

**APPENDIX G-1  
CHILD CARE SECTION  
2010 APU**

**County: Clinton**

**I. Administration (Required Section)**

Describe how your district is organized to administer the child care program including any functions that are subcontracted to an outside agency.

1. Identify the unit that has primary responsibility for the administration of child care for:

Public Assistance Families: **Day Care Unit**

Transitioning Families: **Day Care Unit**

Income Eligible Families: **Day Care Unit**

Title XX: **Day Care Unit**

2. Indicate the use of New York State Child Care Block Grant (NYSCCBG) Funds.

FFY 07-08 Rollover Funds ( <i>this amount is available from the NYSCCBG ceiling report in the claiming system</i> )	<b>\$379,694</b>
Estimate of FFY 08-09 Rollover Funds	<b>\$180,973*</b>
Estimate of Flexible Funds for Families (FFFS) for child care subsidies	<b>\$ -0-</b>
NYSCCBG Allocation for SFY 09-10 (Estimate)	<b>\$726,794*</b>
Estimate of Local Share	<b>\$298,721</b>

**Total Estimated NYSCCBG Amount: \$1,206,488\***

10/08-9/09

A. Subsidy	<b>\$ 880,737</b>
B. Other program costs (excluding subsidy)	<b>\$ 307,654</b>
C. Administrative costs	<b>\$ 18,097</b>

3. Does your district have a contract or formal agreement with another organization to perform any of the following functions? No

<u>Function:</u>	<u>Organization:</u>	<u>Amount of Contract:</u>
<input type="checkbox"/> Eligibility screening		
<input type="checkbox"/> Screening of legally-exempt providers		
<input type="checkbox"/> Assistance in locating care		
<input type="checkbox"/> Child Care Information Systems		
<input type="checkbox"/> Other		

**APPENDIX G-2**

**Other Eligible Families if Funds are Available (Required Section)**

List below are optional categories of eligible families that your district can include as part of its ICP. Select any categories your district wants to serve and describe any limitations associated with the category.

Optional Categories	Option	Limitations
1. Public Assistance (PA) families participating in an approved activity in addition to their required work activity.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
2. PA families or families with income up to 200% of the State Income Standard (SIS) when the caretaker is:  a) participating in an approved substance abuse treatment program  b) homeless  c) a victim of domestic violence  d) in an emergency situation of short duration	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	a-d) Local Social Services worker must assess specific need and authorize child care to meet that need based on recommendations of service providers and assessment of other available resources.  <ul style="list-style-type: none"> <li>• other adults in the home</li> <li>• family/friends who might provide care</li> <li>• amount and length of child care needed</li> <li>• transportation considerations</li> </ul>
3. Families with an open child protective services case when child care is needed to protect the child.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
4. Families with income up to 200% of the State Income Standard when child care services are needed because the child's caretaker:  a) is physically or mentally incapacitated  b) has family duties away from home	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	a)  b)
5. Families with income up to 200% of the State Income Standard when child	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

care services are needed for the child's caretaker to actively seek employment for a period up to 6 months.		
6. PA families where a sanctioned parent is participating in unsubsidized employment, earning wages at a level equal to or greater than the minimum amount under law.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to participate in:		
a) a public or private educational facility providing a standard high school curriculum offered by or approved by the local school district	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b) an education program that prepares an individual to obtain a NYS High School equivalency diploma	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
c) a program providing basic remedial education in the areas of reading, writing, mathematics, and oral communications for individuals functioning below the ninth month of the eighth grade level	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
d) a program providing literacy training designed to help individuals improve their ability to read and write	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
e) English as a second language (ESL) instructional program designed to develop skills in listening, speaking, reading, and writing the English language for individuals whose primary language is other than English.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
f) a two year full-time degree granting program at a community college, a two year college, or an undergraduate college with a specific vocational goal leading to an associate degree or certificate of completion	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

