



CHILD CARE AND DEVELOPMENT FUND PLAN
FOR KANSAS
FFY 2002-2003

This Plan describes the CCDF program to be conducted by the State for the period 10/1/01 – 9/30/03. As provided for in the applicable statutes and regulations, the Lead Agency has the flexibility to modify this program at any time, including changing the options selected or described herein.

The official text of the applicable laws and regulations govern, and the Lead Agency acknowledges its responsibility to adhere to them regardless of the fact that, for purposes of simplicity and clarity, the specific provisions printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text.

Public reporting burden for this collection of information is estimated to average 162.57 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

(Form ACF 118 Approved OMB Number: 0970-0114 expires 02-29-2004)

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AMENDMENTS LOG
 Child Care and Development Services Plan for KANSAS
 For the period: 10/1/01 – 9/30/03

SECTION AMENDED	EFFECTIVE/ PROPOSED EFFECTIVE DATE	DATE SUBMITTED TO ACF	DATE APPROVED BY ACF
1.2	July, 2002	January, 2003	
2.1	July, 2002	January, 2003	
2.3	October 1, 2002	January, 2003	
3.3.1	February 1, 2003	January, 2003	
3.4.1	February 1, 2003	January, 2003	
3.4.2	February 1, 2003	January, 2003	
3.5.1	February 1, 2003	January, 2003	
3.5.3	May, 2002	January, 2003	
3.5.5	February 1, 2003	January, 2003	
5.4	October 1, 2003	January, 2003	
Attachment 3.5.1	February 1, 2003	January, 2003	

Instructions:

- 1) Lead Agency completes the first 3 columns and sends a photocopy of this Log (showing the latest amendment sent to ACF) and the amended section(s) to the ACF Regional contact. A copy of the Log, showing the latest amendment pending in ACF, is retained in the Lead Agency's Plan.
- 2) ACF completes column 4 and returns a photocopy of the Log to the grantee.
- 3) The Lead Agency replaces this page in the Plan with the copy of the Log received from ACF showing the approval date.

Note: This process depends on repeated subsequent use of the same Log page over the life of the Plan. At any time the Log should reflect all amendments, both approved and pending in ACF. The Lead Agency is advised to retain those "old" plan pages that are superseded by amendments in a separate appendix to its Plan.

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PART 1 – ADMINISTRATION

The agency shown below has been designated by the Chief Executive Officer of the State (or Territory), 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)

1.1 Lead Agency Information: (as designated by State chief executive officer)

Name of Lead Agency: Social and Rehabilitation Services

Address of Lead Agency: 915 SW Harrison
Topeka, KS 66612

Name and Title of the
Lead Agency's Chief Executive Officer: Janet Schalansky, Secretary

Phone & Fax Numbers: 785-296-3274 785-296-4685(FAX)

1.2 State Child Care (CCDF) Contact Information: (day-to-day contact)

Name and Title of the
State Child Care Contact (CCDF): Alice Womack, Child Care Administrator

Address of Contact: 915 SW Harrison, 5th Floor South
Topeka, KS 66612

Phone & Fax Numbers: 785-291-3314 785-296-0146

E-Mail Address: acw@srskansas.org

1.3 The Lead Agency estimates that the following amounts will be available for child care services and related activities during the 1-year period: October 1, 2001 through September 30, 2002. (§98.13(a))

- Federal Child Care & Development Fund: \$ 43,638,969
- Federal TANF Transfer to CCDF (if known): \$18,300,000 (preliminary estimate)
- Direct Federal TANF Spending on Child Care (if known): \$ 0
- State Matching Funds: \$9,458,900

1.4 The Lead Agency estimates that the following amount (and percentage) of the CCDF will be used to administer the program (not to exceed 5 percent): \$ 1,760,000 (3%). (658E(c)(3), §§98.13(a), 98.52)

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1.5 Does the Lead Agency directly administer and implement all services, programs and activities funded under the CCDF Act, including those described in Part 5 – Activities & Services to Improve the Quality and Availability of Child Care?

() Yes. – GO to Section 1.8.

(X) No, and the following describes how the Lead Agency maintains overall control when services or activities are provided through other agencies. (658D(b)(1)(A), §98.11)

The Kansas Department of Social and Rehabilitation Services (SRS) enters into an annual Memorandum of Agreement (MOA) with the Kansas Department of Health and Environment (KDHE) to implement activities to improve the quality of child care and assure minimum health and safety requirements are met. Through this MOA, a portion of the CCDF funds are transferred to KDHE to improve the child care regulatory program and enhance effectiveness at the State and local level. This MOA sets the limits of KDHE involvement. An annual meeting will be held between SRS and KDHE to review final year end report and negotiate the MOA for the upcoming year. Quarterly coordination meetings are held in addition to the annual MOA meeting. KDHE must request in writing and SRS must approve in writing any and all proposed changes for the use of CCDF funds under the MOA. Renewal of the MOA is not automatic and shall be solely at the discretion of SRS.

SRS will contract with Kansas Association of Child Care Resource and Referral Agencies (KACCRRRA) to provide consumer education, provide training and technical assistance to child care providers and gather data related to child care availability and accessibility. KACCRRRA also administers a family child care provider grant program and is responsible for a statewide Media Campaign on the importance of quality child care. This annual contract sets the limits of KACCRRRA activities funded through CCDF. Specific Outcomes and Performance Indicators are designated within the contract. The contract duration is for 12 months, may be canceled by either party upon provision of written notice at least 30 days in advance of the effective date of cancellation, and may be amended in writing with the mutual agreement of both parties.

KACCRRRA also administers a grant for the Professional Development Initiative (PDI) for early care and education in Kansas. This grant promotes increasing the quality of child care by improving the professional preparation and education of child care providers. Elements of PDI include: Accreditation Project; Regional Support Teams (RST); Registry and Career Lattice; Coordination of Training through further development of the core competencies, CEU project and Articulation; and Teacher Education and Compensation Helps (T.E.A.C.H).

1.6 For **child care services** funded under §98.50 (i.e., certificates, vouchers, grants/contracts for slots **based on individual eligibility**), does the Lead Agency itself: (§98.11)

Determine individual eligibility of non-TANF families? YES X NO

If NO, identify the name and type of agency that determines eligibility of non-TANF families for child care:

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Determine individual eligibility of TANF families? YES X NO ___

If NO, identify the name and type of agency that determines eligibility of TANF families for child care:

Assist parents in locating child care? YES X NO ___

If NO, identify the name and type of agency that assists parents:

Make payments to providers? YES X NO ___

If NO, identify the name and type of agency that makes payments:

1.7 Is any entity named in response to section 1.6 a non-governmental entity? (658D(b), §§98.10(a), 98.11(a))

(X) No.

() Yes, the following entities named in section 1.6 are non-governmental:

Section 1.8 - Use of Private Donated Funds

1.8.1 Will the Lead Agency use private donated funds to meet a part of the matching requirement of the CCDF pursuant to §98.53(e)(2) and (f)?

(X) No. GO TO 1.9

() Yes, and the entity designated to receive private donated funds is:

Name of entity:

Address:

Contact:

1.8.2 Is the entity designated to receive private donated funds (named above) a non-governmental agency? (§98.11(a))

() Yes.

(X) No.

Section 1.9 - Use of State Pre-Kindergarten (Pre-K) Expenditures

1.9.1 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF maintenance of effort (MOE) requirement?

(X) No.

() Yes, and the State assures that its level of effort in full day/full year child care services has not been reduced, pursuant to §98.53(h)(1).

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1.9.2 During this plan period, will State expenditures for Pre-K programs be used to meet any of the CCDF Matching Fund requirement? (§98.53(h))

No.

Yes, and the following describes State efforts to ensure that pre-K programs meet the needs of working parents (§98.53(h)(2)):

1.9.3 Will the State use Pre-K expenditures to meet more than 10% of the:

Maintenance of effort requirement, OR
Matching fund requirement?

If No to both, CHECK HERE X.

If Yes to either, the following describes how the State will coordinate its Pre-K and child care services to expand the availability of child care (§98.53(h)(4)).

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PART 2 -- DEVELOPING THE CHILD CARE PROGRAM

Section 2.1 – Consultation and Results of Coordination:

Describe the consultations the Lead Agency held in developing this Plan. At a minimum, the description must include the following: 1) the representatives of local governments (including tribal organizations when such organizations exist within the boundaries of the State) that were consulted (658D(b)(2), §§98.12(b), 98.14(b)); and, 2) the results of coordination with other Federal, State, local, and tribal (if applicable) agencies and programs including those involved with public health, employment, public education, and TANF. (658D(b)(1)(D), §§98.12(a), 98.14(a)(1) & (2))

The development of this CCDF Plan has been a continuation of the methods used under the original CCDBG Plans. A Statewide Early Child Care and Education Advisory Committee was formed in 1991 and has provided guidance and input on child care issues since then. Committee membership consists of representatives from local businesses, county offices, community colleges, provider training agencies, state agencies, advocates, universities, Child Care Resource and Referral agencies, parents, and child care providers. Eleven members represent 11 different geographical areas around the State. This entity conducts open quarterly meetings and provides continuous input on child care issues. The required Public Hearing process is described in Section 2.2.

