

**APPENDIX G-1
CHILD CARE SECTION
2011 APU**

County: Greene

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 / Employment Unit
Transitioning Families:	Day Care / Employment Unit
Income Eligible Families:	Day Care / Employment Unit
Title XX:	Day Care / Employment Unit

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

Estimate of Rollover Funds for FFY 08-09	\$33,832.00
Estimate of Flexible Funds for Families (FFFS) for child care subsidies	\$0
NYSCCBG Allocation for SFY 09-10	\$447,650.00
Estimate of Local Share	\$38,000.00

Total Estimated NYSCCBG Amount: \$485,650.00

A. Subsidy	\$305,650.00
B. Other program costs (excluding subsidy)	\$0.00
C. Administrative costs	\$180,000.00

3. Does your district have a contract or formal agreement with another organization to perform any of the following functions?

<u>Function:</u>	<u>Organization:</u>	<u>Amount of Contract:</u>
<input type="checkbox"/> Eligibility screening		
<input checked="" type="checkbox"/> Screening of legally-exempt providers	Child Care Council of Columbia / Green	\$33,000.00
<input type="checkbox"/> Assistance in locating care		
<input type="checkbox"/> Child Care Information Systems		
<input type="checkbox"/> Other		

APPENDIX G-2

II. Other Eligible Families if Funds are Available (Required Section)

Listed 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 when the caretaker is:		
a) participating in an approved substance abuse treatment program.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Up to 180 days
b) homeless	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Up to 120 days
c) a victim of domestic violence	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Up to 120 days
d) in an emergency situation of short duration	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Up to 120 days
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	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Incapacitation needs to be verified
b) has family duties away from home	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to actively seek employment for a period up to 6 months.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Only if enrolled in an employment seeking program

<p>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.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>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:</p>		
<p>a) a public or private educational facility providing a standard high school curriculum offered by or approved by the local school district</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>b) an education program that prepares an individual to obtain a NYS High School equivalency diploma</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>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</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>d) a program providing literacy training designed to help individuals improve their ability to read and write;</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>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</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>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</p>	<input checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>h) a prevocational skill training program such as, a basic education and literacy training program</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

<p>i) a demonstration project designed for vocational training or other project approved by the Department of Labor.</p> <p>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 one program.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>8. PA recipients and low income families with incomes 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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

APPENDIX G-3

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

Reasonable Distance

Your district is required to define reasonable distance based on community standards for determining accessible child care.

The following defines "reasonable distance": **“Child care is accessible when travel distance is no more than one hour between the site of an appropriate child care provider and the participant’s home, the child’s school or the participant’s employment/work activity location. The one-hour of travel is defined as any means of transportation including, but not limited to, walking, public transportation, shuttle service or use of a personal vehicle. Appropriate child care will be considered available when a Temporary Assistance to Needy Families (TANF) recipient identifies a provider on their own or the agency provides a referral to the Child Care Council resulting in a minimum of two referrals meeting the criteria above.”**

Describe any steps/consultations made to arrive at your definition: **This definition was reached after consultation and discussion with representatives from the Greene County Temporary Assistance Unit, Department of Labor, Child Care Council and Community Action Transportation Unit.**

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 **200%** 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% to 35% 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 annual gross income that is in excess of the State Income Standard divided by 52.

Family Share Percentage selected by our district **35%**.

Case Closings (select one or two)

1. 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.

Should Day Care funding become limited or unavailable, Greene County will close the following cases:

- a. **Family Income 200%-225%**
- b. **Family Income 175%-200%**
- c. **Family Income 150%-175%**
- d. **Family Income 125%-150%**
- e. **Family Income 100%-125%**

2. The district has not established priorities beyond the federally-mandated priorities. If all NYSCCBG funds are committed, case closings for families which are not eligible under a child care guarantee and are not a federally-mandated priority must be based on the length of time in receipt of services. The length of time used to close cases may be based either on the shortest or longest time receiving child care services but must be consistent for all families. The district has chosen to close cases based on:

- shortest time receiving child care services
- longest time receiving child care services

Case Openings

The district must describe below how priority is given to federally mandated priorities and how the district will select cases to be opened in the event that there are insufficient funds available.

- a. **Family Income 100%-125%**
- b. **Family Income 125%-150%**
- c. **Family Income 150%-175%**
- d. **Family Income 175%-200%**
- e. **Family Income 200%-225%**

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.

County Greene County Date _____

FRONT END DETECTION SYSTEM (FEDS) PLAN OF OPERATION

If an application has one or more of the indicators checked below on the district's approved FEDS plan, and the eligibility worker is not confident that an indicator has been explained or supported adequately, the application must be referred for a FEDS investigation. The wording of each indicator must appear exactly on the FEDS plan as well as the FEDS referral process/form.