<p>g) a training program which has a specific occupational goal and is conducted by an institution licensed or approved by the State Education Department other than a college or university</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>h) a prevocational skill training program such as, a basic education and literacy training program</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>i) a demonstration project designed for vocational training or other project approved by the Department of Labor.</p> <p><b>The parent/caretaker must complete the selected programs listed under number seven within 30 consecutive calendar months. The parent/caretaker cannot enroll in more than on program.</b></p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>8. PA recipients and low income families with income up to 200% of the State Income Standard who are satisfactorily participating in a two-year program other than one with a specific vocational sequence (leading to an associates degree or certificate of completion and that is reasonably expected to lead to an improvement in the parent-caretaker's earning capacity) as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

<p>9. PA recipients and low income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a two-year college or university program (other than one with a specific vocational sequence) leading to an associates degree or a certificate of completion that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>10. PA recipients and low income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a four-year college or university program (leading to a bachelor degree and that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity) as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<p>11. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to participate in a program to train workers in a employment field that currently is or is likely to be in demand in the near future, if the caretaker documents that he or she is a dislocated worker and is currently registered in such a program, provided that child care services are only used for the portion of the day the caretaker is able to document is directly related to the caretaker engaging in such a program.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

## APPENDIX G-3

### **Reasonable Distance, Very Low Income, Family Share, Case Closings and Openings and Fraud and Abuse Control Activities (Required Section)**

#### **Reasonable Distance**

It will be considered reasonable for a person to travel by personal vehicle fifteen minutes or 10 miles one way to a day care provider off the route from home to work. For someone utilizing public transportation with the day care provider on the bus route from home to work, one half mile from the bus stop on either end of the trip will be considered reasonable. One half mile will be considered reasonable for a person to walk to a day care provider's home. Variations in this standard will be considered for special circumstances such as ages and number of children who need to be walked to day care, locations and time of day to ensure safety in walking, weather conditions, and physical challenges which may impact the person's ability to travel. The plan was developed with input from the LDSS's day care staff, employment and assistance staff, services staff, and consultation with the Child Care Council.

#### **Very Low Income**

Very Low Income is defined by each district and is used in determining priorities for child care benefits.

Very Low Income is defined as **125%** of the State Income Standard.

#### **Family Share**

Family share is the weekly amount paid towards the costs of the child care services by the child's parent or caretaker. In establishing family share, your district must select a percentage from 10 percent to 35 percent to use in calculating the family share. The family share of child care is calculated by applying the family share percentage against the amount of the family's gross income that is in excess of the State Income Standard divided by 52.

Family Share Percentage selected by our district is **20%**.

## Case Closings

The district must describe below how priority is given to federally mandated priorities and describe local priorities. If all NYSCCBG funds are committed, the district will discontinue funding to those families that have lower priorities in order to serve families with higher priorities. Described below is how the district will select cases to be closed in the event that there are insufficient or no funds available.

**NOTE:** Category 1 cases will be guaranteed child care until programmatically ineligible.

1. If all NYSCCBG funds are committed, our district will discontinue funding to Category 3 families 150%- 200% from longest duration of child care received to shortest.
2. If there are insufficient NYSCCBG funds after Category 3 (150% - 200%) cases are closed, our district will close Category 2 cases (150% - 200%) from longest duration of child care received to shortest.
3. Category 3 – all the rest, including 125%-200% of poverty
4. Category 2 – all the rest, including 125%-200% of poverty
5. Priority populations will close in this order
  - teen parent
  - children with special needs
  - very low income



## Case Openings

Described below is how our district will select cases to be opened in the event that there are insufficient funds available.

- A prioritized waiting list will be created when limited funds restrict day care subsidies. Cases will be opened as funds allow considering the reverse order of case closings.