In 1995, SRS combined the Income Maintenance and Employment Preparation Services Commissions into one commission. In 1999, this commission became the Economic and Employment Support (EES) Commission. EES administers TANF, Food Stamps, Medical, Work Programs and Child Care Subsidy(CCDF). In October, 1999, a reorganization divided the Child Care Program into two parts. The Child Care Subsidy program remained in EES and the Child Care and Early Childhood Development (Quality Initiatives) moved to the Children and Family Policy Division. Close collaboration and coordination **occurred** in all policy making decisions of these programs. **Effective July, 2002 Child Care and Early Childhood Development returned to EES.** Regular workgroups of field staff and Central Office meet to develop policy/procedure that is consistent within all programs. Staff meet regularly to discuss issues, concerns, changes and accomplishments. SRS coordinates the delivery of child care services to be funded under the CCDF with other agencies through the Statewide Early Child Care and Education Advisory Committee. Representatives from Kansas Department of Health and Environment (KDHE) and local health departments are part of this committee. KDHE is responsible for the regulation of out-of-home care in Kansas and the regulatory field work in each county. Additional funds from CCDF have been transferred to KDHE through an MOA to improve the regulatory program and enhance effectiveness at the state and local levels. Expected results are an improvement in timeliness/efficiency in relaying regulatory information through the development of an electronic communication system connecting KDHE Central Office level with county health departments/licensing surveyors, SRS Central Office, local SRS field staff, statewide R&R agencies and statewide training office. Additional funding has also provided for six additional regional staff to coordinate activities with their local offices/surveyors.

Kansas Department of Education (KSDE) is also represented on the Statewide Advisory Committee. Coordination with KSDE has resulted in meetings with KSDE staff to discuss the funding of preschool or school-age programs. Efforts are being made to coordinate funding for these types of programs to maximize use of State and Federal funds. KSDE is one of the

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collaborators involved in the Early Childhood Education Leadership Summit to develop a definition and description for School Readiness in Kansas.

Kansas Department of Human Resource (KDHR) is the agency responsible for Welfare to Work Initiatives and is a member of the Child Care Advisory Committee.

SRS conducts quarterly meetings with the Kickapoo Tribal TANF program. Eligible tribal members have a choice or “dual eligibility” for either the SRS CCDF funds or tribal CCDF funds. Eligible tribal members for the Potawatomi, Iowa, Sac and Fox utilize SRS administered CCDF funds. Open communication and coordination with tribal members result in accessibility by all tribes of CCDF child care services.

The Kansas Juvenile Justice Authority (JJA) has a representative on the Advisory Committee. This state agency was established by statute in 1997. SRS and JJA are currently studying the adaptation of a curriculum dealing with preventive intervention for school-age children. SRS is also coordinating with JJA the funding to communities for prevention and/or school-age activities.

A representative from Kansas Association of Child Care Resource and Referral Agencies (KACCRRRA) is also on the Advisory Committee. Funds from CCDF support the network and activities for resource and referral within the State. This results in coordination of information that is accessible to clients at all local SRS offices regarding the availability of child care.

Head Start is also represented on the Statewide Advisory Committee. This allows for sharing of information regarding Head Start programs and promotes collaboration and partnerships between child care and Head Start programs serving families.

Kansas Child Care Training Opportunities (KCCTO) is an agency which provides in-service training opportunities to caregivers statewide. KCCTO is a voting member of the Advisory Committee.

Section 2.2 - Public Hearing Process:

Describe the Statewide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan. At a minimum, the description must include the date(s) of the hearing(s), how and when the public was notified Statewide of the hearing(s), the hearing site(s), and how the content of the Plan was made available to the public in advance of the hearing. (658D(b)(1)(C), §98.14(c))

To allow for public comment on this CCDF State Plan, a public forum was held during the Statewide Child Care and Early Education Advisory Committee meeting on April 26, 2001 in Topeka. Notice of this meeting was sent through a notice to all members and previous attendees; it also appeared in the Kansas Register. In addition, public forums were held in Hays on June 5 and Wichita on June 6. The draft proposed state plan was available for viewing on the SRS website and upon request. Notice of these forums were publicized through the Kansas Register as well as press releases from SRS to the Hays and Wichita communities. The meetings were conducted by SRS staff using Draft versions of the state plan. A brief

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overview of the state plan/process was given, then comments/questions/input from the public were heard. Notes were taken of issues noted by participants. These will be compiled and made available to the SRS Public Information office; they will also become part of the CCDF planning process.

Section 2.3 - Public-Private Partnerships: Describe the activities, including planned activities, to encourage public-private partnerships which promote private-sector involvement in meeting child care needs. (658D(b)(1), §98.16(d))

SRS will continue to take an active role in expanding child care services and working with the private sector by helping communities identify their child care needs and bring resources together to plan new programs and support existing programs. Through the Professional Development Initiative the development of Regional Support Teams (RST) are being formed in local communities across the state. These RST's will consist of members of each community working together to assess their local child care needs and methods for meeting these needs.

Within the CCDF grant program, to encourage local business participation, applicants seeking CCDF grant funds for start-up or expansion of child care projects **were** asked to show a 15% local match. A component of the CCDF grant program **was used to** promote public/private partnerships through the availability of 50% matching funds made available to support employer-sponsored child care programs. Employers may request funding and/or technical assistance to develop and start up child care centers. **Due to current budget constraints the CCDF grant program is not available.**

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PART 3 – CHILD CARE SERVICES OFFERED

Section 3.1 - Description of Child Care Services:

REMINDER: The Lead Agency must offer certificates for services funded under 45 CFR 98.50. (98.30) Certificates must permit parents to choose from a variety of child care categories including center-based care, group home care, family child care and in-home care. (§98.30(e))

3.1.1 In addition to offering certificates, does the Lead Agency also have grants or contracts for child care slots?

- No.
 Yes, and the following describes the types of child care services and the range of providers that will be available through grants or contracts: (658A(b)(1), 658P(4), §§98.16(g)(1), 98.30(a)(1) & (b))

3.1.2 The Lead Agency must allow for in-home care, but may limit its use. Does the Lead Agency limit the use of in-home care in any way?

- No.
 Yes, and the limits and the reasons for those limits are (§§98.16(g)(2), 98.30(e)(1)(iv)):

3.1.3 Are all of the child care services described in 3.1.1 above (including certificates) offered throughout the State? (658E(a), §98.16(g)(3))

- Yes
 No, and the following are the localities (political subdivisions) and the services that are not offered:

Section 3.2 - Payment Rates for the Provision of Child Care:

The statute (at 658E(c)(4)) requires the Lead Agency to establish payment rates for child care services that ensure eligible children equal access to comparable care and these rates are provided as Attachment 3.2A. The attached payment rates are effective as of February 1, 2002.

The following is a summary of the facts relied on by the State to determine that the attached rates are sufficient to ensure equal access to comparable child care services provided to children whose parents are not eligible to receive child care assistance under the CCDF and other governmental programs. Include, at a minimum:

The month and year of the local market rate survey(s): August, 2000 (§98.43(b)(2))

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How the payment rates are adequate to ensure equal access based on the results of the above noted local market rate survey (i.e., the relationship between the attached payment rates and the market rates observed in the survey): (§98.43(b))

The market rate survey combined mail and telephone surveys of a stratified random sample of providers across the state. Assurances were made for every county to be included in the sample. Providers were divided into certain regions and clusters of counties. Within regions, random samples were selected within center, licensed and registered providers. A total of 3,000 were selected for sampling, with 1,294 responding (a 43% response rate). Surveyors then showed the average rate for regions for the 50th through 100th percentiles. Results indicate that SRS payment rates have dropped to the 50th percentile. Effective February 1, 2002, SRS adjusted child care provider maximum reimbursement rates in accordance with data received on the 2000 market rate survey. The new rates were for services provided in February and paid in March. Rates were adjusted to the 65th percentile for Licensed Homes and Child Care Centers, and the 60th percentile for Registered Homes.

Per recommendation of the contractor, SRS also changed the way counties are grouped. Rather than being grouped according to SRS management areas, counties are grouped in accordance with similarities of prices charged to the private sector. Three groupings were implemented. A “hold harmless” provision was added to allow no provider decreases due to the new groupings.

Additional facts that the Lead Agency relies on to determine that its payment rates ensure equal access include: (§98.43(d))

Parents may choose regulated providers which includes centers, group homes, and family day care homes. Parents may also choose unregulated, legally exempt providers which may include in or out-of-home relative care and/or in-home non-relative care. The rates referenced above are paid to all provider types. SRS may enroll with the provider chosen by the parents. The following chart indicates the number of regulated providers enrolled with SRS versus the number of eligible providers.

