mail or via the internet. Requested verifications are also accepted by mail, fax or through e-mail. Recipients can drop off an application or requested verifications necessary to complete the application at any of the 63 local offices. The local office will mail the applications or verifications to the Division of Child Care. The date the application or verifications were date stamped at the local office is the date honored as the date received in the Child Care Services office. A simplified TANF application was implemented to avoid excessive reporting by the applicant. School schedules, pay stubs and work schedules do not need to be submitted with the application because they are verified by the Employment Specialist at the local office. The front page of the application is completed and signed by the Employment Specialist verifying the recipient's TANF activity and child care need. The back page of the application is completed and signed by the applicant and verifies the child care needs and child care provider information.

ARSD 67:47:01:02. Application for child care services.

ARSD 67:47:01:06. Deadline for determining eligibility-Beginning date of eligibility.

South Dakota Child Care Subsidy Policy Manual, Section 23

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

## 3.4 Family Contribution to Payment

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

### 3.4.1 Provide the CCDF copayments in the chart below according to family size.

☐ Note - If the sliding fee scale is not statewide, check here

and describe how many jurisdictions set their own sliding fee scale

Fill in the chart based on the most populous area of the State.

| Family Size | (a) Lowest "Entry" Income Level Where Copayment First Applied | (b) What is the monthly copayment for a family of this size upon initial entry into CCDF? | (c) What is the percent of income for (b)? | (d) Maximum Highest "Entry" Income Level Before No Longer Eligible | (e) What is the monthly copayment for a family of this size upon initial entry into CCDF? | (f) What is the percent of income for (e)? |
|---|---|---|---|---|---|---|
| 1 | NA | NA | NA | NA | NA | NA |
| 2 | 1,402 | 10 | <1 | 2,336 | 350 | 15 |
| 3 | 1,764 | 10 | <1 | 2,940 | 441 | 15 |
| 4 | 2,126 | 10 | <1 | 3,544 | 532 | 15 |
| 5 | 2,489 | 10 | <1 | 4,148 | 622 | 15 |

a) What is the effective date of the sliding fee scale(s)? March 1, 2016

b) Provide the link to the sliding fee scale http://dss.sd.gov/childcare/childcareassistance/

### 3.4.2 How will the family's contribution be calculated and to whom will it be applied? Check all that the Lead Agency has chosen to use.

☑ Fee as dollar amount and

- ☐ Fee is per child with the same fee for each child
- ☐ Fee is per child and discounted fee for two or more children
- ☐ Fee is per child up to a maximum per family
- ☐ No additional fee charged after certain number of children
- ☑ Fee is per family

☑ Fee as percent of income and

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

Describe:

- ☐ Other.

Describe:

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

☐ Yes, and describe those additional factors using the checkboxes below.

- ☐ Number of hours the child is in care
- ☐ Lower copayments for higher quality of care as defined by the State/Territory
- ☐ Other.

Describe other factors.

☑ No.

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

Will the Lead Agency waive family contributions/co-payments?

☑ Yes, the Lead Agency waives family contributions/co-payments for families with income at or below the poverty level for families of the same size.

The poverty level used by the Lead Agency for a family size of 3 is $ 1,680

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

### 3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable?

Check all that apply:

☑ Limits the maximum co-payment per family.

Describe:

The co-payment amounts range from 0% at poverty level and raise incrementally to 15%. Families with income between 100%-105% Federal Poverty Level have a $10.00 monthly co-payment. Families with income over 105% FPL have a co-payment between 4.5% and 15% of the family income. Co-payments are capped not to exceed 15% of monthly income.

☐ Limits combined amount of copayment for all children to a percentage of family income.

List the percentage of the copayment limit.

Describe:

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

Describe:

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

Describe:

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

Describe:

☑ Other.

Describe:

Families with adjusted gross income below 100% of the Federal Poverty Level do not have a co-payment. Families with adjusted gross income between 100%-105% of the Federal Poverty Level have a co-payment of $10.00 per month. Families with adjusted income over 105% of the Federal Poverty Level will have a co-payment of between 4.5% and 15% of the family income. Co-payments are graduated and capped not to exceed 15%. This eliminates the "cliff" affect for families at the higher end of the sliding fee scale.

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

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

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

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

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children

who receive care during non-traditional hours. With respect to investments to increase access to programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

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

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

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

A child care certificate is issued after the family has selected a provider and is found to be eligible for assistance. Staff working with TANF families inform families of the option to choose child care providers who are registered or licensed or unregulated. In addition to this, child care slots have been contracted with one child care center in two communities, Rapid City and Sioux Falls. These areas of the state serve an above average number of TANF families. The contracted slots allow TANF applicants/recipients to begin work/job search activities immediately while having the assurance of a quality child care provider. If they choose not to use the contracted slot, a certificate is also offered to ensure parental choice.

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

- ☐ Certificate form provides information about the choice of providers, including high quality providers
- ☐ Certificate is not linked to a specific provider so parents can choose provider of choice
- ☑ Consumer education materials on choosing child care

☐ Referral to child care resource and referral agencies

☐ Co-located resource and referral in eligibility offices

☐ Verbal communication at the time of application

☐ Community outreach, workshops or other in-person activities

☑ Other.

Describe

The parent may choose from a variety of child care providers including private, non-profit, faith-based, centers, family child care, or in-home care. The child care application includes a list of provider types the family may choose from. The local Helpline Center and Early Childhood Enrichment programs provide materials for parents such as the Choosing Child Care brochure with a packet of information that they provide for those requesting child care referrals. Participants in parenting classes also receive information on choosing child care as well as parents of newborns who receive Bright Start materials. Licensing Specialists respond to parent requests for provider listing in one of the following methods: referral to the on-line State website; or e-mail the listing to the parent; or send a hard-copy of the listing and other resources which include assistance on choosing safe and quality child care to the parent. A cover letter is included with a hard-copy version which outlines the Child Care Services website address, as well as contact phone number for more program information. The cover letter also includes the various categories of care which are regulated by the state, how to obtain copies of compliance or complaint information for the regulated programs along with information on how to access the child care assistance program.

### 4.1.3 Child Care Services Available through Grants or Contracts

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

☑ Yes. If yes, **describe**

the type(s) of child care services available through grants or contracts

Licensed child care centers provide the contractual services specifically for TANF families.

the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child

care providers, etc.)

Licensed child care centers.

the process for accessing grants or contracts

All eligible families receiving TANF can access the contracted slots.

the range of providers available through grants or contracts

There are two child care centers where slots are contracted.

how rates for contracted slots are set for grants and contracts

Negotiated with each child care center.

how the State/Territory determines which entities to contract with for increasing supply and/or improving quality

This is determined by the high concentration of TANF families.

if contracts are offered statewide and/or locally:

In a joint effort with the Rapid City and Sioux Falls TANF programs (Department of Labor Field Offices), contracted child care slots are available with one child care center in each community. These areas of the state serve an above-average number of TANF families. The contracted slots allow TANF applicants/recipients greater flexibility in child care choices. The outcome of the program allows TANF recipients to begin work/job search activities immediately while having the assurance of a quality child care provider. If they choose not to use the contracted slot, a certificate is also offered to ensure parental choice. These providers are licensed child care centers. Rates are set based on consultation with each program to ensure participation. The sites are determined based on the high-volume of TANF families in a particular area.

☐ No. If no, skip to 4.1.4.

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

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

- ☐ Programs to serve children with disabilities
- ☐ Programs to serve infants and toddlers
- ☐ Programs to serve school-age children
- ☐ Programs to serve children needing non-traditional hour care
- ☐ Programs to serve homeless children
- ☐ Programs to serve children in underserved areas
- ☐ Programs that serve children with diverse linguistic or cultural backgrounds

- [x] Programs that serve specific geographic areas
  - [x] Urban
  - [ ] Rural
- [ ] Other.

Describe:

- [x] Improve the quality of child care programs with grants or contracts for:
  - [ ] Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
  - [ ] Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
  - [ ] Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
  - [ ] Programs to serve children with disabilities or special needs
  - [ ] Programs to serve infants and toddlers
  - [ ] Programs to serve school-age children
  - [ ] Programs to serve children needing non-traditional hour care
  - [ ] Programs to serve homeless children
  - [ ] Programs to serve children in underserved areas
  - [ ] Programs that serve children with diverse linguistic or cultural backgrounds
  - [x] Programs that serve specific geographic areas
    - [x] Urban
    - [ ] Rural
  - [ ] Other.

Describe:

**4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds.**

(658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access

Describe the policies and procedures for unlimited access

Administrative Rules of South Dakota require parent access to their child while in care (67:42:03:18, 67:42:04:07.01. 67:42:10:12 and 67:42:14:25). The policy is stated in the provider handbook, the parent handbook and discussed at various training events provided by licensing staff. It is listed on both the Provider and Parent certificates provided by the Child Care Subsidy program.

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

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

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

Describe:

Care must be provided only for the applicant's children.

☑ Restricted based on provider meeting a minimum age requirement

Describe:

The provider must be at least 18 years of age and maintain a separate residence from the applicant.

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

Describe:

☐ Restricted to care by relatives

Describe:

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

Describe:

☑ Restricted to in-home providers that meet some basic health and safety requirements

Describe:

These providers will receive training and receive an on-site inspection to ensure basic health and safety and compliance with new federal requirements.

☑ Other

Describe:

Each provider is informed of the US Department of Labor employment and wage requirements.

☐ No.

## 4.2 Assessing Market Rates and Child Care Costs

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

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

The State must consult with the State Advisory Council, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the MRS or alternative methodology, including by posting the results on the Internet.

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

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

☑ MRS

☐ Alternative Methodology.

Describe:

☐ Both.

Describe:

☐ Other.

Describe:

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

Describe:

Prior to developing the market rate survey questions, South Dakota consults with the Early Childhood Enrichment agencies and child care licensing in order to determine if any additions or changes are needed based on their data needs. Provider input, whether gathered during survey result presentations or gathered at time of survey response, is also

reviewed and incorporated as needed.

### 4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable.

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

Describe:

The South Dakota Market Rate Survey collects data that represents the child care market by surveying all regulated child care providers across the state, regardless of their participation in the subsidy program; the response rate for the most recent survey was 75%. Surveys were sent by mail using current addresses maintained on the Licensing mainframe system; non-responders were sent a second mailing. Staff completed follow-up calls to providers to clarify or complete missing survey information. The data was collected over a period of two-and-a- half months. To account for geographic variation, rates were calculated at a county level and blended in geographic groups with similar population and rate levels. To account for differences in rate by different provider types and child age, rates were collected and calculated with these differentiations. Rates are weighted by enrollment to account for the actual number of child care slots rather than the number of child care providers.

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

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

Rates were calculated for each county to reflect varying prices for child care between counties. Rates were also calculated by blending counties with similar population density based on U.S. Census Bureau 2013 population estimates. This method increased the number of responses used to calculate a rate, and provides a market rate for counties without a rate response for one or more age groups.

b) Type of provider:

Rates were collected from four types of providers: Family Child Care, Group Family Child Care, Child Care Center, and Out-of-School Time Programs.

c) Age of child:

Rates and enrollment were collected for the following age groups: Infant/Toddler (4 weeks up to 3 years), Pre-school (3 to 5 years), and School age (kindergarten and older).

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

.

**4.2.5 Describe the process used by the State to make the results of the market rate survey widely available to the public.**

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016)

05/31/2015

b) Date report containing results were made widely available, no less than 30 days after the completion of the report 6/26/2015

c) How the report containing results was made widely available and provide the link where the report is posted if available

An email was sent on June 26, 2015, to all regulated child care providers which contains a link to the posted results as well as Early Childhood Enrichment agencies, Child Care Licensing and Department of Education Head Start Collaboration and Birth to Three program. The document has also been made available in hard copy at various meetings and conferences involving stakeholders and others who might be interested. Higher education entities also received the document: http://dss.sd.gov/childcare/stateplan/default.aspx

## 4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms

that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children).