## Fraud and Abuse Control Activities

**The district must identify below the criteria it will use to determine which child care subsidy applications suggest a higher than acceptable risk for fraudulent or erroneous child care subsidy payment and procedures for referring such applications to the district's front end detection system.**

All Child Care Subsidy Applications are processed by a Social Welfare Examiner assigned to the Child Care Unit. Applications are reviewed utilizing a revised Front End Detection/EVR Referral indicator checklist:

- Working off the books (currently or previously)
- Self-employed but without adequate business records to support financial assertions
- PO Box used as mailing address without reasonable explanation
- Landlord does not verify household composition or provides information inconsistent with application
- Client unsure of own address
- Case closed for employment within past 2 months. Employed person now out of the home
- No documentation to verify identity or documentation of identity is questionable
- Documents or information provided are inconsistent with application, such as different name used for signature
- Prior history of denial, case closing, or overpayments resulting from an investigation
- Current application is inconsistent with prior case information.
- Children under the age of six with no birth certificates available
- No absent parent information or information is inconsistent with application

If indicators are identified, applications are referred to the Fraud Unit for verification (FEDS). In addition, new applicants who require day care due to employment are required to submit employment verification and also provide us with their current work schedule that is subject to verification with the employer.

**The district must describe below its sampling methodology used to determine which cases it will seek verification of an applicant or recipient's continued need for child care including, as applicable, verification of participation in employment, education or other required activities.**

Social Welfare Examiners assigned to the Employment and Assistance and the Child Care Unit work closely in coordinating day care. Individuals receiving day care must recertify every six months. At this time recipients' continued need for day care is verified. Recipients are required to provide documentation regarding employment, school schedules, work experience requirements, etc. A Principle Account Clerk in the Accounting Unit reviews each time sheet to ensure proper amounts are paid. When Caseworkers assigned to the Child Care Unit conduct unannounced home visits a comparison is made between the children present during the home visit with attendance sheets submitted for payment. In addition the home visit is compared with work experience logs submitted or educational attendance forms submitted. Questionable time sheets are forwarded to fraud for investigation.

**The district must describe below its sampling methodology used to determine which child care providers of subsidized child care services they will review for the purpose of comparing the child care providers' attendance forms for children receiving subsidized child care services and any child and adult care food program inspection forms to verify that child care was actually provided on the days listed on the attendance forms.**

The district has approximately 45 providers that participate in CACFP. The district will randomly select 3 providers per month that participate in CACFP and care for subsidized children. If the provider was previously selected or if they do not care for subsidized children they will not be included in the sample. The district will then contact the food sponsor and ask when the last inspection for CACFP was done on that provider and the children that were seen at that visit. The district will then compare the names of the subsidized children seen at that visit with the subsidy attendance forms given to the district by the child care provider to verify that child care was actually provided on the days listed on the attendance forms. The district will follow up on any inconsistency found.

## APPENDIX G-4

### **District Options (Required Section)**

Districts have certain flexibility to administer the child care subsidy program to meet local needs. Check which options that your district wishes to include in your county plan. Complete attachments for any area(s) checked.

1.  Our district has identified local priorities in addition to the federal priorities (complete Appendix G-5).
2.  Our district has chosen to establish funding set-asides for NYSCCBG (complete Appendix G-6).
3.  Our district is using Title XX funds for the provision of child care services (complete Appendix G-7).
4.  Our district has chosen to establish additional local standards for child care providers (complete Appendix G-8).
5.  Our district has chosen to make payments to child care providers for absences (complete Appendix G-9).
6.  Our district has chosen to make payments to child care providers for program closures (complete Appendix G-10).
7.  Our district has chosen to pay for transportation to and from a child care provider (complete Appendix G-11).
8.  Our district has chosen to pay up to a 15% higher than the applicable market rates for regulated child care services that have been accredited by a nationally recognized child care organization (complete Appendix G-11).
9.  Our district has chosen to pay up to 15% higher than the applicable market rates for non-traditional hours (complete Appendix G-11).
10.  Our district has chosen to pay up to 75% of the enhanced market rate for legally-exempt family and in-home child care providers who have completed 10 hours of training and the training has been verified by the legally-exempt care giver enrollment agency (complete Appendix G-11).
11.  Our district has chosen to pay for child care services while a caretaker who works the second or third shift sleeps (complete Appendix G-11).