SRS Area	SRS Provider Enrollment	Totalled Regulated	Percent
Chanute	480	605	79%
Emporia	194	552	35%
Garden City	340	639	53%
Hays	199	607	33%
Hutchinson	313	542	58%
Kansas City	228	329	69%
Lawrence	364	589	62%
Manhattan	541	1011	54%
Olathe	569	1591	36%
Topeka	331	547	61%
Wichita	597	1276	48%
Total	3,957	7,681	52%

Source: KsCares extract. Data current as of 9/00. SRS figure includes any legally exempt facilities.

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If the payment rates do not reflect individual rates for the full range of providers -- center-based, group home, family and in-home care -- explain how the choice of the full range of providers is made available to parents:

Section 3.3 - Eligibility Criteria for Child Care:

By statute, all eligible children must be under the age of 13 and reside with a family whose income does not exceed 85% of the State Median Income (SMI) for a family of the same size and whose parent(s) are working or attending a job training or educational program or who receive or need to receive protective services. (658E(c)(3)(B), 658P(3), §98.20(a))

3.3.1 Complete column (a) in the matrix below. Complete Column (b) ONLY IF the Lead Agency is using income eligibility limits lower than 85% of the SMI).

IF APPLICABLE

	Family Size	(a) 85% of State Median Income (SMI) (\$/month)	(b) Income Level, lower than 85% SMI*, if used to limit eligibility (\$/month)
	1	\$2398	N/A
	2	\$3136	\$1493
	3	\$3874	\$1878
	4	\$4612	\$2262
	5	\$5350	\$3187

**SRS sets eligibility based on Federal Poverty Levels. Eligibility limit is 185% of the FPL. Guidelines are updated every May in accordance with current poverty guidelines.*

3.3.2 How does the Lead Agency define “income” for the purposes of eligibility? Is any income deducted or excluded from total family income, for instance, work or medical expenses; child support paid to, or received from, other households; Supplemental Security Income (SSI) payments? Is the income of all family members included, or is the income of certain family members living in the household excluded? Please describe and/or include information as Attachment 3.3.2 A. (§§98.16(g)(5), 98.20(b))

3.3.3 Has the Lead Agency established additional eligibility conditions or priority rules, for example, income limits that vary in different parts of the State, special eligibility for families receiving TANF, or eligibility that differs for families that include a child with special needs? (658E(c)(3)(B), §98.16(g)(5), §98.20(b))

- No
- Yes, and the additional eligibility criteria are: (Terms must be defined in Appendix 2)

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- 3.3.4 Has the Lead Agency elected to waive, on a case-by-case basis, the fee and income eligibility requirements for cases in which children receive, or need to receive, protective services, as defined in Appendix 2? (658E(c)(3)(B), 658P(3)(C)(ii), §98.20(a)(3)(ii)(A))
- Not Applicable, CCDF-funded child care is not provided in cases in which children receive, or need to receive, protective services.
- No
- Yes
- 3.3.5 Does the Lead Agency allow child care for children age 13 and above who are physically and/or mentally incapable of self-care? (Physical and mental incapacity must then be defined in Appendix 2.) (658E(c)(3)(B), 658P(3), §98.20(a)(1)(ii))
- No
- Yes, and the upper age is through 18 years.
- 3.3.6 Does the Lead Agency allow child care for children age 13 and above who are under court supervision? (658P(3), 658E(c)(3)(B), §98.20(a)(1)(ii))
- No
- Yes, and the upper age is through 18 years.
- 3.3.7 Does the State choose 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? (§§98.20(a)(3)(ii), 98.16(f)(7))
- Yes. (**NOTE:** This means that for CCDF purposes the State considers these children to be in protective services.)
- No.
- 3.3.8 Does the State choose to provide respite child care to children in protective services? (§§98.16(f)(7), 98.20(a)(3)(ii)(A) & (B))
- Yes.
- No.

Section 3.4 Priorities for Children:

- 3.4.1 The following describes the priorities for serving CCDF-eligible children including how statutorily required priority is given to children of families with very low family income and children with special needs: (Terms must be defined in Appendix 2) (658E(c)(3)(B))

Priority #1 Families participating in Work Programs who are receiving TAF or food stamps, and Tribal recipients.

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- Priority #2 Families receiving Social Service Child Care
 - Priority #3 Families no longer eligible for TAF but who are still receiving child care while transitioning to employment, whose income is at or below **150%** of the federal poverty level.
 - Priority #4 Teen parents completing high school/GED
 - Priority #5 Employed families whose income is at or below **150%** of the federal poverty level.

3.4.2 The following describes how CCDF funds will be used to meet the needs of families who are receiving Temporary Assistance for Needy Families (TANF), families who are attempting through work activities to transition off of TANF, and families that are at risk of becoming dependent on TANF. (658E(c)(2)(H), Section 418(b)(2) of the Social Security Act, §§98.50(e), 98.16(g)(4))

SRS has lowered the eligibility guideline to 150% the Federal poverty level(FPL) as the eligibility determination for child care assistance. **While it is still believed that everyone below 185% of the FPL is at risk of going on cash assistance, current budget conditions required changes in this policy.** Specific child care needs of families needing child care are currently being met. This can be illustrated by the following: there are no waiting lists for families to receive child care services in Kansas; in February, 2002, provider rates were adjusted to the 65th percentile for Licensed Homes and Child Care Centers and to the 60th percentile for Registered providers as a result of a 2000 market rate survey. Periodic review of market rates is requested in order to keep SRS provider rates competitive with the private sector. SRS workers promote child care as a support service for families. Our sliding fee scale was adjusted in May, 2001. The fee scale is updated annually in accordance with the new federal poverty guidelines.

A pilot project has been conducted during the past 18 months to investigate alternative methods of making payment for child care services. This was a Direct Pay pilot in one rural geographical management area containing 21 of 105 counties. This pilot allowed parents complete control of negotiating with providers and making payment for services. An intensive consumer education program was implemented and parents were required to turn in receipts documenting type of care and the name of provider to ensure the use of legal providers and that funds were appropriately spent. A contracted study was completed in October 2000. It has been decided that even though many aspects of Direct Pay will be considered for statewide implementation, specifically parental control and consumer education, the “cash out” mechanism will not be implemented statewide. The Hays Area is expecting to have providers enrolled and workers re-trained by July 1, 2002. At this time, provider payment will resume in the Hays Area.

Section 3.5 - Sliding Fee Scale for Child Care Services:

3.5.1 A sliding fee scale, which is used to determine each family's contribution to the cost of child care, must vary based on income and the size of the family. A copy of this

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sliding fee scale for child care services and an explanation of how it works is provided as Attachment 3.5.1 A.

Will the Lead Agency use additional factors to determine each family's contribution to the cost of child care? (658E(c)(3)(B), §98.42(b))

- No.
 Yes, and the following describes any additional factors that will be used to determine a family's contribution including, but not limited to, a maximum amount (family cap), number of children in care, and/or whether care is full or part-time:

3.5.2 Is the same sliding fee scale provided in the attachment in response to question 3.5.1 above in use in all parts of the State? (658E(c)(3)(B))

- Yes
 No, and other scale(s) are provided as Attachment ____.

3.5.3 The Lead Agency may waive contributions from families whose incomes are at or below the poverty level for a family of the same size, (§98.42(c)), and the poverty level used by the Lead Agency for a family of 3 is: \$ 10,512.

The Lead Agency must elect ONE of these options:

- ALL families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee.
 ALL families, including those with incomes at or below the poverty level for families of the same size, ARE required to pay a fee.
 SOME families with income at or below the poverty level for a family of the same size ARE NOT required to pay a fee. A description of these families is:

TANF recipients, families below 70% of the FPL and families receiving Social Services, food stamps education and training, and work program participants.

3.5.4 Does the Lead Agency have a policy which prohibits child care providers from charging families any unsubsidized portion of the providers' normal fees (in addition to the contributions discussed in 3.5.1)? (§98.43(b)(3))

- No
 Yes, please describe:

Providers sign an agreement with SRS indicating they understand they may not charge parents the difference between the SRS rate and the private pay rate. It has been a long-standing policy within the Child Care Program to allow charges which include transportation, overtime, late fees, holidays, and extra absent days (time) if

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the provider's policy to charge the private sector the extra charges. Providers are encouraged to develop contracts regarding payment policies and charges to parents. Providers are referred to the local Child Care Resource and Referral Agency for assistance in developing a contract to be used with all parents. Parents have the responsibility to ask about extra fees during their selection process. SRS parents should be educated about the possibility of extra charges. If a parent chooses a provider who charges extra fees, it is the parent's choice to use that provider or to choose another one. Parents willing to pay extra for a provider of their choice are not restricted from making that choice to the extent possible.

3.5.5 The following is an explanation of how the copayments required by the Lead Agency's sliding fee scale(s) are affordable: (§98.43(b)(3))

In January, 1999, Kansas expanded its family share schedule from five (5) to eleven (11) levels to assure families a more gradual increase in their cost of child care. The income amounts are adjusted each year to coincide with the changes in the Federal Poverty Levels. The family's share of the child care costs ranges from \$0 to \$177 per month for a family of three based on their monthly gross income. The percent of cost to the family also increases with the increase in income. These percentages range from 0% to 9% for income eligible families.