Section 1-State Mandated Indicators

all district plans must include these indicators:

- (X) Financial obligations are current, but stated expenses exceed income *without a reasonable explanation***
- (X) Working off the books (currently or previously)**
- (X) Supported by loans or gifts from family/friends**
- (X) Application is inconsistent with prior case information**
- (X) Prior history of denial, case closing, or overpayment *resulting from an investigation.***

Section 2 – State-Approved Optional Indicators

This section may be left blank if a county chooses not to select any of these optional indicators for its FEDS process. If the district chooses to include any or all of these optional indicators in its plan, eligibility workers must also refer to FEDS any applications with these indicators:

- (X) No absent parent information or information is inconsistent with application
- (X) No documentation to verify identity or documentation of identity is questionable
- (X) Landlord does not verify HH composition or provides information inconsistent with application
- (X) Self-employed but *without adequate business records* to support financial assertions
- (X) Alien with questionable or no documentation to substantiate immigration status
- (X) Documents or information provided are inconsistent with application, such as different name used for signature or invalid SSN
- (X) P.O. Box is used as a mailing address *without a reasonable explanation*, e.g., high crime area
- (X) Primary tenant with no utility bills (e.g., phone or electric) in his/her name
- (X) Children under the age of six with no birth certificates available
- (X) Unsure of own address

Section 3 – State-Approved County-Specific Indicators

Eligibility workers are not allowed to refer cases based on an “other” box that they fill in for each FEDS referral. Indicators listed and checked here must be pre-approved by the State and must be pre-filled on the district’s FEDS referral process/form. This section may be left blank if a district chooses not to create any county-specific indicators for their FEDS process. Once the State approves this indicator, eligibility workers must also refer to FEDS any applications with these indicators:

- (X) County-Specific Indicator: **Moved into Greene County within the last six months**
- (XI) County-Specific Indicator: **Homeless at time of application**

Section 4 – Description of FEDS Process - Please describe your FEDS process:

a. **Specify what program areas will use FEDS:**

TA FS Medicaid CC _____ **Other**
(specify)

b. **Describe how an application will be referred by the eligibility worker to the investigative unit. Include if this is a manual, e-mail or automated process, and if there is eligibility supervisory review. OTDA strongly encourages eligibility supervisory review.**

FEDS criteria are reviewed at each eligibility interview by the eligibility examiner. Appropriate FEDS referral is completed and all applicable documentation is attached. Eligibility examiner signs and dates referral. Supervisor then reviews, signs and dates referral and delivers it to the Fraud Unit.

c. **Describe how the investigative unit logs and tracks the referral, as well as how it processes it (i.e., home visit, collateral contact, office interview, etc.).**

Resource Consultant logs referral, assigns and tracks for timeliness. Investigator must complete the investigation within 10 days. The investigation may include a home visit and collateral contacts. The investigator will complete a written response on the reverse side of the referral and attach all appropriate documentation. When extenuating circumstances exist and the investigation is not completed in ten days, the investigator will review with Resource Consultant and investigation period will be extended, if approved by Eligibility Supervisor. When investigation is completed, investigator gives completed referral to the Resource Consultant who signs, dates, and logs results. Resource Consultant then gives completed referral to the Eligibility Supervisor.

d. **Specify the targeted time frames for reporting investigative results back to the eligibility worker for final determination.**

The investigator must complete the investigation within 10 days.

- e. **If your district contracts out for investigations, such as with a local sheriff's department, explain this process and staffing and identify the contractor.**

Our district does not contract out for investigations.

- f. **Describe how and when the investigative unit is informed of the final action taken on the application, for inclusion in the FEDS monthly report.**

The Eligibility examiner completes the back of the FEDS referral upon case disposition and the Supervisor returns the copy to the Fraud Unit as case is completed. Resource Consultant logs results for inclusion in the monthly FEDS report.

- g. **Attach copies of:**

- **Any letter used to inform an applicant of a FEDS interview or home visit**
- **Any letter used to inform an applicant that they may be investigated for FEDS**
- **The FEDS referral form**
- **Any other FEDS form that passes between eligibility and investigations, such as a report of investigation**

WE DO NOT SEND THE APPLICANT A LETTER PRIOR TO AN INTERVIEW OR HOME VISIT.

This Plan was completed by (please print): ___Tammi McGrath

Title: Resource Consultant_____

Email Address: **Tammi.McGrath@dfa.state.ny.us** **Phone:** **_518-719-3730**_____

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.

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.