☐ Note - If the payment rates are not set by the State/Territory, check here

Describe how many jurisdictions set their own payment rates

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

Rate $ 3.95 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 80th

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

Rate $ 2.85 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 75th

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

Rate $ 3.95 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 80th

d) Toddler (18 months), full-time licensed FCC care in most populous geographic region

Rate $ 2.85 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 75th

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region

Rate $ 3.55 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 90th

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate $ 2.75 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)
Percentile: 75th

g) School-age child (6 years), full-time licensed center care in the most populous geographic region

Rate $ 3.70 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)

Percentile: 75th

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region

Rate $ 3.00 per hour unit of time (e.g., hourly, daily, weekly, monthly, etc.)

Percentile: 75th

i) Describe the calculation/definition of full-time care:

South Dakota does not strictly define full-time care when collecting rate information through the Market Rate Survey.Providers use their definition of full-time care in order to declare their full-time rates in the appropriate location on the Market Rate Survey.

j) Provide the effective date of the payment rates : June 1, 2016

k) Provide the link to the payment rates : http://dss.sd.gov/childcare/childcareassistance/

**4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care.**

In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

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

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

Describe:

☑ Tiered rate/rate add-on for children with special needs as defined by the State/Territory.

Describe:

Providers caring for a child with special needs can be reimbursed up to a maximum rate of $4.75 per hour regardless of age of child or county care is provided. This amount is established each time reimbursement rates are increased in relation to the most recent Market Rate Survey; the current rate is increased by the statewide percentage increase with is calculated based on the final rate chart. In some instances, a higher rate for the care of a child with special needs can be established upon receipt of documentation required to complete the negotiation process.

☑ Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on).

Describe:

To encourage smaller group sizes for infants and toddlers, a special rate will be paid to registered family child care providers who care for 6 or fewer children. The special rate is available for children in care under age 3. Providers can be reimbursed up to a maximum of 25% above the established county reimbursement rate (based on most recent Market Rate Survey) for this age category as long as the final rate does not exceed what the provider currently charges the general public.

☐ Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory.

Describe:

☐ Tiered rate/rate add-on for programs serving homeless children.

Describe:

☐ Other tiered rate/rate add-on beyond the base rate.

Describe:

☐ None.

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

Describe:

South Dakota's reimbursement rates were updated on June 1, 2016, utilizing the most recent market rate survey completed May 31, 2015.

**4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014.**

For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

Describe:

South Dakota's payment rates are effective June 1, 2016. Consideration for setting payment rates in alignment with the cost of quality is yet to be determined and continues to be explored.

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

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

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

☑ Payment rates are set at the 75th percentile or higher of the most recent survey.

Describe:

Current reimbursement rates are set at the 75th percentile or higher of the most recent market rate survey completed May 31, 2015. These rates went into effect on June 1, 2016. South Dakota has historically updated reimbursement rates per the most recent market rate survey and at the 75th percentile depending on availability of funds.

☑ Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.

☐ Rates based on data on the cost to the provider of providing care meeting certain standards

Describe:

☐ Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile.

Describe:

☐ Data on the proportion of children receiving subsidy being served by high-quality providers.

Describe:

☑ Data on where children are being served showing access to the full range of providers. .

Describe:

South Dakota reimbursement rates are weighted by enrollment to account for the actual number of child care slots rather than the number of child care providers. This ensures that the rates consider where children are being served. Rates are calculated separately among provider types in order to allow families access to child care of their choice of provider.

☐ Data on how rates set below the 75th percentile allow CCDF families access to the same quality of care as families not receiving CCDF.

Describe:

☐ Feedback from parents, including parent survey or parent complaints.

Describe:

☐ Other.

Describe:

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

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

☑ Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016.

Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access

Current reimbursement rates are set at the 75th percentile or higher of the most recent market rate survey completed May 31, 2015. These rates went into effect on June 1, 2016. Reimbursement rates are calculated separately by provider type, age group, and geographic area to allow families to access child care of their choice at a reimbursement level specific to the area in which they seek child care services. Rates were weighted by enrollment to account for the actual number of child care slots rather than the number of child care providers.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

## 4.5 Payment Practices and Timeliness of Payments

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

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

☑ Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

The Lead Agency

☐ Pays prospectively prior to the delivery of services.
Describe:

☑ Pays within no more than 21 days of billing for services.
Describe:
South Dakota Administrative Rules 67:47:01:16-The Department shall pay child care service benefits directly to the provider within 15 working days following receipt of the

complete forms required under 67:47:01:15.

☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance.

Describe including the State/Territory's definition of occasional absences

☐ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe

Specify percent and describe

☑ Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month.

Specify the number of absence days allowed and paid for and describe

The Lead Agency allows absent days per the South Dakota Administrative Rule 67:47:01:10 states: If a child is not in care because the child is ill or on vacation or because the child's parent failed to report an absence, the department may reimburse the child care provider for a maximum of 36 hours a month for the time the child is not in care. If a child is not in care because the child is attending Head Start or a preschool operated by or under contract with a school district, the department may reimburse the child care provider up to four hours a day for the time the child is not in care.

☑ Pays on a full-time or part-time basis (rather than smaller increments such as hourly)

Describe:

The Lead Agency provides a full weekly or daily payment for participating providers serving TANF families. Providers who charge a weekly rate are reimbursed for a maximum of 45 hours per week at the maximum hourly rate or reimbursed at the weekly rate as established by the program, whichever is the lessor of the two. Regardless of the hours the child is in care each week, the provider receives an established daily rate (9 hours multiplied by the maximum hourly reimbursement rate) or the weekly rate of reimbursement. The provider agrees to notify Child Care Services when a child is absent for five consecutive days and the daily fee will be paid through the fifth absent day.

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

Describe:

☑ Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment

Describe:

When a change occurs to the family's eligibility status that may impact payment, providers are notified promptly either by email or mail. This includes a certificate closure, change to eligibility dates, coverage level, or provider change.

☑ Has a timely appeal and resolution process for payment inaccuracies and disputes.

Describe:

When there is a payment dispute; the provider is given written notice of the cause of the overpayment along with fair hearing rights. The request for a hearing must be made in writing to the Department of Social Services, Administrative Hearings, within 30 days of the notice.

☐ Other.

Describe:

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

The Lead Agency continues to analyze provider feedback to assess ways to make payments responsive to the market. In regard to paying full-time or part-time rates for non-TANF families, the practice may be accepted in some areas of the state, but not all. Paying prospectively prior to delivery of service and paying based on enrollment vs. attendance varies in practice throughout the state. Paying for such items as registration fees, deposits and supplies also varies throughout the state and there has been no feedback from providers that this is an issue. The Lead Agency has been able to keep payment rates updated to the 75th percentile based on the most current survey and offer limited absent hour coverage.

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

☑ Policy on length of time for making payments.

Describe length of time:

South Dakota Administrative Rule 67:47:01:16 states: The Department shall pay child care service benefits directly to the provider within 15 working days following receipt of the complete forms required under 67:47:01:15.

☐ Track and monitor the payment process

Describe:

☑ Use of electronic tools (e.g., automated billing, direct deposit, etc.)

Describe:

Child Care providers may request payment by completing a request for payment paper form or by using the Online Payment Request Website. Payment is issued to the provider, electronically. Child Care Centers, Group Family Child Care, and Out-of-School Time Programs receive their payment through direct deposit. Family Child Care and Informal care (such as family friend or neighbor) providers receive their payment through direct deposit or the U.S. Bank ReliaCard. Under certain circumstances, providers may be exempted from electronic payment and receive their payment by check.

☐ Other.

Describe:

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

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

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

☑ Yes.

Describe data sources

South Dakota utilizes surveys directed to child care providers and families to analyze supply and demand of care within the State.

☐ No.

If no, how does the State/Territory determine most critical supply needs?

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

a) Infants and toddlers (check all that apply)

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

Describe

b) Children with disabilities (check all that apply)

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

Describe

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

- [ ] Grants and contracts (as discussed in 4.1.3)
- [ ] Family child care networks
- [ ] Start-up funding
- [ ] Technical assistance support

- [ ] Recruitment of providers
- [ ] Tiered payment rates (as discussed in 4.4.1)
- [ ] Other.

Describe

d) Homeless children (check all that apply)

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

Describe

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

Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

- [x] Fully implemented and meeting all Federal requirements outlined above.

Describe

In most parts of South Dakota there is an extremely low unemployment rate. According to the Bureau of Labor Statistics the unemployment rate as of March 2016 is 2.5 percent. To address areas where there are higher concentrations of TANF recipients and families of lower income, contracts are in place in two communities to pay for slots. These contracts help to ensure high quality child care for families who may have difficulty

finding immediate child care options. In addition, agreements are in place with 21 child care centers across the state to ensure TANF families have access to high quality care. In these programs the full weekly or daily rate is paid to align with the provider billing practice. Licensing specialists monitor these programs to ensure they are in good standing and identify any concerns that would indicate low quality. For families who have been receiving child care subsidy for six months or more, a survey is conducted and analyzed as to where there is a lack of child care in the community and whether or not their children are benefiting from their child care experiences. Child care licensing specialists also assist with community development activities in areas where a need is identified to ensure availability. When quality grants are awarded, areas of high poverty and unemployment are always given priority.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

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

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

### 5.1 Licensing Requirements and Standards

Each State is required to certify it has in effect licensing requirements applicable to all child care services provided within the State (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(I)(i))

#### 5.1.1 The State/Territory certifies that it has licensing requirements applicable to child care services provided within the State.

(658(c)(2)(F)) This requirement did not change under the CCDBG Act of 2014. List the

categories of care that your State/Territory licenses and provide your definition of each licensed category of care

List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

South Dakota licensing requirements are applicable to the following categories of child care providers: 1) Registered Family Day Care Homes - which is the provision of regular care and supervision to no more than 12 children, including the provider's own children who are under the age of six years, for a part of a 24-hour period as a supplement to regular parental care. 2) Group Family Day Care Home - is a facility where regular supervision of 13-20 children is provided for part of a 24-hour period as a supplement to regular parental care. 3) Day Care Center - is a facility for the care and supervision of 21 or more children on a regular basis for part of a day as a supplement to regular parental care. 4) Before and After School - is care and supervision that serves as a substitute for parental care before and after school hours for children who are five years of age or older and enrolled in school.

**5.1.2 Does your State/Territory exempt any child care providers from its licensing requirements?**

☑ Yes.

Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers

Informal provider types, also known as a family friend or neighbor care; in-home provider types, where care is provided in the child's home and relative providers are currently exempt from formal licensing regulations and are eligible to receive CCDF funds. These providers must be at least 18 years of age, maintain a separate residence from the applicant, and provide care only for the applicant's child(ren). These providers are caring for children approved and specifically chosen by the parent. They are not representing themselves as starting a profession as a child care provider and this is typically temporary care. Children are not endangered as the requirements include: submitting a Home Health and Safety Checklist, immunization verification for the children in their care, and (for non-relatives) a screening against the Central Registry of Child Abuse and Neglect. By September 30, 2016, the informal and in-home providers, will also meet the health and safety requirements of the new federal law and compliance with these standards will be verified through an annual inspection of the home.

☐ No.