Section 3.6 - Certificate Payment System:

A child care certificate means a certificate, check, or other disbursement that is issued by the Lead Agency directly to a parent who may use it only to pay for child care services from a variety of providers (including center-based, group home, family and in-home child care), or, if required, as a deposit for services. (658E(c)(2)(A)), 658P(2), §§98.2, 98.16(k), 98.30(c)(3) & (e)(1))

Describe the overall child care certificate payment process, including, at a minimum:

3.6.1 A description of the form of the certificate: (§98.16(k))

See Attachment 3.6.1 A (Child Care Plan)

3.6.2 A description of how the certificate program permits parents to choose from a variety of child care settings by explaining how a parent moves from receipt of the certificate to the choice of provider; (658E(c)(2)(A)(iii), 658P(2), §§98.2, 98.30(c)(4) & (e)(1) & (2))

The Child Care Plan consists of a multi-part form indicating eligibility time frames, number of hours authorized per month, chosen provider, rate to be paid to the provider, estimated cost to the agency and co-payment (family share) requirements. Parents are determined eligible for child care services under CCDF by completing an application. Families may submit applications to the child care program through the mail or in person. Within 30 days, eligibility for child care subsidy is determined and a Child Care Plan can be completed by worker and eligible parent.

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Parents are permitted to choose from out-of-home care that is center-based, licensed or registered family day care homes, licensed group homes, or relatives; or in-home care provided by a relative or unrelated care giver in the child's own home. All providers must clear a screening check through the Kansas Child Abuse/Neglect Registry. All regulated providers must clear a Kansas Bureau of Investigation background check. All types of providers are allowable including non-profit, for profit, sectarian or religious organizations, Head Start Wrap-Around, and public or private school sponsored programs. The provider selected by the parent is indicated on the Child Care Plan.

The worker will determine if the out-of-home provider selected by the parent is enrolled with the grantee in order for payment to be made to the provider for the clients' eligible children. If the provider is already enrolled with the grantee for payment, the Plan is completed and services are authorized for payment on a date agreed upon by provider, parent, and agency. If the provider selected by the parent is not currently enrolled with the grantee, paperwork is made available to the parent/provider so the provider can be enrolled for payment. Every attempt is made to have the effective date of the provider registration cover the entire time the family would be eligible. For in-home care, the parent will receive payment for actual child care costs less any family share. Rates are based on the cluster's maximum hourly rates established for Registered and Relative providers. The client, upon receipt of payment from the grantee, is responsible to pay the In-home Child Care Provider. The responsibilities of the client and the In-home Provider are divided and require coordination. The Health and Safety Checklist should be completed together.

Providers bill for care the month following the month care is provided. Payment is issued to the provider within 30 days of the receipt of the billing. Eligible families may change providers at any time by notifying the agency.

- 3.6.3 If the Lead Agency is also providing child care services through grants and contracts, explain how it ensures that parents offered child care services are given the option of receiving a child care certificate. (§98.30(a) & (b))

N/A

PART 4 - PROCESSES WITH PARENTS

4.1 The following describes the process for a family to apply/receive child care services (658D(b)(1)(A), 658E(c)(2)(D) & (3)(B), §§98.16(k), 98.30(a) through (e)). If the process varies for families based on eligibility category, for instance, TANF versus non-TANF, please describe. The description should include:

How parents are informed of the availability of child care services and of available child care options;
Where/how applications are made;
Who makes the eligibility determination;
How parents who receive TANF benefits are informed about the exception to individual penalties as described in 4.4; and
Length of eligibility including variations that relate to the services provided, e.g., through collaborations with Head Start or pre-kindergarten programs.

A combined application for Cash, Food Stamps, Health Benefits and Child Care has been developed. TANF recipients are deemed eligible for child care when they are determined eligible for cash assistance. They are offered child care when the case manager establishes participation activities in Economic and Employment Support. No other eligibility determination is required. When the cash case closes, parents are notified they may be eligible to continue to receive child care services. They are required to request this service and provide wage income information.

Parents who are not TANF recipients are informed of the availability of child care services and of available child care options at the time they fill out the application for Food Stamps, Cash Assistance and/or Health Benefits. Resource and Referral agencies are kept informed of available child care subsidy funds. The R&R refers parents to the local SRS office. Applications are made in person at the local SRS office or a request may be initiated over the phone with an application being mailed to the individual. Within 30 days of application, eligibility is determined by the SRS case worker. A Child Care Plan which authorizes services is created and provided to both the parent and the child care provider.

Eligibility is approved for a one year period. Parents are required to notify the grantee agency when changes occur such as needed hours, financial status, household members or providers.

Throughout the policy manual used by workers to administer program policies it is indicated the agency is responsible to inform TANF clients about the TANF work activity good cause determination for child care and that a good cause finding does not suspend the TANF “clock” on federal benefits. This is also specifically addressed in the Work Program section of the policy manual. Clients are to be given “good cause” for failure to meet work requirements. “Good cause” is not only outlined in the policy manual, but also addressed in Kansas regulations.

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An Early Head Start Initiative is administered by existing Head Start grantees in the State. The following are used to determine eligibility for this program: Income at or below 100% of Federal Poverty Level at application with ongoing eligibility until child reaches age 4; pregnant women; families with children birth to age 4; families with children under age 1 not working; 10% of enrollment available for children with disabilities; other employed families will be given preference; participation in education/training will be considered

- 4.2 The following is a detailed description of how the State maintains a record of substantiated parental complaints and how it makes the information regarding such parental complaints available to the public on request. (658E(c)(2)(C), §98.32))

Through a Memorandum of Agreement with the Department of Health and Environment(KDHE), it is expected that KDHE will maintain a record of substantiated facility complaints, including parental complaints. This information is made available to the public on request and is made available in accordance with the Kansas Open Records Act. The complaint system includes:

1. Policies on investigation of all complaints of noncompliance, including anonymous complaints;
2. Maintenance of records;
3. A fair hearing procedure before substantiation;
4. Recording rebuttals or updates by providers;
5. A system which provides for confidentiality of the complaint;
6. Maintenance of a child abuse/neglect registry through SRS.

- 4.3 The following is a detailed description of the procedures in effect in the State for affording parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B), §98.31))

As stated in the Kansas Administrative Regulation (K.A. R.) 28-4-123, each parent or guardian of a child enrolled in a day care facility or preschool as defined in Kansas Statutes Annotated (K.S.A.) 65-517, K.A.R. 28-4-113 and K.A.R. 28-4-420, shall have access to the premises during all hours of operation. Each residential facility as defined in K.A.R. 28-4-311 and K.A.R. 28-4-268 shall develop a plan for parental visitation in cooperation with the legal custodian if different from the parent.

- 4.4 The regulations at §98.33(b) require the Lead Agency 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.

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 Child Care 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. The TANF agency that established these criteria or definitions is: Social and Rehabilitation Services, Integrated Service Delivery, Economic and Employment Services

- "appropriate child care": A regulated facility that meets or exceeds minimum licensing and registration regulations. A non-regulated legally exempt provider who has completed a Health and Safety Standards Check List CC-1631 and maintains a facility that meets or exceeds minimum standards.

- "reasonable distance": Total daily transport time to and from home and to the child care provider not to exceed 2 hours. If a longer transport time is generally accepted in the community, the round trip transport time shall not exceed the generally accepted community standards.

- "unsuitability of informal child care": Care for which SRS would not enter into a Provider Agreement : i.e. a relative with an unwillingness to care for child; age inappropriateness; documentation of family services/protective services case histories

- "affordable child care arrangements": The ability of a family to pay the costs of care through sufficient income or assistance through the child care subsidy program.

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**PART 5 - ACTIVITIES & SERVICES TO IMPROVE
THE QUALITY AND AVAILABILITY OF CHILD CARE**

5.1 The Child Care and Development Fund provides earmarks for infant and toddler care and school-age care and resource and referral services as well as the special earmark for quality activities.

- The following describes the activities funded to improve the quality of care for infants/toddlers and identifies the entity(ies) providing them:

To improve the quality of care for infants/toddlers, the TANF agency(SRS), is using CCDF funding to support a Kansas Early Head Start (KEHS) Program. Funding to support this program is through a transfer of 7.5 million dollars from the Temporary Assistance to Needy Families (TANF) block grant to CCDF. This program delivers full day, full year, comprehensive early care and education services. This is a state/federal partnership serving pregnant women and children up to age 4 in families with incomes at or below the federal poverty level. Thirteen communities in Kansas, serving 32 counties, receive both state and federal funding to provide full-day, full-year early care and education to over 825 children. Each KEHS program provides services in collaboration with existing child care programs, Parents as Teachers, Healthy Families, Inter-agency Coordinating Council (Part C), and other early care and education program providers. Community partners include public school systems, community mental health centers, county health departments, medical providers, local SRS offices and other human service agencies.

The purpose of KEHS is to enhance children's physical, social, emotional and cognitive development; enable parents to be better care givers of and teachers to their children; and help parents meet their own goals, including that of economic independence. The program provides early, continuous, intensive and comprehensive child development and family support services to families and children. Services include health, nutrition and mental health, early childhood education, social services, parent involvement and child care.