**NEW YORK STATE
OFFICE OF TEMPORARY AND DISABILITY
ASSISTANCE
Riverview Center, 4th Floor
40 N. Pearl Street
Albany, New York 12243**

**George E. Pataki
Governor**

**Robert Doar
Commissioner**

July 10, 2006

Ms. Mary Zindell
Resource Consultant
Greene County DSS
PO Box 528, 411 Main Street
Catskill, NY 12414

Dear Mary:

This letter will serve as approval of Greene County's revised FEDS plan for Temporary Assistance and Food Stamps and also for the EVR plan for Temporary Assistance and Food Stamps. We will forward these approved plans to State DOH for the Medicaid portions of these plans and State OCFS for the Child Care portions of your plans, and you will hear from those agencies directly.

Regarding implementation of your revised FEDS and EVR plans, we encourage you to continue to maintain a good relationship between your eligibility workers and supervisors and investigators and to share the plans with them. In order to be successful, the FEDS process must have eligibility workers, supervisors and investigators who understand the function of each indicator, as well as the FEDS process itself. We offer the following tools for Greene County's staff, to assist in understanding and maintaining a good FEDS process:

- The FEDS ADM, 05 ADM-08
- The FEDS pc learning module, which can be accessed through the following link:
www.trainingspace.org
- The Fall 2006 NYWFIA regional meetings (FEDS will be discussed).

As you know, we recently converted to an automated report for FEDS—please call me if you have any questions about what to report, or anything else regarding FEDS. I can be contacted at (518) 402-0127 or at maria.schollenberger@otda.state.ny.us.

We appreciate very much the time and effort you put into revising your plan, as well as your patience during the review process. We also thank you for helping to maintain the integrity of Temporary Assistance and Food Stamps in New York State.

Sincerely,

MS /s/

Maria Schollenberger
FEDS Project Director

Greene County Attachments
cc: Commissioner Pospesel
Jean Shannon, DOH
David Dorpfeld, OCFS

CASE NAME _____ SS # _____ CASE # _____ TA , SN , FS , MA, CHILD CARE _____
 (Circle which applies)

ADDRESS _____ DIRECTIONS _____

HOUSEHOLD COMPOSITION	D.O.B.

YEAR	COLOR	VEHICLE (TYPE/MODEL)

FEDS

INCOME/RESOURCE	
	FINANCIAL OBLIGATIONS ARE CURRENT, BUT STATED EXPENSES EXCEED INCOME <i>WITHOUT A REASONABLE EXPLANATION</i>
	WORKING OFF THE BOOKS (<i>CURRENTLY OR PREVIOUSLY</i>)
	SELF-EMPLOYED BUT <i>WITHOUT ADEQUATE BUSINESS RECORDS</i> TO SUPPORT FINANCIAL ASSERTIONS
	SUPPORTED BY LOANS OR GIFTS FROM FAMILY / FRIENDS

IDENTITY STATUS	
	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 OR INVALID SSN
	ALIEN WITH QUESTIONABLE OR NO DOCUMENTATION TO SUBSTANTIATE IMMIGRATION STATUS

RESIDENCE	
	PO BOX USED AS A MAILING ADDRESS <i>WITHOUT A REASONABLE EXPLANATION</i> , e.g., HIGH CRIME AREA
	LANDLORD DOES NOT VERIFY HOUSEHOLD COMPOSITION OR PROVIDES INFORMATION INCONSISTENT WITH APPLICATION
	PRIMARY TENANT WITH NO UTILITY BILLS (e.g., PHONE OR ELECTRIC) IN HIS / HER NAME
	UNSURE OF OWN ADDRESS
	OTHER: MOVED INTO GREENE CO. WITHIN THE LAST 6 MONTHS
	OTHER: HOMELESS AT TIME OF APPLICATION

OTHER	
	CHILDREN UNDER THE AGE OF SIX WITH NO BIRTH CERTIFICATES AVAILABLE
	NO ABSENT PARENT INFORMATION OR INFORMATION IS INCONSISTENT WITH APPLICATION
	PRIOR HISTORY OF DENIAL, CASE CLOSING, OR OVERPAYMENTS <i>RESULTING FROM AN INVESTIGATION</i>

EVR

(APPLICATION FOR TA/FS/MA/CC WHO DO NOT MEET A FEDS INDICATOR – RECERTS WHERE RECIPIENTS’ EXPENSES EXCEED INCOME AND BILLS ARE PAID TO DATE – TA/FS SANCTIONED EMPLOYABLES)

EVR INVESTIGATION REQUEST

APPLICATION / RECERTIFICATION DATE

(SPECIFY ALLEGATION ON REVERSE)

FRAUD

FRAUD INVESTIGATION REQUEST

ALLEGATION: (To be completed by Examiner)

FRAUD UNIT RESPONSE

INVESTIGATOR _____ DATE _____ SUPERVISOR _____ DATE _____

INCOME MAINTENANCE RESPONSE - FEDS / EVR

DATE DENIED _____

DATE OPENED _____

DATE REDUCED BENEFITS _____

DATE WITHDRAWN _____

DATE OTHER _____

REASON:

APPENDIX G-4

IV. 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). (*amended 5/8/07*)
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 Appendix G-12).