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

☑ Fully implemented and meeting all Federal requirements outlined above. Describe using 5.1.4 and 5.1.5 below.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

a) Licensed Center-Based Care

1. Infant
   - State/Territory age definition:

Children birth up to age 2.
   - Ratio:

1:5
   - Group Size:

20

2. Toddler
   - State/Territory age definition:

Children age 2 up to age 3.
   - Ratio:

1:5
   - Group Size:

20

3. Preschool:
   - State/Territory age definition:

Children age 3 up to age 5.
   - Ratio:

1:10
   - Group Size:

20

4. School-Age
- State/Territory age definition:

Children 5 years of age or older and enrolled in school.
- Ratio:

1:15
- Group Size:

20

5. If any of the responses above are different for exempt child care centers, describe:
Child care centers receiving CCDF funds are not exempt from meeting licensing standards.
6. Describe, if applicable, ratios and group sizes for centers with mixed age groups.
The staff to child ratios of mixed-age groups must meet the requirements of the age grouping that comprises the majority of the children except when children under three years of age are present. When three or more children under the age of three years are present in the mixed-age group, the staff child ratio for children under three years of age must be maintained.

b) Licensed Group Child Care Homes:

1. Infant
- State/Territory age definition:

Children birth up to age 2.
- Ratio:

1:5
- Group Size:

20

2. Toddler

- State/Territory age definition:

Children age 2 up to age 3.

- Ratio:

1:5

- Group Size:

20

3. Preschool:

- State/Territory age definition:

Children age 3 up to age 5.

- Ratio:

1:10

- Group Size:

20

4. School-Age

- State/Territory age definition:

Children 5 years of age or older and enrolled in school.

- Ratio:

1:15

- Group Size:

20

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

A maximum of 20 children are allowed in the Group Family Day Care Home for full-day care. The provider's children who are also in care are to be included in determining group size and ratio. State law allows a Group Family Day Care Home to care for three additional children if the children are school-age, beyond the grade of Kindergarten, present only before and after school hours, or if the children are at the facility because of a family emergency or special circumstance.

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

Group Family Day Care Homes receiving CCDF funds are not exempt from meeting licensing standards.

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

c) Licensed Family Child Care:

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

Describe the ratios:

No more than four children may be under the age of two years of age, and no more than two of these four children may be under the age of one, unless there is a registered helper in the home. If a registered helper is present in the home, no more than eight of the twelve children may be under the age of two and no more than four of the eight children may be under the age of one.

Describe the group size:

No more than 12 children may be in care at any one time.

Describe the threshold for when licensing is required:

Licensing is required when 13 or more children are in care.

Describe the maximum number of children that are allowed in the home at any one time:

Twelve children are allowed at one time.

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

The provider's children under age six are counted in the provider to child ratio and in

group size.

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

State law allows a registered family day care provider to have two additional children in care if the children are school age, beyond the grade of Kindergarten, and present only before and after school hours, or if the children are at the facility because of a family emergency or special circumstance.

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

Only registered family child care home providers are eligible to receive CCDF funds.

d) Any other eligible CCDF provider categories:

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

Describe the ratios:

Informal providers (such as a family friend or neighbor) are limited to the care of children from only one family; therefore there are no ratios or group size limitations. The other type of care eligible for CCDF is Before-and After-School programs. Staff-to-child ratio for a Before and After School program is 1:15.

Describe group size:

Group size for a Before and After School program is 20 children.

Describe the threshold for when licensing is required:

All Before-and-After- School programs are licensed prior to operating.

Describe maximum number of children that are allowed in the home at any one time:

Maximum number of children allowed in a Before-and-After -School program is based on 25 square feet per child.

Describe if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size:

Any of the Before-and-After-School program staff who have children in care at the facility are included in the staff to child ratio and group size maximums.

Describe the limits on infants and toddlers or additional school-age children that are

allowed for part of the day:

Before-and After-School programs do not provide care to infants or toddlers.

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

a) Licensed Center-Based Care:

1. Infant lead teacher

Infant lead teachers in centers are required to be at least 18 years of age. If the lead teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the lead teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant teacher qualifications:

Infant assistant teachers in centers are required to be at least 18 years of age. If the assistant teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the assistant teacher is in a supervisory role, the minimum educational requirement is a CDA.

2. Toddler lead teacher

Toddler lead teachers in centers are required to be at least 18 years of age. If the lead toddler teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the lead toddler teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant teacher qualifications:

Toddler assistant teachers in centers are required to be at least 18 years of age. If the assistant toddler teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the assistant toddler teacher is in a supervisory role, the

minimum educational requirement is a CDA.

3. Preschool lead teacher

Preschool lead teachers in centers are required to be at least 18 years of age. If the preschool lead teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the preschool lead teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant teacher qualifications:

Preschool assistant teachers in centers are required to be at least 18 years of age. If the preschool assistant teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the preschool assistant teacher is in a supervisory role, the minimum educational requirement is a CDA.

4. School-Age lead teacher

School-age lead teachers in centers are required to be at least 18 years of age. If the school-age lead teacher is responsible for program planning the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the school-age lead teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant teacher qualifications:

School-age assistant teachers in centers are required to be at least 18 years of age. If the school-age assistant teacher is responsible for program planning the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the school-age assistant teacher is in a supervisory role, the minimum educational requirement is a CDA.

5. Director qualifications:

All child care center directors are required to be at least 18 years of age. If the child care center director is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) Credential from the Council for Professional Recognition. If the child care center director is in a supervisory role, the minimum educational requirement is a CDA.

b) Licensed Group Child Care Homes:

1. Infant lead teacher

Infant lead teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the lead infant teacher is responsible for program planning the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the lead infant teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant qualifications:

Infant assistant teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the assistant infant teacher is responsible for program planning the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the assistant infant teacher is in a supervisory role, the minimum educational requirement is a CDA.

2. Toddler lead teacher

Toddler lead teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the lead toddler teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the lead toddler teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant qualifications:

Toddler assistant teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the assistant toddler teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the assistant toddler teacher is in a supervisory role, the minimum educational requirement is a CDA.

3. Preschool lead teacher

Preschool lead teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the lead preschool teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the lead preschool teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant qualifications:

Preschool assistant teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the assistant preschool teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA)

credential from the Council for Professional Recognition. If the assistant preschool teacher is in a supervisory role, the minimum educational requirement is a CDA.

4. School-Age lead teacher

School-age lead teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the lead school-age teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the lead school-age teacher is in a supervisory role, the minimum educational requirement is a CDA.

and assistant qualifications:

School-age assistant teachers in Group Family Day Care Homes are required to be at least 18 years of age. If the assistant school-age teacher is responsible for program planning, the minimum educational requirement is a Child Development Associate (CDA) credential from the Council for Professional Recognition. If the assistant school-age teacher is in a supervisory role, the minimum educational requirement is a CDA.

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

c) Licensed Family Child Care home provider qualifications

Registered family day care providers are required to be at least 18 years of age. There are no minimum educational requirements required of family home providers. This group of providers is required to obtain six hours of professional development training annually.

d) Other eligible providers qualifications:

Before-and-After-School program lead and assistant teachers are required to be at least 18 years of age. The individual responsible for program planning and staff supervision in a Before-and-After-School program is required to meet educational requirements. The minimum educational requirement is a Child Development Associate (CDA) Credential from the Council for Professional Recognition or four years of verifiable experience.

**5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics.**

(658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this

requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

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

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

☐ Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016.

Provide a citation and a link if available

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/16

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Seven of the health and safety requirements are already integrated into Administrative Rule for registered and licensed providers, with the exception of: Prevention and response to emergencies due to food and allergic reactions; Emergency preparedness; and Handling and storage of hazardous materials and the appropriate disposal of bio contaminants. None of the standards are currently required for exempt and in-home providers.

Unmet requirement - Identify the requirement(s) to be implemented Prevention and control of infectious diseases (including immunization)

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

Administrative Rule change needed to add this standard for prevention of infectious diseases to requirements for exempt and in-home providers. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented First aid and

cardiopulmonary resuscitation (CPR) certification

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Administrative Rule change needed to add this standard for first aid and CPR to requirements for exempt and in-home providers. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee. Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
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Unmet requirement - Identify the requirement(s) to be implemented Prevention of sudden infant death syndrome and use of safe sleeping practices

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Administrative Rule change needed to add this standard for preventing sudden infant death and use of safe sleep practices to requirements for exempt and in-home providers. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented Administration of medication, consistent with standards for parental consent

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Administrative Rule change needed to add this standard for administering medicationsto requirements for exempt and in-home providers. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee. Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented Prevention of and response to emergencies due to food and allergic reactions

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Administrative Rule change needed to add this standard for preventing and responding to food and allergic reactions to requirements for all provider types. All Administrative Rule changes include an internal review of proposed rules, a public

hearing, and a review by the Legislative Interim Rules Committee.Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic

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

Administrative Rule change needed to add this standard for ensuring the building and physical premises are safe to requirements for exempt and in-home providers. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented Prevention of shaken baby syndrome and abusive head trauma

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

Administrative Rule change needed to add this standard for preventing shaken baby syndrome to requirements for exempt and in-home providers. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee. Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))

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

Administrative Rule change needed to add this standard for having an emergency and response plan to requirements for all provider types. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee. Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures

compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Administrative Rule change needed to add this standard for handling and storage of hazardous materials and disposal of bio contaminants to requirements for all provider types. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented Precautions in transporting children (if applicable)

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

agencies, etc.)

Administrative Rule change needed to add this standard for transporting children to requirements for exempt and in-home providers. All Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee. Providers are notified of the final rule changes, implementation date, and options for meeting this requirement. Providers then implement the standard in their practices and licensing ensures compliance during monitoring visits.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☐ Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016.

Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan

for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 09/30/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Met with provider groups including family day care association, state directors association, the Sioux Falls director association, and the Sioux Falls Health Department regarding orientation requirements; drafted rule changes to Chapters 67:42:03; 67:42:10; and 67:42:14 to address orientation training for regulated providers; rules have been drafted to address requirements for exempt and in-home providers; an outline of orientation training basic requirements was developed; In June 2015, Division of Child Care convened a work group to develop state specific orientation training content. Currently three classes are complete through production; three are drafted and will go to recording by the end of April; The remaining four are in the writing phase to be reviewed by the end of April, then will go through recording, production and release online. Expected date training will be available either on-line or via in-person group trainings, is August 2016. The Child Abuse and Neglect training is developed and scheduled to go online by July or August 2016. A notification was sent to providers on May 1, 2016 outlining specific requirements for orientation training, information regarding the future state specific orientation training, the Better Kid Care training, and the child abuse and neglect training. Providers were also provided with a list of options for obtaining first aid and CPR training. A webinar was held May 10, to review requirements, implementation dates, and options for obtaining training.

Unmet requirement - Identify the requirement(s) to be implemented pre-service (prior to initial service) or orientation (period from when service started) appropriate to the provider setting that address each of the requirements relating to the required topic areas

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

State specific training that addresses all required topic areas except reporting child abuse and neglect and CPR is being developed. Content for each topic will be written, recorded, and the training is then produced for on-line access, as well as used for in-person group training sessions.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 07/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Childhood Enrichment Programs

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

State specific training on reporting child abuse and neglect isbeing developed.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 07/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Social Services, Division of Child Protection Services

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

Child Care Services is collaborating with Better Kid Care to ensure varied training options are available and accessible to all provider types. The Better Kid Care training includes all categories except first aid,CPR, and reporting child abuse and

neglect. The Better Kid Care orientation training will be available in July 2016.

Projected start date for each activity: 02/01/2016
Projected end date for each activity: 07/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Better Kid Care

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

Providers will be notified when the state specific online and in-person training, the Better Kid Care training, and the child abuse and neglect training is available. The notification will provide instruction as to how to access the training and what documentation will be necessary to verify completion. Providers will be reminded at this time as to the date orientation is to be completed.