In addition to the goals mentioned above, the KEHS initiative seeks to increase the amount of child care for infants and toddlers and to raise the quality of child care for all children in Kansas. A major portion of the KEHS initiative will be to deliver quality training to staff and child care providers in Kansas to encourage professional development and continuous program improvement. KEHS staff and child care providers will be required to obtain their Child Development Associate (CDA) which consists of 120 hours of course work, 480 hours of field work, weekly conferences with instructional personnel and additional hours completing reading and writing assignments.

Kansas established the Infant/Toddler Initiative in July, 1999. An Infant/Toddler Specialist is located in each of the 16 Child Care Resource and Referral Agencies throughout the state. Infant/Toddler Specialists serve as a local resource to both child care providers and parents on issues surrounding the importance of quality child care and nurturing infants based on recent research around early brain

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development. They also provide support, training and technical assistance on health related issues.

- The following describes child care resource and referral activities funded and identifies the entity(ies) providing them:

Services provided through KACCRRRA include training and technical assistance for child care providers; information to parents seeking child care; consumer education for the public on quality child care; a media campaign targeting employers, parents and providers; administration of a statewide family child care provider grant program; and gathering of data related to child care accessibility and availability. KACCRRRA has also been the administrator for a Professional Development Initiative project to promote professionalism in the early care and education field.

- The following describes school-aged child care activities funded and identifies the entity(ies) providing them.

In a public/private partnership with United Way of Wyandotte County, Ewing Marion Kauffman Foundation and SRS, CCDF funds have been made available to programs serving school-age children in Wyandotte county. Funds are used to assist new child care providers to apply and meet state child care licensing requirements, and to provide licensed child care providers with training and technical assistance in health, safety, nutrition, child abuse detection/prevention and children with special needs requirements, or to assist licensed child care providers in expanding their child care services. These funds were targeted to a specific area of the state/county where the supply of existing licensed child care services was low and therefore unable to meet the needs of families needing safe before-and-after school care. Programs that may have been operating “underground” were given the opportunity to request funds to help them begin the process of becoming licensed. United Way of Wyandotte County is responsible for the management of these public/private funds.

Other projects specific to school-age care: CCDF funds were granted to a child care program that was already NAEYC accredited to help meet NSACA accreditation requirements; Another one to comply with NSACA quality standards; and to implement a summer camp curriculum designed for and planned by school-age children.

Kansas examined the current child care licensing regulations and developed new State regulations for school-age facilities. Public meetings were held across the state to receive input and provide feedback on proposals. SRS participated in these public meetings and has worked closely with Kansas Department of Health and Environment, Child Care Licensing and Registration in the development of the new regulations.

In November, 2000 a group of professionals concerned about early childhood and school readiness convened an Early Childhood Education Leadership Summit. Following the meeting a smaller group was organized to develop a definition of

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school readiness and identify outcome measures associated with it. The Kansas Children's Cabinet agreed to facilitate this process. Members of the NextSteps Committee are from Kansas Department of Education, Kansas Department of Health and Environment, Success By Six, Kansas Department of Social and Rehabilitation Services, Kansas Association of Child Care Resource and Referral Agencies, Local School Districts, Kansas Head Start Association, Kansas Inservice Training Systems, and Kansas Children's Cabinet and Trust Fund.

- 5.2 The law requires that not less than 4% of the CCDF be set-aside for quality activities (658E(c)(3)(B), 658G, §§98.13(a), 98.16(h), 98.51, 98.16(h)). The Lead Agency estimates that the following amount and percentage will be used for the quality activities (not including earmarked funds):

\$ 1,675,636.76 (4 %)

- 5.3 Check either "Yes" or "No" for each activity listed to indicate which activities the Lead Agency will undertake to improve the availability and quality of child care (include activities funded through the 4% quality set-aside as well as the special earmark for quality activities). (658E(c)(3)(B), §§98.13(a), 98.16(h))

Yes No

- X ___ comprehensive consumer education; (§98.51(a)(1)(i))
X ___ grants or loans to providers to assist in meeting State and local standards; (§98.51(a)(2)(ii))
X ___ improving the monitoring of compliance with licensing and regulatory requirements; (§98.51(a)(2)(iii))
X ___ training, education, and technical assistance; (§98.51(a)(2)(iv))
X ___ improving salaries and other compensation for child care providers; (§98.51(a)(2)(v))
X ___ other quality activities that increase parental choice, and improve the quality and availability of child care. (§98.51(a)(1)(ii) & (ii))

- 5.4 Describe each activity that is checked "Yes" above and identify the entity(ies) providing them.

Consumer Education: Kansas Association of Child Care Resource and Referral Agencies (KACCRRRA) provides consumer information to any parent who calls to inquire about child care. This information will cover topics such as how to choose quality child care, how to identify your child's needs, how to interview child care providers, parents and providers' rights and responsibilities. This information will also be provided to TANF recipients required to participate in work activities at the time they are referred to the TANF agency. KACCRRRA also distributes public education materials throughout the state through mailings, brochures, posters and public service announcements, and sometimes uses the media to alert parents to the availability of child care. In July of 1999, a media campaign was launched statewide through the R&R network. This campaign targets parents, child care professionals, and employers. The theme is "Good Beginnings Last A Lifetime - Make a Smart Child Care Choice". It specifically

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raises awareness about the implications of brain development research, the components of high quality child care, and techniques for businesses to support family friendly policies.

Local health departments also provide consumer information to parents and providers. Within the Kansas Economic and Employment Support Manual (KEESM), section 3530, the agency,(SRS), is responsible to inform TANF parent-guardian-caretakers about the TANF work activity good cause determination for child care and that a good cause finding does not suspend the TANF “clock” on federal benefits.

Resource and Referral Programs: Resource and Referral(R&R) services are provided through the statewide network of Kansas Association of Child Care Resource and Referral Agencies (KACCRRRA). KACCRRRA consists of sixteen (16) member agencies providing R&R services to all 105 Kansas counties. This R&R network has been developed and supported through CCDBG/CCDF during the past seven years and will continue to be supported through CCDF funds.

Services provided through KACCRRRA include training and technical assistance for child care providers; information to parents seeking child care; consumer education for the public on quality child care; a media campaign targeting employers, parents and providers; administration of a statewide family child care provider grant program; and gathering of data related to child care accessibility and availability. KACCRRRA has also been the administrator for a Professional Development Initiative project to promote professionalism in the early care and education field.

Grants or loans to providers: Since 1997, a quality improvement grant program for licensed home providers has been in place. Funding, up to \$1500 per provider, is made available to improve the quality of their licensed family day care home. **Until FFY03** SRS has committed approximately \$500,000 each of four years to this initiative. **Due to budget constraints, the amount committed has been lowered to \$100,000.** An average of 350 providers annually receive grants. This program also makes start-up funds of \$750 available to new providers serving infants/toddlers. This grant program is administered for SRS through KACCRRRA. SRS will continue to commit and provide funds to support this program.

Monitoring of compliance with licensing/regulatory: A written agreement with Kansas Department of Health and Environment (KDHE) outlines activities to be provided for compliance with licensing and regulatory requirements. Regulatory improvements will be made to State operations to keep up with growing program demands, to meet the need for timeliness of action, and to respond effectively to the public or other agencies. Regulatory improvements will also be made through aid to counties to supplement funding for the child care regulatory work at the local level. Funding will improve the effectiveness at the local level by enabling counties to add services and additional staff as well as provide a consistent and comprehensive regulatory program. Funding allows for improved educational qualifications of surveyors. This effects availability and quality by providing consistency in surveying, improving their ability to investigate complaints thoroughly and make recommendations on marginal providers regarding license issuance or renewal. Increased educational levels also allows surveyors to provide training and technical assistance to all providers. Funding through this agreement will also increase the human resource and technology needs of the licensing bureau and local government

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aid for child care. Funds to KDHE will supplement and not supplant levels of state and local expenditures for child care licensing.

Training, education and technical assistance: Through the CCDF grant program, education and training activities are made available to child care providers statewide. Training and educational opportunities are to assist providers in meeting applicable State and local requirements, and increase their professional development. These opportunities are geared to regional needs and various skill levels of child care providers. Appropriate areas such as health and safety; first aid; nutrition; recognition, prevention and reporting of child abuse and neglect; recognition of communicable disease; developmentally appropriate practices; school-age care; and care of special needs children are addressed. Providers are encouraged to attain a CDA or higher. Kansas promotes professionalism among care providers and strives to provide recognition to providers for completed training.

Compensation for child care providers: Effective February 1, 2002, SRS adjusted child care provider maximum reimbursement rates in accordance with data received on the 2000 market rate survey. The new rates were for services provided in February and paid in March. Rates were adjusted to the 65th percentile for Licensed Homes and Child Care Centers, and the 60th percentile for Registered Homes.