12.  Our district has chosen to make payments to child care providers who provide child care services, which exceed 24 consecutive hours (complete G-12).
13.  Our district has chosen to include 18, 19 or 20 year olds in the Child Care Services Unit (complete Appendix G-12).
14.  Our district is seeking a waiver from one or more regulatory provisions. Such waivers are limited to those regulatory standards that are not specifically included in law (complete Appendix G-12).
15.  Our district has chosen to pay for breaks in activity for low-income families (non public assistance families, complete Appendix G-12).
16.  Our district has chosen to use local equivalent forms such as, but not limited to, child care application, client notification and/or legally exempt enrollment forms (attach copies of the local equivalent forms your district uses).

Any previous approvals for local equivalent forms will not be carried forward into this county plan. Therefore, any local equivalent forms a district wishes to establish or renew must be included in this plan and will be subject to review and approval by OCFS.

A local equivalent form Clinton County wishes to renew is the *Application for Child Care Assistance* which is included as the next four pages.



**CLINTON COUNTY DEPARTMENT OF SOCIAL SERVICES**  
**APPLICATION FOR CHILD CARE SERVICES**

Application Date \_\_\_\_\_ Worker: **DC** \_\_\_\_\_ Case Type: **40** District: **A09** Case Number: **S** \_\_\_\_\_ Service Trans. Type     
New Op Reop Recert

Case Name \_\_\_\_\_ Disposition: Denied  Reason Code  WD

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Residence Address \_\_\_\_\_ City \_\_\_\_\_, NY Zip Code: \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_ City \_\_\_\_\_, NY Zip Code: \_\_\_\_\_

Former Address \_\_\_\_\_ Another phone number where you can be reached \_\_\_\_\_ Marital Status \_\_\_\_\_

**List everyone who lives with you even if they are not applying. List yourself first.**

	First Name	M I	Last Name	Date Of Birth	Social Security Number (SSN) <i>Optional</i>	Sex  M or F	Does this person need child care?		Relation- Ship to You	Hispanic Or Latino?		Enter Y (Yes) or N (No) for each race*						
							Yes	No		Yes	No	I	A	B	P	W		
1.																		
2.																		
3.																		
4.																		
5.																		
6.																		
7.																		
8.																		

\*Race/Ethnic Codes: **I** – Native American or Alaskan Native, **A** – Asian, **B** – Black or African American, **P** – Native Hawaiian or Pacific Islander, **W** - White

Please list maiden or other names by which you or anyone in your household has been known	<b>First Name</b>	<b>MI</b>	<b>Last Name</b>

Are you currently receiving or applying for Temporary Assistance? Yes  No

Are you currently receiving or applying for other Child Care funding? Yes  No  If yes, name of agency: \_\_\_\_\_

*You may use the back page if you need more room or there is other information that you think we might need*

**List names of everyone under 21 and write in any information you currently have about the person's absent parent.**

Name of Person Under 21	Absent Parent's Name and Address	Absent Parent's Date of Birth <i>Optional</i>	Absent Parent's Social Security Number <i>Optional</i>

Do you need child care so you can work? Yes  No  If no, list reason child care is needed \_\_\_\_\_

Current Place of Employment? \_\_\_\_\_ Work Phone: \_\_\_\_\_  
*(If self-employed, list the name of your company)*

Start Date of Job: \_\_\_\_\_ Pay Rate per Hour: \_\_\_\_\_ Hours per Week: \_\_\_\_\_

Is this a job with rotating shifts? Yes  No  Are you required to work overtime? Yes  No

List the Schedule Days and Hours of Employment (e.g., Mon, through Fri. 8 am – 4 pm): \_\_\_\_\_

<b>INCOME – ANSWER ALL QUESTIONS LISTED BELOW</b>					
Indicate if you or someone who lives with you receives money from:	Yes	No	Gross Amount	Period (week, month, etc.)	Who Receives?
Employment/self-employment including overtime, Commissions, training programs, tips					
Child Support Payments (received)					
Alimony/Support (received)					
Unemployment Insurance Benefits					
Social Security Benefits (including SSI)					
Disability Benefits (NYS, VA, Private)					
Rental/Boarders/Lodgers Income (received)					
Other (please specify)					