APPENDIX G-4 (continued)

- 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.

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

Projected total Title XX expenditures for plan duration: **\$ 5,000.00**

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) **225%** (3) **225%** (4) **225%**

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

The district may propose local standards in addition to the State standards for providers who will receive child care subsidies.

1. Described below are the additional local 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 the Greene County Department of Social Services to conduct a local welfare database check.

If a legally exempt provider or household member refuses to sign the release, which would allow Greene County Department of Social Services to conduct local database checks, the 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 this situation, 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 provider and/or household member(s) age 18 years of age and older are an indicated subject of a child abuse or maltreatment report the proposed provider will be required to submit to Greene County Department of Social Services 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 database 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 the Department's local database check or the provider submits information obtained by 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 regarding the indicated child protective report correlates with the information obtained from the local database check and there are no other health or safety concerns and the parent/caretaker still chooses to use the provider, 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 the provider's care, parents will be informed of their right to choose an alternative provider and be given information about how to locate other providers.

If the local database check reveals that the provider has an active or open preventive case the Department will not recommend enrollment unless the CPS or Preventive Supervisor approves. The Supervisor will review if the provision of child care by the provider/preventive service recipient would cause health and safety concern for the children. All assessments would need to be completed within a 10 day period of the provider's enrollment request.

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

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 the Greene County Department of Social Services to conduct a local welfare database check.

If a legally exempt provider or household member refuses to sign the release, which would allow Greene County Department of Social Services to conduct local database checks, the 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 this situation, 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 provider and/or household member(s) age 18 years of age and older are an indicated subject of a child abuse or maltreatment report the proposed provider will be required to submit to Greene County Department of Social Services 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 database 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 the Department's local database check or the provider submits information obtained by 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 regarding the indicated child protective report correlates with the information obtained from the local database check and there are no other health or safety concerns and the parent/caretaker still chooses to use the provider, 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 the provider's care, parents will be informed of their right to choose an alternative provider and be given information about how to locate other providers.

If the local database check reveals that the provider has an active or open preventive case the Department will not recommend enrollment unless the CPS or Preventive Supervisor approves. The Supervisor will review if the provision of child care by the provider/preventive service recipient would cause health and safety concern for the children. All assessments would need to be completed within a 10 day period of the provider's enrollment request.

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 provider is 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 or email 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 insure information that could affect the safety of the children in legally exempt childcare settings is shared. The Greene County Department of Social Services wants to make sure that providers have told parents about known child protective histories. In rare situations, providers are deemed unsafe to be around any children by the Family and Children Services Units due to a serious child abuse history and the Department wants to make sure parents have a chance to make educated decisions about using providers.

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

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

- Day Care Center Legally Exempt Group
 Group Family Day Care School Age Child Care
 Family Day Care

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	4	3	7
Base period	24	16	40

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

Child is absent due to illness which includes caretaker/relative.

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

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.

Differential Payment Rates

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

Accredited Programs may receive a differential payment up to _____ % above market rate.

Care during non-traditional hours may be paid up to _____ % above market rate.

Limitations to the above differentials are as follows:

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

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 _____ 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:

Indicate the number of hours allowed by your district (maximum number of hours allowed is eight). **eight**

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.

Child Care Services Unit

The Child Care Service Unit is the basis upon which a district will determine which household and/or family members 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

-OR-

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.

Waivers

Districts have the authority to request a waiver of 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 begin 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
2011 ANNUAL PLAN UPDATE
CHECKLIST
ADMINISTRATIVE COMPONENT – LOCAL DEPARTMENT OF SOCIAL SERVICES**

Greene 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 checked="" type="checkbox"/> | <input 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 type="checkbox"/> | <input checked="" 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 checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Appendix G-9 – Payment to Child Care Providers for Absences |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10. Appendix G-10 – Payment for Child Care Providers for Program Closures |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. Appendix G-11 – Transportation, Differential Payment Rates, and Sleep |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. Appendix G-12 – Child Care Exceeding 24 Hours, Child Care Service Unit, Waivers, Break in Activities |