Projected start date for each activity: 07/30/2016
Projected end date for each activity: 07/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Early Childhood Enrichment Programs and Better Kid Care

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

Administrative Rule changes implemented to address additional orientation training topic areas required of regulated as well as exempt and in-home providers. Rule changes include a review of rules internally, a public hearing, review by the Legislative Interim Rules Committee, redraft of rules based on comments. Providers will be notified of the rule changes, the date for implementation and how the rule can be met.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

All providers will receive training in the orientation topic areas or provide documentation that they have received the within the past two years by 9.30.17.

Projected start date for each activity: 07/01/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care.

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☑ Nutrition (including age appropriate feeding).

Describe:

Regulated providers are required to prepare and post menus; document actual food served; ensure meals supply 1/3 of child's daily nutritional needs; feed infants according to their individual schedule; and hold infants while being bottle fed.

☑ Access to physical activity.

Describe:

Each licensed program is required to have a written program of activities planned according to the development level of each group of children that includes indoor and outdoor activities.

☐ Screen time.

Describe:

☐ Caring for children with special needs.

Describe:

☑ Recognition and reporting of child abuse and neglect.

Describe:

Administrative Rule of South Dakota 67:42:10:22 requires all staff to read and sign a statement which defines child abuse and neglect and outlines the staff member's responsibility to report all incidents of child abuse or neglect according to state law.

☑ Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety.

Describe:

Child development, standards for discipline, and food storage and preparation requirements.

**5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from these CCDF health and safety requirements.**

Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics?

☑ Yes, all relatives are exempt from all health and safety training requirements.

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

Prior to receiving payment, relative providers must complete and return a Home Health and Safety Checklist to Child Care Services. This form pertains to the home where child care is provided. To ensure that all safety requirements are met, this form also requires the signature of the parent who is applying for assistance. Relative providers are exempt from the regulations because they are family members of the child, therefore the parent knows this provider more personally than they would a non-relative provider. These

children most likely often spend time with this individual outside of care hours as well.

☐ Yes, some relatives are exempt from health and safety training requirements.

If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

☐ No, relatives are not exempt from CCDF health and safety training requirements.

## 5.2 Monitoring and Enforcement Policies and Practices

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

☐ Yes.

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

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

Overall Target Completion Date (no later than September 30, 2016) 09/30/16

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

For all regulated child care programs, policies, practices and requirements are currently included in South Dakota Codified Laws (SDCL) 26-6 and in Administrative Rules of South Dakota (ARSD) Chapters 67:42:03 Family Day Care Homes; 67:42:10 Licensed Programs; 67:42:11 Environmental Health Standards, 67:42:14 Before and After School Care, and 67:42:16 Scope of Services for Child Care Programs.

Unmet requirement - Identify the requirement(s) to be implemented policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements.

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

Administrative Rule change required to add health and safety policies and practices to rules for exempt and in-home providers.

Projected start date for each activity: 06/01/15
Projected end date for each activity: 09/30/16
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child

care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))

☑ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting:

Policy citation: Licensing Manual, Chapter 2, page 2-4. Child Care Services trains the inspectors in the Department of Social Services philosophy, health and safety regulations, and expectations; inspection processes and procedures; interpretation of licensing regulations; and responding to provider's needs and questions. Annual training is coducted with all inspectors to discuss licensing regulations for different types of programs, interpretation of those regulations, and inspection practices. Licensing specialists meet quarterly with inspectors at a local level to discuss questions, issues, needs, etc. Department of Public Safety inspectors also receive additional annual training from the Fire Marshall's Office and the Department of Health that enhances their knowledge and skills in inspecting for fire and life safety as well as environmental health regulations in the child care facilities.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☐ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits

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

Overall Target Completion Date (no later than November 19, 2016) 11/19/16

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

A pre-registration visit is currently made to all prospective family day care homes and once registered, those homes are currently inspected once every two years. A pre-licensure visit is currently made to all licensed Group Family Day Care Homes, Day Care Centers, and Before-and-After-School Programs and those licensed facilities are inspected on an annual basis.

Unmet requirement - Identify the requirement(s) to be implemented require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time.)

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

Administrative Rule change needed to require annual inspections of registered Family Day Care Home providers. Rule changes include an internal review of the proposed changes, a public hearing, and a review by the Legislative Interim Rules Committee.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/27/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Providers are notified of final rules, implementation date for annual inspections, and

how the rule requirement will be met.

Projected start date for each activity: 09/27/2016
Projected end date for each activity: 10/14/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
Existing inspectors and licensing specialists begin conducting annual inspections of these homes.

Projected start date for each activity: 11/19/2016
Projected end date for each activity: 11/19/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Department of Public Safety

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

☐ Yes.

The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements:

☑ No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than

November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than November 19, 2016) 11/19/2016

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

Proposed rule changes have been drafted that would require an annual inspection of exempt and in-home provider homes. On April 12, 2016, Child Care Services licensing specialists were trained in the expectations for conducting these exempt and in-home inspections. Inspection forms for exempt and in-home providers have been developed. The inspection process for exempt and in-home providers has been outline and will be conducted by CCS licensing specilists.

Unmet requirement - Identify the requirement(s) to be implemented policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B))).

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

Administrative Rule change is needed to require annual inspections of exempt and in-home providers homes. Rule changes include an annual review of the proposed changes, a public hearing, and a review by the Legislative Interim Rules Committee.

Projected start date for each activity: 6/01/2015
Projected end date for each activity: 09/27/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

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

Exempt and in-home providers are notified of final rule changes as well asthe implementation date and process for conducting annual inspections.

Projected start date for each activity: 09/27/2016
Projected end date for each activity: 10/14/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Child Care Services licensing specialists will begin conducting these inspections.

Projected start date for each activity: 11/19/2016
Projected end date for each activity: 11/19/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☑ Yes.

The State/Territory certifies that it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List

the policy citation and list the State/Territory ratio of licensing inspectors:
Chapter 1 page 21, of the Child Care Services Licensing Procedure and Policy Manual contains policies and practices regarding inspection of child care facilities. Ten Child Care Services Licensing Specialists and a pool of up to 22 Department of Public Safety inspectors conduct inspections for 1,100 regulated programs. The current ratio is 1:34.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

☑ Yes.

Fully implemented and meeting all Federal requirements outlined above. List the Lead Agency's policy citation(s):

South Dakota Codified Law (SDCL) 26-8A-3.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

**5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from inspection requirements.**

Note this exception only applies if the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

☑ Yes, all relatives are exempt from all inspection requirements.

If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.

The federal law allows exemption of this category. Care is provided only to children who are related to the child care provider. This option is allowed as the children are known to the provider and families often feel more comfortable choosing care within the extended family. Immunization records for the children in care are required.

☐ Yes, some relatives are exempt from inspection requirements.

If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care.

☐ No, relatives are not exempt from inspection requirements.

## 5.3 Criminal Background Checks

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

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

member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry. Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.
Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.
Fees for background checks - Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.
Transparency - The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory's consumer education website (also see section 2.3) or other publicly available venue.
Appeals process - The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.
Privacy considerations - Lead Agency may not publicly release the results of individual background checks.

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

☐ Fully implemented and meeting all Federal requirements outlined above.

List the policy citation within the Lead Agency's rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below.

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated

electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2017) 09/30/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

South Dakota law currently requires a state criminal fingerprint check, a Federal Bureau of Investigation fingerprint check, a child abuse and neglect screening, and a check of the Sex Offender Registry for all regulated child care providers. CCS currently has a process in place for conducting background checks for family child care providers and their staff. That process includes CCS calling the staff regarding any disqualifying crimes, then sending the results to the provider in the form of a letter indicating whether the staff is eligible or ineligible for employment. Currently, background check results are returned within 45 days, results are provided without revealing specific information, CCS pays for the cost of the checks, policies and procedures are available online, and results of individual background checks are not publicly released. Currently licensed centers submit their staff fingerprints directly to the South Dakota criminal repository and the results are returned to the center. When CCS begins conducting those checks for centers, exempt providers, and in-home providers, the same process used for family day care will be followed for licensed centers, exempt and in-home provider background checks.

Unmet requirement - Identify the requirement(s) to be implemented. Requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds.

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

Administrative Rule change needed to incorporate additional background check requirements including: all required checks are needed for exempt and in-home providers; all out-of-state checks and NCIC check needed for regulated providers;

additional prohibitions need to be required for all provider types; and background checks will be conducted once every five years is needed for all provider types. All administrative rule changes include an internal review of proposed rules, a public hearing on the changes, and a review by the Legislative Interim Rules Review Committee.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
All provider types and partner agencies will be notified of final rule changes. The notification to providers will include the new rules, an explanation of the changes, the implementation date, and how to meet the new requirement. Notification to partner agencies will include the new rules, an explanation of the change, the implementation date, and an explanation of how it impacts their agency.

Projected start date for each activity: 10/01/2016
Projected end date for each activity: 10/15/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity
Child Protection Services,Division of Criminal Investigation, local FBI contact.

Tasks/Activities - What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
CCS willassign a staff person to process background checks for all providers types. This includes conducting the checks, returning result letters to programs, and managing responses to keep the process moving. The process currently in place

for conducting checks for family child care providers and their staff will be used as it meets the requirements of the federal law.

Projected start date for each activity: 07/01/2017
Projected end date for each activity: 07/01/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented. 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.

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

Notification of center-based applicants, exempt providers and in-home providersineligible for employment will follow the same process currently in place for registered family day care applicants. That process includes: CCS licensing specialist calls the applicant ineligible for employment based on the results of the criminal background check and shares the reason for ineligibility including the disqualifying crime. A notification follow-up letter will be sent reiterating the reason for ineligibility and notification of appeal rights.

Projected start date for each activity: 06/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

.

Unmet requirement - Identify the requirement(s) to be implemented. A process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness.

Tasks/Activities - What specific steps will you take to implement the unmet

requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

Althoughan appeals process is not yet in place to specifically appeal the results of criminal background checks, South Dakota does have an appeals process that is followed for other action taken by the state, and the appeals for background check results will follow that same process. The process will include: when an applicant is ineligible for employment based on the results of the criminal background check, CCS will call the individual to explain the reasons for disqualification and the process for appealing that decision. A follow-up letter will be sent to the applicant with the reason, the process to appeal, and contact information for appealing that decision.

Projected start date for each activity: 10/01/2016

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Department of Social Servcies, Office of Administrative Hearings.

Unmet requirement - Identify the requirement(s) to be implemented. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as any other individuals in the household that may have unsupervised access to children.

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

Administrative Rule change is neededto conduct all background checks on persons who supervise children or have unsupervised access to children for exempt and in-home providers. Rule change will also include addition of out-of-state checks and NCIC check for licensed centers and registered family dya care homes. Administrative rule changes include an internal review of the rules, a public hearing, and a review by the Legislative Interim Rules Committee. Providers are notified of the final rules, and provided an explanation of the changes and how to meet the

rule changes.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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Unmet requirement - Identify the requirement(s) to be implemented. State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years;

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

Administrative Rule change needed to incorporaterequirements for a state criminal and a state sex offender check for exempt and in-home providers in South Dakota and in all states they have lived for the past five years.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

CCS staff call current exempt and in-home providers to notify them of the rule changes and provide an overview of the requirements for background checks. The necessary formsand instructions will be sent to these providers to complete and submit. CCS staff will ensure receipt of the forms and completion of the background check.

Projected start date for each activity: 10/01/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

SD Division of Criminal Investigations,other states

Unmet requirement - Identify the requirement(s) to be implemented. State child abuse and neglect registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years,

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

Administrative Rule change needed to incorporate requirements for achild abuse and neglect screening for expempt and in-home providers in South Dakota and in all states they have lived in the past five years.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

CCS staff call current exempt and in-home providers to notify them of the rule changes and provide an overview of the requirements for background checks. The necessary formsand instructions will be sent to these providers to complete and submit. CCS staff will ensure receipt of the forms and completion of the background check.