Based on a recommendation of the contractor, SRS changed the way counties are grouped. Rather than being grouped according to SRS management areas, counties are grouped in accordance with similarities of prices charged to the private sector. Three (3) groupings were implemented. A “hold harmless” provision was added to allow no provider decreases due to the new groupings.

A new market rate survey was completed in November, 2002. Changes will be implemented using the new data as the budget allows.

Kansas has implemented the Teacher Education and Compensation Helps (T.E.A.C.H.) Program. At this time several pilot sites are established. They are Barton County Community College, Cloud County Community College, Garden City Community College, Kansas City Kansas Community College, Labette Community College, and Colby Community College. Smart Start grant proposals that include TEACH are coordinated through TEACH via KACCRRA.

Other quality activities which increase parental choice and improve quality and availability: Through an annual Request for Proposal (RFP), SRS **has made** grant funds available to public or non-profit agencies which provide child care services. Grants **were** awarded to agencies for the following services:

1. Grants are available to centers to establish, expand or enhance the quality of their program. Priority is given to programs providing care for infants/toddlers or alternative hours of care.
2. Grants are available to establish, expand or enhance the quality of school-age programs;
3. Grants are available for local child care advisory groups to help strengthen their local advisory group or sponsor additional activities;

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4. Grants are available (\$50,000 start-up requiring a 50% cash match by employers) to private or non-profit businesses to promote employer sponsored child care;
 5. Annual funding is made available to support the statewide network of resource and referral agencies, KACCRRRA, covering all 105 Kansas counties.
 6. Special emphasis on supporting providers as they earn their Child Development Associate (CDA) credential. Funding is made available through the State Training Program for scholarships for eligible applicants.
 7. State licensing improvement is funded through a Memorandum of Agreement between SRS and Department of Health and Environment. Specific activities funded have been previously noted.
 8. On-going funding for the current Early Head Start grantees will be available. This initiative provides comprehensive services for children 0-4. It seeks to increase the amount of child care for infants and toddlers and to raise the quality of child care for all children. Delivery of quality training to EHS and child care providers will encourage professional development and continuous program improvement. **Due to budget constraints, this program has been eliminated at this time.**

Additional quality activities: The Kansas Early Care and Education Professional Development Initiative (PDI) Task Force is a group of child care advocates who are establishing various initiatives to promote professionalism in the early care and education field. The PDI Task Force is focusing attention on the following areas: establishment of core competencies for child care professionals, development of career ladder for early care and education positions, listing of training opportunities in Kansas, development of articulation agreements for college credit and a system of Continuing Education Units (CEUs), establishment of a registry of credentialed individuals working in early care and education and their levels of credentials, development of a system of fair compensation based on worker's credentials, and the formation of a public awareness campaign. Funding from CCDF will result in creation of a strategic plan to continue implementation of the Professional Development system.

Beginning in SFY 2000, July 1, 1999, a new initiative began to provide an Infant/Toddler specialist in each of the sixteen KACCRRRA resource and referral agencies throughout the state. These specialists serve as a local resource to both child care providers and parents on issues surrounding the importance of quality care and nurturing of infants based upon recent research around early brain development. They also provide support and technical assistance on health related issues.

5.5 Is any entity identified in sections 5.1 or 5.4 a non-governmental entity?

() No.

(X) Yes, the following entities named in this Part are non-governmental:

Non-governmental: Kansas Association of Child Care Resource and Referral Agencies (KACCRRRA) and Kansas Child Care Training Opportunities (KCCTO).

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PART 6 - HEALTH AND SAFETY REQUIREMENTS FOR PROVIDERS

(ONLY THE 50 STATES AND THE DISTRICT OF COLUMBIA COMPLETE PART 6.
ONLY TERRITORIES COMPLETE PART 7.)

The National Resource Center for Health and Safety in Child Care (NRCHSCC) of DHHS's Maternal and Child Health Bureau supports a comprehensive, current, on-line listing of the licensing and regulatory requirements for child care in the 50 States and the District of Columbia. In lieu of requiring a State Lead Agency to provide information that is already publicly available, ACF accepts this compilation as accurately reflecting the States' licensing requirements. The listing, which is maintained by the University of Colorado Health Sciences Center School of Nursing, is available on the World Wide Web at: <http://nrc.uchsc.edu/>

Section 6.1 - Health and Safety Requirements for Center-Based Providers

(658E(c)(2)(F), §§98.41, §98.16(j))

6.1.1 Are all center-based providers paid with CCDF funds subject to licensing under State law which is reflected in the NRCHSCC's compilation referenced above? If:

(X) YES, answer 6.1.2 and proceed to 6.2.

() NO, answer 6.1.2 and 6.1.3.

Have center licensing requirements as relates to staff-child ratios, group size, or staff training been modified since approval of the last State Plan? (§98.41(a)(2) & (3))

() YES

(X) NO

6.1.3 For that center-based care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

Building and physical premises safety

Health and safety training

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Section 6.2 - Health and Safety Requirements for Group Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.2.1 Are all group home providers paid with CCDF funds subject to licensing under State law which is reflected in the NRCHSCC's compilation referenced above? If:

(X) YES, answer 6.2.2 and proceed to 6.3.

() NO, answer 6.2.2 and 6.2.3.

Have group home licensing requirements as relates to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

() YES

(X) NO

6.2.3 For that group home care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

Building and physical premises safety

Health and safety training

Section 6.3 - Health and Safety Requirements for Family Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.3.1 Are all family home child care providers paid with CCDF funds subject to licensing under State law which is reflected in the NRCHSCC's compilation referenced above? If:

(X) YES, answer 6.3.2 and proceed to 6.4.

() NO, answer 6.3.2 and 6.3.3.

Have family home child care provider requirements as relates to staff-child ratios, group size, or staff training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

() YES

(X) NO

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6.3.3 For that family home care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

Building and physical premises safety

Health and safety training

Section 6.4 - Health and Safety Requirements for In-Home Providers (658E(c)(2)(F), §§98.41, 98.16(j))

6.4.1 Are all in-home child care providers paid with CCDF funds subject to licensing under State law which is reflected in the NRCHSCC's compilation referenced above? If:

YES, answer 6.4.2 and proceed to 6.5.

NO, answer 6.4.2 and 6.4.3.

Have in-home health and safety requirements as relates to staff-child ratios, group size, or training been modified since the approval of the last State Plan? (§98.41(a)(2) & (3))

YES

NO

6.4.3 For that in-home care which is NOT licensed, and therefore not reflected in NRCHSCC's compilation, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

The signature of the provider on the self-assessment checklist (Attachment 6.4.3A) verifies that health and safety standards have been discussed.

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Building and physical premises safety

The parent or responsible adult has conducted a walk-through inspection of his/her home, relative's or out-of-home provider's home. The provider has completed a self assessment checklist for home safety.

Health and safety training

The signature of the provider on the self-assessment checklist verifies that health and safety standards have been discussed.

Section 6.5 - Exemptions to Health and Safety Requirements

At State option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings who live in a separate residence from the child in care, may be exempted from health and safety requirements (658P(4)(B), §98.41(a)(1)(ii)(A)). Indicate the Lead Agency policy regarding these relative providers:

- All relative providers are subject to the same requirements as described in sections 6.1 - 6.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
- All relative providers are exempt from all health and safety requirements.
- Some or all relative providers are subject to different health and safety requirements from those described in sections 6.1 - 6.4. The following describes those different requirements and identifies which relatives they apply to:

All in or out-of-home relatives and in-home non-relative providers must complete a self-assessment checklist for health and safety and also pass a Kansas child abuse and neglect registry check.

Section 6.6 - Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how health and safety requirements are effectively enforced:

Are child care providers subject to routine unannounced visits?

- No
- Yes, and the following describes the providers subject to unannounced visits and the frequency of those visits.

Unannounced visits are conducted to Licensed Child Care Providers at least one time each year by Child Care Provider Surveyors contracted through Kansas Department of Health and Environment, Child Care Licensing and Registration. Additional unannounced visits may occur in response to complaints received by SRS or KDHE.

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Amended Effective: _____

In the Memorandum of Agreement with KDHE, SRS is requesting unannounced visits to 25% of the registered providers who have an agreement to care for SRS children. Visits are scheduled to begin July 1, 2001.

Are child care providers subject to background checks?

No

Yes, and the following describes the providers subject to background checks.

Each child care facility subject to licensing or registration by KDHE must at initial application and re-application report the name, address and birthdate of each person over 10 years of age who resides, works or regularly volunteers in the facility.

Names are checked with the Kansas Bureau of Investigation (KBI) and on the Child Abuse and Neglect Registry.

Names of relative and in-home providers are checked through the Child Abuse and Neglect Registry before subsidized care is provided.

- Does the State require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)

No

Yes, and the following describes the State's reporting requirements and how such injuries are tracked (if applicable).

Day care facilities are required to report immediately to the parent or guardian each illness or injury of a child which requires medical attention. Any injury or illness which results in the death of a child in care shall be reported by the next working day to the county health department or KDHE.