**You may use this page if you need more room or there is other information that you think we might need.**



**READ THE IMPORTANT INFORMATION BELOW AND SIGN AT THE BOTTOM**

**PENALTIES** – Your application may be investigated. By signing this agreement you are consenting to cooperate in such investigation. **Federal and State laws provide for penalties of fine, imprisonment or both if you do not tell the truth when you apply for Child Care Services;** or at any time when you are questioned about your eligibility; or if you case someone else not to tell the truth regarding your application or continuing eligibility. Penalties also apply if you conceal or fail to disclose facts regarding your initial or continuing eligibility for Child Care Services; or if you conceal or fail to disclose facts that would affect the right of someone for whom you have applied to obtain or continue to receive Child Care Services; and such Child Care Services must be used for the other person and not yourself. It is unlawful to obtain Child Care Services by concealing information or providing false information.

**CHANGES** – I agree to inform the agency **immediately** of any change in my needs, income, property, living arrangement or address to the best of my knowledge or belief.

I agree to inform the agency promptly of any change in child care arrangements, including where child care is provided, who is providing care, providers fees, and hours for which child care is needed.

**CONSENT** – I understand that by signing this application form I agree to any investigation made by the Department of Social Services to verify or confirm the information I have given or any other investigation made by them in connection with my request for Child Care Services. If additional information is requested, I will provide it.

**NON-DISCRIMINATION NOTICE - This application will be considered without regard to race, color, sex, disability, religious creed, national origin or political belief.**

**CERTIFICATION OF CITIZENSHIP/ALIEN STATUS FOR CHILD CARE SERVICES – I swear and affirm under penalties of perjury, that all children who are seeking child care services** \_\_\_\_\_

*List the names of all the children who need child care services)*

**are United States (U.S.) citizens or nationals or persons with satisfactory immigration status.** I understand that information about my household may be submitted to the Immigration and Naturalization Service (INS) for verification of immigration status, if applicable. I further understand that the use or disclosure of information about household members including myself who are applying for or receiving Child Care Services is restricted to persons and organizations directly connected with the verification of immigration status and the administration or enforcement of provisions of the Child Care Services program.

**CERTIFICATION: I swear and/or affirm under the penalties of perjury that the information I have given or will give to the local Social Services district is correct.**

Applicant/Representative Signature	Date Signed	Husband/Wife Signature	Date Signed

*Please return to the address below:*

**Clinton County Department of Social Services  
Day Care Unit  
13 Durkee Street  
Plattsburgh, NY 12901**

**Phone: 565-3217 Fax: 565-3432**

**Use this area for additional information:**

**I CONSENT TO WITHDRAW MY APPLICATION. I understand I may reapply at any time.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

***For Agency Use Only***

Eligibility Determined by \_\_\_\_\_ Date \_\_\_\_\_

Eligibility Approved by \_\_\_\_\_ Date \_\_\_\_\_

Child Care Authorization Period: From \_\_\_\_\_ To \_\_\_\_\_

Comments:

**APPENDIX G-5  
PRIORITY POPULATIONS-ADDITIONAL LOCAL PRIORITIES**

In addition to the federal priorities of very low income families and families with children who have special needs, the following additional local priorities have been selected:

Category: Teen Parent Rank: 1  
Description: Adolescents in need of day care to attend high school are a priority population in Clinton County.

Category: Rank:  
Description:

Category: Rank:  
Description:

Category: Rank:  
Description:

Category: Rank:  
Description:

**APPENDIX G-7  
TITLE XX CHILD CARE**

Projected total Title XX expenditures for plan duration: \$5,000

Financial eligibility limits (percentage of State Income Standard) your district will apply based on family size. Maximum reimbursable limits are 275% for a family of 1 or 2, 255% for a family of 3, and 225% for a family of 4 or more. Districts that are utilizing Title XX funds only for child protective and/or preventive child care services must not enter financial eligibility limits as these services are offered without regard to income.