Projected start date for each activity: 10/01/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Unmet requirement - Identify the requirement(s) to be implemented. National Crime Information Center (run by the FBI)

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

Administrative Rule change needed to incorporate requirements for an NCIC check for exempt and in-home providers. Administrative rule changes include an informal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Local FBI contact.

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

CCS staff call current exempt and in-home providers to notify them of the rule changes and provide an overview of the requirements for background checks. The necessary formsand instructions will be sent to these providers to complete and submit. CCS staff will ensure receipt of the forms and completion of the background check.

Projected start date for each activity: 10/01/2016
Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Local FBI contact.

Unmet requirement - Identify the requirement(s) to be implemented. FBI fingerprint check using Next Generation Identification

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

Administrative Rule change to incorporate requirements for FBI fingerprint checks for exempt and in-home providers. Adminsitrative rule changes include an internal review of proposed changes, a public hearing, and a review by the Legislative Interim Rules Committee.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Local FBI contact.

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

CCS staff call current exempt and in-home providers to notify them of the rule changes and provide an overview of the requirements for background checks. The necessary formsand instructions will be sent to these providers to complete and submit. CCS staff will ensure receipt of the forms and completion of the background check.

Projected start date for each activity: 10/01/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

FBI

Unmet requirement - Identify the requirement(s) to be implemented. National Sex Offender Registry.

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

Administrative Rule change needed to incorporate requirements for the National Sex Offender Registry check for exempt and in-home providers. Administrative Rules include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.

Projected start date for each activity: 06/01/2015
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

CCS staff call current exempt and in-home providers to notify them of the rule changes and provide an overview of the requirements for background checks. The necessary forms and instructions will be sent to these providers to complete and submit. CCS staff will ensure receipt of the forms and completion of the background check.

Projected start date for each activity: 10/01/2016
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead

agency to complete implementation of this activity

FBI

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

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

Administrative Rule change needed to incorporate the criminal prohibitions not currently in rule for all provider types. Administrative Rule changes include an internal review of proposed rules, a public hearing, and a review by the Legislative Interim Rules Committee.

Projected start date for each activity: 06/01/2015

Projected end date for each activity: 09/30/2016

Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

CCS staff notify regulated as well as exempt and in-home providers of the rule changes and crimes that prohibit employment in a child care program. Providers recieve an explanation of the change and how to meet the rule change.

Projected start date for each activity: 10/01/2016

Projected end date for each activity: 10/15/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care
Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Describe:

The Division of Child Care currently coordinates background checks to include fingerprint, central registry and sex offender checks. These checks are currently completed within the 45-day time frame unless there is an unforeseen circumstance such as a rejected fingerprint that must be resubmitted to the FBI, and that can take an additional four weeks to complete. The specific results from a check are not shared with anyone except the individual being screened. A letter of eligibility or ineligibility is sent to the facility. When this requirement is fully implemented, the Division of Child Care will be conducting all checks, and any individual who is prohibited from employment, will be sent a letter of ineligibility and offered hearing rights.

**5.3.3 Describe how the State/Territory is assisting other States process background checks, including which agency/entity is responsible for working with other states**

Describe:

In South Dakota, the Division of Criminal Investigation (DCI) conducts all state criminal fingerprint checks. Contact information for DCI is: Criminal Justice Training Center, 1302 E Hwy 14, Suite 5, Pierre SD 57501-8505 and the phone number is (605) 773-3331. Sex Offender checks would be conducted by the individual state in need of the information, and completed on-line on the SD Sex Offender Registry at http://sor.sd.gov/. At this time South Dakota does not process central registry screening requests from other states relative to employment purposes.

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

☑ Yes.

Describe:

State law prohibits employment in a regulated child care program for individuals with any felony conviction in the past five years. For convictions that occurred more than 5 years from the date of employment, a review is conducted when additional information is gathered from the arrest and conviction, as well as from the potential staff person as to the circumstances of the charge, changes the individual has made since that arrest, etc.

☐ No.

**5.3.5 Does the Lead Agency disqualify child care staff members based on their conviction for other crimes not specifically listed above?**

☑ Yes.

Describe:

South Dakota also disqualifies child care staff members for any crime that indicates harmful behavior toward children; a conviction of manslaughter, aggravated assault, riot, robbery, and burglary in the first or second degree.

☐ No.

**5.3.6 Does your State State/Territory exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, 98.41(A)(ii)(A)) from background checks?**

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

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

Describe.

☐ No, relatives are not exempt from background checks.

**5.3.7 Describe how fees charged for completing the background checks do not exceed the actual cost of processing and administration, including how the State State/Territory ensures that 3rd party vendors or contractors do not charge fees that exceed the actual cost of processing and administration, if applicable.**

Lead Agencies can report that no fees are charged if applicable:

Describe.

Costs for state background checks are $24.00 and costs for federal background checks are $19.25. All costs are paid by the lead agency. Fees do not exceed the actual cost of processing and administration.

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

Describe.

The policies are currently published on the CCS website at http://dss.sd.gov/childcare/licensing/

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

☐ Yes.

List types of crime included in the aggregated data:

☑ No.

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

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key

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

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

## 6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development requirements designed to enable child care providers to promote the social, emotional, physical and cognitive development of children and to improve the knowledge

and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

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

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

**6.1.1 Describe the status of the State's training and professional development requirements to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.**

a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and mid-level training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).

b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.)

c) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)

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

e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.

☑ Fully implemented and meeting all Federal requirements outlined above. Describe using 6.1.2 through 6.1.6 below.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:

Projected end date for each activity:

Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

**6.1.2 Describe how the State provides ongoing training and professional development, provides for a progression of professional development (such as allows an individualto build on entry- and mid-level training and education both in terms of the skills and knowledge they attain but also in terms of credit that leads toward a higher level credential or certification, including articulation agreements) reflecting research and best practice to meet the developmental needs of participating children and improve the quality and stability of the child care workforce:**

☑ State/Territory professional standards and competencies.

Describe.

The Division of Child Care Core Knowledge and Competency document was developed as a component of the South Dakota Pathways to Professional Development Trainer Registry. The purpose of the document is to provide Pathways Trainers with an understanding of the principles of knowledge that need to be addressed in training sessions in order to develop caregivers' knowledge and skills in the 15 Professional Training Areas of the South Dakota Pathways to Professional Development project.

☑ Career ladder or lattice.

Describe.

The Pathways to Professional Development Career Lattice is a voluntary workforce registry. The Career Lattice has 7 levels that range from Introductory Informal Education to Masters & Doctoral Degree.

☐ Articulation agreements between two- and four-year postsecondary early childhood education or degree programs.

Describe.

☑ Community-based training approved by a state regulatory body to meet licensing or regulatory requirements.

Describe.

Although there are a variety of ways a child care provider can receive training, the primary delivery system for ongoing training is through regional ECE programs. All training received through these programs is considered "approved." Child Care Licensing specialists approve training as it relates to requirements to meet licensing standards.

☑ Workforce data, including recruitment, retention, registries or other documentation, and compensation information.

Describe.

The Pathways to Professional Development Career Lattice collects workforce data relative to the number who voluntarily participate. Workforce data is also collected at the time of each market rate survey. This data includes provider characteristics such as average number of days/hours of operation per week, enrollment; types of care offered; educational level of the provider/director and staff; turnover rates, etc.

☐ Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework.

Describe.

☑ Continuing education unit trainings and credit-bearing professional development.

Describe.

The Division of Child Care contracts with 5 regional agencies known as Early Childhood Enrichment (ECE) agencies to deliver an ongoing progression of training that includes CEU trainings for child care providers. The ECE agencies work with South Dakota State University's Office of Continuing and Extended Education for CEU approval.

☑ State-approved trainings.

Describe.

All trainings offered through the ECE regional programs are approved as well as trainings offered through various conferences tied to the Pathways training areas. Other trainings include but are not limited to Family and Consumer Extension Services; technical institutes; four-year colleges and universities; American Red Cross and American Heart for CPR training; conferences held by statewide provider associations, state agencies such as Department of Health, etc.

☐ Inclusion in state and/or regional workforce and economic development plans.

Describe.

☑ Other.

Describe.

The Division of Child Care has articulation agreements with 5 higher education institutions (South Dakota State University (SDSU), Black Hills State University (BHSU), Oglala Lakota College (OLC), Southeast Technical Institute (STI), and Sisseton Wahpeton College) to enable child care providers to articulate their Child Development Associate (CDA) training into 10-12 college credits toward an Associates or Bachelor's

degree program. Training must have been completed through either the South Dakota CDA Training Program or through Child Care Aware Training Academy to be eligible for articulation. To be eligible to articulate, the child care provider must have a current CDA Credential and have completed a 30-hr Pathways to Professional Development Series training.

**6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC**

Describe.

Training and professional development requirements are embedded in child care licensing administrative rules and serve as the foundation for training development. The Early Learning Guidelines and Pathways to Professional Development program serve as guidance for training content. Course content is developed in consultation with five regional ECE training entities, Department of Education, and Department of Health. Input from the child care field, is received through communication with various provider associations and through the Administrative Rules process.

The Division works with South Dakota State University and they have reviewed and approved the class content for the 30-hr Pathways to Professional Development Series as part of the articulation agreement.

**6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements**

Describe.

Recognizing the importance of social and emotional development for young children, South Dakota's Early Learning Guidelines include a unique section that outlines benchmarks for social emotional development. Knowledge and application of the early learning and

development guidelines, health and safety standards and social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models are embedded in all training offerings or as stand-alone trainings throughout the state. This knowledge is foundational and is incorporated at various levels of the progression of training. Licensing regulations identify Guidance and Discipline as a specific training topic.

**6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable)**

Describe.

The Division of Child Care works with the Early Childhood Enrichment (ECE) network to provide a variety of training opportunities accessible to all child care providers statewide. Training in a variety of communities, statewide and via regional online training opportunities are available. The ECE agencies publish the training calendar on their websites and distribute the calendars through e-mails and newsletters. The calendars are posted on the Division of Child Care's website. In addition to trainings available on the training calendar, the ECE agencies work in collaboration with licensing staff and tribal entities to identify and address potential gaps in accessible training. This collaboration has resulted in the addition of much needed CPR and Child Development Associate training in tribal communities. In addition to training provided directly by ECE staff, the agencies have purchased license agreements for the Child Care Aware Training Academy to improve accessibility of Child Development Associate (CDA) training and Continuing Education Units (CEUs) to child care providers in rural and frontier areas of the state.

**6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.**

Describe.

Basic training and professional development requirements are generalized for all providers.

Specialized training is available throughout the state specific to types of care provided such as family child care, infant-toddler care and school-age care. Infant-toddler, family child care and school-age certificate opportunities are available as well as training towards a Child Development Associate (CDA) credential. The CDA is a minimum requirement for a child care center director. In addition, the Division of Child Care has developed a state Out-of-School-Time Credential which meets the minimum educational requirement for a director or program planner in a licensed Out-of-School-Time program. Training is available on a regional basis that specifically addresses Native American culture and activities for child care providers focusing on the philosophy of Lakota tradition. Working with children with disabilities is embedded in all training to ensure providers understand the concept of inclusion. Training is available on a regional basis that specifically addresses Native American culture and activities for child care providers focusing on the philosophy of Lakota tradition. Working with children with disabilities is embedded in all training to ensure providers understand the concept of inclusion. Professional development opportunities also include topics to assist providers in understanding cultural diversity, how to create partnerships with families and activities to support children who have English as a second language.