- Other methods used to ensure health and safety requirements are effectively enforced:

Kansas Statutes authorize KDHE to enforce compliance through correction orders, denials, revocation, civil penalty up to \$500/day, emergency suspension and injunction. KDHE employs a full-time child care attorney to litigate orders. Approximately 10% (annually) of the regulated community is issued an enforcement action. Administrative procedures are established and followed.

Annual site visits to all licensed facilities are conducted by KDHE licensing surveyors. Site visits are conducted when complaints are lodged against any licensed or registered facility. Licensed and registered sites may be monitored, based on their corrective action plans, when there have been numerous issues related to the health, safety and well-being of children.

Section 6.7 – Exemptions from Immunization Requirements

The State assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the State public health agency. (§98.41(a)(1))

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The State exempts the following children from immunization (check all that apply):

- Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- Children who receive care in their own homes.
- Children whose parents object to immunization on religious grounds.
- Children whose medical condition contraindicates immunization.

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PART 7 - HEALTH AND SAFETY REQUIREMENTS IN THE TERRITORIES

Section 7.1 - Health and Safety Requirements for Center-Based Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all center-based care, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

Building and physical premises safety

Health and safety training

Section 7.2 - Health and Safety Requirements for Group Home Providers in the Territories (658E(c)(2)(F), §98.41(a), §98.16(j))

For all group home care, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

Building and physical premises safety

Health and safety training

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Section 7.3 - Health and Safety Requirements for Family Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all family child care, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

Building and physical premises safety

Health and safety training

Section 7.4 - Health and Safety Requirements for In-Home Providers in the Territories
(658E(c)(2)(F), §98.41(a), §98.16(j))

For all in-home care, the following health and safety requirements apply to child care services provided under the CCDF for:

The prevention and control of infectious disease (including age-appropriate immunizations)

Building and physical premises safety

Health and safety training

Section 7.5 - Exemptions to Territorial Health and Safety Requirements

At Lead Agency option, the following relatives: grandparents, great grandparents, aunts, uncles, or siblings who live in a separate residence from the child in care, may be exempted from health

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and safety requirements (658P(5)(B), 98.41(g)). Indicate the Lead Agency policy regarding these relative providers:

- () All relative providers are subject to the same requirements as described in sections 7.1 - 7.4 above, as appropriate; there are no exemptions for relatives or different requirements for them.
- () All relative providers are exempt from all health and safety requirements.
- () Some or all relative providers are subject to different health and safety requirements from those described in sections 7.1 - 7.4 and the following describes those different requirements and which relatives they apply to:

Section 7.6 - Enforcement of Health and Safety Requirements

Each Lead Agency is required to certify that procedures are in effect to ensure that child care providers of services for which assistance is provided comply with all applicable health and safety requirements. (658E(c)(2)(E), §§98.40(a)(2), 98.41(d)) The following is a description of how Territorial health and safety requirements are effectively enforced:

- Are child care providers subject to routine unannounced visits?
 - () No
 - () Yes, and the following describes the providers subject to unannounced visits and the frequency of those visits.

- Are child care providers subject to background checks?
 - () No
 - () Yes, and the following describes the providers subject to background checks.

- Does the Territory require that child care providers report serious injuries that occur while a child is in care? (Serious injuries are defined as injuries requiring medical treatment by a doctor, nurse, dentist, or other medical professional.)
 - () No
 - () Yes, and the following describes the Territory's reporting requirements and how such injuries are tracked (if applicable).

- Other methods used to ensure health and safety requirements are effectively enforced:

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Section 7.7 – Exemptions from Immunization Requirements

The Territory assures that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendations for childhood immunizations of the Territorial public health agency. (§98.41(a)(1))

The Territory exempts the following children from immunization (check all that apply):

- Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts and uncles).
- Children who receive care in their own homes.
- Children whose parents object to immunization on religious grounds.
- Children whose medical condition contraindicates immunization.

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APPENDIX 1 -- PROGRAM ASSURANCES AND CERTIFICATIONS

The Lead Agency, named in Part 1 of this Plan, assures that:

- 1) upon approval, it will have in effect a program which complies with the provisions of the Plan printed herein, and is administered in accordance with the Child Care and Development Block Grant Act of 1990 as amended, Section 418 of the Social Security Act, and all other applicable Federal laws and regulations. (658D(b), 658E(a))
- (2) the parent(s) of each eligible child within the State who receives or is offered child care services for which financial assistance is provided is given the option either to enroll such child with a child care provider that has a grant or contract for the provision of the service; or to receive a child care certificate. (658E(c)(2)(A)(i))
- (3) in cases in which the parent(s) elects to enroll the child with a provider that has a grant or contract with the Lead Agency, the child will be enrolled with the eligible provider selected by the parent to the maximum extent practicable. (658E(c)(2)(A)(ii))
- (4) the child care certificate offered to parents shall be of a value commensurate with the subsidy value of child care services provided under a grant or contract. (658E(c)(2)(A)(iii))
- (5) with respect to State and local regulatory requirements, health and safety requirements, payment rates, and registration requirements, State or local rules, procedures or other requirements promulgated for the purpose of the Child Care and Development Fund will not significantly restrict parental choice from among categories of care or types of providers. (658E(c)(2)(A), §98.15(p), §98.30(g), §98.40(b)(2), §98.41(b), §98.43(c), §98.45(d)).
- (6) that children receiving services under the CCDF are age-appropriately immunized, and that the health and safety provisions regarding immunizations incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the State public health agency. (§98.41(a)(1))

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The Lead Agency also certifies that:

- (1) it has procedures in place to ensure that providers of child care services for which assistance is provided under the Child Care and Development Fund afford parents unlimited access to their children and to the providers caring for their children during the normal hours of operations and whenever such children are in the care of such providers. (658E(c)(2)(B))
- (2) it maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request. (658E(c)(2)(C))
- (3) it will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices. (658E(c)(2)(D))
- (4) it has in effect licensing requirements applicable to child care services provided in the State. (658E(c)(2)(E))
- (5) there are in effect within the State (or other area served by the Lead Agency), under State or local law, requirements designed to protect the health and safety of children; these requirements are applicable to child care providers that provide services for which assistance is made available under the Child Care and Development Fund. (658E(c)(2)(E))
- (6) procedures are in effect to ensure that child care providers that provide services for which assistance is provided under the Child Care and Development Fund comply with all applicable State or local health and safety requirements. (658E(c)(2)(G))
- (7) payment rates under the Child Care and Development Fund for the provision of child care services are sufficient to ensure equal access for eligible children to comparable child care services in the State or sub-State area that are provided to children whose parents are not eligible to receive assistance under this program or under any other Federal or State child care assistance programs. (658E(c)(4)(A))

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Amended Effective: _____

APPENDIX 2 - ELIGIBILITY AND PRIORITY TERMINOLOGY:

For purposes of determining eligibility and priority for CCDF-funded child care services, lead agencies must define the following terms. (658P, 658E(c)(3)(B))

- (1) attending (a job training or educational program; include minimum hours if applicable) enrolled in an approved job training or educational program and meeting the attendance expectations
- (2) in loco parentis -any blood relative with custody or any person with court-ordered custody and with the legal right and responsibility to act as a parent
- (3) job training and educational program -an approved accredited program leading to a certificate, high school diploma or equivalency, or specific skills training which is a logical progression to paid employment; persons eligible for child care while attending training must be employed a minimum of 20 hours a week or be in Work Programs.
- (4) physical or mental incapacity (if the Lead Agency provides such services to children age 13 and older) -Developmentally delayed = a handicapping condition which impedes appropriate behavior in one or more of the following areas: motor functioning; self-help skills; cognition; communication; and interaction with their social and/or physical environment and special assistance limitations. Children up to age 18 are eligible if incapacity is documented by a physician or psychologist.
- (5) protective services -Protective services, per se, will not be provided with these funds, however, child care will be provided to protect children who cannot protect themselves from abuse, neglect and exploitation, to enable a child to remain in the home while the parent(s) work toward rehabilitation or when the child is at risk of a health or social condition which may adversely affect the child's development. SRS makes the determination that a child needs to receive protective services.
- (6) residing with -All family members living together in the same household, including a person living away from home if the person maintains his/her permanent residence with the family and continues to function as a family member even if the maintenance provided is inadequate.
- (7) special needs child -Emotional, behavioral, physical or personal need of a child requiring more than the usual amount of care and supervision for the child's age and protective service children and children that are physically and mentally incapacitated.
A special needs child is defined as a child who has a temporary or permanent disability but is able to function in a family child care home or center environment without access to other specialized support services. Any SRS provider may request to be designated as a Special Needs Provider and will be paid an additional \$0.15 above the standard hourly rate. Special purpose child care is defined as child care for a child with disabilities who has a need for specialized services provided by a Special Purpose Center or integrated unit. Special Purpose programs must be designated by KDHE and/or SRS. Separate hourly rates are paid to Special Purpose Centers.
- (8) very low income - Income at or below the Federal Poverty Level.

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(9) working (include minimum hours if applicable) -A physical or mental activity engaged in for the purpose of remuneration as determined by the Department of Social and Rehabilitation Services at the time of eligibility determination.