Family Size: (2) WR (3) WR (4) WR

Programmatic Eligibility for Income Eligible Families. (Check all that apply.)

- Title XX:  employment  education/training  
 seeking employment  illness/incapacity  
 homelessness  domestic violence  
 emergency situation of short duration  
 participating in an approved substance abuse treatment program

Does your district apply any limitations to the programmatic eligibility criteria?

Yes  No

(See Technical Assistance #1 for information on limiting eligibility.)

If yes, describe eligibility criteria:

Does your district prioritize certain eligible families for Title XX funding?

Yes  No

If yes, describe which families will receive priority:

Does your district use Title XX funds for child care for open child protective services cases?

Yes  No

Does your district use Title XX funds for child care for open child preventive services cases?

Yes  No

**APPENDIX G-8**  
**ADDITIONAL LOCAL STANDARDS FOR CHILD CARE PROVIDERS**

State law allows districts to propose local standards in addition to the State standards for providers who will receive child care subsidies.

1. Described below are the additional standards that will be required of providers as well as which providers must comply with each additional standard.

**Providers of legally exempt child care and all household members 18 years of age and older will be asked to sign a release which will allow our Department to conduct a local child welfare database check.**

**If a legally exempt provider or household member refuses to sign the release which, would allow our Department to conduct local database checks, our Department will inform the parent/caretaker of the refusal so that they can consider the refusal when they make a decision to select the provider. In these situations, parents will be reminded of their right to choose another provider and will be given information about how to locate other providers.**

**When a local database check reveals that a legally exempt providers and/or household member(s) 18 years of age and older are an indicated subject of a child abuse or maltreatment report they will be required to submit to our Department a written statement providing information concerning the indicated incident(s). This statement must be signed by the parent/caretaker acknowledging receipt of this information and the parent/caretaker's wish to use this child care provider.**

**If the information regarding the indicated child protective report does not correlate with the information obtained from the local data base check our Department will notify the provider that they have five calendar days to clarify the discrepancies in the information submitted to the Department and parent/caretaker. Within that five calendar day period the provider must submit information to our Department and the parent/caretaker that either correlates with the information obtained by our Department's local database check or the providers submits information to our Department which documents that the information obtained from the local database check is inaccurate. If the provider fails to clarify the discrepancies the district will notify the enrollment agency that the additional standard has not been met.**

**If the information given by the provider regarding the indicated child protective report correlates with the information obtained from the local database check the enrollment agency will be notified that the additional standard has been met. In some cases, our district will need to inform the parent that the parent's decision to place their child in the care of this provider would place their child at risk. As mandated reporters, the district is obligated to make a report of suspected child abuse or maltreatment if placing the child in the care of a provider would place the child in imminent danger of impairment and the parent/caretaker nevertheless places the child in provider's care. Parents will be informed of their right to chose an alternative provider and be given information about how to locate other providers.**

2. Described below are the methods and resources that will be utilized to determine that these additional standards are being met.

**Our district will provide the release, which will allow our Department to conduct a local welfare database check, in the enrollment package instructing the provider to return the enrollment package including the release to the enrollment agency. When the enrollment agency receives the signed release they will notify the district. Our district will initiate the local child welfare check and will use procedures outlined in number one after the enrollment agency has notified the district that they have received the signed release.**

**If the local welfare database check reveals an indicated child protective report the Day Care Unit staff will follow the procedures outlined in number one.**

3. Described below are the procedures the district will use to notify the Legally Exempt Caregiver Enrollment Agency as to whether or not the legally exempt providers are in compliance with the additional local standards. (Districts only need to describe this procedure if the additional local standard is applied to legally exempt child care providers.)

**The district will notify the enrollment agency in writing as to whether or not the additional standard has been met. The district will maintain a file, which will document the information used to determine if the standard has been met or not.**

4. Described below is the justification for each additional standard.

**To verify that the provider has given the parent/caretaker complete and accurate information about indicated child abuse and maltreatment reports.**

**APPENDIX G-9  
PAYMENT TO CHILD CARE PROVIDERS FOR ABSENCES**

The following providers are eligible for payment for absences:  
(Check any that are eligible)

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Day Care Center       | <input checked="" type="checkbox"/> School Age Child Care |
| <input checked="" type="checkbox"/> Group Family Day Care | <input checked="" type="checkbox"/> Family Day Care       |
| <input type="checkbox"/> Legally Exempt Group             |   |

Our district will only pay for absences to providers with which the district has a Contract or letter of intent\*.  Yes  No

Base period selected (check one)  3 months  6 months

Number of absences allowed during base period:

Period	Routine Limits (# of days)	Extenuating Circumstances (# of days)	Total Number of Absences Allowed (# of days)
In a month	12	3	15
Base period	12	8	20

List reasons for absences for which the district will allow payment:

Illness, medical appointments, homelessness, court.

List any limitations on the above providers' eligibility for payment for absences:

No payment will be made for absences when the child care provider is closed and not available.

Note: Legally exempt family child care and in-home child care providers are **not** eligible to receive payment for absences.



**APPENDIX G-11**  
**TRANSPORTATION, DIFFERENTIAL PAYMENT RATES, ENHANCED MARKET RATES FOR LEGALLY EXEMPT, SLEEP**

**Transportation**

Describe below under what circumstances and limitations if any your district will use to reimburse for transportation, what type of transportation will be reimbursed (public vs. private), and how much your district will pay (per mile or trip). Note if paying for transportation, Appendix F will need to reflect this choice.

N/A

**Differential Payment Rates**

Indicate below the percentage above the market rate your district has chosen.

Accredited Programs may receive a differential payment up to \_\_\_\_\_ percent above market rate. N/A

Care during non-traditional hours may be paid up to 15 percent above market rate.

Limitations to the above differentials are as follows:

Non-traditional hours are defined as weekends and the night shift (10 pm – 6 am).

Payments may not exceed 15 percent above market rate. However, if your district wishes to establish a payment rate that is in excess of 15 percent above the applicable market rate you must describe below why the 15 percent maximum is insufficient to provide access within the district to accredited programs and/or care provided during non-traditional hours.

N/A

## **Enhanced Market Rate For Legally-Exempt Family and In-Home Child Care Providers**

If a district elects to establish a payment rate that is in excess of the enhanced market rate for legally- exempt family and in-home child care providers who have annually completed 10 or more hours of training and the training has been verified by the legally-exempt care giver enrollment agency. The district must state the percentage above the market rate it proposes to use.

Our district is requesting to increase the legally-exempt enhanced market rate up to 75 percent of the applicable registered family day care market rate. Market rate may not exceed 75 percent (75%) of the child care market rates established for registered family day care.

A district that selects the option to increase the legally-exempt enhanced market rate must select one of the options listed below for implementation of the legally-exempt enhanced market rate:

for all legally-exempt family and in-home child care providers that have been approved by the applicable legally-exempt caregiver enrollment agency; or

for those legally-exempt family and in-home child care providers who were receiving the enhanced rate on the date of the regulations, but only for the remainder of their current one-year enrollment period; or

for those legally-exempt family and in-home child care providers who were receiving the enhanced rate on the date of the regulations, for the remainder of the time they remain enrolled and continue to meet the ten-hour annual training requirement.

## **Sleep**

The following describes the standards that will be used in evaluating whether or not to pay for child care services while a parent or caretaker that works a second or third shift sleeps and any limitations pertaining to payment:

Parents with pre-school children during the school year and parents with school age or pre-school children during the summer and school vacations are eligible to apply for extended day care to sleep (no more than eight hours) when no other reasonable arrangements are available.

**APPENDIX G-12**  
**CHILD CARE EXCEEDING 24 HOURS, CHILD CARE SERVICES UNIT, WAIVERS,**  
**BREAKS IN ACTIVITIES**

**Child Care Exceeding 24 Hours\***

Child care services may exceed 24 consecutive hours when such services are provided on a short-term emergency basis or in other cases where the caretaker's approved activity necessitates care for 24 hours on a limited basis.

Describe any limitations for payment of child care services that exceed 24 consecutive hours.

A limit of 72 hours per emergency.

**Child Care Services Unit\***

The Child Care Service Unit is the basis upon which a district will determine which household and/or family should be counted in determining family size and countable family income.

Our district will include the following in the Child Care Services Unit (check which ones apply).

18 year old       19 year old       20 year old

Our district will include only the following in the Child Care Services Unit when it will benefit the family (check which ones apply).

18 year old       19 year old       20 year old

Describe the criteria your district will use to determine whether or not an 18, 19 or 20 year old is included in the Child Care Services Unit.

A new determination will be made in an event of a change in family circumstances to benefit the family.

**Waivers\***

Districts have the authority to request a waiver for any regulatory provision that is non-statutory. Describe and justify why your district is requesting a waiver.

### **Breaks in Activities**

Districts may pay for child care services for low income families during breaks in activities for a period not to exceed two weeks or for a period not to exceed one month where child care arrangements would otherwise be lost and the subsequent activity is expected to be within that period (check one).

two weeks       four weeks

Districts may provide child care services while the caretaker is waiting to enter an approved activity or employment or on a break between approved activities. The following low income families are eligible for child care services during a break in activities (check any that are eligible):

entering an activity       waiting to begin employment       break between activities

**APPENDIX H  
ANNUAL PLAN UPDATE  
CHECKLIST**

**ADMINISTRATIVE COMPONENT – LOCAL DEPARTMENT OF SOCIAL SERVICES**

**CLINTON County**

All Local Department of Social Services are required to complete this checklist. For each item below, please indicate by marking “YES” or “NO” whether there are any changes to report. For each item that is answered “Yes” or where a “NO” response is not an option, a written response is required clearly indicating what has changed and reason for the change. Responses should be attached on separate page and added at the end of this appendix.

<u>YES</u>	<u>NO</u>	
		I. Financing Process
<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. General Information
<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Purchase of Services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Performance or Outcome Based Provisions
<input type="checkbox"/>	<input checked="" type="checkbox"/>	II. Monitoring Procedures
		III. Appendices
<input checked="" type="checkbox"/>	<input type="checkbox"/>	a. Appendix A – Legal Assurances
<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Appendix B – Summary of Memorandum of Understanding with the District Attorney’s Office for Child Protective Services (Check “No” if the memorandum is current, designates suitable locations for abandoned infants and there are no changes since the last CFSP or APU.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Appendix C – Estimate of Persons to be Served
<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Appendix D – Non-Residential Services to Victims of Domestic Violence
<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Appendix E – Chafee Foster Care Independence Program Use of Allocations
<input checked="" type="checkbox"/>	<input type="checkbox"/>	f. Appendix F – Department of Social Services – Program Information Matrix
		g. Appendix G – Child Care
<input checked="" type="checkbox"/>	<input type="checkbox"/>	1. Appendix G-1 – Administration
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. Appendix G-2 – Other Eligible Families if Funds are Available
<input type="checkbox"/>	<input checked="" type="checkbox"/>	3. Appendix G-3 – Reasonable Distance, Very Low Income, Family Share, Case Closings and Case Openings, and Fraud and Abuse Control Activities
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Appendix G-4 – Districts Options
<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Appendix G-5 – Priority Populations
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Appendix G-6 – Funding Set-Asides
<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Appendix G-7 – Title XX Child Care
<input type="checkbox"/>	<input checked="" type="checkbox"/>	8. Appendix G-8 – Additional Local Standards for Child Care Providers
<input type="checkbox"/>	<input checked="" type="checkbox"/>	9. Appendix G-9 – Payment to Child Care Providers for Absences

- 10. Appendix G-10 – Payment for Child Care Providers for Program Closures
- 11. Appendix G-11 – Transportation, Differential Payment Rates, and Sleep
- 12. Appendix G-12 – Child Care Exceeding 24 Hours, Child Care Service Unit, Waivers, Break in Activities