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

☑ Financial assistance for attaining credentials and post-secondary degrees.

Describe.

The Division of Child Care provides funding for income-based scholarships for those working in state registered or licensed child care programs towards the completion of their Child Development Associate (CDA). The Division offers a $400 scholarship toward the cost of CDA training and technical assistance and a $425 scholarship to cover the assessment fee from the Council for Professional Recognition.

☐ Financial incentives linked to education attainment and retention.

Describe.

☐ Registered apprenticeship programs.

Describe.

☐ Outreach to high school (including career and technical) students.
Describe.

☐ Policies for paid sick leave.
Describe.

☐ Policies for paid annual leave.
Describe.

☐ Policies for health care benefits.
Describe.

☐ Policies for retirement benefits.
Describe.

☑ Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services).
Describe.
The regional ECE training program provides classes that focus on topics such as stress management and self-care. These classes are offered stand-alone and are often embedded in classes throughout the year as part of their annual training options to ensure providers are reminded of the importance of caring for themselves in order to care for others. The fitCare program offered statewide, also has a focus on provider self-care, stress management and well-being. Any class offerings in this subject area are for the purpose of helping child care providers regain/maintain emotional control during stressful times while caring for children.

☐ Other.
Describe.

**6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language.**

Describe.

Limited English speaking families receive initial support from programs such as Lutheran Social Services Center for New Americans, Sisters of the Presentation of the Blessed Virgin Mary, Aberdeen Area Hispanic Outreach, Multi-Cultural Center of Sioux Falls and Benedictine Multi-Cultural Center of Watertown. Finding a child care provider has not been identified to Child Care Services (CCS) as an issue from those supporting programs or families. If finding child care is determined to be a need, CCS would determine what hours of care are needed, ages of children needing care, etc. and begin working to find child care that meets the needs of the family. Interpretation services are utilized or English speaking family members at this stage. This process often starts with asking the family if they are aware of any individuals who would be interested in providing child care for their children if they are not interested in a formal child care arrangement. If a potential resource is identified, licensing specialists proceed in contacting the potential provider and make information available on the registration process. At the current time, there are six family child care providers registered to provide care in South Dakota, where English is a second language. Most often familiar individuals are selected by the family and CCS works with various interpretation services or English speaking family members to increase communication and understanding of the program. Often various languages and/or dialects are spoken and with the help of an Interpreter or a family member who speaks English, communication challenges can be overcome on a case by case basis.

**6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.**

- [x] Informational materials in non-English languages
- [ ] Training and technical assistance in non-English languages
- [ ] CCDF health and safety requirements in non-English languages
- [ ] Provider contracts or agreements in non-English languages
- [ ] Website in non-English languages
- [x] Bilingual caseworkers or translators available
- [ ] Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
- [ ] Other.

Describe.

☐ None

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

Primary language relating to information or services is Spanish. The state has the ability to utilize translation and interpretation services in all primary and secondary languages.

**6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).**

Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

☐ Yes.

The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers

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

Overall Target Completion Date (no later than September 30, 2016) 9/30/2016

Overall Status - Describe the State/Territory's overall status toward complete

implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) Partially implemented

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

The regional Early Childhood Enrichment trainers, Licensing Specialists, Subsidy Caseworkers, and Administrative Staff participated in a train-the-trainer session that focused on eligibilty for and services provided through McKinney-Vento Act by the South Dakota Department of Education.

Unmet requirement - Identify the requirement(s) to be implemented Use CCDF for activities to improve quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

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

Identify a standardized list of key talking points and additional resources regarding working with families experiencing homelessness to include in existing training offerings

Projected start date for each activity: 04/01/2016
Projected end date for each activity: 09/30/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services Child Care Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Regional Early Childhood Enrichment Training Programs, Department of

Education

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

Embed training into ongoing training offerings conducted by regional Early Childhood Enrichment programs and Licensing Specialists

Projected start date for each activity: 08/01//2016
Projected end date for each activity: 09/3/0/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

Regional Early Childhood Enrichment Training Programs

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

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

### 6.2.1 If checked yes to 7.1 in the next section, check which content is included training and professional development activities. Check all that apply.

☑ Yes, If yes,

a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.

Pre and Post Surveys will be completed by participants in every class offered by the Early Childhood Enrichment (ECE) system to measure participant knowledge gain. In addition, the ECE system will measure behavior change by collecting information on knowledge gain, provider confidence, intent, practice, and habit. In addition, the number of programs participating in various quality improvement activities will be tracked.

b) Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe:

CCDF discretionary funding.

☐ Other funds.

Describe:

c) Check which content is included in training and professional development activities. Check all that apply.

☑ Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c.

Describe:

Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies is embedded in a variety of training topics/offerings throughout the state. For example, trainings such as fitCare curriculum specifically address nutrition and physical activity as well as social-emotional development. Besides fitCare, various coursework is offered by the Early Childhood Enrichment (ECE) training system such as but not limited to the following: Social Emotional Milestones/Temperaments, Guidance and Discipline/Understanding Behavior, Teaching Children to Embrace Differences, Cultivating Curiosity, When is this Normal?, Where does Temperament Fit into the Equation?, Respectful Care/Primary Caregiving; Language Development, Early Brain Development and Literacy.

☑ Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2).

Describe:

All child care providers have opportunities for continuous professional development

through training, coursework, coaching and mentoring that promotes social-emotional and behavioral development. Mental health consultation specific to the child care setting is available in at least two areas of the state.

☑ 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 ECE agencies deliver a variety of training opportunities on creating partnerships with families. Knowing that child care providers serve as a resource for families regarding child development, the ECE system works to equip the provider with information and resources they need. For example, the fitCare training provides providers with a variety of resources to share with families regarding nutrition, physical activity, emotional management and rest/relaxation for children ages 3-5 years. After participating in training on the Early Learning Guidelines, child care providers receive copies of a Family Calendar that are to be provided to families to encourage their involvement in their child's development through a list activities they can do with their child.

☑ Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards.

Describe:

Training is available for child care providers on the Early Learning Guidelines for ages 3-5 years. In addition, to stand-alone trainings, a 20-hr Early Learning Guidelines series is available to providers statewide as an online training opportunity.

☐ On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development.

Describe:

☐ Using data to guide program evaluation to ensure continuous improvement.

Describe:

☐ Caring for children of families in geographic areas with significant concentrations of

poverty and unemployment.

Describe:

☑ Caring for and supporting the development of children with disabilities and developmental delays.

Describe:

Training is provided through the ECE agencies to assist providers in meeting the individual needs of children. Information is integrated into all trainings that address the child care environment and age-appropriate activities. Individual topic-specific classes are also offered such as the following: Teaching Children to Embrace Differences, Adapting your Environment, Easy Toy Adaptations, Including Children With Diverse Abilities, Accepting All Children and Differences, and Child Care ADA and the Professional Way. In addition, individualized on-site technical assistance is provided to child care programs as requested to address more specific needs.

☑ Supporting positive development of school-age children.

Describe:

Through the ECE system, ongoing training to support positive development of school-age children is provided to afterschool and summer school-age programs statewide through in-person and online training opportunities. ECE and Child Care Services staff also provide training through workshops at the annual SD School-Age Care Alliance (SoDakSACA) conference and OST Director Retreat. The SD OST Credential is available via online training and T/A through the ECE system. Afterschool Director support is made available through the SD Afterschool Discussion Listserv and email alerts regarding trends and best practices. Child Care Services provides resource support & guidance to both the SoDakSACA and SD Afterschool Partnership advisory boards.

☐ Other.

Describe:

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

☐ Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling

☐ State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities

☑ Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education

☑ Other.

Describe:

The Pathways to Professional Development training series is provided twice per year to child care providers across the state and delivered thru statewide online training. This 4-part series is delivered to meet the articulation agreement requirements to articulate training from the South Dakota Child Development Associate (SD CDA) training program into college credit at South Dakota colleges and universities. In addition, students have the option to receive licensing training hours or continuing education units (CEU) for their participation in the series.

☐ No.

**6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas?**

States and Territories are encouraged to consult with Caring for our Children for best practices and recommended time needed to address training hour requirements.

☑ Yes. If yes, describe:

a) Licensed Center-Based Care

1) Number of pre-service or orientation hours and any required areas/content

Currently, staff in licensed centers are required to have orientation training in specified content areas but there is no set number of hours required for orientation. The required content areas for orientation currently includes: Planning developmentally appropriate activities for children; supervision and guidance techniques; hand washing and sanitization techniques to reduce the spread of disease and infection; meeting nutritional needs of children; meeting special health care needs of children; emergency response procedures; reporting suspected cases of child

abuse and neglect; facility policies; and regulations governing center operations. At least one staff member on-site in a licensed center is required to have CPR certification prior to the initial license being issued. By September 2016, all child care providers will have orientation training that meets the requirements of the federal law, see implementation plan at Section 5.1.6 of this State Plan for orientation training.

2) Number of on-going hours and any required areas/content

Twenty hours of training is required annually for all staff in licensed centers. The areas of content for annual training include the following: Child growth and development; Detecting and reporting child abuse and neglect; Guidance and behavior management; Food handling techniques; Identification and Prevention of communicable diseases; Program health and safety; Nutrition for children; Program management and regulation; Communication and relations with staff; Cultural diversity; Learning environments; Age appropriate activities and planning; Professionalism; Partnerships with parents; Inclusion of all children; and Basic first aid. During all hours the facility is in operation, there must be at least one staff person on site who is training in both first aid and infant-child CPR.

b) Licensed Group Child Care Homes

1) Number of pre-service or orientation hours and any required areas/content

Staff in licensed Group Family Child Care Homes are required to have orientation training in specified content areas but there is no set number of hours required for orientation. The required content areas for orientation currently include: Planning developmentally appropriate activities for children; supervision and guidance techniques; hand washing and sanitization techniques to reduce the spread of disease and infection; meeting nutritional needs of children; meeting special health care needs of children; emergency response procedures; reporting suspected cases of child abuse and neglect; facility policies; and regulations governing center operations. At least one staff member on-site in a licensed center is required to have CPR certification prior to the initial license being issued. By September 2016, all child care providers will have orientation training that meets the requirements of the federal law, see implementation plan at Section 5.1.6 of this State Plan for orientation training.

2) Number of on-going hours and any required areas/content

Ten hours of training is required annually for all staff in licensed Group Family Day Care Homes. The areas of content for annual training include the following: Child

growth and development; Detecting and reporting child abuse and neglect; Guidance and behavior management; Food handling techniques; Identification and Prevention of communicable diseases; Program health and safety; Nutrition for children; Program management and regulation; Communication and relations with staff; Cultural diversity; Learning environments; Age appropriate activities and planning; Professionalism; Partnerships with parents; Inclusion of all children; and Basic first aid. During all hours the facility is in operation, there must be at least one staff person on site who is training in both first aid and infant-child CPR.

c) Licensed Family Child Care Provider

1) Number of pre-service or orientation hours and any required areas/content

Each registered family day care provider is required to obtain certification in CPR prior to receiving a registration. There are currently no other orientation requirements for this type of provider. By September 2016, all child care providers will have orientation training that meets the requirements of the federal law, see implementation plan at Section 5.1.6 of this State Plan for orientation training.