(10) Additional terminology related to conditions of eligibility or priority established by the Lead Agency:

teen parent - Teen through age 19 who is completing high school or equivalency education program

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Attachment 3.2A
KANSAS DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES
MAXIMUM HOURLY CHILD CARE PROVIDER RATES
BY TYPE OF PROVIDER AND AGE OF CHILD

*Effective February 1, 2002

	HOMES				CENTERS				SPECIAL PURPOSE UNITS/CENTERS**	
	REGISTERED/RELATIVE		LICENSED/GROUP		Infant	Toddler	Preschool	School-Age	Under 2.5	Over 2.5
	Under 18 mos	18 mos & over	Under 18 mos	18 mos & over	Under 12 mos	12 mos to 29 mos	30 mos to 5 yrs	6 yrs or more		
Group #1	3.00	2.50	3.12	2.72	4.48	3.85	3.12	2.98	7.37	7.05
Group #2	2.02	2.00	2.22	2.00	3.36	2.88	2.20	2.01	7.37	7.05
Group #3	1.75	1.56	1.80	1.70	2.10	2.00	1.84	1.75	7.37	7.05

Child care provider rates are based on data received by conducting a Market Rate Survey. A child care market survey measures the child care prices charged by the providers and paid by parents in a specified geographic area. The above rates and groupings are the result of a Market Rate Survey conducted in 2000. Using the data received, counties are grouped according to general likeness of rates charged to the private sector. Registered providers are paid at the 60th percentile and Licensed Homes/Child Care Centers are paid at the 65th percentile. This means that for Child Care Centers, 65% of providers charge the private sector the state rate or below.

Group #1 = Douglas, Johnson

Group #2 = Atchison, Butler, Finney, Harvey, Leavenworth, Miami, Riley, Saline, Sedgwick, Shawnee, Wyandotte

Group #3 = All counties not listed above

Providers may not see a change in some age categories from the prior rate which was effective 2/1/99. This 1999 rate chart is also available. No rate will be reduced due to the new groupings. For these “hold harmless” categories, all providers (existing and new) will receive the 2/1/99 rate rather than a decrease.

Child Care Facilities designated as a Special Needs Provider for special needs children who do not require Special Purpose Care may receive an additional 15 cents per hour for each child if the following requirements are met:

1. The Provider selected by the parent indicates a desire to be a Special Needs Provider for the child.
2. An ES-1627a Request For Special Purpose/Special Needs Provider Child Care has been approved documenting the child’s special needs and authorizing the enhanced payment rate.

Special Purpose Child Care Centers/Units serving children who have been professionally evaluated as having a special need severe enough to require additional staff or specialized support services not routinely available, are eligible for reimbursement up to, but not exceeding, the above Special Purpose rates for a maximum of four (4) hours per day when the following requirements are met:

1. The Center has a KDHE designation of Special Purpose Center or integrated unit, or the Center has special approval from SRS Central Office Child Care staff for a specific child.
2. An ES-1627a Request for Special Purpose/Special Needs Provider Child Care form is completed authorizing the enhanced payment rate for a child.

Special Purpose rates may also be used for sick child care centers.

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Attachment 3.3.2A

Income Kansas divides income into two types. There is earned and unearned income. Income includes money received from such sources as wages, self-employment, property rentals, pensions, benefits and contributions. There are no deductions or resource tests to determine eligibility for child care services.

Income Codes (INEL)

EX= exempt

AF	TAF income (EX)
AL	Alimony income
AS	Adoption Support (EX)
CG	Capital Gains from sale of property
CR	Cash received on a regular basis
CS	Child support
DI	Dividends and interest
DP	Disability payments
EE	Education loans/grants used for education expenses (EX)
EL	Education loans/grants used for living expenses (EX)
EM	Emancipated minor non-exempt income (any type)
FA	Farm self-employment net income
FC	Foster care payments (EX)
GI	Gross monthly earned income
IH	Inheritance net income
IL	Independent living (EX)
IT	Interest income
JC	Job Corps Income (EX)
JT	JPTA allowance (EX)
MA	Military allotment
OI	Other earned income
PE	Pensions, annuities, trust funds
RI	Rental net income
RR	Railroad retirement income
SE	Self-employment net income
SI	SSI benefits (EX)
SS	Social Security benefits
UC	Unemployment compensation
VB	Veteran's benefits
VP	Work programs' vendor payment (EX)
WT	Worker's compensation

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Attachment 3.5.1

**Kansas Department of Social and Rehabilitation Services
Monthly Family Income and Share Schedule for Child Care Services**

Effective February 1, 2003

Each family determined eligible for Child Care based on income shall be assessed a monthly share based on family size and monthly gross income. The monthly fee shown on the chart below for each income level and family size is the “family share” the parent or guardian pays the child care provider monthly toward the cost of care for all children receiving care.

Notes:

(1) There is only one family share schedule for all families paying a “family share”. Income should be rounded to the nearest dollar.

(2) The family’s income must be equal to or under the “Income Limit” amount.

Family Members	Level I 70% of Poverty		Level II 100% of Poverty		Level III 110% of Poverty		Level IV 120% of Poverty		Level V 130% of Poverty		Level VI 140% of Poverty		Level VII 150% of Poverty	
	Income Limit	Mo Fee	Income Limit	Mo Fee	Income Limit	Mo Fee	Income Limit	Mo Fee	Income Limit	Mo Fee	Income Limit	Mo Fee	Income Limit	Mo Fee
2	\$697	\$0	\$995	\$18	\$1,095	\$46	\$1,194	\$63	\$1,294	\$84	\$1,393	\$110	\$1,493	\$141
3	876	0	1,252	22	1,377	58	1,502	79	1,628	106	1,753	138	1,878	177
4	1,056	0	1,508	27	1,659	70	1,810	95	1,960	127	2,111	166	2,262	213
5	1,236	0	1,765	31	1,942	82	2,118	112	2,295	149	2,471	194	2,648	250
6	1,415	0	2,022	36	2,224	94	2,426	128	2,629	170	2,831	222	3,033	286
7	1,595	0	2,278	40	2,506	106	2,734	144	2,961	192	3,189	251	3,417	322
8	1,775	0	2,535	45	2,789	118	3,042	160	3,296	213	3,549	279	3,803	358
9	1,954	0	2,792	49	3,071	130	3,350	176	3,630	235	3,909	307	4,188	394
10	2,134	0	3,048	54	3,353	142	3,658	192	3,962	256	4,267	335	4,572	430
11	2,314	0	3,305	59	3,636	154	3,966	209	4,297	278	4,627	363	4,958	467
12	2,493	0	3,562	63	3,918	166	4,274	225	4,631	300	4,987	392	5,343	503

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SOCIAL AND REHAB. SERV.
P O BOX 1424
TOPEKA, KS 66601

CHILD CARE SERVICE PLAN

Page 1 of 1
Date of Plan: 02/26/02

SRS Case Manager:
STEVE NEWCOMER
Telephone No.:
(913) 296-2500

TOPEKA ASSOCIATION FOR
2701 RANDOLPH
TOPEKA, KS 66611

Client Telephone No.:

Client Name:
RETROPOST, RENEE
EASY ST
TOPEKA, KS 66608

Provider ID: 14860867326661100
Provider Telephone No.:
Provider Location:
2701 RANDOLPH
TOPEKA, KS 66611

---- Provider Copy ----- _----- _--_

						Effective CareDates	
Name						From	To
MATT RETROPOST						01/15/02	12/31/02
Month	Hours	SRS Rate	Estimated Cost	Auth Number	Family Fee	Estimated SRS Pay	
01/02	120	1.90	228.00	C00000002686	58.00	170.00	
02/02	120	1.90	228.00		0.00	228.00	
03/02	120	1.90	228.00		0.00	228.00	
04/02	120	1.90	228.00		0.00	228.00	
05/02	120	1.90	228.00		0.00	228.00	
06/02	120	1.90	228.00		0.00	228.00	
07/02	120	1.90	228.00		0.00	228.00	
08/02	120	1.90	228.00		58.00	170.00	
09/02	120	1.90	228.00		58.00	170.00	
10/02	120	1.90	228.00		58.00	170.00	
11/02	120	1.90	228.00		58.00	170.00	
12/02	120	1.90	228.00		58.00	170.00	

The above rate may change during the effective period of care due to changes in the provider's rate classification, the child's age or SRS rates.

Expected hours of care per month are estimated based on information provided to SRS by the client. Expected payments may vary, based on actual number of care hours per month.

Client failure to pay the family fee may cause the client to lose eligibility for child care services.

The State of Kansas/SRS is not responsible for unpaid bills.

Payment for child care services not authorized by SRS is the client's sole responsibility.

The client is responsible for contacting SRS before this authorization ends, or when care arrangements change. Failure to notify SRS may result in the client being responsible for incorrect payments.

This agreement is contingent upon continued availability of government funding for child care. If funds are no longer available, this agreement may be reduced or terminated with ten days notice.

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Effective Date: October 1, 2001

Amended Effective: _____



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