2) Number of on-going hours and any required areas/content

Six hours of training is required annually of registered family day care providers and their helpers. The areas of content for annual training include the following: Child growth and development; Detecting and reporting child abuse and neglect; Guidance and behavior management; Food handling techniques; Identification and Prevention of communicable diseases; Program health and safety; Nutrition for children; Program management and regulation; Communication and relations with staff; Cultural diversity; Learning environments; Age appropriate activities and planning; Professionalism; Partnerships with parents; Inclusion of all children; and Basic first aid. Each family day care providers CPR certification must remain valid.

d) Any other eligible CCDF provider

1) Number of pre-service or orientation hours and any required areas/content

Staff in licensed Before-and After-School programs are required to have orientation training in specified content areas but there is no set number of hours required for orientation. The required content areas for orientation currently include: Planning developmentally appropriate activities for children; supervision and guidance techniques; hand washing and sanitization techniques to reduce the spread of disease and infection; meeting nutritional needs of children; meeting special health care needs

of children; emergency response procedures; reporting suspected cases of child abuse and neglect; facility policies; and regulations governing center operations. At least one staff member on-site in a licensed center is required to have CPR certification prior to the initial license being issued. By September 2016, all child care providers will have orientation training that meets the requirements of the federal law, see implementation plan at Section 5.1.6 of this State Plan for orientation training. There are currently no training requirements for informal providers. By September 2016, all child care providers will have orientation training that meets the requirements of the federal law, see implementation plan at Section 5.1.6 of this State Plan for orientation training.

2) Number of on-going hours and any required areas/content

Ten hours of training is required annually for all staff in Before-and-After-School Programs. The areas of content for annual training include the following: child growth and development; detecting and reporting child abuse and neglect; guidance and behavior management; food handling techniques; identification and prevention of communicable diseases; program health and safety; nutrition for children; program management and regulation; communication and relations with staff; cultural diversity; learning environments; age appropriate activities and planning; professionalism; partnerships with parents; inclusion of all children; and basic first aid.

☐ No

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

☑ Fully implemented - as of March 1, 2016.

Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance

Basic training on business practices is delivered by the Early Childhood Enrichment (ECE) network through trainings such as: Early Childhood Management Training Series, Family Child Care Entry Level Series, and Pathways to Professional Development series. These series are accessible to child care providers statewide as they are delivered via online training once per year. The content includes information and resources for record keeping, budgeting, program policies, hiring practices, etc. In addition, business training and workshops delivered through state associations such as the Family Child Care Providers of South Dakota, South Dakota Association for the Education of Young Children and the South Dakota Association of Child Care Directors are popular.

Regional ECE agencies and licensing staff provide one-on-one technical assistance to child care programs to address individual program needs. During technical assistance visits, staff utilize tools such as the Program Administration and Business Administration Scales as well as resources from First Children's Finance http://www.firstchildrensfinance.org/ to improve program business practices. When needed, ECE agencies refer child care directors to local resources such as the Department of Labor for additional expertise in this area.

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

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

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

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

Projected start date for each activity:
Projected end date for each activity:
Agency - Who is responsible for complete implementation of this activity

Partners - Who is the responsible agency partnering with the State/Territory lead agency to complete implementation of this activity

## 6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

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

☑ The State assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
- Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
- Updated as determined by the State. List the date or frequency

The Early Learning Guidelines are currently being revised. Revision is tentatively set for every 5 years.

☐ Fully implemented and meeting all Federal requirements outlined above - as of March 1, 2016. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

☑ Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date

(no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

Overall Target Completion Date (no later than September 30, 2016) 9/30/2017

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

Implemented requirement(s) - Identify any requirement(s) implemented to date if applicable

South Dakota currently has Early Learning and Development Guidelines (ELDG) for ages 3-5. Information about utilizing the ELDGs is integrated into all training opportunities for child care providers who care for children 3-5 years of age. In addition, the Early Childhood Enrichment system offers a 20-hr Early Learning and Development Guidelines series. The current 3-5 ELDG document is provided to child care providers attending these training opportunities and is accessible online on the Division's website at: http://dss.sd.gov/childcare/linksandresources/. In addition to the ELG document, child care providers receive supplemental resources such as the Family Calendar to share with the families of children in their care. Work on a new birth to 5 ELDG document began in October 2014.

Unmet requirement - Identify the requirement(s) to be implemented Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten

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

The Early Learning and Development Guidelines (ELDG) Review Panel completes draft of birth to 5 ELDG document.

Projected start date for each activity: 10/01/2014
Projected end date for each activity: 12/31/2016
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with to complete implement

this activity

Department of Education

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

Additional components of the Early Learning and Development Guidelines document including Introduction, Glossary, and Resources and stakeholder feedback on the final draft is gathered.

Projected start date for each activity: 01/01/2017
Projected end date for each activity: 06/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with to complete implement this activity

Department of Education

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

Final edits are made anddocument is sent to the printer.

Projected start date for each activity: 07/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with to complete implement this activity

Department of Education

Unmet requirement - Identify the requirement(s) to be implemented Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC

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

agencies, etc.)

Develop and implement a plan for the public dissemination of the new birth to 5 guidelines

Projected start date for each activity: 01/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with to complete implement this activity

Department of Education

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

Coordinate and host a train the trainer event for trainers on the new birth to 5 ELDG document.

Projected start date for each activity: 07/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity
Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with to complete implement this activity

Department of Education, Regional Early Childhood Enrichment (ECE) agencies

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

Work with the Early Childhood Enrichment (ECE) network to deliver training on the Early Learning and Development Guidelines where the document will be distributed to child care providers.

Projected start date for each activity: 07/01/2017
Projected end date for each activity: 09/30/2017
Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with to complete implement this activity

Department of Education, Regional Early Childhood Enrichment (ECE) agencies

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

Make a downloadable online version of the ELDG Document and other supplemental resources available for child care providers.

Projected start date for each activity: 08/01/2017

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Division of Child Care

Partners - Who is the responsible agency partnering with to complete implement this activity

Department of Education

Unmet requirement - Identify the requirement(s) to be implemented Updated as determined by the State.

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

Work with the ELDG Oversight Committee to develop a revision schedule for the birth to 5 ELDG document.

Projected start date for each activity: 07/01/2017

Projected end date for each activity: 09/30/2017

Agency - Who is responsible for complete implementation of this activity

Department of Social Services, Child Care Services

Partners - Who is the responsible agency partnering with to complete implement this activity

Department of Education

**6.3.2 Check for which age group(s) the State has established early learning and development guidelines:**

☐ Birth-to-three

Provide a link:

☑ Three-to-Five

Provide a link:

http://doe.sd.gov/oess/documents/HEADSTART_EarlyLearningGuidelines.pdf

☐ Birth-to-Five

Provide a link:

☐ Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards).

Describe and provide a link:

☐ Other.

Describe:

**6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children's cognitive, physical, social and emotional development and support children's overall well-being?**

☑ Yes, the State/Territory has a system of technical assistance operating State/Territory-wide

☐ Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide

☐ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

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

☑ Child care providers are supported in developing and implementing curriculum/learning activities based on the State's/Territory's early learning and development guidelines.

Describe:

Technical assistance is available through the Early Childhood Enrichment (ECE) system upon request.

☐ The technical assistance is linked to the State's/Territory's quality rating and improvement system.

Describe:

☐ Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines.

Describe:

☑ Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

Technical assistance is available through the Early Childhood Enrichment (ECE) system upon request.

☐ Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines.

Describe:

b) Indicate which funds are used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

Quality set-aside.

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

**6.3.4 Check here to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))**

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used to deny children eligibility to participate in the CCDF program
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

☑ Yes.

## 7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

1) Supporting the training and professional development of the child care workforce (as described in Section 6)

2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)

3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services

4) Improving the supply and quality of child care programs and services for infants and toddlers

5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)

6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)

7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children

8) Supporting providers in the voluntary pursuit of accreditation

9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set-aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

## 7.1 Activities to Improve the Quality of Child Care Services

### 7.1.1 What are your overarching goals for quality improvement?

Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

The State's preliminary goal is to increase and incentivize workforce development opportunities so that the health, safety and developmental needs of children can be met. Meetings and discussions have been held with the Early Childhood Enrichment program staff, Division of Child Care Licensing representatives, and representatives from the Division of Child Care. Surveys targeted for licensed child care center directors and family day care providers were conducted and will to be used to inform the process for quality improvement initiatives in the months ahead.

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

☐ Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2. Indicate which funds will be used for this activity (check all that apply)

- ☐ CCDF funds.

  Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

- ☐ Other funds.

  Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3. Indicate which funds will be used for this activity (check all that apply)

- ☑ CCDF funds.

  Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

  Quality set-aside infant-toddler targeted funds will be used to improve the quality of child care services for infants and toddlers.

- ☐ Other funds.

  Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☐ Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If

checked, respond to 7.4. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

CCDF quality set-aside funding.

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☐ Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☐ Supporting accreditation. If checked, respond to 7.7. Indicate which funds will be used for this activity (check all that apply)

☐ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

☑ Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

CCDF quality set-aside funding.

☑ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

Department of Health, Maternal Child Health and 1305 funding is used to support this activity.

☑ Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9. Indicate which funds will be used for this activity (check all that apply)

☑ CCDF funds.

Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)

CCDF quality set-aside.

☐ Other funds.

Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

## 7.2 Quality Rating and Improvement System

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

☐ Yes, the State/Territory has a QRIS operating State/Territory-wide.

Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available

☐ Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide.

Provide a link, if available

☑ No, but the State/Territory is in the development phase

☐ No, the State/Territory has no plans for development

a) If yes, check all that apply to your QRIS.

☐ Participation is voluntary

☐ Participation is mandatory for providers serving children receiving subsidy.

If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)

☐ Participation is required for all providers

☐ Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels

☐ Supports and assesses the quality of child care providers in the State/Territory

☐ Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers

☐ Embeds licensing into the QRIS.

Describe:

☐ Designed to improve the quality of different types of child care providers and services

☐ Describes the safety of child care facilities

☐ Addresses the business practices of programs

☐ Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood

system and the ratings of the programs in which the child is enrolled

☐ Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services.

If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality

☐ Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating

b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.

☐ Licensed child care centers

☐ Licensed family child care homes

☐ License-exempt providers

☐ Early Head Start programs

☐ Head Start programs

☐ State pre-kindergarten or preschool program

☐ Local district supported pre-kindergarten programs

☐ Programs serving infants and toddlers

☐ Programs serving school-age children

☐ Faith-based settings

☐ Other.

Describe:

**7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory.**

Describe:

At the current time, a volunteer system for recognizing programs that have completed activities beyond minimum health and safety standards is being explored.Â In September

andÂ October 2015, a Â survey was distributed to licensed and registered child care programs to gather feedback regarding industry perceptions of quality child care and program needs.Â Based on the results of the survey, the agency has begun preliminary discussions around potential quality initiatives that could be implemented to help improve the quality of child care. Any system would be voluntary and would involve a continuous quality improvement component only.Â NoÂ formal timelines have not been established.Â

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

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

### 7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers?

Check all that apply and describe.

☐ Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families.

Describe:

☐ Establishing or expanding the operation of community or neighborhood-based family child care networks.

Describe:

☑ Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers.

Describe:

The South Dakota Early Childhood Enrichment (ECE) System utilizes the philosophy of care developed by the Program for Infants and Toddler Care (PITC) as the foundation for all infant and toddler training. A pathway for infant and toddler training has been developed where child care providers can first take a 20-hour entry level training and then take Child Growth and Development training which is offered as part of the Child Development Associate (CDA) training program. They can then progress on to receive an infant and toddler certificate. After receiving the South Dakota infant and toddler certificate, a provider is nearly halfway to completing training towards the CDA Credential with an Infant and Toddler setting. In addition, a number of infant and toddler training opportunities have been developed for continuing education toward renewal of the CDA credential. This work will be maintained over the next three years and enhancements will be added as providers demonstrate interest.

☐ Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care.

Describe:

☑ Providing coaching and/or technical assistance on this age group's unique needs from Statewide networks of qualified infant-toddler specialists.

Describe:

In each of the five Early Childhood Enrichment (ECE) offices, there is an identified Infant and Toddler Specialist who utilizes the Program for Infant and Toddler Caregivers (PITC) philosophy and resources in the delivery of technical assistance to providers who care for infants and toddlers. ECE staff providing coaching services have completed the Child Care Aware Training Academy's Improving the Quality of Child Care Programs through Coaching course.

☑ 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:

The Division Director serves on the State Inter-Agency Group for the Birth to Three

Program. In addition, the Early Childhood Enrichment (ECE) offices work with the Birth-to-Three coordinators/specialists on an as needed basis for training regarding Individual Family Service Plans (IFSP) and Individual Education Plans (IEP), consultation, and referrals. Child care providers are encouraged to allow physical, occupational, speech and various types of therapies to occur in the child care setting as requested.

☐ Developing infant and toddler components within the State's/Territory's QRIS.

Describe:

☐ Developing infant and toddler components within the State's/Territory's child care licensing regulations.

Describe:

☑ Developing infant and toddler components within the early learning and development guidelines.

Describe:

Staff members with the Division of Child Care and the Early Childhood Enrichment (ECE) agencies are participating in the Early Learning Guidelines Review Panel and Oversight Committee that is revising the current 3-5 year old guidelines and developing guidelines for children birth to age 3. The South Dakota Department of Education, Head Start Collaboration Office has taken the lead in this review.

☐ Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care.

Describe:

☐ Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being.

Describe:

☐ Other.

Describe:

**7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State's progress in improving the quality of child care programs and services in the State/Territory**

Describe:

The Early Childhood Enrichment (ECE) system will conduct pre and post surveys to measure knowledge gain of providers attending infant/toddler specific training. Technical assistance outcomes are tracked utilizing a standardized data collection system that collects information from the child care provider prior to the technical assistance visit, at the end of the first on-site technical assistance visit, and at routine follow-up visits (30, 60, 90 and 120 days). This process measures behavior change as providers progress through the technical assistance process and put the knowledge they have gained into practice. These forms collect information on the 5 key measures that determine if a child care provider will/does positively change practice. These measures are: knowledge gain, confidence to put the intended action into practice, intent to put this knowledge into practice, practicing the action and if the intended action has become a habit.

## 7.4 Child Care Resource & Referral

**7.4.1 Describe the status of the child care resource and referral system**

☐ State/Territory has a CCR&R system operating State/Territory-wide.

Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary

☐ State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide.

Describe:

☐ State/Territory is in the development phase

**7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory**

Describe:

NA - box was not checked in 7.1.2

## 7.5 Facilitating Compliance with State Standards

**7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards?**

Describe:

CCDF quality funds are used to support the ECE system by providing training and technical assistance to assist programs in meeting state licensing requirements. In addition, grants are available for start-up and expansion and programs needing to meet licensing compliance issues.

**7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory**

Describe:

The State will utilize data from Early Childhood Enrichment class pre- and post- surveys to measure knowledge gain of providers and outcome data from technical assistance provided by the Early Childhood Enrichment (ECE) system to measure progress. The data tracking model is based on the behavior change model. When providing technical assistance to a program, ECE staff work with the child care provider to identify a goal and develop action steps that will move them toward the achieving their goal. The same process is followed for a program that contacts the ECE agency directly for assistance or is referred by licensing due to a corrective action plan. The number of start-up, expansion and compliance grants will be tracked and evaluated based on type of program, number of children impacted and type of

grant awarded.

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

**7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings.**

Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children

NA - box was not checked in 7.1.2

**7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory**

Describe:

NA - box was not checked in 7.1.2

## 7.7 Accreditation Support

**7.7.1 Does the State/Territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?**

☐ Yes, the State/Territory has supports operating State/Territory-wide.

Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation

☐ Yes, the State/Territory has supports operating as a pilot or in a few localities but not

State/Territory-wide.

Describe:

☐ No, but the State/Territory is in the development phase

☑ No, the State/Territory has no plans for development

**7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory**

Describe:

NA - box was not checked in 7.1.2

## 7.8 Program Standards

**7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development?**

Please describe:

The fitCare program was developed to help child caregivers develop and maintain a 'healthy' environment. Four fitCare instructional classes are comprised of Food (nutritional fitness), Move (physical fitness), Recharge (restorative fitness) and Mood (emotional fitness). A special emphasis on emotional management (Mood), rest and relaxation (Recharge) is unique to this curriculum and is often overlooked in other such programs. fitCare is a collaborative effort that includes the South Dakota Department of Social Services, Division of Child Care, South Dakota Department of Health, Sanford Children's and Sanford fit Initiative. The Physical Activity Intensive Technical Assistance Program works with child care center directors to evaluate and promote best practices within their program's physical activity policy. The process begins with an online Director's training on the importance of program policies. This training is held twice per year, after which a cohort with a maximum of 5 programs is formed. A coach from the Early Childhood Enrichment (ECE) program then works with the programs to determine the strengths of the program's current physical activity

policy, based upon the number of best practice standards that are addressed within the policy. Up to twelve months of support and the development or revision of a program's physical activity policy along with support in implementation of the policy with staff and parents is provided. As part of the intensive technical assistance, child care program staff are encouraged to attend fitCare classes and participate in the fitCare TA. The Physical Activity Intensive Technical Assistance Program was recently expanded utilizing quality funding to communities outside of the Sioux Falls metro area. This has enabled programs in the Mitchell, Vermillion, and Yankton communities to participate in the PATA program. A program implementation manual is being developed that will provide guidance to expand the program to new areas of the state as additional funding becomes available.

The Social and Emotional Foundations Project supports early childhood programs and families in an effort to prevent and/or limit expulsion and suspension practices in early childhood settings. Currently, the project provides services in the Rapid City community via the local Early Childhood Enrichment (ECE) program in partnership with Behavior Management Systems (BMS) a local community mental health provider. The goal is to assist programs in accessing technical assistance, coaching and training to increase the early childhood provider's ability to manage difficult behaviors, and provide families with access to mental health services. The Social and Emotional Foundations Project was recently expanded utilizing quality funding to provide access to the program for additional children in communities outside Rapid City area. Potential new relationships with local community mental health agencies are being explored to allow for expansion of the program in other regions of the state in the event that additional funding to support the project becomes available.

**7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory**

Describe:

The Early Childhood Enrichment (ECE) system will conduct pre and post surveys to measure knowledge gain of providers in fitCare classes and track technical assistance outcomes.

## 7.9 Other Quality Improvement Activities

**7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.**

None at this time.

# 8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

## 8.1 Program Integrity

**8.1.1 Describe how the State ensures that their definitions for violations have been modified, staff trained, and program integrity procedures revised to reflect new requirements.**

Describe:

The lead agency modifies and ensures any changes to definitions for violations are modified

and program integrity procedures are revised to reflect the new requirements. Administration and eligibility determination is done at one central location which allows for ease of implementation and accountability.

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

Check all that apply.

- [x] Issue policy change notices
- [x] Issue new policy manual
- [x] Staff training
  - [x] Orientations
  - [x] Onsite training
  - [ ] Online training
- [x] Regular check-ins to monitor implementation of the new policies.

  Describe:

  Staff meetings are conducted three times per week. Caseworkers bring unique or challenging cases to each meeting. The case is discussed and follow-up recommendations are made in a group setting while referring to policy and rule. This process allows caseworkers to be in alignment with policy and rules and ensure interpretations of new and on-going procedures are consistent among caseworkers. Eligibility determination is in one central office and allows daily staff interactions.
- [ ] Other.

  Describe:

**8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF.**

The Lead Agency is responsible for ensuring effective internal controls over the administration

of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

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

Describe:

Subrecipient activities are regularly monitored through the monthly program activity report and quarterly financial reports. On-site site visits are conducted annually as well as monthly conference calls. In addition, an RFP process is conducted every three years. This is a competitive grant application process. Grant agreements include the following in addition to expected activities and other provisions to align with program goals and objectives: 1) The audit requirements of A-133 2) allowable expenditures were either outlined specifically or the grant title and the CFDA number were given; 3) assurances were present from all grant recipients stating they would follow applicable federal, state and local regulations.

**8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency.**

Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

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

☑ Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

☑ Run system reports that flag errors (include types)

Describe:

- An auto-report is generated in order to identify individuals receiving both State and Tribal administered CCDF funds.
- An auto-report is generated monthly to monitor monthly provider billings
- An auto-report is generated monthly to monitor against duplicate certificates for families.
- A report to review provider payments made during indicated time frame.

☑ Review of enrollment documents, attendance or billing records

☑ Conduct supervisory staff reviews or quality assurance reviews

☑ Audit provider records

☑ Train staff on policy and/or audits

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

☑ Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

☑ Run system reports that flag errors (include types)

Describe:

- An auto-report is generated in order to identify individuals receiving both State and Tribal administered CCDF funds.

- An auto-report is generated monthly to monito monthly provider billings
- An auto-report is generated monthly to monitor against duplicate certificates for families.
- A report to review provider payments made during indicated time frame.

☑ Review of enrollment documents, attendance or billing records

☑ Conduct supervisory staff reviews or quality assurance reviews

☑ Audit provider records

☑ Train staff on policy and/or audits

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines:

**8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory?**

The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

☑ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount: 50

☐ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

☑ Recover through repayment plans

☑ Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments.

Describe:

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines

b) Check which activities the Lead Agency will use for intentional program violations or fraud?

☑ Require recovery after a minimum dollar amount in improper payment.

Identify the minimum dollar amount: 50

☑ Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

☑ Recover through repayment plans

☑ Reduce payments in subsequent months

☐ Recover through State/Territory tax intercepts

☐ Recover through other means

☐ Establish a unit to investigate and collect improper payments.

Describe composition of unit below

☐ Other.

Describe:

☐ None.

Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, include action steps and

completion timelines:

c) Check which activities the Lead Agency will use for administrative error?

- [x] Require recovery after a minimum dollar amount in improper payment.

  Identify the minimum dollar amount: 50

- [ ] Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)
- [x] Recover through repayment plans
- [x] Reduce payments in subsequent months
- [ ] Recover through State/Territory tax intercepts
- [ ] Recover through other means
- [ ] Establish a unit to investigate and collect improper payments.

  Describe composition of unit below

- [ ] Other.

  Describe:

- [ ] None.

  Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

### 8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations?

The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

- [x] Disqualify client.

  If checked, please describe, including a description of the appeal process for clients who are disqualified:

If a recipient is proven to have committed an intentional program violation, he/she may be disqualified from receiving assistance.

•1st Offense IPV - Disqualification from receiving any monies or assistance from Child Care Services for a period of one year.

•2nd Offense IPV - Disqualification from receiving any monies or assistance from Child Care Services for a period of two years.

•3rd Offense IPV - Permanent disqualification from receiving any monies or assistance from Child Care Services.

If a recipient believes the action is incorrect, they may request a fair hearing within 30 days of the notification letter. The request must be in writing, signed and mailed to the Department of Social Services, Division of Administrative Hearings and Procedures

☑ Disqualify provider.

If checked, please describe, including a description of the appeal process for providers who are disqualified:

If a provider is proven to have committed an intentional program violation, he/she may be disqualified from receiving subsidy reimbursement.

•1st Offense IPV - Disqualification from receiving any monies or assistance from Child Care Services for a period of one year.

•2nd Offense IPV - Disqualification from receiving any monies or assistance from Child Care Services for a period of two years.

•3rd Offense IPV - Permanent disqualification from receiving any monies or assistance from Child Care Services.

If a provider believes the action is incorrect, they may request a fair hearing within 30 days of the notification letter. The request must be in writing, signed and mailed to the Department of Social Services, Division of Administrative Hearings and Procedures.

☑ Prosecute criminally

☐ Other.

Describe: