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**Child Care and Development Fund (CCDF) Plan  
for  
State/Territory Montana**

**FFY 2025 – 2027**

**Version: Initial Plan**

**Plan Status: Approved as of 2024-11-09 00:34:15 GMT**

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/01/2024 to 9/30/2027, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Lead Agency acknowledges its responsibility to adhere to the applicable laws regardless of these modifications.

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## Overview

### *Introduction*

The Child Care and Development Block Grant Act (CCDBG) (42 U.S.C. 9857 *et seq.*), together with section 418 of the Social Security Act (42 U.S.C. 618), authorize the Child Care and Development Fund (CCDF), the primary federal funding source devoted to supporting families with low incomes afford child care and increasing the quality of child care for all children. The CCDF program is administered by the Office of Child Care (OCC) within the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services and provides resources to State, Territory, and Tribal governments via their designated CCDF Lead Agency.

CCDF plays a vital role in supporting family well-being and child development; facilitating parental employment, training, and education; improving the economic well-being of participating families; and promoting safe high-quality care and learning environments for children when out of their parents' care.

As required by CCDBG, this CCDF Plan serves as the State/Territory Lead Agency's application for a three-year cycle of CCDF funds and is the primary mechanism OCC uses to determine Lead Agency compliance with the requirements of the statute and regulations. CCDF Lead Agencies must comply with the rules set forth in CCDBG and corresponding ACF-issued rules and regulations. The CCDF Plan is a fundamental part of OCC's oversight of CCDF and is designed to align with and complement other oversight mechanisms including administrative and financial data reporting, the monitoring process, error rate reporting, audits, and the annual Quality Progress Report.

### *Organization of Plan*

In their CCDF Plans, State/Territory Lead Agencies must describe how they implement the CCDF program. The Plan is organized into the following sections:

1. CCDF Program Administration
2. Child and Family Eligibility and Enrollment and Continuity of Care
3. Child Care Affordability
4. Parental Choice, Equal Access, Payment Rates, and Payment Practices
5. Health and Safety of Child Care Settings
6. Support for a Skilled, Qualified, and Compensated Child Care Workforce
7. Quality Improvement Activities
8. Lead Agency Coordination and Partnerships to Support Service Delivery
9. Family Outreach and Consumer Education
10. Program Integrity and Accountability

### *Completing the Plan*

This revised Plan aims to capture the most accurate and up-to-date information about how a State/Territory is implementing its CCDF program in compliance with the requirements of CCDF. In responding to plan questions, Lead Agencies should provide concise and specific summaries and/or bullet points as appropriate to the question. Do not insert tables or charts, add attachments, or copy manuals into the Plan. A State/Territory's CCDF Plan is intended to stand on its own with sufficient information to describe how the Lead Agency is implementing its CCDF program without need for added attachments, tables, charts, or State manuals.

OCC recognizes that Lead Agencies use different mechanisms to establish CCDF policies, such as State statute, regulations, administrative rules, policy manuals, or policy issuances. Lead Agencies must submit their CCDF Plan no later than July 1, 2024.

#### *Review and Amendment Process*

OCC will review submitted CCDF Plans for completeness and compliance with federal policies. Each Lead Agency will receive a letter approximately 90 days after the Plan is due that includes all Plan non-compliances to be addressed. OCC recognizes that Lead Agencies continue to modify and adapt their programs to address evolving needs and priorities. Lead Agencies must submit amendments to their Plans as they make substantial policy and program changes during the three-year plan cycle, including when addressing non-compliances.

#### *Appendix 1: Implementation Plan*

As part of the Plan review process, if OCC identifies any CCDF requirements that are not fully implemented, OCC will communicate a preliminary notice of non-compliance for those requirements via an emailed letter. OCC has created a standardized template for Lead Agencies to submit as their 60-day response to that preliminary notice. This template is found at Appendix 1: Lead Agency Implementation Plan. This required response via the Appendix will help create a shared understanding between OCC and the Lead Agency on which elements of a requirement are unmet, how they are unmet, and the Lead Agency's steps and associated timelines needed to fully implement those unmet elements.

#### *CCDF Plan Submission*

CCDF Lead Agencies will submit their Plans electronically through the Child Care Automated Reporting System (CARS). CARS will include all language and questions included in the final CCDF Plan template approved by the Office of Management and Budget (OMB). Note that the format of the questions in CARS could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities.

## 1 CCDF Program Administration

Strong organizational structures, operational capacity, and partnerships position States and Territories to administer CCDF efficiently, effectively, and collaboratively.

This section identifies the CCDF Lead Agency, CCDF Lead Agency leadership, and the entities and individuals who will participate in the implementation of the program. It also identifies the partners who were consulted to develop the Plan.

## 1.1 CCDF Leadership

The governor of a State or Territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the State or Territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications.

### 1.1.1 Designated Lead Agency

Identify the Lead Agency or joint interagency office designated by the State or Territory. OCC will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here.

- a. Lead Agency or Joint Interagency Office Information:
  - i. Name of Lead Agency: **Department of Health and Human Services**
  - ii. Street Address: **1625 11th Ave.**
  - iii. City: **Helena**
  - iv. State: **Montana**
  - v. ZIP Code: **59601**
  - vi. Web Address for Lead Agency: **<https://dphhs.mt.gov>**
- b. Lead Agency or Joint Interagency Official contact information:
  - i. Lead Agency Official First Name: **Charles**
  - ii. Lead Agency Official Last Name: **Brereton**
  - iii. Title: **Director**
  - iv. Phone Number: **406-444-5623**
  - v. Email Address: **Charles.brereton@mt.gov**

### 1.1.2 CCDF Administrator

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

- a. CCDF Administrator contact information:
  - i. CCDF Administrator First Name: **Jody**

- ii. CCDF Administrator Last Name: **Lehman**
  - iii. Title of the CCDF Administrator: **Bureau Chief, Child Care Bureau**
  - iv. Phone Number: **(406) 444-3928**
  - v. Email Address: **joseph.lehman@mt.gov**
- b. CCDF Co-Administrator contact information (if applicable):
- i. CCDF Co-Administrator First Name: **Jill**
  - ii. CCDF Co-Administrator Last Name: **Christensen**
  - iii. Title of the CCDF Co-Administrator: **Bureau Chief, Early Childhood Services Bureau**
  - iv. Phone Number: **(406) 444-0309**
  - v. Email Address: **Jill.Christensen@mt.gov**
  - vi. Description of the Role of the Co-Administrator: **CCDF quality oversight**

## 1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as the Lead Agency retains overall responsibility for the administration of the program. Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

### 1.2.1 Entity establishing CCDF program rules

Which of the following CCDF program rules and policies are administered (i.e., set or established) at the State or Territory level or local level? Identify whether CCDF program rules and policies are established by the State or Territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards.

Check one of the following:

- a.  All program rules and policies are set or established by the State or Territory. (If checked, skip to question 1.2.2.)
- b.  Some or all program rules and policies are set or established by local entities or agencies. If checked, indicate which entities establish the following policies. Check all that apply:
  - i. Eligibility rules and policies (e.g., income limits) are set by the:
    - State or Territory.
    - Local entity (e.g., counties, workforce boards, early learning coalitions).
    - Other. Identify the entity and describe the policies the entity can set:
  - ii. Sliding-fee scale is set by the:
    - State or Territory.

- Local entity (e.g., counties, workforce boards, early learning coalitions).
- Other. Identify the entity and describe the policies the entity can set:
- iii. Payment rates and payment policies are set by the:
  - State or Territory.
  - Local entity (e.g., counties, workforce boards, early learning coalitions).
  - Other. Identify the entity and describe the policies the entity can set:
- iv. Licensing standards and processes are set by the:
  - State or Territory.
  - Local entity (e.g., counties, workforce boards, early learning coalitions).
  - Other. Identify the entity and describe the policies the entity can set:
- v. Standards and monitoring processes for license-exempt providers are set by the:
  - State or Territory.
  - Local entity (e.g., counties, workforce boards, early learning coalitions).
  - Other. Identify the entity and describe the policies the entity can set:
- vi. Quality improvement activities, including QIS, are set by the:
  - State or Territory.
  - Local entity (e.g., counties, workforce boards, early learning coalitions).
  - Other. Identify the entity and describe the policies the entity can set:
- vii. Other. List and describe any other program rules and policies that are set at a level other than the State or Territory level:

1.2.2 Entities implementing CCDF services

The Lead Agency has broad authority to operate (i.e., implement activities) through other agencies, as long as it retains overall responsibility for CCDF. Complete the table below to identify which entity(ies) implements or performs CCDF services.

Check the box(es) to indicate which entity(ies) implement or perform CCDF services.

CCDF Activity	CCDF Lead Agency	TANF Agency	Local Government Agencies	CCR&R	Other
Who conducts eligibility determinations?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Describe: Consumer education is available from scholarship service contractors.



CCDF Activity	CCDF Lead Agency	TANF Agency	Local Government Agencies	CCR&R	Other
Who assists parents in locating child care (consumer education)?	[x]	[x]	[ ]	[ ]	[x] Describe: Consumer education is available from scholarship service contractors.
Who issues payments?	[x]	[ ]	[ ]	[ ]	[ ] Describe:
Who monitors licensed providers?	[x]	[ ]	[ ]	[ ]	[ ] Describe:
Who monitors license-exempt providers?	[x]	[ ]	[ ]	[ ]	[ ] Describe:
Who operates the quality improvement activities?	[x]	[ ]	[ ]	[ ]	[ ] Describe:

### 1.2.3 Information systems availability

For any activities performed by agencies other than the Lead Agency as reported above in 1.2.1 and 1.2.2, identify the processes the Lead Agency uses to oversee and monitor CCDF administration and implementation activities to retain overall responsibility for the CCDF program.

Check and describe how the Lead Agency includes in its written agreements the required elements. Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project but must include, at a minimum, the elements below.

#### a. Tasks to be performed.

[x] Yes. If yes, describe: **The Lead Agency has contracted CCDF eligibility scholarship services, which include consumer education and referrals for families participating in the Temporary for Needy Families (TANF) and families involved with the Child and Family Services Division (CFSD) of the Department of Public Health and Human Services (DPHHS). The TANF program is managed by the Human and Community Services Division (HCSD) of the DPHHS. Consumer education for parents in locating child care is provided by the scholarship services contractors. 1) For scholarship services contractors, the Lead Agency has a contract and monitors the agency to ensure eligibility determination and consumer education for parents in locating child care. 2) For the TANF program, the Lead Agency works with HCSD to ensure referrals to the scholarship services are received and processed. 3) For referrals from CFSD, the Lead Agency works with CFSD to ensure referrals to the scholarship services are received and processed.**

No. If no, describe:

- b. Schedule for completing tasks.

Yes. If yes, describe: **1) For scholarship services contractors, the Lead Agency has monthly meetings, quarterly data reporting, and annual monitoring. 2) For the TANF program, the Lead Agency meets with HCSD and TANF contractor quarterly. 3) For referrals from CFSD, the Lead Agency meets CFSD quarterly.**

No. If no, describe:

- c. Budget which itemizes categorical expenditures in accordance with CCDF requirements.

Yes. If yes, describe: **1) For scholarship services contractors are funded through CCDF funds to provide services. 2) The TANF contractor is funded through TANF funds to provide services. 3) CFSD is funded through the state general fund to provide services.**

No. If no, describe:

- d. Indicators or measures to assess performance of those agencies.

Yes. If yes, describe: **1) Scholarship services contractors have contract requirements and performance measurables to meet. 2) The Lead Agency works collaboratively HCSD to measure the number of referrals that lead to eligible cases and consumer complaints for families referred. 3) The Lead Agency works with CFSD to measure the number of referrals that lead to eligible cases and consumer complaints for families referred. The Lead Agency has internal processes in place, examined annually by the Policy Unit, to ensure compliance and successful workflow.**

No. If no, describe:

- e. In addition to the written agreements identified above, describe any other monitoring and auditing processes used to oversee CCDF administration. **Child and Family Services Division (CFSD) cases are subject to the same rate review process as non-TANF subsidy cases. Contracted eligibility staff review cases selected by the Lead Agency. The Lead Agency reviews the cases, documents errors, and identifies potential corrective action and mitigation strategies. CFSD and the Lead Agency hold regular meetings to review operations and address any issues. HCSD, the Lead Agency, and the TANF contractor hold regular meetings to review operations and address any issues.**

#### 1.2.4 Certification of shareable information systems.

Does the Lead Agency certify that to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop is made available to other public agencies? This includes public agencies in other States for their use in administering child care or related programs.

Yes.

No. If no, describe:

#### 1.2.5 Confidential and personally identifiable information

Certification of policies to protect confidential and personally identifiable information

Does the Lead Agency certify that it has policies in place related to the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds?

Yes.

No. If no, describe:

### 1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF Plan, and consultation with and meaningful input and feedback from a wide range of representatives is critical for CCDF programs to continually adapt to the changing needs of families, child care programs, and the workforce. Consultation involves meeting with or otherwise obtaining input from an appropriate agency in the development of the State or Territory CCDF Plan. As part of the Plan development process, Lead Agencies must consult with the following:

- (1) Appropriate representatives of general-purpose local government. General purpose local governments are defined by the U.S. Census at [https://www2.census.gov/govs/cog/g12\\_org.pdf](https://www2.census.gov/govs/cog/g12_org.pdf).
- (2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) or similar coordinating body pursuant to 98.14(a)(1)(vii).
- (3) Tribe(s) or Tribal organization(s) within the State. This consultation should be done in a timely manner and at the option of the Tribe(s) or Tribal organization(s).

#### 1.3.1 Consultation efforts in CCDF Plan development

Describe the Lead Agency's consultation efforts in the development of the CCDF Plan, including how and how often the consultation occurred.

- a. Describe how the Lead Agency consulted with appropriate representatives of general-purpose local government: **Positions within the Montana CCDF Advisory council represent general purpose local government. This body was provided a copy of the draft state plan prior to the public hearing to gather their input. Following that distribution, they convened on May 1, 2024. During that meeting, the Early Childhood Services Bureau and the Child Care Bureau presented key sections of the draft state plan, highlighting changes and areas where the Lead Agency sought their input. The advisory council provided feedback and input both during that time and latter in writing or separate meetings with Lead Agency staff. In addition, during the Montana Child Care Licensing Project, the Lead Agency received input from interviews with agencies and entities including child and family services, industry and labor, public and environmental health, and fire. These interviews included the following where the number provided is the number of groups from that stakeholder type: Tribal leaders, 1; Dept of Labor & Industry, 1; Public Health & Safety Division: Environmental Health, 2; Public Health & Safety Division: Immunization Program, 4; Fire Marshals, 2; Family Outreach, 1; Legislators 1. This information and input informed the revision of Montana's child care licensing administrative rules and in**

turn the State Plan. A copy of the assessment from this project is available at <https://dphhs.mt.gov/ecfsd/ChildCare/childcarelicensingproject>.

- a. Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body: **The Montana Early Childhood Advisory Council (MECAC) is currently not convening. The council was paused after a change in division leadership and bureau restructure. The work to evaluate the MECAC and potentially reestablish the council is being led by the PDG-B5. As the grant's focus is on EC system development, PDG B-5 is positioned to provide a comprehensive and objective reflection of MECAC effectiveness and provide the state a recommendation on how to proceed. In the interim, a Child Care Advisory Council, CCAC has been created to continue to guide CCDF planning and implementation. The council's first met in January 2024 and again in May to focus specifically on state plan review and feedback.**
- b. Describe, if applicable, how the Lead Agency consulted with Indian Tribes(s) or Tribal organizations(s) within the State: **In Summer of 2023, the Lead Agency began an Impact Project grant to receive federal technical assistance. The Lead Agency developed a Tribal engagement plan using grant resources with the goal of improving access for tribal children and families by improving government-to-government relationships between Montana's state and tribal CCDF administrators. Building trusting relationships between state and tribal CCDF administrators will provide an opportunity to learn from one another, to identify and pursue common outcomes, and to address the barriers in the systems in authentic, community-driven ways. The Lead Agency sent letters to Montana's Tribal Nation leaders to coordinate time with each Tribe's child care leaders, and to recruit members to the Impact Project Leadership team. In early assessment work, the Lead Agency has identified key areas of focus for initial collaborative work, they are professional development and training, procedure and policies related to child care licensing, background check requirements for child care staff, and child care subsidy. On May 16, 2024, representatives of the Lead Agency met with Tribal child care representatives from Northern Cheyenne, Crow, Chippewa-Cree, Salish and Kootenai Tribes. The meeting was held in Billings, MT. with options for in person and remote attendance. The agenda covered the State Plan sections regarding health and safety, workforce development, and child care subsidy. The convened group also agreed to future meetings with one virtual meeting in the summer and regular meetings beginning in the fall of 2024.**
- c. Identify other entities, agencies, or organizations consulted on the development of the CCDF Plan (e.g., representatives from the child care workforce, or statewide afterschool networks) and describe those consultation efforts: **In February of 2023, the Lead Agency with federal technical assistance facilitation engaged in a multi-day CCDF strategic planning process, whereby goals and outcomes for all compliance sections were set. The Lead Agency invited internal staff and key stakeholders to provide suggestions on all aspects of the plan. Stakeholders from contracted partners, other state departments, and specialty areas engaged in the comprehensive process which supported state plan writing. The Lead Agency meets annually with a group of child care center directors at the Directors' Symposium. This even is hosted by Montana's early childhood workforce registry organization, The Early Childhood Project. During the April 2024 event, Lead Agency leadership presented on elements of the State Plan including changes to the**

quality rating system, the subsidy program, and licensing rules changes. Directors provided feedback and input on the State Plan both during the session and in writing afterwards. Montana’s CCDF Administrator serves as an ex officio member of the Montana Afterschool Alliance’s (MTAA) steering committee. The MTAA supports the development and growth of statewide policies that will secure the resources that are needed to sustain new and existing school-based/school-linked afterschool programs. They have been collaborative partners in developing Montana’s yet-to-be-adopted out of school time licensing type. This licensing type would allow afterschool programs to become licensed and access CCDF funds, including participation in the state’s subsidy program.

1.3.2 Public hearing process

Lead Agencies must hold at least one public hearing in the State or Territory, with sufficient Statewide or Territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan.

Describe the Statewide or Territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan.

- i. Date of the public hearing: **5/15/2024**  
Reminder: Must be no earlier than January 1, 2024. If more than one public hearing was held, enter one date (e.g., the date of the first hearing, the most recent hearing date, or any hearing date that demonstrates this requirement).
- ii. Date of notice of public hearing: **4/25/2024**
- iii. Was the notice of public hearing posted publicly at least 20 calendar days prior to the date of the public hearing?  
 Yes.  
 No. If no, describe:
- iv. Describe how the public was notified about the public hearing, including outreach in other languages, information on interpretation services being available, etc. Include specific website links if used to provide notice **The Lead Agency contractor(s) provide outreach to families and communities by county on the details of the notice of public hearing. The Lead Agency uses an Interested Parties List collected through the website to email an invite to the hearing. Finally, the notice is posted on the Lead Agency website and to the DPPHS calendar. The Lead Agency’s website allows for the automatic translation of the website into 15 major languages. If additional languages are needed, requests can be made through the Lead Agency’s civil rights and EEO coordinator at hhshumanresources@mt.gov or at (800) 833-8503.**
- v. Describe how the approach to the public hearing was inclusive of all geographic regions of the State or Territory: **The Lead Agency contractor(s) provide outreach to families and communities by county on the details of the notice of public hearing. Finally, the notice is posted on the Lead Agency website.**
- vi. Describe how the content of the Plan was made available to the public in advance of the public hearing (e.g., the Plan was made available in other languages, in

multiple formats, etc.): **An ADA compliant PDF version of the Plan was posted to the Lead Agency website and attached in outreach efforts.**

- vii. Describe how the information provided by the public was taken into consideration regarding the provision of child care services under this Plan: **The Lead Agency set up a virtual comment process through the DPHHS access.gov portal. Lead agency staff compiled and reviewed public comments and questions relevant to sections of the plan. The Lead Agency took said recommendations and made corrections to the Plan as necessary.**

### 1.3.3 Public availability of final Plan, amendments, and waivers

Lead Agencies must make the submitted and approved final Plan, any approved Plan amendments, and any approved requests for temporary waivers publicly available on a website.

- a. Provide the website link to where the Plan, any Plan amendments, and waivers (if applicable) are available. Note: A Plan amendment is required if the website address where the Plan is posted changes.  
**<https://dphhs.mt.gov/ecfsd/childcare/documentsandresources>**
- b. Describe any other strategies that the Lead Agency uses to make submitted and approved CCDF Plan and approved Plan amendments available to the public. Check all that apply and describe the strategies below, including any relevant website links as examples.
  - i.  Working with advisory committees. Describe: **A CCDF report is presented by the Lead Agency Bureau Chief at CCDF Advisory Council meetings. The Council is notified via email, and a notice is posted on the Lead agency website. Once an amendment to the State Plan has been made and accepted, the State Plan is updated on the website. The Council disseminates the information to their local and statewide partners.**
  - ii.  Working with child care resource and referral agencies. Describe: **Lead Agency contractors are notified via email, and a notice is posted on the Lead Agency website. Once an amendment to the State Plan has been made and accepted, it is then updated on the website. Lead Agency contractors route any questions from their community members to the Lead Agency. A quarterly meeting is held with the CCR&R Network wherein information concerning the State Plan is shared and comments are received.**
  - iii.  Providing translation in other languages. Describe:
  - iv.  Sharing through social media (e.g., Facebook, Instagram, email). Describe: **Lead Agency contractors share information on a variety of social media platforms, including Facebook, Twitter, and Instagram, in addition to email, e-newsletters, and texting. The Lead Agency uses an interested party's email distribution list to provide updates to Montana's State Plan, including the drafting process, important dates, and amendments. In addition to the Interested Party's List, the Lead Agency regularly emails various partners, including: The Early Childhood Project; Montana Early Childhood Advisory Council; Best Beginnings Local Coalitions; The Early Childhood and Family Support Division of Montana DPHHS; Early Head Start and Head Start; The Montana Project LAUNCH team; Montana Preschool Development Grant; Infant Toddler and Preschool Instructors; Child**

**Care Resource and Referral agencies; Child and Adult Care Food Program Sponsors.**

- v.  Providing notification to key constituents (e.g., parent and family groups, provider groups, advocacy groups, foundations, and businesses). Describe: **The Lead Agency uses an Interested Party’s email distribution list to provide updates to Montana's State Plan, including the drafting process, important dates, and amendments. There are over 350 individuals on the Interested Party’s list, including child care providers and parents. The Lead Agency’s partners listed in (iv) above share the information with the providers and families in their communities. Once an amendment to the State Plan has been made and accepted, the State Plan is updated on the Lead Agency website. The public is notified via email, and a notice is posted on the Lead Agency website.**
- vi.  Working with Statewide afterschool networks or similar coordinating entities for out-of-school time. Describe: **The Lead Agency uses an Interested Party’s email distribution list to provide updates to Montana's State Plan, including the drafting process, important dates, and amendments. The list includes directors from Montana After School Alliance and Regional Boys and Girls Clubs, and the public**
- vii.  Direct communication with the child care workforce. Describe:
- viii.  Other. Describe:

## 2 Child and Family Eligibility and Enrollment and Continuity of Care

Stable and reliable child care arrangements facilitate job stability for parents and healthy development of children. CCDF eligibility and enrollment policies can contribute to these goals. Policies and procedures that create barriers to families accessing CCDF, like inaccessible subsidy applications and onerous reporting requirements, interrupt a parent’s ability to work and may deter eligible families from participating in CCDF.

To address these concerns, Lead Agencies must provide children with a minimum of 12 months between eligibility determinations, limit reporting requirements during the 12-month period, and ensure eligibility determination and redetermination processes do not interrupt a parent’s work or school.

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency’s eligibility and enrollment policies support access for eligible children and families.

### 2.1 Reducing Barriers to Family Enrollment and Redetermination

Lead Agency enrollment and redetermination policies may not unduly disrupt parents’ employment, education, or job training activities to comply with the Lead Agency’s or designated local entity’s requirements. Lead Agencies have broad flexibility to design and implement the eligibility practices that reduce barriers to enrollment and redetermination.

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, Lead Agencies can offer

a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g., use of languages other than English, access to transportation, accommodation of parents working non-traditional hours).

2.1.1 Eligibility practices to reduce barriers to enrollment

- a. Does the Lead Agency implement any of the following eligibility practices to reduce barriers at the time of initial eligibility determination? Check all that apply and describe those elements checked.
- i.  Establishing presumptive eligibility while eligibility is being determined. Describe the policy, including the populations benefiting from the policy, and identify how long the period of presumptive eligibility is: **The Lead Agency has a 30-calendar day presumptive eligibility period when a family turns in the first four pages of the application, has a completed authorization to release information form, and an identified child care provider sufficient to set up the authorization of services. TANF families applying for a Non-TANF case are eligible for a presumptive eligibility period. A family applying under TANF is not eligible for presumptive eligibility, since eligibility is based off a referral for child care from the TANF contractor.**
  - ii.  Leveraging eligibility from other public assistance programs. Describe: **The Lead Agency allows for a family participating in Temporary Needs for Families (TANF) to be referred for child care assistance. Families must complete a scholarship application to be considered for program eligibility.**
  - iii.  Coordinating determinations for children in the same household (while still ensuring each child receives 12 months of eligibility). Describe:
  - iv.  Self-assessment screening tools for families. Describe:
  - v.  Extended office hours (evenings and/or weekends).
  - vi.  Consultation available via phone.
  - vii.  Other. Describe the Lead Agency policies to process applications efficiently and make timely eligibility determinations: **The Lead Agency offers express eligibility for families participating in the Supplemental Nutrition Assistance Program (SNAP). This means a family participating in SNAP can have income information already provided used to speed up the eligibility determination process. Also, the Lead Agency requires the scholarship contractor to review the application within seven business days of submission to ensure timely processing.**
  - viii.  None.
- b. Does the Lead Agency use an online subsidy application?  
 Yes.  
 No. If no, describe why an online application is impracticable.
- c. Does the Lead Agency use different policies for families receiving TANF assistance?  
 Yes. If yes, describe the policies:  
 No.



### 2.1.2 Preventing disruption of eligibility activities

- a. Identify, where applicable, the Lead Agency’s procedures and policies to ensure that parents do not have their employment, education, or job training unduly disrupted to comply with the State’s/Territory’s or designated local entity’s requirements for the redetermination of eligibility. Check all that apply.
- i.  Advance notice to parents of pending redetermination.
  - ii.  Advance notice to providers of pending redetermination.
  - iii.  Pre-populated subsidy renewal form.
  - iv.  Online documentation submission.
  - v.  Cross-program redeterminations.
  - vi.  Extended office hours (evenings and/or weekends).
  - vii.  Consultation available via phone.
  - viii.  Leveraging eligibility from other public assistance programs.
  - ix.  Other. Describe:
- b. Does the Lead Agency use different policies for families receiving TANF assistance?  
 Yes. If yes, describe the policies:  
 No.

## 2.2 Eligible Children and Families

At eligibility determination or redetermination, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the State's median income (SMI) for a family of the same size and whose family assets do not exceed \$1,000,000; and (3)(a) reside with a parent or parents who are working or attending a job training or educational program (which can include job search) or (b) receive, or need to receive, protective services as defined by the Lead Agency.

### 2.2.1 Eligibility criteria: age of children served

Lead Agencies may provide child care assistance for children less than 13 years of age, including continuing to provide assistance to children if they turn 13 during the eligibility period. In addition, Lead Agencies can choose to serve children up to age 19 if those children are unable to care for themselves.

- a. Does your Lead Agency serve the full federally allowable age range of children through age 12?  
 Yes.  
 No. If no, describe the age range of children served and the reason why you made that decision to serve less than the full range of allowable children.

*Note:* Do not include children incapable of self-care or under court supervision, who are reported below in 2.2.1b and 2.2.1c.

- b. Does the Lead Agency extend eligibility for CCDF-funded child care to children ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care?
- No.
- Yes.
- i. If yes, the upper age is (may not equal or exceed age 19): **18.00**
- ii. If yes, provide the Lead Agency definition of physical and/or mental incapacity: **Physical or mental incapacity is defined as children under the age of 19 with disabilities or cognitive delays who are not able to properly manage or care for his/her person without assistance. Appropriate clinical authorities must document this determination. The Lead Agency requires a child meet the definition for a child with special needs or a child with disabilities.**
- c. Does the Lead Agency extend eligibility for CCDF-funded child care to children ages 13 and older but below age 19 who are under court supervision?
- No.
- Yes. If yes, and the upper age is (may not equal or exceed age 19): **18.00**
- d. How does the Lead Agency define the following eligibility terms?
- i. “residing with”: **A child must live in the same household as the parent, or person who is legally responsible for the child's welfare, during the period of time for which child care services are requested.**
- ii. “in loco parentis”: **When an adult is acting in place of a parent. For example, an adult designated in a military parent's family plan would be acting "in loco parentis."**

### 2.2.2 Eligibility criteria: reason for care

Lead Agencies have broad flexibility on the work, training, and educational activities required to qualify for child care assistance. Lead Agencies do not have to set a minimum number of hours for families to qualify for work, training, or educational activities, and there is no requirement to limit authorized child care services strictly based on the work, training, or educational schedule/hours of the parent(s). For example, the Lead Agency can include travel or study time in calculating the amount of needed services.

How does the Lead Agency define the following terms for the purposes of determining CCDF eligibility?

- a. Identify which of the following activities are included in your definition of “working” by checking the boxes below:
- i.  An activity for which a wage or salary is paid.
- ii.  Being self-employed.
- iii.  During a time of emergency or disaster, partnering in essential services.
- iv.  Participating in unpaid activities like student teaching, internships, or practicums.
- v.  Time for meals or breaks.

- vi.  Time for travel.
  - vii.  Seeking employment or job search.
  - viii.  Other. Describe:
- b. Identify which of the following activities are included in your definition of “attending job training” by checking the boxes below:
- i.  Vocational/technical job skills training.
  - ii.  Apprenticeship or internship program or other on-the-job training.
  - iii.  English as a Second Language training.
  - iv.  Adult Basic Education preparation.
  - v.  Participation in employment service activities.
  - vi.  Time for meals and breaks.
  - vii.  Time for travel.
  - viii.  Hours required for associated activities such as study groups, lab experiences.
  - ix.  Time for outside class study or completion of homework.
  - x.  Other. Describe:
- c. Identify which of the following diplomas, certificates, degrees, or activities are included in your definition of “attending an educational program” by checking the boxes below:
- i.  Adult High School Diploma or GED.
  - ii.  Certificate programs (12-18 credit hours).
  - iii.  One-year diploma (36 credit hours).
  - iv.  Two-year degree.
  - v.  Four-year degree.
  - vi.  Travel to and from classrooms, labs, or study groups.
  - vii.  Study time.
  - viii.  Hours required for associated activities such as study groups, lab experiences.
  - ix.  Time for outside class study or completion of homework.
  - x.  Applicable meal and break times.
  - xi.  Other. Describe:
- d. Does the Lead Agency impose a Lead Agency-defined minimum number of hours of activity for eligibility?
- No.
  - Yes.
- If yes, describe any Lead Agency-imposed minimum requirement for the following:

Work. Describe: **An individual is working when (s)he performs any paid type of legal labor on either a full or part-time basis and has documents to show income received. Evidence of workers compensation or a waiver from workers compensation is also further proof of employment.**

Job training. Describe: **If a single parent is attending school or training full-time, where full-time is based on the school's guidelines, the parent does not have a work activity requirement. In a two-parent family if both parents are attending school or training full-time, where full-time is based on the school's guidelines, there is no work activity requirement for either parent.**

Education. Describe: **If a single parent is attending school or training full-time, where full-time is based on the school's guidelines, the parent does not have a work activity requirement.**

Combination of allowable activities. Describe: **Employed and attending school or a training program part-time and meeting a minimum hourly requirement.**

Other. Describe:

- e. Does the Lead Agency allow parents to qualify for CCDF assistance based on education and training without additional work requirements?

Yes.

No. If no, describe the additional work requirements:

- f. Does the Lead Agency extend eligibility to specific populations of children otherwise not eligible by including them in its definition of “children who receive or need to receive protective services?”

Note: A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are *not* working or are *not* in education/training activities, but this provision should be included in the Lead Agency’s protective services definition.

No. If no, skip to question 2.2.3.

Yes. If yes, answer the questions below:

Provide the Lead Agency’s definition of “protective services” by checking below the sub-populations of children that are included:

Children in foster care.

Children in kinship care.

Children who are in families under court supervision.

Children who are in families receiving supports or otherwise engaged with a child welfare agency.

Children participating in a Lead Agency’s Early Head Start - Child Care Partnerships program.

Children whose family members are deemed essential workers under a governor-declared state of emergency.

Children experiencing homelessness.

Children whose family has been affected by a natural disaster.

Other. Describe: **The Child and Family Services Division (CFSD) determines if a child falls under the "protective services" definition.**

g. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

No.

Yes.

h. Does the Lead Agency waive the eligible activity (e.g., work, job training, education, etc.) requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

No.

Yes.

i. Does the Lead Agency use CCDF funds to provide respite care to custodial parents of children in protective services?

No.

Yes.

### 2.2.3 Eligibility criteria: deciding entity on family income limits

How are income eligibility limits established?

There is a statewide limit with no local variation.

There is a statewide limit with local variation. Provide the number of income eligibility tables and describe who sets the limits:

Eligibility limits are established locally only. Provide the number of income eligibility tables and describe who sets the limits:

Other. Describe:

### 2.2.4 Initial eligibility: income limits

a. Complete the appropriate table to describe family income limits.

i. Complete the table below to provide the statewide maximum income eligibility percent and dollar limit or threshold:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1	4138.00	56.11	2322.00
2	5412.00	58.22	3151.00
3	6685.00	59.55	3981.00
4	7958.00	60.44	4810.00

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
5	9232.00	61.08	5639.00

ii. Does the Lead Agency certify that they use other funds if the income eligibility limit percent exceeds 85% SMI?

Not applicable. The Lead Agency does not allow income eligibility limits above 85% SMI.

Yes, the Lead Agency certifies that they use other funds (non-CCDF funds) for families with income that exceeds 85% SMI.

No. The Lead Agency establishes income eligibility limits above SMI and includes CCDF funds to pay for families with income that exceeds 85% SMI. If checked, describe:

b. Complete the table below if the Lead Agency has local variation in the maximum income eligibility limit. Complete the table for the region/locality with the highest eligibility limit, region/locality with the lowest eligibility limit, and the region/locality that is most populous:

i. Region/locality with the highest eligibility limit:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1			
2			
3			
4			
5			

ii. Region/locality with the lowest eligibility limit:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1			
2			
3			
4			

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
5			

iii. Region/locality that is most populous:

Family Size	100% of SMI (\$/Month)	Maximum Initial Eligibility Limit (or Threshold) %	Maximum Initial Eligibility Limit (or Threshold) \$
1			
2			
3			
4			
5			

iv. Does the Lead Agency certify that they use other funds if the income eligibility limit percent exceeds 85% SMI?

Not applicable. The Lead Agency does not allow income eligibility limits above 85% SMI.

Yes, the Lead Agency certifies that they use other funds (not CCDF funds) for families with income that exceeds 85% SMI.

No. The Lead Agency establishes income eligibility limits above 85% SMI and includes CCDF funds to pay for families with income that exceeds 85% SMI. If checked, describe:

c. How does the Lead Agency define “income” for the purposes of eligibility at the point of initial determination? Check all that apply:

i.  Gross wages or salary.

ii.  Disability or unemployment compensation.

iii.  Workers’ compensation.

iv.  Spousal support, child support.

v.  Survivor and retirement benefits.

vi.  Rent for room within the family’s residence.

vii.  Pensions or annuities.

viii.  Inheritance.

ix.  Public assistance.

x.  Other. Describe: **The Lead Agency has a list of countable income in the Child**

**Care Policy Manual Section 2-6: Income Evaluation Table.**

- d. What is the effective date for these income eligibility limits? **03/01/2024**
- e. Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census, even if the federal poverty level is used in implementing the program.

What federal data does the Lead Agency use when reporting the income eligibility limits?  
 LIHEAP. If checked, provide the publication year of the LIHEAP guideline estimates used by the Lead Agency: **2024**

Other. Describe:

- f. Provide the direct URL/website link, if available, for the income eligibility limits.  
**[https://dphhs.mt.gov/assets/ecfsd/childcare/policymanual/Sliding\\_Fee\\_Scale\\_2023.pdf](https://dphhs.mt.gov/assets/ecfsd/childcare/policymanual/Sliding_Fee_Scale_2023.pdf)**

2.2.5 Income eligibility: irregular fluctuations in earnings

Lead Agencies must take into account irregular fluctuations in earnings in initial eligibility determination and redetermination processes. The Lead Agency must ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI from seasonal employment or other temporary work schedules, do not affect eligibility or family co-payments.

Check the processes that the Lead Agency uses to take into account irregular fluctuations in earnings.

- i.  Average the family’s earnings over a period of time (e.g., 12 months).  
Identify the period of time **Earnings are averaged over a period of time up to twelve months and evaluated on a case-by-case basis.**
- ii.  Request earning statements that are most representative of the family’s monthly income.
- iii.  Deduct temporary or irregular increases in wages from the family’s standard income level.
- iv.  Other. Describe the other ways the Lead Agency takes into account irregular fluctuations in earnings: **Each instance of changes in earnings is evaluated on a case-by-case basis. Irregular income should first be averaged on a two-month basis. If an accurate computation cannot be made on a two-month basis, then the parent’s income can be calculated by averaging up to a 12-month basis.**

2.2.6 Family asset limit

- a. When calculating income eligibility, does the Lead Agency ensure each eligible family does not have assets that exceed \$1,000,000?  
 Yes.  
 No. If no, describe:
- b. Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?



No.

Yes. If yes, describe the policy or procedure:

### 2.2.7 Additional eligibility criteria

Aside from the eligibility conditions or rules which have been described in 2.2.1 – 2.2.6, is any additional eligibility criteria applied during:

- a.  Eligibility determination? If checked, describe: **The family must meet a child support compliance requirement for any child under the age of 18. If a child in the household with has an absent parent, the child support compliance requirement can be met by an in-compliance child support case with the Child Care Enforcement Division, a court-file and judge-signed parenting plan, or approved good cause.**
- b.  Eligibility redetermination? If checked, describe: **The family must meet a child support compliance requirement for any child under the age of 18. If a child in the household with has an absent parent, the child support compliance requirement can be met by an in-compliance child support case with the Child Care Enforcement Division, a court-file and judge-signed parenting plan, or approved good cause.**

### 2.2.8 Documentation of eligibility determination

Lead Agencies must document and verify that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination.

Check the information that the Lead Agency documents and verifies at initial determination and redetermination and describe what information is required and how often.

Required at Initial Determination	Required at Redetermination	Description
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Applicant identity. Describe how you verify: <b>Applicants may have an interview either in person or by telephone during the initial application period. Applicants may include photo identification documents: government issued identification, passport, Montana driver's license, or a school identification card. If the family receives Supplemental Nutrition Assistance Program (SNAP) benefits, the verification can be obtained from the Lead Agency Eligibility Database. Documentation of what was used to determine the applicant's identity is included in case notes in the database. Paper or electronic documents are kept at the scholarship contractor agency that maintains the confidential files for the applicant. At annual re-determination, information already on file does not need to be resubmitted.</b>

Required at Initial Determination	Required at Redetermination	Description
[x]	[x]	<p>Applicant’s relationship to the child. Describe how you verify: <b>The applicant’s relationship to the child can be determined from a variety of documentation: 1) Birth Certificates; 2) Legal or court documentation; 3) Child and Family Services documentation; 4) Verification from the Combined Healthcare Information and Montana Eligibility System (CHIMES) if the family is on the Supplemental Nutrition Assistance Program (SNAP) benefits; or 5) Other Documentation.</b> Documentation of what was used to determine the applicant’s relationship to the child is included in case notes in the computer database. Electronic or paper documents are kept at the scholarship contractor agency that maintains the confidential files for the applicant. At annual re- determination, information already on file does not need to be resubmitted.</p>
[x]	[x]	<p>Child’s information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe how you verify: <b>Children receiving child care assistance must be US citizens or US nationals. A variety of documentation may be used to determine this: 1) Birth certificates or passports; 2) A Social Security card (optional); 3) Verification from the Eligibility Database if the family is on SNAP benefits; or 4) Other documentation.</b> Documentation used to determine the child's eligibility is included in case notes in the database. Paper or electronic documents are kept at the scholarship contractor agency that maintains the confidential files for the applicant. The information is required at initial application, but then it is kept in the confidential file at the scholarship contractor agency. At annual re-determination, information already on file does not need to be resubmitted.</p>
[x]	[x]	<p>Work. Describe how you verify: <b>Applicants complete a Work Verification Form signed by the employer at the time of initial application, annual redetermination, or with a job change. A parent may choose to submit paystubs if the Work Verification is not an accurate representation of their current work. Self-employment is initially verified through a self-statement attestation which is a self-employment form filled out by the applicant. Self-employment income is verified through tax returns or receipts of income and expenses. Documentation used to determine the parent's work activity requirement is included in case notes in the computer database.</b></p>

Required at Initial Determination	Required at Redetermination	Description
[x]	[x]	Job training or educational program. Describe how you verify: <b>Applicants must submit receipt of fees paid and number of credits enrolled to prove the attendance of school. Documentation of what was used to determine the job training or education program is included in case notes in the database. Paper or electronic documents are kept at the scholarship contractor agency that maintains the confidential files for the applicant. The information is required at annual re-determination, a new receipt of fees paid and number of credits enrolled will be required.</b>
[x]	[x]	Family income. Describe how you verify: <b>Work income is determined using a Work Verification Form or paystubs. Self-employed applicants must meet Federal minimum wage requirements to qualify for childcare assistance. Self-employed individuals need to provide written documentation verifying their self-employment status at the time of application. Documentation used to determine the family income is included in case notes in the database. Paper or electronic documents are kept at the scholarship contractor agency that maintains the confidential files for the applicant. The information is required at initial application, but then it is kept in the confidential file at the scholarship contractor agency. At annual re-determination, new income documentation will be required.</b>
[x]	[x]	Household composition. Describe how you verify: <b>Submitted applications are used to determine the household composition. Documentation used to determine the household composition is included in case notes in the database. Paper or electronic documents are kept at the scholarship contractor agency that maintains the confidential files for the applicant. The information is required at initial application and annual re-determination.</b>

Required at Initial Determination	Required at Redetermination	Description
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Applicant residence. Describe how you verify: <b>Applicants submit proof of residency such as a rental agreement, utility bill, or current Montana Driver's License. Documentation used to determine the applicant's residency is included in case notes in the database. Paper or electronic documents are kept at scholarship contractor agency that maintains the confidential files for the applicant. The information is required at initial application, but then it is kept in the confidential file at the scholarship contractor agency. At annual re-determination, information already on file does not need to be submitted again.</b>
<input type="checkbox"/>	<input type="checkbox"/>	Other. Describe how you verify: <b>N/A</b>

### 2.2.9 Exception to TANF work requirements

Lead Agencies must ensure that families with young children participating in TANF will be informed of their right not to be sanctioned under the TANF work requirement if the custodial parent has a demonstrated inability to obtain child care for a child under age six, in accordance with Section 407(e)(2) of the Social Security Act.

- a. Identify the TANF agency that established these criteria or definitions: **The Department of Public Health and Human Services.**
- b. Provide the following definitions established by the TANF agency:
  - i. "Appropriate child care": **The child care provider meets applicable state standards.**
  - ii. "Reasonable distance": **If the family is without either their own (or arranged) transportation, and there is no public transportation, then their home or work site must be no more than 1 mile from the childcare provider.**
  - iii. "Unsuitability of informal child care": **Care that does not meet applicable state licensing standards, although it may be the family's choice.**
  - iv. "Affordable child care arrangements": **The total parental (caretaker relative or person acting in loco parentis) co-payment and "above and beyond" obligation does not exceed 25% of gross family income.**
- c. How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?
  - i.  In writing
  - ii.  Verbally
  - iii.  Other. Describe:

## 2.3 Prioritizing Services for Vulnerable Children and Families

Lead Agencies must give priority for child care assistance to children with special needs, families with very low incomes (considering family size), and children experiencing homelessness. A Lead Agency has the flexibility to prioritize other populations of children.

Note: Statute defines children with disabilities, and CCDF rule gives flexibility to Lead Agencies to include vulnerable populations in their definition of children with special needs.

CCDF defines “child experiencing homelessness” as a child who is homeless, as defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a).

2.3.1 Lead Agency definition of priority groups

Describe how the Lead Agency defines:

- d. “Children with special needs.” **A child with special needs means a child who is age 18 or younger who requires additional assistance because of an emotional or physical disability and/or cognitive delay that is verified by medical records or other appropriate documentation such as written verification of the physical, emotional, or mental disability from the appropriate authority.**
- e. “Families with very low incomes.” **A family, whose income is at or below the TANF eligibility threshold of the current years’ federal poverty guidelines.**

2.3.2 Prioritization of child care services

Identify how the Lead Agency will prioritize child care services for the following children and families.

- a. Complete the table below to indicate how the identified populations are prioritized.

Population Prioritized	Prioritize for enrollment in child care services	Serve without placing on waiting list	Waive co-payments as described in 3.3.1	Pay higher rate for access to higher quality care	Use grants or contracts to reserve spots	Other
Children with special needs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:
Families with very low incomes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:
Children experiencing homelessness, as defined by CCDF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:

Population Prioritized	Prioritize for enrollment in child care services	Serve without placing on waiting list	Waive co-payments as described in 3.3.1	Pay higher rate for access to higher quality care	Use grants or contracts to reserve spots	Other
(Optional) Families receiving TANF, those attempting to transition off TANF, and those at risk of becoming dependent on TANF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Describe:

a. Does the Lead Agency define any other priority groups?

No.

Yes. If yes, identify the populations prioritized and describe how the Lead Agency prioritizes services: **Teenage parent: A teenage parent means a parent through their 20th birthday who is attending high school. If there was limited funding for child care assistance, a household headed by a teenage parent is a priority. Administrative Rules of Montana 37.80.201(5), Nonfinancial Requirements for Eligibility and Priority for Assistance, includes the priority list to be implemented if there are insufficient funds to provide benefits to all eligible households. A household headed by a teenage parent is listed as priority number three, after a household receiving TANF and a household containing a child with special needs or a child with disabilities, respectively.**

### 2.3.3 Enrollment and grace period for children experiencing homelessness

Lead Agencies must allow (after an initial eligibility determination) children experiencing homelessness to receive CCDF services while required eligibility documentation is obtained.

Lead Agencies must establish a grace period that allows children experiencing homelessness and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with State, Territory, or local immunization and other health and safety requirements. The length of such a grace period must be established in consultation with the State, Territorial, or Tribal public health agency.

Note: Any payment for such a child during the grace period may not be considered an error or improper payment.

- a. Describe the strategies to allow CCDF enrollment of children experiencing homelessness while required eligibility documentation is obtained: **A family experiencing homelessness is eligible for a 90-calendar day eligibility period while families stabilize their living arrangements. To be eligible for 90-day eligibility period, the parent must submit two forms of documentation to prove homelessness. The first is a self-attestation from the parent on the application. The second could be a letter from a homeless shelter or a statement from a friend or relative the family is living with. A parent must select a registered or licensed child care provider for child(ren) in the family. The 90-day eligibility**

period allows the family experiencing homelessness to meet all Non-TANF eligibility requirements which include proof of Montana residency, citizenship of child(ren), and income and activity requirements. Scholarship contractor agencies are available to support families experiencing homelessness. Referrals are provided for available community services and identifying child care providers that may meet the needs of the family.

- b. Describe the grace period for each population below and how it allows them to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements.

- i. Provide the policy for a grace period for:

Children experiencing homelessness: **The State requires children to have current immunizations to attend a child care facility, but a conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. A child experiencing homelessness can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. The 30-day grace period begins the first day the child attends a child care facility as verified on the sign-in/sign-out records. A child must meet the immunization requirement for conditional enrollment before the end of the 30-day period. A child may not be granted grace periods consecutively.**

Children who are in foster care: **The State requires children to have current immunizations to attend a child care facility, but a conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. A child in foster care can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. The 30-day grace period begins the first day the child attends a child care facility as verified on the sign-in/sign-out records. A child must meet the immunization requirement for conditional enrollment before the end of the 30-day period. A child may not be granted grace periods consecutively.**

- ii. Does the Lead Agency certify that the length of the grace period was established in consultation with the State, Territorial, or Tribal public health agency?

Yes.

No. If no, describe:

- c. Describe how the Lead Agency coordinates with licensing agencies and other relevant State, Territorial, Tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements: **If a family does not have a current immunization history for a child, the scholarship contractor will refer the parent to the county health department or a local healthcare provider. The county health department will look at imMTrax (Montana Immunization Information System) to see if the child has a history of immunizations in Montana. The local healthcare provider may look at imMTrax**

or contact the county health department if the local healthcare provider needs additional help getting the child's history of immunizations in Montana. If a child does not have current immunizations, the county health department or local healthcare provider will work with the family to fill out the conditional enrollment form. This form will have a plan to get the child current on immunizations. If the county health department needs assistance with out-of-state immunization history, the county health department will contact the state health department. The parent needs to grant permission for the State of Montana to contact other states for immunization history. The conditional enrollment form is monitored by the Lead Agency when a monitoring visit occurs.

## 2.4 Lead Agency Outreach to Families Experiencing Homelessness, Families with Limited English Proficiency, and Persons with Disabilities

The Lead Agency must conduct outreach and provide services to families with limited English proficiency, families experiencing homelessness, and persons with disabilities.

### 2.4.1 Families with limited English proficiency and persons with disabilities: outreach and services

- a. Check the strategies the Lead Agency or partners utilize to conduct outreach and provide services to eligible families with limited English proficiency. Check all that apply.
  - i.  Application in languages other than English (application and related documents, brochures, provider notices).
  - ii.  Informational materials in languages other than English.
  - iii.  Website in languages other than English.
  - iv.  Lead Agency accepts applications at local community-based locations.
  - v.  Bilingual caseworkers or translators available.
  - vi.  Bilingual outreach workers.
  - vii.  Partnerships with community-based organizations.
  - viii.  Collaboration with Head Start, Early Head Start, or Migrant and Seasonal Head Start.
  - ix.  Home visiting programs.
  - x.  Other. Describe:
- b. Check the strategies the Lead Agency or partners utilize to conduct outreach and provide services to eligible families with a person(s) with a disability. Check all that apply.
  - i.  Applications and public informational materials available in braille and other communication formats for access by individuals with disabilities.
  - ii.  Websites that are accessible (e.g., Section 508 of the Rehabilitation Act).
  - iii.  Caseworkers with specialized training/experience in working with individuals with disabilities.
  - iv.  Ensuring accessibility of environments and activities for all children.
  - v.  Partnerships with State and local programs and associations focused on



disability- related topics and issues.

- vi.  Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers.
- vii.  Partnerships with State and local IDEA Part B, Section 619 and Part C providers and agencies.
- viii.  Availability and/or access to specialized services (e.g., mental health, behavioral specialists, therapists) to address the needs of all children.
- ix.  Other. Describe:

#### 2.4.2 Families experiencing homelessness: Outreach and technical assistance efforts

- a. Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness and their families.
  - i.  Lead Agency accepts applications at local community-based locations.
  - ii.  Partnerships with community-based organizations.
  - iii.  Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care.
  - iv.  Other. Describe: **Lead Agency scholarship contractors provide outreach information to places providing services to homeless families such as homeless shelters, and organizations that may work with homeless families such as Offices of Public Assistance, Good Will/Salvation Army stores, etc.**
- b. The Lead Agency must provide training and technical assistance (TA) to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness.
  - i. Describe the Lead Agency’s training and TA efforts for providers in identifying and serving children and their families experiencing homelessness. **The Lead Agency contracts with Child Care Training to offer trainings to providers, to increase their skill in serving families experiencing homelessness. The Lead Agency utilizes Technical Assistance contracts, to prioritize high needs communities and populations including Homeless families and the providers who serve them.**
  - ii. Describe the Lead Agency’s training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness. **Lead Agency scholarship contractors serve families experiencing homelessness. The Lead Agency has offered trainings and peer sharing. The peer sharing has been helpful. Each scholarship contractor has identified local community partners and has worked within their region to identify and serve families experiencing homelessness.**

## 2.5 Promoting Continuity of Care

Lead Agencies must consider children’s development and promote continuity of care when authorizing child care services and must establish a minimum 12-month period for each child, both at the initial eligibility determination and redetermination.

2.5.1 Children’s development

Describe how the Lead Agency’s eligibility, enrollment, reporting, and redetermination policies promote continuity of care in order to support children’s development. **The Lead Agency promotes continuity of care by allowing the parent to determine the child’s need for care and inquiring whether a child has an Individualized Education Plan (IEP) or Individual Family Services Plan (IFSP). The authorized child care hours do not need to follow the parent’s work, training, or educational schedule. A child cannot be authorized for more than 20 hours per day or 50 hours per week without approval from the Lead Agency. The goal is to use a reasonable approach that supports the child’s developmental and learning needs.**

2.5.2 Minimum 12-month eligibility

Lead Agencies must establish a minimum 12-month eligibility period for each child, both at the initial eligibility determination and at redetermination to support continuity in child care assistance and reduce barriers to families retaining eligibility. This requirement is:

- Regardless of changes in income, Lead Agencies may not terminate CCDF assistance during the minimum 12-month period if a family has an increase in income that exceeds the Lead Agency’s income eligibility threshold but not the federal threshold of 85 percent of SMI; and
- Regardless of temporary changes in participation in work, training, or educational activities.

a. Does the Lead Agency certify that their policies or procedures provide a minimum 12-month eligibility period for each child at initial eligibility determination?

Yes.

No. If no, describe: **Based on the Preliminary Notice of Possible Non-Compliance dated 01/30/2024 from the Office of Child Care, the Lead Agency does not provide a minimum of 12-months eligibility when a child is newly added to the case of a family already participating in the CCDF program; or provide services at least at the same level for a minimum of 12 months when a parent requests case closure or a reduction in benefits, or when a parent is late submitting required re-determination information. The Lead Agency needs additional time to meet the un-met requirements. Currently, when a new child added to a family already participating on the CCDF program, eligibility is only given to the current 12-month eligibility period, which does not allow a minimum of 12 months of eligibility for the new child. Currently, a family can request a case to be closed, which means a family does not receive the same level of services a minimum of 12 months. Currently, if a parent is late when submitting required re-determination information, the family may be given less than 12 months of eligibility because the previous eligibility period is considered and a lapse in eligibility can be given, using the old 12-month eligibility end date. The Lead Agency is receiving technical assistance from federal partners to plan and implement changes to scholarship policy and procedure to meet these non-compliance issues. See Appendix for additional information.**

b. Does the Lead Agency certify that its definition of “temporary change” includes each of the minimum required elements?

1. Any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness.
2. Any interruption in work for a seasonal worker who is not working between regular industry work seasons.
3. Any student holiday or break for a parent participating in a training or educational program.
4. Any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program.
5. Any cessation of work or attendance at a training or educational program not listed above. In these cases only, Lead Agencies may establish a period of 3 months or longer.
6. Any change in age, including a child turning 13 years old during the minimum 12-month eligibility period.
7. Any changes in residency within the State or Territory.

Yes.

No. If no, describe:

c. Are the policies different for redetermination?

No.

Yes. If yes, provide the additional/varying policies for redetermination:

### 2.5.3 Job search and continued assistance

a. Does the Lead Agency consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination and/or at the minimum 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of 3 months of job search.) Check all that apply:

i.  Yes. The Lead Agency does consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination. If yes, describe:

ii.  Yes. The Lead Agency does consider seeking employment (engaging in a job search) as an eligible activity at redetermination. If yes, describe:

iii.  No. The Lead Agency does not consider seeking employment (engaging in a job search) as an eligible activity at initial eligibility determination or redetermination.

b. Does the Lead Agency continue assistance during the minimum 12-month eligibility period when a parent has a non-temporary loss or cessation of eligible activity?

Yes. The Lead Agency continues assistance.

No, the Lead Agency discontinues assistance.

i. If no, describe the Lead Agency's policies for discontinuing assistance due to a parent's non-temporary change: **A parent is required to report a change in work, training, or educational status within ten calendar days from the date the change occurs. If the parent has a cessation of work, training, or education, the parent will be given a 90-calendar day grace period. The parent must meet activity**

requirements at the end of the grace period, and if not, the family's eligibility will be discontinued. Cessation refers to a permanent ending of activity, meaning the parent does not plan to return to the activity.

- ii. If no, describe what specific actions/changes trigger the job-search period after each such loss or cessation: **When a parent reports the required change in work, training, or educational status, it is evaluated to see if it is a cessation or a temporary change. If it is a cessation of work, training, or education, a 90-calendar day grace period is given.**
- iii. If no, how long is the job-search period where a family can continue assistance (must be at least 3 months)? **90-calendar days**
- c. The Lead Agency may discontinue assistance prior to the next minimum 12-month redetermination in the limited circumstances listed below. Check and provide the policy for all circumstances in which the Lead Agency chooses to discontinue assistance prior to the next minimum 12-month redetermination:
  - i.  Not applicable.
  - ii.  Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

Provide the Lead Agency's policy defining the number of unexplained absences identified as excessive: **Five or more consecutive unexplained absences reported by the child care facility when there is no indication that the child will be receiving care at that facility soon.**
  - iii.  A change in residency outside of the State or Territory.

Provide the Lead Agency's policy for a change in residency outside the State or Territory: **To receive Best Beginnings Child Care Scholarship, the parent and the child must be living together in Montana. If a family moves out of the state, the family is not eligible for the scholarship, and eligibility will be terminated.**
  - iv.  Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Provide the Lead Agency's definition of fraud/intentional program violations that lead to discontinued assistance: **A parent will be issued an intentional program violation and sanction for any of the following intentional program violations: (1) providing false employment information, including concealing employment; (2) providing false information regarding wages or other income; (3) misrepresenting or failing to disclose household membership; (4) claiming child care assistance for care provided by an ineligible provider; (5) misrepresenting the amount of child care needed or used; or (6) falsifying sign-in/sign-out records. If a parent or guardian receives a second intentional program violation, the department will require the repayment of all child care assistance payments related to the violation and the parent will be terminated from the Best Beginnings Scholarship Program.**

2.5.4 Reporting changes during the minimum 12-month eligibility period

Lead Agencies may only require families to report changes that impact a family’s eligibility, including only if the family’s income exceeds 85 percent of the SMI, taking into account irregular fluctuations in income, or there is a non-temporary change in the parent’s work, training, or education status, during the 12-month eligibility period. Lead Agencies may also require families to report that enable the lead agency to contact the family or pay providers, such as a new telephone number or address.

Note: The response below should exclude reporting requirements for a graduated phase-out, which are described in question 2.5.5.

Does the Lead Agency limit what families must report during the 12-month eligibility period to the changes described above?

Yes.

No. If no, describe:

2.5.5 Policies and procedures for graduated phase-out of assistance at redetermination

Lead Agencies that establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out of assistance for families whose income has increased above the Lead Agency’s initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of SMI.

Lead Agencies that provide a graduated phase-out must implement a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

- (i) 85 percent of SMI for a family of the same size; or,
- (ii) An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency’s initial eligibility threshold that:
  - (A) Takes into account the typical household budget of a family with a low income
  - (B) Provides justification that the second eligibility threshold is:
    - (1) Sufficient to accommodate increases in family income over time that are typical for workers with low incomes and that promote and support family economic stability
    - (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption

At redetermination, a child must be considered eligible if their parents are participating in an eligible activity even if their income exceeds the Lead Agency’s initial eligibility income limit as long as their income does not exceed the second tier of eligibility. Note that once determined eligible, the child must be considered eligible for a full minimum 12-month eligibility period, even if the parents’ income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A child eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible children with the exception of the co-payment restrictions, which do not apply to a graduated phase-out. To help families transition from child care assistance, Lead Agencies may gradually adjust co-payment amounts in proportion to a family’s

income growth for families whose children are determined eligible under a graduated phase-out. Lead Agencies may require additional reporting on changes in family income but must still ensure that any additional reporting requirements do not constitute an undue burden on families.

Check and describe the option that best identifies the Lead Agency's policies and procedures regarding the graduated phase-out of assistance.

- a.  Not applicable. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and therefore is not required to provide a graduated phase-out period. (If checked, skip to question 3.1.1.)
- b.  The Lead Agency sets the second tier of eligibility at 85 percent of SMI. If checked, describe the policies and procedures:
  - i.  Lead Agency adjusts the family's co-pay during the graduated phase-out period. If checked, describe how the Lead Agency gradually adjusts co-payment for families under a graduated phase-out period in proportion to a family's income growth. Include information on the percentage or amount of change made in the co-payment during graduated phase-out:
  - ii.  Lead Agency requires additional reporting requirements during the graduated phase-out period. If checked, describe:
- c.  The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold. If checked, provide the following information:
  - i. Provide the income level (\$/month) and the percent of SMI for the second tier of eligibility for a family of three: **\$4,303, 64.36% of SMI**
  - ii. Describe how the second eligibility threshold takes into account the typical household budget of a low-income family: **The copayment is a flat eight percent of the family's income in the second eligibility level. Affordable child care is defined as seven percent of a family's income. The eight percent copayment is close to affordable child care.**
  - iii. Describe how the second eligibility threshold is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability: **The entry level for a family of three into the second eligibility level is above 185% of the Federal Poverty Guideline (FPG), and the exit level is 200% FPG, an income of \$3,982 at entry and \$4,303 at exit. It allows for an increase in monthly income of \$321 and \$3,852 annually.**
  - iv. Describe how the second eligibility threshold reasonably allows a family to continue accessing child care services without unnecessary disruption: **Graduated phase-out families have the same change reporting requirements as all other families utilizing the subsidy program.**
  - v.  Lead Agency adjusts the family's co-pay during the graduated phase-out period. If checked, describe how the Lead Agency gradually adjusts co-payment for families under a graduated phase-out period in proportion to a family's income growth. Include information on the percentage or amount of change made in the co-payment during graduated phase-out:

- vi.  Lead Agency requires additional reporting requirements during the graduated phase-out period. If checked, describe:

### 3 Child Care Affordability

CCDF subsidies make child care more affordable for eligible families, providing access to a greater range of child care options that allow parents to work, go to school, or enroll in training and they allow parents to access higher quality care options that better support children’s development. CCDF requires some families participating in CCDF to pay an affordable co-payment set by the Lead Agency to cover a part of their care. But co-payments can be a significant and destabilizing financial strain on family budgets and a barrier to parent employment, and the CCDBG Act requires that the co-payment amount not be a barrier to families participating in CCDF. Lead Agencies may not set parent co-payments above 7% of family income regardless of gradual phase-out policies and regardless of the number of children receiving assistance. Lead Agencies are encouraged to set co-payments much lower than 7% to make child care more affordable for more families and have broad flexibility to waive co-payments for to many participants. Lead Agencies must ensure that the total payment to a child care provider is not reduced because of family’s lowered or waived co-payment.

In this section, Lead Agencies will identify how they determine an eligible family’s co-payment, the policies in place to waive or ensure co-payments are affordable for families, and how the Lead Agency improves access for children and families in economically and/or socially marginalized communities.

#### 3.1 Family Co-payments

Lead Agencies must establish and periodically revise a sliding-fee scale for families receiving CCDF services that varies based on income and the size of the family to determine each family’s contribution (i.e., co-payment) and does not create a barrier to receiving CCDF assistance. In addition to income and the size of the family, the Lead Agency may use other factors as appropriate when determining family contributions/co-payments. Lead Agencies may not use price of care or amount of subsidy payment in determining co-payments. Lead Agencies must ensure that the total payment to a child care provider is not reduced because of family’s lowered or waived co-payment.

##### 3.1.1 Family co-payment

Lead Agencies may not charge any family more than 7% of a family’s gross income, regardless of the number of children participating in CCDF.

- a. What is the maximum percent of a family’s gross income any family could be charged as a co-payment? **Currently, the Lead Agency has the maximum percentage set at eight percent. The Lead Agency acknowledges the 2024 CCDF rules set the maximum family copayment at seven percent. The Lead Agency has requested a waiver request to meet the seven percent in 2025.**
- b. Does the Lead Agency certify that their sliding fee scales are always based on income and family size (regardless of how many different scales they may use)?

Yes.

No. If no, describe:

3.1.2 Sliding fee scale

Provide the CCDF co-payments for eligible families in the table(s) below according to family size for one child in care.

a. Is the sliding fee scale set statewide?

Yes.

No. If no, describe how the sliding fee scale is set:

b. Complete the table below. If the sliding fee scale is not set statewide, complete the table for the most populous locality:

	<i>A</i>	<i>B</i>	<i>C</i>	<i>D</i>	<i>E</i>	<i>F</i>
Family Size	Lowest monthly income at initial eligibility where the family is first charged a co-pay (greater than \$0).	What is the monthly co-payment for a family of this size based on the income level in (A)?	What percentage of income is the co-payment in (B)?	Highest monthly income at initial eligibility where a family is charged a co-pay before a family is no longer eligible.	What is the monthly co-payment for a family of this size based on the income level in (D)?	What percentage of income is this co-payment in (E)?
1	0.00	0.00	0.00	0.00	0.00	0.00
2	778.00	10.00	0.50	3151.00	252.00	8.00
3	980.00	10.00	0.50	3981.00	318.00	8.00
4	1179.00	10.00	0.50	4810.00	385.00	8.00
5	1379.00	10.00	0.50	5639.00	451.00	8.00

c. What is the effective date of the sliding-fee scale(s)? 03/01/2024

d. Provide the link(s) to the sliding-fee scale(s):

[https://dphhs.mt.gov/assets/ecfsd/childcare/policymanual/Sliding\\_Fee\\_Scale\\_2023.pdf](https://dphhs.mt.gov/assets/ecfsd/childcare/policymanual/Sliding_Fee_Scale_2023.pdf)

e. Does the Lead Agency allow providers to charge families additional amounts above the required co-payment in instances where the provider’s price exceeds the subsidy payment?

No.

Yes.

If yes:

i. Provide the rationale for the Lead Agency’s policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy does not provide a barrier and promotes affordability and access for families: **Parents are responsible for any costs, including copayments, not covered by the Best Beginnings Scholarship or**



additional fees that a provider may charge. A child care provider is allowed to charge a family on the Best Beginnings Scholarship additional fees as long as the child care provider charges the same fees to a private pay family.

- ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families: **Providers participating in the scholarship program submit rate data to the Lead Agency which includes any registration fees they charge families. Additionally, the 2023 Montana Child Care Market Rate Survey Final Report includes information on the percentage of additional costs for families. 27% of home-based providers and 50% of centers charge a one-time registration. 16% of home-based providers and 37% of centers charge a recurring enrollment fee. 18% of home-based providers and 38% of centers charge an activity fee. 7% of home-based providers and 13% of centers charge a waitlist fee.**

### 3.2 Calculation of Co-Payment

Lead agencies must calculate a family's contribution (or co-payment), taking into account income and family size, and Lead Agencies may choose to consider other factors in their calculation.

#### 3.2.1 Family co-payment calculation

- a. How is the family's contribution calculated, and to whom is it applied? Check if the fee is a dollar amount or if the fee is a percent of income below, and then check all that apply under the selection, as appropriate.
  - i.  The fee is a dollar amount and (check all that apply):
    - The fee is per child, with the same fee for each child.
    - The fee is per child and is discounted for two or more children.
    - The fee is per child up to a maximum per family.
    - No additional fee is charged after a certain number of children.
    - The fee is per family.
    - The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe:
    - Other. Describe:
  - ii.  The fee is a percent of income and (check all that apply):
    - The fee is per child, with the same percentage applied for each child.
    - The fee is per child, and a discounted percentage is applied for two or more children.
    - The fee is per child up to a maximum per family.
    - No additional percentage is charged after a certain number of children.
    - The fee is per family.
    - The contribution schedule varies because it is set locally/regionally (as

indicated in 1.2.1). Describe:

Other. Describe:

- b. Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment? (Lead Agencies may not use price of care or amount of subsidy payment in determining co-payments).

No.

Yes.

If yes, check and describe those additional factors below:

i.  Number of hours the child is in care. Describe:

ii.  Quality of care (as defined by the Lead Agency). Describe:

iii.  Other. Describe:

- c. Describe any other policies the Lead Agency uses in the calculation of family co-payment to ensure it does not create a barrier to access. Check all that apply:

i.  Base co-payments on only a portion of the family's income. For instance, only consider the family income over the federal poverty level.

ii.  Base co-payments on the number of children in the family and reduce a portion of the co-payments as the number of children being served increases.

iii.  Other. Describe:

### 3.3 Waiving Family Co-payment

#### 3.3.1 Waiving family co-payment

The Lead Agency may waive family contributions/co-payments for many families to lower their costs and maximize affordability for families. Lead Agencies have broad flexibility in determining for which families they will waive co-payments.

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

No, the Lead Agency does not waive any family contributions/co-payments. (Skip to question 4.1.1.)

Yes. If yes, identify and describe which family contributions/co-payments waived.

i.  Families with an income at or below 100% of the Federal Poverty Level for families of the same size.

ii.  Families with an income above 100% but at or below 150% of the Federal Poverty Level for families of the same size.

iii.  Families experiencing homelessness.

iv.  Families with children with disabilities.

v.  Families enrolled in Head Start or Early Head Start.

vi.  Children in foster care or kinship care, or otherwise receiving or needing to receive protective services. Describe the policy: **The Lead Agency does not require**

payment for referrals from the Child and Family Services Division (CFSD). CFSD identifies if any child receiving protective services needs child care under the Best Beginnings Child Care Scholarship.

- vii. [ ] Families meeting other criteria established by the Lead Agency. Describe the policy:

## 4 Parental Choice, Equal Access, Payment Rates, and Payment Practices

Core purposes of CCDF are to provide participating parents choice in their child care arrangements and provide their children with equal access to child care compared to those children not participating in CCDF. CCDF requirements approach equal access and parental choice comprehensively to meet these foundational program goals. Providing access to a full range of child care providers helps ensure that families can choose a child care provider that meets their family’s needs. CCDF payment rates and practices must be sufficient to support equal access by allowing child care providers to recruit and retain skilled staff, provide high-quality care, and operate in a sustainable way. Supply-building strategies are also essential.

This section addresses many of the CCDF provisions related to equal access, including access to the full range of providers, payment rates for providers, co-payments for families, payment practices, differential payment rates, and other strategies that support parental choice and access by helping to ensure that child care providers are available to serve children participating in CCDF.

In responding to questions in this section, OCC recognizes that each Lead Agency identifies and defines its own categories and types of care. OCC does not expect Lead Agencies to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

### 4.1 Access to Full Range of Provider Options

Lead Agencies must provide parents a choice of providers and offer assistance with child care services through a child care certificate (or voucher) or with a child care provider that has a grant or contract for the provision of child care services. Lead Agencies are reminded that policies and procedures should not restrict parental access to any type or category of care or provider (e.g., center care, home care, in-home care, for-profit provider, non-profit provider, or faith-based provider, etc.).

#### 4.1.1 Parent choice

- a. Identify any barriers to provider participation, including barriers related to payment rates and practices, (including for family child care and in-home providers), based on provider feedback, public comment, and reports to the Lead Agency: **The 2023 Market Rate Survey (MRS) \offered providers an opportunity to share what they believe are challenges with the Best Beginning Scholarship program. Providers providing care in a family child care setting and in-home (provider’s home) are included in the “home” provider description. A vast majority of providers (87% of homes and 90% of centers) have children who receive the Best Beginnings scholarships. Over 40% of home-based and center-based providers reported that reimbursements being paid after care is provided is a challenge with accepting Best Beginnings recipients. Other challenges included low state reimbursement**

rates (53% of family child care and 55% of centers) and limitations on hours covered (45% of homes and 46% of centers).

- b. Does the Lead Agency offer child care assistance through vouchers or certificates?  
 Yes.  
 No.
- c. Does the Lead Agency offer child care assistance through grants or contracts?  
 Yes.  
 No.
- d. Describe how the parent is informed that the child care certificate allows the option to choose from a variety of child care categories, such as private, not-for-profit, faith-based providers; centers; family child care homes; or in-home providers: **Families receiving CCDF-funded child care can get a child care referral list from a Lead Agency scholarship contractor agency for a family, group, or center-based child care provider. A scholarship contractor can provide the family receiving CCDF-funded child care, assistance in answering questions about the use of a Family, Friend, or Neighbor (FFN) or Relative Care Exempt (RCE) Provider. Additionally, a parent is informed on the application.**
- e. Describe what information is included on the child care certificate: **The Lead Agency offers a child care certificate through the Best Beginnings Scholarship to parents in the form of an authorization plan. As part of the eligibility process, an authorization of services is created. A parent must have a provider selected for this authorization of services to be created. Once the eligibility worker creates an authorization of services for a child an Authorization Plan (certificate) is created and mailed to the parent. The Authorization Plan (certificate) includes the following information: (1) Authorization Plan (certificate) identification number; (2) family's unique case number; (3) facility information including facility unique identification number, name, type, and address; (4) information, including name and age, for each child in the family authorized for child care; (5) authorization (certificate) begin and end date; (6) the payment rate (at the time the certificate was created); (7) the amount of time that a child is authorized for care at the facility; (8) the family's copayment obligation; (9) and the eligibility worker's name, phone number, and work address.**

## 4.2 Assess Market Rates and Analyze the Cost of Child Care

To establish subsidy payment rates that ensure equal access, Lead Agencies must collect and analyze statistically valid and reliable data and have the option to conduct either a (1) market rate survey (MRS) reflecting variations in the price to parents of child care services by geographic area, type of provider, and age of child, or (2) an ACF pre-approved alternative methodology, such as a cost estimation model, which estimates the cost of care by incorporating both data and assumptions to estimate what expected costs would be incurred by child care providers and parents under different scenarios. All Lead Agencies must analyze the cost of providing child care through a narrow cost analysis or pre-approved alternative methodology.

Prior to conducting the MRS or pre-approved alternative, Lead Agencies must consult with the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)) or similar coordinating body, local child care

program administrators, local child care resource and referral agencies, and other appropriate entities; and organizations representing child care caregivers, teachers, and directors. Prior to conducting the MRS or pre-approved alternative methodology, Lead Agencies must consult with the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)) or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities; and organizations representing child care caregivers, teachers, and directors.

Note: Any Lead Agency considering using an alternative methodology instead of a market rate survey to set payment rates, is required to submit a description of its proposed approach to OCC for pre-approval in advance of developing and conducting the alternative methodology. Advance approval is not required if the Lead Agency plans to implement both an MRS and an alternative methodology to set rates at a percentile of the market rate, but a Lead Agency conducting a limited market rate survey and using it to inform their cost model would need pre-approval for this approach. In its request for ACF pre-approval, a Lead Agency must provide details on the following elements of their proposed alternative methodology:

- Overall approach and rationale for using proposed methodology
- Description of stakeholder engagement
- Data collection timeframe (if applicable)
- Description of the data and assumptions included in the methodology, including how these elements will yield valid and reliable results from the model
- Description of how the methodology will capture the universe of providers, and reflect variations by provider type, age of children, geographic location, and quality

#### 4.2.1 Completion of the market rate survey or ACF pre-approved alternative methodology

Did the Lead Agency conduct a statistically valid and reliable MRS or ACF pre-approved alternative methodology to meet the CCDF requirements to assess child care prices and/or costs and determine payment rates? Check only one based on which methodology was used to determine your payment rates.

- a.  Market rate survey.
- i. When were the data gathered (provide a date range; for instance, September – December 2023)? **Data was collected March-November 2023.**
- b.  ACF pre-approved alternative methodology.
- i.  The alternative methodology was completed.
- ii.  The alternative methodology is in process.

*If the alternative methodology was completed:*

When were the data gathered and when was the study completed?

Describe any major differences between the pre-approved methodology and the final methodology used to inform payment rates. Include any major changes to stakeholder engagement, data, assumptions or proposed scenarios.

*If the alternative methodology is in progress:*

Provide a status on the alternative methodology and timeline (i.e., dates when the alternative methodology activities will be conducted, any completed steps to date, anticipated date of completion, and expected date new rates will be in effect using the alternative methodology).

c. Consultation on data collection methodology.

Describe when and how the Lead Agency engaged the following partners and how the consultation informed the development and execution of the MRS or alternative methodology, as appropriate.

- iii. State Advisory Council or similar coordinating body: **The Lead Agency presented the Market Rate Survey (MRS) to the CCDF Advisory Council in January 2024. This provided a forum for the council to review the plan and provide input.**
- iv. Local child care program administrators: **The Lead Agency and its scholarship contractors used direct email communication to reach out to child care providers and families to collect data and disseminate information during the data collection period of March-November 2023. Additionally, Montana State University (MSU) reached out to individual child care providers for data collection during this time.**
- v. Local child care resource and referral agencies: **The Lead Agency coordinated with its scholarship contractors to collect data and communicate survey efforts. The Lead Agency consulted with scholarship contractors in February 2024.**
- vi. Organizations representing child care caregivers, teachers, and directors from all settings and serving all ages: **The Lead Agency presented the MRS to the CCDF Advisory Council in January 2024. This includes representatives from organizations representing all settings and serving all ages.**
- vii. Other. Describe: **The Lead Agency presented information on the MRS to the Montana Legislature Economic Affairs Interim Committee in January 2024.**

d. An MRS must be statistically valid and reliable.

An MRS can use administrative data, such as child care resource and referral data, if it is representative of the market. Please provide the following information about the market rate survey:

- i. When was the market rate survey completed? **12/31/2023**
- ii. What was the time period for collecting the information (e.g., all of the prices in the survey are collected within a three-month time period)? **Prices were collected March-November 2023, a nine-month period.**
- iii. Describe how it represented the child care market, including what types of providers were included in the survey: **The majority of child care providers in Montana were surveyed, including licensed child care centers and registered family and group home based child care facilities.**
- iv. What databases are used in the survey? Are they from multiple sources, including licensing, resource and referral, and the subsidy program? **Data was received solely from the Lead Agency CCUBBS database and from direct responses to the survey instrument.**

- v. How does the survey use good data collection procedures, regardless of the method for collection (mail, telephone, or web-based survey)? **The population of interest for the MRS study is child care providers and the children in their child care facilities. The unit of observation in the licensed child care centers is the provider, who reported on the rates charged to families based on the ages of their children. The units of observation in the registered and licensed child care homes are the provider for standard market rates and the child for actual market rates paid. When considering actual market rates paid, the rate paid by the parents of each child in the family or group child care facility was reported. While a substantial amount of information was collected on all providers and the children in their care, the study is focused on those children who received no discounts or scholarships. Head Start facilities were omitted from the summary financial statistics.**
  - vi. What is the percent of licensed or regulated child care centers responding to the survey? **75.00**
  - vii. What is the percent of licensed or regulated family child care homes responding to the survey? **53.00**
  - viii. Describe if the survey conducted in any languages other than English: **The survey was not conducted in other languages.**
  - ix. Describe if data were analyzed in a manner to determine price of care per child: **The data was reviewed to analyze the ages of children.**
  - x. Describe if data were analyzed from a sample of providers and if so, how the sample was weighted: **A sample of providers was not analyzed.**
- e. Price variations reflected.

The market rate survey data or ACF pre-approved alternative methodology data must reflect variations in child care prices or cost of child care services in specific categories.

- i. Describe how the market rate survey or pre-approved alternative methodology reflected variation in geographic area (e.g., county, region, urban, rural). Include information on whether parts of the State or Territory were not represented by respondents and include information on how prices or costs could be linked to local geographic areas. **Surveys were returned from across Montana's varied geography ensuring both rural and urban population price data was received. Every contracting region responded to the MRS including 344 home-based responses from the following regions (North West, 46; West, 52; South West, 36; South Central, 56; North Central, 36; North East, 32; and South East, 89), and 190 child care center responses from the following regions (North West, 20; West, 37; South West, 12; South Central, 53; North Central, 26; North East, 8; and South East, 34). The MRS determined that there were higher child care rates for high growth counties, which include Flathead, Gallatin, Lewis and Clark, Missoula, Ravalli, and Yellowstone. The high growth counties had population increases of 2,000 people or more from 2000 to 2022.**
- ii. Describe how the market rate survey or pre-approved alternative methodology reflected variation in type of provider (e.g., licensed providers, license-exempt providers, center-based providers, family child care home providers, home based

providers). The Market Rate Survey instrument link was emailed to all licensed center, registered group home, and registered family home child care provider in an announcement on 4/5/2023. Additional follow up in the form of an online postcard with link, individual phone numbers, and a mailed survey instrument were used to gather responses between April-July 2023.

- iii. Describe how the market rate survey or pre-approved alternative methodology reflected age of child (e.g., infant, toddler, preschool, school-age): **The Market Rate Survey instrument requested standard rates for full-time weekday care and standard part-time weekday rates for four age groups of children: infant (up to 12 months); toddler (1-2 years); preschool (3-5 years); and school age (6 years and older).**
- iv. Describe any other key variations examined by the market rate survey or ACF pre-approved alternative methodology, such as quality level: **N/A**

#### 4.2.2 Cost analysis

If a Lead Agency does not complete a cost-based pre-approved alternative methodology, they must analyze the cost of providing child care services through a narrow cost analysis. A narrow cost analysis is a study of what it costs providers to deliver child care at two or more levels of quality: (1) a base level of quality that meets health, safety, staffing, and quality requirements, and (2) one or more higher levels of quality as defined by the Lead Agency. The narrow cost analysis must estimate costs by levels of quality; include relevant variation by provider type, child's age, or location; and analyze the gaps between estimated costs and payment rates to inform payment rate setting. Lead agencies are not required to complete a separate narrow cost analysis if their pre-approved alternative methodology addresses all of the components required in the narrow cost analysis.

Describe how the Lead Agency analyzed the cost of child care through a narrow cost analysis or pre-approved alternative methodology for the FFY 2025–2027 CCDF Plan, including:

- a. How did the Lead Agency conduct a narrow cost analysis (e.g., a cost model, a cost study, existing data or data from the Provider Cost of Quality Calculator)? **The Narrow Cost Analysis assessed the annual earnings and determined the cost of care from a sampling of licensed child care centers registered family homes, and registered group homes. The Lead Agency conducted individual phone interviews with child care directors to review their financial records and determine the cost of care utilizing a cost study.**
- b. In the Lead Agency's analysis, were there any relevant variations by geographic location, category of provider, or age of child? **The Narrow Cost Analysis sampling included rural and urban child care providers, different sized programs (family home, group home, small center, medium center, or large center), and participation in the state's quality program. Age of child was not reviewed. While the Narrow Cost Analysis included both urban and rural child care providers, there were no relevant variations based on geography location. The Narrow Cost Analysis determined the cost of care varied by provider type. According to the Narrow Cost Analysis, the following was the annual cost of care (when including owner labor): family providers (\$11,822/child), group provider at (\$12,141/child), and center at (\$13,910/child).**
- c. What assumptions and data did the Lead Agency use to determine the cost of care at the base level of quality (e.g., ratios, group size, staff compensations, staff training, etc.)?



According to the Narrow Cost Analysis, 44% of the child care facilities sampled participated in the Lead Agency's QRS program. Child care providers were interviewed on the cost of provider quality child care, specifically the costs and revenue associated with the QRS program. All child care providers participating in the Lead Agency's QRS program reported that tuition does not cover the cost of care provided at their current QRS level and that tuition alone would not cover the cost of care provided at the next higher QRS level, if applicable. The cost of care included both a calculation based on reported expenses and enrollment. By including reported expenses to determine the cost of care and almost half of the providers participating in the QRS, an accurate picture for a base level of quality was given.

- d. How does the Lead Agency define higher quality and what assumptions and data did the Lead Agency use to determine cost at higher levels of quality (e.g., ratio, group size, staffing levels, staff compensation, professional development requirements)? A Lead Agency can use a quality improvement system or other system of quality indicators (e.g., accreditation, pre-Kindergarten standards, Head Start Program Performance Standards, or State-defined quality measures). **The Lead Agency set rates based on the 2023 Market Rate Study, which included a Market Rate Survey and a Narrow Cost Analysis, at the 75th percentile. Rates differ across program type, family home, group home, and center, as well as by age groups. Rates are higher for larger programs to reflect their higher costs of care per child, as demonstrated in the Narrow Cost Analysis. In addition to setting rates at the 75th percentile, the Lead Agency offers high-quality add-on payments for child care providers participating in the Lead Agency's QRS program at Quality Levels 2, 3, 4, and 5. This incentivizes high-quality child care providers to accept children participating in CCDF. The QRS program is meant to be a pathway to National Association for the Education of Young Children (NAEYC) and National Association of Family Child Care (NAFCC) accreditation. Programs who move through the levels will gain the skills and knowledge necessary to achieve the highest level of quality, national accreditation. Included in the QRS is education, qualifications, and training opportunities; family and community partnership strategies; creating and maintaining high quality supportive environments through the use of the Environmental Rating Scales (ECERS-3, ITERS-3, FCCERS-3); leadership and program management skill building with the use of the Program and Business Administration Scales (PAS, BAS). Additionally, the QRS is a Continuous Quality Improvement (CQI) model. CQI leads to safer environments, more efficient procedures, consistent program practices, workforce recruitment and retention, better learning outcomes and experiences and overall improves services and supports for the children, families, and staff.**
- e. What is the gap between cost and price, and how did the Lead Agency consider this while setting payment rates? Did the Lead Agency target any rate increases where gaps were the largest or develop any long-term plans to increase rates based on this information? **The Lead Agency set rates based on the 2023 Market Rate Study (MRS), which included a Market Rate Survey and a Narrow Cost Analysis, at the 75th percentile. The Narrow Cost Analysis defined the cost of care annually with owner labor included as a family provider at \$11,822 per child, a group provider at \$12,141 a child, and a center at \$13,910 a child. MRS established a statewide reimbursement half-day (0.01-5.00 hours/day) and a full-time day (5.01-12.00 hours/day). The cost of care from the Narrow Cost Analysis does not consider a child's age, so preschool age will be used. The annual cost of care for a**

preschool child are as follows: a family provider is \$10,392 (\$40 for a full time day X 5 days a week X 4.33 monthly conversion X 12 months); a group provider is \$11,691 (\$45 for a full time day X 5 days a week X 4.33 monthly conversion X 12 months); and a child care center is \$14,289 (\$55 for a full time day X 5 days a week X 4.33 monthly conversion X 12 months). In comparison between the annual MRS calculated rates and the Narrow Cost Analysis annual cost of care, both family and group providers have a cost of care in the Narrow Cost Analysis, but the MRS annual calculated rate was higher for child care centers. Since the annual cost of care is within \$1,500 for all child care provider types (approximately \$100 per month), the Lead Agency believes the established payment rates at the 75th percentile do not show large gaps between cost and price.

#### 4.2.3 Publicly available report on the cost and price of child care

The Lead Agency must prepare a detailed report containing the results of the MRS or ACF pre-approved alternative methodology and include the Narrow Cost Analysis if an ACF pre-approved alternative methodology was not conducted.

The Lead Agency must make this report widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public or stakeholders prior to conducting the MRS or ACF pre-approved alternative methodology.

a. Describe how the Lead Agency made the results of the market rate survey or ACF pre-approved alternative methodology report widely available to the public by responding to the questions below.

- i. Provide the date the report was completed: **1/17/2024**
- ii. Provide the date the report containing results was made widely available (no later than 30 days after the completion of the report): **2/1/2024**
- iii. Provide a link to the website where the report is posted and describe any other strategies the Lead Agency uses to make the detailed report widely available:  
**<https://dphhs.mt.gov/assets/ecfsd/childcare/documentsandresources/2023MontanaChildCareMarketRateSurvey.pdf>**

**The Lead Agency shared the report with the CCDF Advisory Council, scholarship contract agencies, and provider support contract agencies for further dissemination.**

- iv. Describe how the Lead Agency considered partner views and comments in the detailed report. Responses should include which partners were engaged and how partner input influenced the market rate survey or alternative methodology: **The Lead Agency presented the report to the CCDF Advisory Council and took oral comments. The survey tool contained space where a child care provider could comment. The Lead Agency received submitted comments from child care providers. The Lead Agency reviewed comments when analyzing the proposed statewide reimbursement rates set at the 75% percentile and completing fiscal expenditure estimates.**

### 4.3 Adequate Payment Rates

The Lead Agency must set CCDF subsidy payment rates in accordance with the results of the current MRS or ACF pre-approved alternative methodology and at a level to ensure equal access for eligible families to child care services comparable with those provided to families not receiving CCDF assistance. Lead Agencies are also required to provide a summary of data and facts to demonstrate how payment rates ensure equal access, which means the Lead Agency must also consider the costs of base level care and higher quality care as part of its rate setting. Finally, the Lead Agency must re-evaluate its payment rates at least every 3 years.

The ages and types of care listed in the base payment rate tables are meant to provide a snapshot of the categories of rates and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. If rates are not statewide, please provide all variations of payment rates when reporting base payment rates below.

Base rates are the lowest, foundational rates before any differentials are added (e.g., for higher quality or other purposes) and must be sufficient to ensure that minimum health, safety, quality, and staffing requirements are covered. These are the rates that will be used to determine compliance with equal access requirements.

#### 4.3.1 Payment rates

a. Are the payment rates that the Lead Agency is reporting in 4.3.2 set statewide by the Lead Agency?

Yes.

i. If yes, check if the Lead Agency:

Sets the same payment rates for the entire State or Territory.

Sets different payment rates for different regions in the State or Territory.

No.

ii. If no, identify how many jurisdictions set their own payment rates:

b. Provide the date the current payment rates became effective (i.e., date of last payment rate update based on most recent MRS or ACF pre-approved alternative methodology as reported in 4.2.1). **3/1/2024**

c. If the Lead Agency does not publish weekly rates, then how were the rates reported in 4.3.2 or 4.3.3 calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)? **The full-time day is multiplied by 5 days to calculate a weekly rate.**

#### 4.3.2 Base payment rates

a. Provide the base payment rates in the tables below. If the Lead Agency completed a market rate survey (MRS), provide the percentiles based on the most recent MRS for the identified categories. If the Lead Agency sets different payment rates for different regions in the State or Territory (and checked 4.3.1a ii), provide the rates for the most populous region as well as the region with payment rates set at the lowest percentile. Percentiles are not required if the Lead Agency also conducted an ACF pre-approved alternative methodology but must be reported if the Lead Agency conducted an MRS only.

The preamble to the 2016 final rule states that a benchmark for adequate payment rates is the 75<sup>th</sup> percentile of the most recent MRS. The 75<sup>th</sup> percentile benchmark applies to

the base rates. The 75<sup>th</sup> percentile is the number separating the lowest 75 percent of rates from the highest 25 percent. Setting rates at the 75<sup>th</sup> percentile, while not a requirement, would ensure that eligible families can afford three out of four child care providers. In addition to reporting the 75<sup>th</sup> percentile in the tables below, the Lead Agency must also report the 50<sup>th</sup> percentile and 60<sup>th</sup> percentile for each identified category.

If the Lead Agency conducted an ACF pre-approved alternative methodology, provide the estimated cost of care for the identified categories, as well as the percentage of the cost of care covered by the established payment rate. If the Lead Agency indicated it sets different payment rates for different regions in the State or Territory in 4.3.1.a, provide the estimated cost of care and the percentage of the cost of care covered by the established payment rate for the most populous region as well as the region with rates established at the lowest percent of the cost of care.

For each identified category below, provide the percentage of providers who are receiving the base rate without any add-ons or differential payments.

Provide the full-time weekly base payment rates in the table below. If weekly payment rates are not published, then the Lead Agency will need to calculate its equivalent.

i. Table 1: Complete if rates are set statewide. If rates are not set statewide, provide rates for most populous region. Percentiles are not required if the Lead Agency also conducted an ACF pre-approved alternative methodology but must be reported if the Lead Agency conducted an MRS only.

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
Center Care for Infants (6 months)	<b>58.00 Per Day</b>	<b>100.00</b>	<b>290.00</b>	<b>75.00</b>	<b>50.00</b>	<b>54.60</b>	<b>58.00</b>	<b>0.00 Per Day</b>	<b>0.00</b>

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
Family Child Care for Infants (6 months)	45.00 Per Day	100.00	225.00	75.00	37.00	40.00	45.00	0.00 Per Day	0.00
Center Care for Toddlers (18 months)	58.00 Per Day	100.00	290.00	75.00	50.00	54.60	58.00	0.00 Per Day	0.00
Family Child Care for Toddlers (18 months)	45.00 Per Day	100.00	225.00	75.00	37.00	40.00	45.00	0.00 Per Day	0.00
Center Care for Preschoolers (4 years)	55.00 Per Day	100.00	275.00	75.00	45.00	47.25	55.00	0.00 Per Day	0.00
Family Child Care for Preschoolers (4 years)	40.00 Per Day	100.00	200.00	75.00	40.00	40.00	45.00	0.00 Per Day	0.00
Center Care for School-Age (6 years)	50.00 Per Day	100.00	250.00	75.00	40.00	40.00	45.00	0.00 Per Day	0.00
Family Child Care for School-Age (6 years)	40.00 Per Day	100.00	200.00	75.00	40.00	40.00	45.00	0.00 Per Day	0.00

ii. Table 2: Do not complete if rates are set statewide. If rates are not set statewide, provide rates for region with payment rates set at the lowest percentile. Percentiles are not required if the Lead Agency also conducted an ACF pre-approved alternative methodology but must be reported if the Lead Agency conducted an MRS only.

Care Type	Base payment rate (specify unit, e.g., per day, per week, per month)	% of providers receiving Base rate	Full-Time Weekly Base Payment Rate	What is the percentile of the rate? (MRS)	What is the 50th percentile of the rate? (MRS)	What is the 60th percentile of the rate? (MRS)	What is the 75th percentile of the rate? (MRS)	What is the estimated cost of care? (Alternative Methodology)	What percent of the estimated cost of care is the rate?
Center Care for Infants (6 months)									
Family Child Care for Infants (6 months)									
Center Care for Toddlers (18 months)									
Family Child Care for Toddlers (18 months)									
Center Care for Preschoolers (4 years)									
Family Child Care for Preschoolers (4 years)									
Center Care for School-Age (6 years)									
Family Child Care for School-Age (6 years)									

b. Does the Lead Agency certify that the percentiles reported in the table above are calculated based on their most recent MRS or ACF pre-approved Alternative Methodology?

Yes.

No. If no, what is the year of the MRS or ACF pre-approved alternative methodology that the Lead Agency used? What was the reason for not using the most recent MRS or

ACF pre-approved alternative methodology? Describe:

#### 4.3.3 Tiered rates, differential rates, and add-ons

Lead Agencies may establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (e.g., a higher rate for serving children with special needs).

a. Does the Lead Agency provide any rate add-ons above the base rate?

Yes. If yes, describe the add-ons, including what they are, who is eligible to receive the add-ons, and how often are they paid: **The Market Rate Survey report showed a difference in child care reimbursement rates based off high growth county estimates. The high-growth counties in Montana (Flathead, Gallatin, Lewis and Clark, Missoula, Ravalli, and Yellowstone according to the U.S. Census Bureau) experienced an increase in population of at least 2,000 people between 2020 and 2022. An additional 15% is added to the base rate in these identified high-growth counties. All child care providers in the high-growth counties can receive the additional add-on.**

No.

b. Has the Lead Agency chosen to implement tiered reimbursement or differential rates?

Yes.

No. Tiered or differential rates are not implemented.

If yes, identify below any tiered or differential rates, and, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS or an ACF pre-approved alternative methodology. Check and describe all that apply:

i.  Differential rate for non-traditional hours. Describe: **The Lead Agency pays a 10% add-on for at least one hour of care provided outside of 6 am to 6 pm Monday-Friday.**

ii.  Differential rate for children with special needs, as defined by the Lead Agency. Describe: **A special needs add-on is at the discretion of the Lead Agency when a family and child care provider submit paperwork for the special needs subsidy. This additional subsidy is made available for a child care provider and provides an additional reimbursement over the base scholarship payment. A child with special needs is paid an additional 10% over the base scholarship payment, and a child with disabilities is paid an additional 15% over the base scholarship payment.**

iii.  Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on. Describe:

iv.  Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on. Describe:

v.  Differential rate for higher quality, as defined by the Lead Agency. Describe: **The Lead Agency has a high-quality add-on paid to child care providers that participate in the Lead Agency's QRS program at a defined quality level 2, 3, 4, or**

5 and that maintain their level for children participating in BBS. The following percentage add-ons are paid based on the Level: Level 2, 5%; Level 3, 10%, Level 4, 15%, and Level 5, 20%. There is no ad-on for quality Level 1.

- vi.  Other differential rates or tiered rates. For example, differential rates for geographic area or for type of provider. Describe:
- vii. If applicable, describe any additional add-on rates that you have besides those identified above.

Does the Lead Agency reduce provider payments if the price the provider charges to private-pay families not participating in CCDF is below the Lead Agency's established payment rate?

Yes. If yes, describe:

No.

#### 4.3.4 Establishing payment rates

Describe how the Lead Agency established payment rates:

- a. What was the Lead Agency's methodology or process for setting the rates or how did the Lead Agency use their data to set rates? **The Lead Agency set rates at the 75th percentile from the 2023 Market Rate Report and followed recommendations for statewide rates.**
- b. How did the Lead Agency determine that the rates are adequate to meet health, safety, quality, and staffing requirements under CCDF? **The Lead Agency set rates based on the 2023 Market Rate Study at the 75th percentile. The rates are set up by child care provider type and age of child. A higher rate is set for a child care center, which is supported by the Narrow Cost Analysis. A larger child care facility has a higher cost of care. Additionally, the rate is higher for an infant/toddler, which supports the lower child to staff ratio licensing requirement. To aid in quality requirements, a high quality add-on is paid for care provided to children receiving the scholarship at QRS Level 2, 3, 4, or 5.**
- c. How did the Lead Agency use the cost of care, either from the narrow cost analysis or the ACF pre-approved alternative methodology to inform rate setting, including how using the cost of care promotes the stabilization of child care providers? **The Narrow Cost Analysis defined the cost of care annually with owner labor included as a family provider at \$11,822 per child, a group provider at \$12,141 a child, and a center at \$13,910 a child. If the annual cost is divided by 52 weeks a year, the weekly cost of care would be the following: family providers (\$227.35/child), group providers (\$233.48/child), and centers (\$267.50/child). The cost of care from the Narrow Cost Analysis does not consider a child's age. Based on a preschool-aged child the weekly pay rate for family providers was \$200.00 per child and \$275.00 per child at centers. Since the weekly cost of care is comparable to the middle age category (preschool age), the Lead Agency believes the established payment rates at the 75th percentile promote the stabilization of child care providers.**
- d. How did the Lead Agency account for the cost of higher quality while setting payment rates? **The Lead Agency pays a high-quality add-on for care provided to children receiving the scholarship at QRS Level 2, 3, 4, or 5 providers.**
- e. Identify and describe any additional facts (not covered in responses to 4.3.1 – 4.3.3) that the Lead Agency considered in determining its payment rates to ensure equal access. **The**



Lead Agency established different payment rates for the following child care provider types: Family, Friend, and Neighbor (FFN) and Relative Care Exempt (RCE) provider. The Lead Agency established payment rates for these provider types based on data from the 2023 Market Rate Survey Report. FFNs and RCEs were surveyed in the October 2023 postcard rate survey; however, there was not enough data to establish rates. The Lead Agency set FFN payment rates at 85% of the family child care facility based on a reduced licensing burden relative to family child care facilities. The Lead Agency set RCE payment rates at 85% of the FFN payment rates, based on a reduced licensing burden relative to FFN providers.

#### 4.4 Payment Practices to Providers

Lead Agencies must use subsidy payment practices that reflect practices that are generally accepted in the private pay child care market. The Lead Agency must ensure timeliness of payment to child care providers by paying in advance or at the beginning of delivery of child care services. Lead Agencies must also support the fixed cost of child care services based on paying by the child’s authorized enrollment, or if impracticable, an alternative approach that will not undermine the stability of child care programs as justified and approved through this Plan.

Lead Agencies must also (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time, and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents. These policies apply to all provider types unless the Lead Agency can demonstrate that in limited circumstances the policies would not be considered generally-accepted payment practices.

In addition, Lead Agencies must ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family’s eligibility status that could impact payment, and have timely appeal and resolution processes for any payment inaccuracies and disputes.

##### 4.4.1 Prospective and enrollment-based payment practices

Lead Agencies must use payment practices for all CCDF child care providers that reflect generally-accepted payment practices of providers serving private-pay families, including paying providers in advance or at the beginning of the delivery of child care services and paying based on a child’s authorized enrollment or an alternative approach for which the Lead Agency must demonstrate paying for a child’s authorized enrollment is not practicable and it will not undermine the stability of child care programs. Lead Agencies may only use alternate approaches for subsets of provider types if they can demonstrate that prospective payments and authorized enrollment-based payment are not generally-accepted for a type of child care setting. Describe the Lead Agency payment practices for all CCDF child care providers:

- a. Does the Lead Agency pay all provider types prospectively (i.e., in advance of or at the beginning of the delivery of child care services)?

Yes. If yes, describe:

No, it is not a generally-accepted payment practice for each provider type. If no, describe the provider type not paid prospectively and the data demonstrating it is not a generally-accepted payment practice for that provider type, and describe the Lead

Agency's payment practice that ensures timely payment for that provider type: **The Lead Agency acknowledges the 2024 CCDF rules requires prospective payment for direct services for children participating in CCDF. The Lead Agency has requested a waiver request to meet this requirement and will be seeking technical assistance on maximize the efficient use to meet the needs of the early childhood system. Currently, the Lead Agency pays within 21 calendar days of the receipt of a complete invoice for services. Once a child care provider submits an invoice, the invoice is processed within three business days. Payments are made twice per week. After a payment, providers receive a Statement of Payment (SOP) and families receive an Explanation of Benefits (EOB) explaining what was paid for a child's care. The Lead Agency will implement a new database in 2025 and plans to incorporate prospective payment functionality. Additionally, the Lead Agency must adopt new policies to change payment methodology, and this will require public comment through the Montana Administrative Procedures Act (MAPA).**

b. Does the Lead Agency pay based on authorized enrollment for all provider types?

Yes. The Lead Agency pays all providers by authorized enrollment and payment is not altered based on a child's attendance or the number of absences a child has.

No, it is not a generally-accepted practice for each provider type. If no, describe the provider types not paid by authorized enrollment, including the data showing it is not a generally-accepted payment practice for that provider type, and describe how the payment policy accounts for fixed costs: **The Lead Agency does not pay prospectively. The Lead Agency will implement a new database in 2025 with plans to incorporate prospective payment functionality. The Lead Agency will enact new policies to change payment methodology. Currently, the Lead Agency reimburses for the full payment amount if the child attends at least one day in a month. A parent or referring agency determines a child's need for care up to 50 hours per week. Authorized child care can meet the child's need and does not directly follow the parent's schedule.**

It is impracticable. Describe provider type(s) for which it is impracticable, why it is impracticable, and the alternative approach the Lead Agency uses to delink provider payments from occasional absences, including evidence that the alternative approach will not undermine the stability of child care programs, and thereby accounts for fixed costs:

#### 4.4.2 Other payment practices

Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time, and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents, unless the Lead Agency provides evidence that such practices are not generally-accepted for providers caring for children not participating in CCDF in its State or Territory.

a. Does the Lead Agency pay all providers on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time)?

Yes.

No. If no, describe the policies or procedures that are different than paying on a part-time or full-time basis and the Lead Agency's rationale for not paying on a part-time or full-time basis:

b. Does the Lead Agency pay for reasonable mandatory registration fees that the provider

charges to private-paying parents?

Yes. If yes, identify the fees the Lead Agency pays for: **A registration fee is paid for registering a child in a registered family, registered group, or licensed child care center, if the fee is charged to all who enroll in the facility. The payment will not exceed \$30.**

No. If no, identify the data and how data were collected to show that paying for fees is not a generally-accepted payment practice:

- c. Describe how the Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process: **When an authorization of services is created, an Authorization Plan is generated by the database. The authorization plan is a notification sent to the parent and child care provider. It includes the following information: (1) number of children authorized to receive child care assistance; (2) number of hours authorized per week; (3) number of months authorized; (4) name of the child care provider; (5) and amount of monthly copayment the parent must pay the provider. Additionally, the Authorization Plan contains provider payment policies and provider rates. The Lead Agency does not charge any fees charged to the providers, so this is not included in the Authorization Plan. Contact information for the scholarship services contractor staff is listed on the Authorization Plan to aid in the dispute resolution process.**
- d. Describe how the Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur: **If a parent reports a change to a Lead Agency scholarship contractor agency or the agency becomes aware of a change, the scholarship contractor determines if the change will impact the family's eligibility status. Upon the parent reporting the change, the scholarship contractor will update the case file in the database generating an automatic notification from the database. The notification is issued the same day the change is recorded. If the reported change will be an adverse action, a 15-calendar day notice is given to both the parent and the child care provider. An adverse action may include a change in the family's eligibility status. Finally, a case closure notice is sent to the parent and child care provider the day a case is closed.**
- e. Describe the Lead Agency's timely appeal and resolution process for payment inaccuracies and disputes: **A weekly error log is created by the Lead Agency database for payments that should have been made but were unable to go to the intended party for the Best Beginnings Child Care Scholarship. The weekly error log includes a payment amount, a unique identifier, and the type of payment issue such as missing W-9 form. Error logs are emailed to the Lead Agency twice per week. The Lead Agency reviews payments rejected by the database upon receipt of the error log. A child care provider can contact a scholarship services contractor staff to inquire about a payment inaccuracy or dispute. The scholarship services contractor staff will contact the Lead Agency if the inquiry requires assistance to resolve.**
- f. Other. Describe any other payment practices established by the Lead Agency:

#### 4.4.3 Payment practices and parent choice

How do the Lead Agency’s payment practices facilitate provider participation in all categories of care? **Payment practices support equal access to a range of Lead Agency regulated and monitored providers. A family or referring agency determines a child’s need for authorized child care, up to 50 hours/week. Authorized child care can meet the child’s need and does not have to directly follow the parent’s schedule. The monthly authorized amount is paid if a child is authorized for the entire month and attends at least one day establishing continuity of care for providers and families and financial stability for provider. Providers are reimbursed on a half-time day (part-time) or full-time day (full-time) basis. Registration fees are paid to providers who collect this fee. This fee must be charged to all families regardless of how they pay for childcare.**

## 4.5 Supply Building

Building a supply of high-quality child care that meets the needs and preferences of parents participating in CCDF is necessary to meet CCDF’s core purposes. Lead Agencies must support parent choice by providing some portion of direct services via grants or contracts, including at a minimum for children in underserved geographic areas, infants and toddlers, and children with disabilities.

### 4.5.1 Child care services available through grants or contracts

Does the Lead Agency provide direct child care services through grants or contracts for child care slots?

Yes, statewide. Describe how the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

Yes, in some jurisdictions, but not statewide. Describe how many jurisdictions use grants or contracts for child care slots and how the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

No. If no, describe any Lead Agency plans to provide direct child care services through grants and contracts for child care slots: **The Lead Agency is gathering information to understand the areas of need in Montana to meet the federal requirements to provide direct child care services through contracts and guides. Additionally, the Lead Agency must evaluate cost and implementation, including IT/database expenses.**

If no, skip to question 4.5.2.

i. If yes, identify the populations of children served through grants or contracts for child care slots (check all that apply). For each population selected, identify the number of slots allocated through grants or contracts for direct service of children receiving CCDF.

Children with disabilities. Number of slots allocated through grants or contracts:

Infants and toddlers. Number of slots allocated through grants or contracts:

Children in underserved geographic areas. Number of slots allocated through grants or contracts:

Children needing non-traditional hour care. Number of slots allocated through grants or contracts:

School-age children. Number of slots allocated through grants or contracts:

Children experiencing homelessness. Number of slots allocated through grants or contracts:

Children in urban areas. Percent of CCDF children served in an average month:

Children in rural areas. Percent of CCDF children served in an average month:

Other populations. If checked, describe:

- ii. If yes, how are rates for slots funded by grants and contracts determined by the Lead Agency?

#### 4.5.2 Care in the child's home (in-home care)

The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use.

Will the Lead Agency limit the use of in-home care in any way?

Yes.

No.

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

- i.  Restricted based on the minimum number of children in the care of the in-home provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe:
- ii.  Restricted based on the in-home provider meeting a minimum age requirement. Describe:
- iii.  Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: **The Lead Agency allows in-home care if a parent works non-traditional hours.**
- iv.  Restricted to care by relatives. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider.) Describe:
- v.  Restricted to care for children with special needs or a medical condition. Describe: **The Lead Agency allows in-home care if a child meets the definition for a child with special needs or a child with disabilities.**
- vi.  Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe:
- vii.  Other. Describe: **The Lead Agency allows in-home care for a teen parent.**

#### 4.5.3 Shortages in the supply of child care

Lead Agencies must identify shortages in the supply of child care providers that meet parents' needs and preferences.

What child care shortages has the Lead Agency identified in the State or Territory, and what is the plan to address the child care shortages?

- a. In infant and toddler programs:
  - i. Data sources used to identify shortages: **The Lead Agency uses data from the US Census Bureau’s 2020 Decennial Census for children aged 0-12 by county to determine the possible need for child care. The Lead Agency tracks child care providers by type and licensed capacity from the Lead Agency’s database. Additionally, the Lead Agency will refer to the Montana Department of Labor’s reports for information on the child care industry.**
  - ii. Method of tracking progress: **The Lead Agency will use the Child Care Deserts: An Analysis of Child Care Supply and Demand Gaps in Montana (January 2024) county level data as a baseline and track progress in creating infant/toddler slots.**
  - iii. What is the plan to address the child care shortages using family child care homes? **The Lead Agency funds the Provider Financial Assistance Program through the provider support contractor agencies. This program allows child care providers to receive one time grant funds up to \$3,000 to expand a program to serve more infants and toddlers.**
  - iv. What is the plan to address the child care shortages using child care centers? **The Lead Agency funds the Provider Financial Assistance Program through the provider support contractor agencies. This program allows child care providers to receive one time grant funds up to \$3,000 to expand a program to serve more infants and toddlers.**
- b. In different regions of the State or Territory:
  - i. Data sources used to identify shortages: **The Lead Agency uses data from the US Census Bureau’s 2020 Decennial Census for children aged 0-12 by county to determine the possible need for child care. The Lead Agency tracks child care providers by type and licensed capacity from the Lead Agency’s database. Additionally, the Lead Agency will refer to the Montana Department of Labor’s reports for information on the child care industry.**
  - ii. Method of tracking progress: **The Lead Agency will use the Child Care Deserts: An Analysis of Child Care Supply and Demand Gaps in Montana (January 2024) county level data as a baseline and track progress in remediating child care deserts.**
  - iii. What is the plan to address the child care shortages using family child care homes? **The Lead Agency funds the Provider Financial Assistance Program through the provider support contractor agencies. This program allows child care providers to receive one time grant funds up to \$3,000 for startup costs or other child care facility needs.**
  - iv. What is the plan to address the child care shortages using child care centers? **The Lead Agency funds the Provider Financial Assistance Program through the provider support contractor agencies. This program allows child care providers to receive one time grant funds up to \$3,000 for startup costs or other child care facility needs.**
- c. In care for special populations:

- i. Data sources used to identify shortages: **As part of outreach for the State Plan, the Lead Agency requested feedback on special populations. This included the State Plan Public Hearing, CCDF Advisory Council, local CCR&R agencies, and Montana Child Care Center Symposium. The Lead Agency has received feedback that special populations are viewed as vulnerable populations in Montana, which include refugee families and families with limited English proficiency.**
- ii. Method of tracking progress: **Beginning 10/1/2023, the Lead Agency had scholarship services contractors reporting the number of families inquiring about BBS where English is a second language, how many families have applied for BBS, and what barriers a family experienced when accessing BBS. The Lead Agency will track progress by trying to identify and resolve barriers.**
- iii. What is the plan to address the child care shortages using family child care homes? **The Lead Agency will work with provider supports contractors and scholarship services contractor to identify success stories and determine if there is possible to replicate this in other areas where there is a need.**
- iv. What is the plan to address the child care shortages using child care centers? **The Lead Agency will work with provider supports contractors and scholarship services contractor to identify success stories and determine if there is possible to replicate this in other areas where there is a need.**

#### 4.5.4 Strategies to increase the supply of and improve quality of child care

Lead Agencies must develop and implement strategies to increase the supply of and improve the quality of child care services. These strategies must address child care in underserved geographic areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours.

How does the Lead Agency identify any gaps in the supply and quality of child care services and what strategies are used to address those gaps for:

- a. Underserved geographic areas. Describe: **In Child Care Deserts: An Analysis of Child Care Supply and Demand Gaps in Montana (January 2024), the child care capacity as a percent demand from children under six years old is outlined by county need. This data shows geographically (by county) underserved areas. The Lead Agency funds the Provider Financial Assistance Program through the provider support contractor agencies. This program assists child care providers with a one-time grant fund up to \$3,000 to expand a program, mitigate an emergency, or start a new program.**
- b. Infants and toddlers. Describe: **The Lead Agency has data from child care providers on serving infant/toddlers and supply needs on a statewide basis. Child care providers reported waitlist by age group in the 2023 Market Rate Survey Report. Thirty-six percent of family and group home providers and 41% of center providers had waiting lists for full-time infants. Thirty-three percent home-based providers and 44% of center providers had waiting lists for full-time toddlers. In the 2024 Montana Child Care Business Connect Annual Survey of current and prospective child care owners and administrators, 77% of respondents reported providing care to infants and 92% of respondents to toddlers. The Lead Agency has licensed capacity for infant/toddler ages, and BBS participation for infant/toddler ages. In Child Care Deserts: An Analysis of Child Care Supply and Demand Gaps in Montana (January 2024), the infant child care capacity as a percent demand is**

outlined by county need. The Lead Agency pays a higher payment rate for infant and toddlers to support child care providers.

- c. Children with disabilities. Describe: **BBS tracks information on children with disabilities through the Special Needs Subsidy, which includes both children with disabilities and children with special needs. While the Lead Agency has available data, it is difficult to analyze in the current computer database. The Lead Agency plans to have available reports with the new computer database, which will be live in late 2025. With this information, the Lead Agency will be able to see geographically where non-traditional needs are not being met. In the 2024 Montana Child Care Business Connect Annual Survey of current and prospective child care owners and administrators, 36% of respondents reported providing care for children with special needs. The Lead Agency utilizes technical assistance contracts to prioritize high needs communities and populations. BBS pays an add-on when a child care provider has outlined what additional supports a child needs in the child care setting and a parent has submitted documentation meeting the definition as a child with special needs or a child with disabilities.**
- d. Children who receive care during non-traditional hours. Describe: **BBS requires actual time in and time out information for children on a monthly invoice. The Lead Agency has available data on time in and time out; however, analyzing the data is difficult in the current computer database. The Lead Agency plans to have available reports with the new computer database, no earlier than fall 2025. With this information, the Lead Agency will be able to see geographically where non-traditional needs are not being met. In the 2024 Montana Child Care Business Connect Annual Survey of current and prospective child care owners and administrators, 6% of respondents reported offering non-traditional hours. BBS pays a non-traditional add-on when a child attends at least one hour outside of 6 am-6 pm Monday to Friday.**
- e. Other. Specify what population is being focused on to increase supply or improve quality. Describe:

#### 4.5.5 Prioritization of investments in areas of concentrated poverty and unemployment

Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.

Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have access to high-quality programs. **All Lead Agency QRS program participants must serve a percentage of children with high needs based on their QRS level. QRS programs must serve a minimum 10% high needs children in their programs at Level 1, Level 2, and Level 3. Level 4 and Level 5 programs must serve a minimum 15% high needs children. This percentage determined using the Average Daily Attendance (ADA) or licensed capacity, whichever is less. High needs is defined as: Children receiving services from Part B, Part C, Home Visiting, Children's Mental Health Bureau, or the Children and Family Services Division; Evidence that the child has special healthcare needs (such as food allergies, asthma, diabetes, special dietary restrictions, on extended prescribed medication, etc.); Infants age 0-19 months (program must be serving this population, not just licensed for this population); Enrolled Tribal member Children of teenage parent(s); Children being served through Best Beginnings subsidy; Children of**



migrant families; Children who are homeless; or Other children as identified by the Lead Agency. Provider support contractor(s) recruit and support new providers to improve the quality of care in geographic areas with significant concentrations of poverty and unemployment, and with minimal access to high-quality programs.

## 5 Health and Safety of Child Care Settings

Child care health and safety standards and enforcement practices are essential to protect the health and safety of children while out of their parents' care. CCDF provides a minimum threshold for child care health and safety policies and practices but leaves authority to [Lead Agencies](#) to design standards that appropriately protect children's safety and promote nurturing environments that support their healthy growth and development. Lead Agencies should set standards for ratios, group size limits, and provider qualifications that help ensure that the child care environment is conducive to safety and learning and enable caregivers to promote all domains of children's development.

CCDF health and safety standards help set clear expectations for CCDF providers, form the foundation for health and safety training for child care workers, and establish the baseline for monitoring to ensure compliance with health and safety requirements. These health and safety requirements apply to all providers serving children receiving CCDF services – whether the providers are licensed or license-exempt, must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures by the [Lead Agency](#). CCDF-required annual monitoring and enforcement actions help ensure that CCDF providers are adopting and implementing health and safety requirements.

Through child care licensing, [Lead Agencies](#) set minimum requirements, including health and safety requirements, that child care providers must meet to legally operate in that State or Territory. In some cases, CCDF health and safety requirements may be integrated within the licensing system for licensed providers and may be separate for CCDF providers who are license-exempt.

This section addresses CCDF health and safety requirements, [Lead Agency](#) licensing requirements and exemptions, and comprehensive background checks.

When responding to questions in this section, OCC recognizes that each [Lead Agency](#) identifies and defines its own categories of care. OCC does not expect [Lead Agencies](#) to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that best match the CCDF categories of care.

### 5.1 Licensing Requirements

Each Lead Agency must ensure it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF funds).

#### 5.1.1 Providers subject to licensing

For each category of care listed below, identify the type of providers subject to licensing and describe the licensing requirements.

- a. Identify the center-based provider types subject to child care licensing: **Child Care Center. Child care center is an out-of-home place in which child care is provided to 16 or more children on a regular basis. This license type is subject to extensive licensing requirements.**

Are there other categories of licensed, regulated, or registered center providers the Lead Agency does not categorize as license-exempt?

Yes. If yes, describe:

No.

- b. Identify the family child care providers subject to licensing: **Family Child Care facility, Group Child Care facility. Family Child Care facility means a private residence in which day care is provided to three to eight children on a regular basis. Group day-care home means a private residence or other structure in which day care is provided to 9 to 15 children on a regular basis. Both of these license types are subject to extensive licensing requirements.**

Are there other categories of regulated or registered family child care providers the Lead Agency does not categorize as license-exempt?

Yes. If yes, describe:

No.

- c. Identify the in-home providers subject to licensing: **NA**

Are there other categories of regulated or registered in-home providers the Lead Agency does not categorize as license-exempt?

Yes. If yes, describe: **Friends, Family, Neighbors (FFN) is a child care provider type that provides care to no more than four children from separate families or all children from a sibling group. Relative Care Exempt (RCE) is a child care provider type that provides care to no more than two children from separate households or all children from a sibling group. A RCE is the brother, sister, first cousin, nephew, niece, grandchild, or great grandchild of the person providing child care and includes a child in a step, foster, or adoptive relationship.**

No.

#### 5.1.2 CCDF-eligible providers exempt from licensing

Identify the categories of CCDF-eligible providers who are exempt from licensing requirements, the types of exemptions, and describe how these exemptions do not endanger the health, safety, and development of children. -Relative providers, as defined in CCDF, are addressed in subsection 5.8.

- a. License-exempt center-based child care. Describe by answering the questions below.
- i. Identify the categories of CCDF-eligible center-based child care providers who are exempt from licensing requirements. **NA**
  - ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. **NA**
  - iii. Describe how the exemptions for these CCDF-eligible providers do not endanger

the health, safety, and development of children. **NA**

- b. License-exempt family child care. Describe by answering the questions below.
- i. Identify the categories of CCDF-eligible family child care providers who are exempt from licensing requirements. **Friends, Family, Neighbors (FFN) and Relative Care Exempt (RCE) child care provider types are license-exempt.**
  - ii. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. **Friends, Family, Neighbors (FFN) is a child care provider type that provides care to no more than four children from separate families or all children from a "sibling group." Relative Care Exempt (RCE) is a child care provider type that provides care to no more than two children from separate households or all children from a sibling group. A RCE is the brother, sister, first cousin, nephew, niece, grandchild, or great grandchild of the person providing child care and includes a child in a step, foster, or adoptive relationship. A sibling group means all children are from the same household. For the purposes of FFN, this can also include first cousins and foster children who are not blood related. There is no restrictions on ages of children in care. Care cannot provided for longer than a 24 hour period.**
  - iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. **A FFN provider is subject to certain licensing requirements including annual inspections and background checks. These program types do not endanger the health, safety, and development of children as the following provisions apply to these programs: FFN providers are subject to the federally prescribed comprehensive background checks, must complete the trainings Health and Safety Overview for Family, Friend, and Neighbor Providers (must be renewed every 3 years) and Fundamentals of Family, Friend, and Neighbor Providers Orientation. In addition, FFN providers are required to complete Pediatric CPR and First Aid and must complete 8 hours of approved annual training.**  
  
**A RCE provider is subject to certain licensing requirements including background checks. These program types do not endanger the health, safety, and development of children as the following provisions apply to these programs: RCE providers are subject to the federally prescribed comprehensive background checks, must complete the trainings Health and Safety Overview (must be renewed every 3 years) and Fundamentals Orientation. In addition, RCE providers are required to complete Pediatric CPR and First Aid.**
- c. In-home care (care in the child's own home by a non-relative). Describe by answering the questions below.
- i. Identify the categories of CCDF-eligible in-home care (care in the child's own home by a non- relative) providers who are exempt from licensing requirements. **A Family, Friend, and Neighbor (FFN) can provide care in a child's home. A FFN provider can be a non-relative to the child in care. FFNs are license-exempt.**
  - ii. Describe the exemptions based on length of day, threshold on the number of

children in care, ages of children in care, or any other factors applicable to the exemption. **A FFN may or may not be related to the child; however, a FFN is subject to certain licensing requirements including annual inspections. In-home care is limited to a child approved as a child with disabilities or a child with special needs, a child of a teen parent, or a child whose parent works non-traditional hours. They can watch a sibling group of any size. They cannot provide care for longer than a 24 hour period.**

- iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. **A FFN provider are subject to certain licensing requirements including annual inspections and background checks. These program types do not endanger the health, safety, and development of children as the following provisions apply to these programs: FFN providers are subject to the federally prescribed comprehensive background checks, must complete the trainings Health and Safety Overview for Family, Friend, and Neighbor Providers (must be renewed every 3 years) and Fundamentals of Family, Friend, and Neighbor Providers Orientation. In addition, FFN providers are required to complete Pediatric CPR and First Aid and must complete 8 hours of approved annual training. FFNs are license exempt.**

## 5.2 Ratios, Group Size, and Qualifications for CCDF Providers

Lead Agencies must have child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate staff:child ratios, group size limits for specific age populations, and the required qualifications for providers. Lead Agencies should map their categories of care to the CCDF categories. Exemptions for relative providers will be addressed in subsection 5.8.

### 5.2.1 Age classifications

Describe how the **Lead Agency** defines the following age classifications (e.g., Infant: 0 – 18 months).

- a. Infant. Describe: **Birth through the end of the 18th month.**
- b. Toddler. Describe: **19-36 months**
- c. Preschool. Describe: **3 years old through the end of the 4th year.**
- d. School-Age. Describe: **5 years old and up**

### 5.2.2 Ratio and group size limits

Provide the ratio and group size limits for settings and age groups below.

- a. Licensed CCDF center-based care:
  - i. Infant.

Ratio: **Children:provider  
4:1 (Birth through the end of the 11th month); 6:1 (12 months through the end of the 23rd month)**

Group size: **12 children (Birth through the end of the 11th month); 12**

**children (12 months through the end of the 23rd month)**

ii. Toddler.

Ratio: **Children:provider**  
**8:1 (2 years up to 3 years old)**

Group size: **16 children**

iii. Preschool.

Ratio: **Children:provider**  
**10:1 (3 years through 5 years old)**

Group size: **20 children**

iv. School-Age.

Ratio: **Children:provider**  
**20:1 (6 years old and up)**

Group size: **40 children**

v. Mixed-Age Groups (if applicable).

Ratio: **Must follow the ratio for the youngest child in the group**

Group size: **Must follow the group size for the youngest child in the group.**

**Due to legislative action of House Bill 422 passed and signed into law following the 2023 legislative session and implemented in October 1, 2023, child to staff ratios and ages of children affecting only child care centers were changed and no longer correlate with age classifications found in administrative rule.**

b. If different, provide the ratios and group size requirements for the license-exempt center-based providers who receive CCDF funds under the following age groups:

i.  Not applicable. There are no differences in ratios and group size requirements.

ii. Infant:

iii. Toddler:

iv. Preschool:

v. School-Age:

vi. Mixed-Age Groups:

c. Licensed CCDF family child care home providers:

i. Infant (if applicable)

Ratio: **Children:provider**  
**4:1 (up to 3 children can be under age 2)**

Group size: **8 children**

ii. Toddler (if applicable)

Ratio: **Children:provider**  
**8:1 (up to 3 children can be under age 2)**

Group size: **15 children**

iii. Preschool (if applicable)

Ratio: **Children:provider**  
**8:1 (up to 3 children can be under age 2)**

Group size: **15 children**

iv. School-Age (if applicable)

Ratio: **Children:provider**  
**8:1 (up to 3 children can be under age 2)**

Group size: **15 children**

v. Mixed-Age Groups

Ratio: **Children:provider**  
**8:1 (up to 3 children can be under age 2)**

Group size: **15 children**

d. Are any of the responses above different for license-exempt family child care homes?

No.

Yes. If yes, describe how the ratio and group size requirements for license-exempt providers vary by age of children served. **Family, Friend, and Neighbor**

**Ratio:**

**Children:provider**

**4:1**

**Group size:**

**4 children**

**Relative Care Exempt (RCE)**

**Ratio:**

**Children:provider**

**2:1**

**Group size:**

**2 children**

Not applicable. The Lead Agency does not have license-exempt family child care homes.

e. Licensed in-home care (care in the child's own home):

i. Infant (if applicable)

Ratio: **NA**

Group size: **NA**

- ii. Toddler (if applicable)
    - Ratio: **NA**
    - Group size: **NA**
  - iii. Preschool (if applicable)
    - Ratio: **NA**
    - Group size: **NA**
  - iv. School-Age (if applicable)
    - Ratio: **NA**
    - Group size: **NA**
  - v. Mixed-Age Groups (if applicable)
    - Ratio: **NA**
    - Group size: **NA**
- f. Are any of the responses above different for license-exempt in-home care?
- No.
- Yes. If yes, describe how the ratio and group size requirements for license-exempt in-home care vary by age of children served. **Family, Friend, and Neighbor**
- Ratio:**  
**Children:provider**  
**4:1**
- Group size:**  
**4 children**
- Relative Care Exempt (RCE)**
- Ratio:**  
**Children:provider**  
**2:1**
- Group size:**  
**2 children**

### 5.2.3 Teacher/caregiver qualifications for licensed, regulated, or registered care

Provide the teacher/caregiver qualifications for each category of care.

- a. Licensed center-based care
  - i. Describe the teacher qualifications for licensed CCDF center-based care (e.g., degrees, credentials, etc.), including any variations based on the ages of children in care: **Lead teacher qualifications: (1) complete facility overview on-the-job training; (2) be current on the ECP Practitioner Registry; (3) have 16 hours of**

annual training; (4) have current certification for infant, child, and adult CPR and infant choking response, and pediatric first aid; (5) successfully complete required early childhood teacher health and safety orientation every three years; (6) be at least 18 years old; (7) and be a level 2 or above on the ECP Practitioner Registry. Teachers that work at facilities that exclusively serve children ages 5 and up are waived from the Infant Safety essentials portion of health and safety orientation. There is no variation as to training requirements based on the number of staff employed. Staff qualification do not change based on the ages of the children.

- ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed: **A center director must meet the following minimum requirements: (1) be at least 18-years of age; (2) be current on the ECP Practitioner Registry (have 16 hours of annual training); (3) successfully completed teacher orientation as indicated in ARM 37.95.163; (4) have one of the following: (i) current ECP Practitioner Registry level 4 or higher; (ii) current ECP Practitioner Registry level 3, plus two years of experience in a licensed child care facility or Head Start; (iii) current ECP Practitioner Registry level 2, (iv) three years of experience in a licensed child care facility or Head Start; (v) a bachelor degree or higher in any field, (vi) plus completion of the 60 hour infant-toddler training and the 60 hour preschool course, or 120 hours of alternate training approved by the department; or a combination of education and experience may be considered. This option must be approved by the Child Care Licensing Program manager. The director must complete the program management essentials course within 60 days of becoming a director or successfully complete an approved new director orientation such as program essentials. Center directors must be current on the ECP Practitioner Registry; have current certification for infant, child, and adult CPR and infant choking response, and pediatric first aid; and successfully complete required early childhood teacher health and safety orientation every three years. There is no variation as to training requirements based on the number of staff employed. Staff qualification do not change based on the ages of the children.**

b. Licensed family child care

Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care: **Teacher qualifications for Family and Group Child Care facility teachers: (1) complete facility overview on-the-job training; (2) be current on the ECP Practitioner Registry; (3) have 16 hours of annual training, (4) maintain certification for infant, child, and adult CPR and infant choking response, and pediatric first aid; (5) successfully complete required early childhood teacher health and safety orientation every 3 years; (6) be at least 18 years old. Teachers that work at facilities that exclusively serve children ages 5 and up are waived from the Infant Safety essentials portion of health and safety orientation. For Friends, Family, and Neighbor (FFN) care, providers must have 8 hours of annual training, and have current certification for infant, child, and adult CPR and infant choking response, and pediatric first aid, and successfully complete required FFN health and safety orientation every three years.**

c. Licensed, regulated, or registered in-home care (care in the child's own home by a non-relative)



Describe the provider qualifications for licensed, regulated, or registered in-home care providers (care in the child's own home) including any variations based on the ages of children in care: **NA**

#### 5.2.4 Teacher/caregiver qualifications for license-exempt providers

Provide the teacher/provider qualification requirements (for instance, age, high school diploma, specific training, etc.) for the license-exempt providers under the following categories of care:

- a. License-exempt center-based child care. **NA**
- b. License-exempt home-based child care. **A FFN or RCE provider is licensed as an individual to provide child care, meaning the requirements for the provider is as individual caregiver. A FFN or RCE provider must meet the following requirements: 1) Complete the course, Health and Safety Overview for FFN/RCE Providers; 2) Complete the course, Fundamentals of FFN/RCE Providers Orientation; 3) Must have satisfactory background checks; and 4) Complete pediatric first aid and CPR.**
- c. License-exempt in-home care (care in the child's own home). **FFN and RCE providers are required to complete the training courses 'Health and Safety Overview for FFN/RCE Providers' and 'Fundamentals of FFN/RCE Providers Orientation'.**

### 5.3 Health and Safety Standards for CCDF Providers

**Lead Agencies** must have health and safety standards for providers serving children receiving CCDF assistance relating to the required health and safety topics as appropriate to the provider setting and age of the children served. This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for relative providers, as defined by CCDF. Lead Agencies have the option of exempting certain relatives from any or all CCDF health and safety requirements.

Exemptions for relative providers' standards requirements will be addressed in question 5.8.1.

Describe the following health and safety standards for programs serving children receiving CCDF assistance on the following topics (note that monitoring and enforcement will be addressed in subsection 5.5):

#### 5.3.1 Prevention and control of infectious diseases (including immunizations) health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the prevention and control of infectious diseases for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **If, while in care, a child becomes ill or is suspected of having a communicable disease reportable to the health department while in care, the parent shall be notified by the provider. The parent is responsible for arranging to have the child taken home. ARM 37.95.139. Good health habits, such as washing hands, must be taught during everyday activities. ARM 37.95.184 . Immunization records: A child in care must have a current immunization schedule, a medical exemption, or a religious exemption on file with the child care center to attend. Practices required: Facilities are required to have illness policies that exclude children with specific**

symptoms of illness or that are otherwise suspected of having a communicable disease, conduct daily health checks when a child arrives at the facility. All staff must practice proper handwashing, proper diaper changing practices, proper laundry and bedding storage, safe food handling and other environment sanitization. Annual inspections by the county health department sanitarian are required for this care type. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding these standards.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **If, while in care, a child becomes ill or is suspected of having a communicable disease reportable to the health department while in care, the parent shall be notified by the provider. The parent is responsible for arranging to have the child taken home. Good health habits, such as washing hands, must be taught during everyday activities. Immunization records: A child in care must have a current immunization schedule, a medical exemption, or a religious exemption on file with the child care center to attend. Practices required: Facilities are required to have illness policies that exclude children with specific symptoms of illness or that are otherwise suspected of having a communicable disease, conduct daily health checks when a child arrives at the facility. All staff must practice proper handwashing, proper diaper changing practices, proper laundry and bedding storage, safe food handling and other environment sanitization. Annual inspections by the county health department sanitarian are required for this care type. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding these standards.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  

Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **These apply to the Family, Friend, and Neighbor providers: If, while in care, a child becomes ill or is suspected of having a communicable disease reportable to the health department while in care, the parent shall be notified by the provider. The parent is responsible for arranging to have the child taken home. Good health habits, such as washing hands, must be taught during everyday activities. Immunization records: A child in care must have a current immunization schedule, with the exceptions being 1) a child being in care by an approved relative; 2) care is being provided in the child's home, or 3) a medical exemption is claimed. Practices required: A RCE provider to have illness policies that exclude children with specific symptoms of illness or that are otherwise suspected of having a communicable disease, conduct daily health checks when a child arrives at the facility. Staff must practice proper handwashing, proper diaper changing practices, proper laundry and bedding storage, safe food handling and other environment sanitization. Staff must complete Health and Safety Overview as part of the required orientation training, which covers content regarding these**

standards.

**These apply to the Relative Care Exempt providers:**

If, while in care, a child becomes ill or is suspected of having a communicable disease reportable to the health department while in care, the parent shall be notified by the provider. The parent is responsible for arranging to have the child taken home. Good health habits, such as washing hands, must be taught during everyday activities. Immunization records: A child in care must have a current immunization schedule, with the exceptions being 1) a child being in care by an approved relative; 2) care is being provided in the child's home, or 3) a medical exemption is claimed. Practices required: A RCE provider must practice proper handwashing, proper diaper changing practices, proper laundry and bedding storage, safe food handling and other environment sanitization. A RCE provider must complete Health and Safety Overview as part of the required orientation training, which covers content regarding these standards.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **These apply to the Family, Friend, and Neighbor providers:**

If, while in care, a child becomes ill or is suspected of having a communicable disease reportable to the health department while in care, the parent shall be notified by the provider. The parent is responsible for arranging to have the child taken home. Good health habits, such as washing hands, must be taught during everyday activities. Immunization records: No immunization records are required because an exemption is given when care is being provided in the child's home. Practices required: Facilities are required to have illness policies that exclude children with specific symptoms of illness or that are otherwise suspected of having a communicable disease, conduct daily health checks when a child arrives at the facility. Staff must practice proper handwashing, proper diaper changing practices, proper laundry and bedding storage, safe food handling and other environment sanitization. Staff must complete Health and Safety Overview as part of the required orientation training, which covers content regarding these standards.

**These apply to the Relative Care Exempt providers:**

If, while in care, a child becomes ill or is suspected of having a communicable disease reportable to the health department while in care, the parent shall be notified by the provider. The parent is responsible for taking over care for the child. Good health habits, such as washing hands, must be taught during everyday activities. Immunization records: No immunization records are required because an exemption is given when care is being provided in the child's home. Practices required: A RCE provider must practice proper handwashing, proper diaper changing practices, proper laundry and bedding storage, safe food handling and other environment sanitization. A RCE provider must complete Health and Safety Overview as part of the required orientation training, which covers content regarding these standards.

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**
  
- b. Provide the standards, appropriate to the provider setting and age of children, that address that children attending child care programs under CCDF are age-appropriately immunized, according to the latest recommendation for childhood immunizations of the respective State public health agency, for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **All staff members must meet immunization requirements pursuant to (ARM 37.95.184). Before a child may attend a Montana day care facility, that facility must be provided with the documentation that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, varicella, hepatitis B, pneumococcal, and Hemophilus influenza type B, unless the child qualifies for conditional attendance (ARM 37.95.140). A conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. A child experiencing homelessness can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. A child in foster care can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. However, there is a current Notice of Non-Enforcement regarding immunizations which was put into place in October of 2022. The Notice of Non-Enforcement allows providers to choose whether they allow children without immunizations into their facilities. If the provider chooses to take children without immunizations, they must complete a form to acknowledge this policy and notify all families that the facility does allow children without immunizations.**
  
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **All staff members must meet immunization requirements pursuant to (ARM 37.95.184). Before a child may attend a Montana day care facility, that facility must be provided with the documentation that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, varicella, hepatitis B, pneumococcal, and Hemophilus influenza type B, unless the child qualifies for conditional attendance (ARM 37.95.140). A conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. A child experiencing homelessness can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. A child in foster care can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. However, there is a current Notice of Non-Enforcement regarding immunizations which was put into place in October of 2022. The Notice of Non-Enforcement allows providers to choose whether they allow children without immunizations into their childcare. If the provider chooses to take children without immunizations, they must complete a form to acknowledge this policy**

and notify all families that the facility does allow children without immunizations.

- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have a licensed in-home care.**  
 Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **All staff members must meet immunization requirements pursuant to (ARM 37.95.184). Before a child may attend a Montana day care facility, that facility must be provided with the documentation that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, varicella, hepatitis B, pneumococcal, and Hemophilus influenza type B, unless the child qualifies for conditional attendance (ARM 37.95.140). A conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. A child experiencing homelessness can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. A child in foster care can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. However, there is a current Notice of Non-Enforcement regarding immunizations which was put into place in October of 2022. The Notice of Non-Enforcement allows providers to choose whether they allow children without immunizations into their childcare. If the provider chooses to take children without immunizations, they must complete a form to acknowledge this policy and notify all families that the facility does allow children without immunizations. A child in care must have a current immunization schedule, with the exceptions being 1) a child being in care by an approved relative; 2) care is being provided in the child's home, or 3) a medical exemption is claimed. A provider have immunization records or the exemption on file.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **All staff members must meet immunization requirements pursuant to (ARM 37.95.184). Before a child may attend a Montana day care facility, that facility must be provided with the documentation that the child has been immunized as required for the child's age group against measles, rubella, mumps, poliomyelitis, diphtheria, pertussis (whooping cough), tetanus, varicella, hepatitis B, pneumococcal, and Hemophilus influenza type B, unless the child qualifies for conditional attendance (ARM 37.95.140). A conditional enrollment form allows a family to have a plan from a medical professional to come current with immunizations. A child experiencing homelessness can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. A child in foster care can conditionally attend a child care facility if the conditional enrollment form documenting the child's conditional immunization status is on file at the child care facility. However, there is a current Notice of Non-Enforcement regarding**

immunizations which was put into place in October of 2022. The Notice of Non-Enforcement allows providers to choose whether they allow children without immunizations into their childcare. If the provider chooses to take children without immunizations, they must complete a form to acknowledge this policy and notify all families that the facility does allow children without immunizations. A child in care must have a current immunization schedule, with the exceptions being 1) a child being in care by an approved relative; 2) care is being provided in the child's home, or 3) a medical exemption is claimed. A provider have immunization records or the exemption on file.

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

### 5.3.2 Prevention of sudden infant death syndrome and the use of safe-sleep practices health and safety standard

Provide the standards, appropriate to the provider setting and age of children, that address the prevention of sudden infant death syndrome and use of safe sleeping practices for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **Child care facilities must employ practices known to promote a safe sleep environment (ARM 37.95.1005). Practices required: Infants laid down for sleep must be placed on their backs on a firm surface with no incline and with no blankets or loose items other than a pacifier in the crib. Sleep sacks may be used if arms are not confined. Infant's heads and faces must not be covered. Infants must not be allowed to sleep in car seats, swings, or other apparatus. Any variations to sleep position must be supported with medical documentation. All cries must be investigated. All facilities that provide care to children under age 2 must develop a written policy for safe sleep. Infant teachers must sign an acknowledgement of the facility's safe sleep policy. Director and all teachers must complete Infant Safety Essentials within 30 days of hire, which covers content specific to this standard.**
- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Child care facilities must employ practices known to promote a safe sleep environment. (ARM 37.95.1005). Practices required: Infants laid down for sleep must be placed on their backs on a firm surface with no incline and with no blankets or loose items other than a pacifier in the crib. Sleep sacks may be used if arms are not confined. Infant's heads and faces must not be covered. Infants must not be allowed to sleep in car seats, swings, or other apparatus. Any variations to sleep position must be supported with medical documentation. All cries must be investigated. All facilities that provide care to children under age 2 must develop a written policy for safe sleep. Infant teachers must sign an acknowledgement of the facility's safe sleep policy. Director and all teachers must complete Infant Safety Essentials within 30 days of hire, which covers content specific to this standard.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard: **N/A**

[x] Not applicable.

- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **A FFN or RCE provider must employ practices known to promote a safe sleep environment. ARM 37.95.1005 Practices required: Infants laid down for sleep must be placed on their backs on a firm surface with no incline and with no blankets or loose items other than a pacifier in the crib. Sleep sacks may be used if arms are not confined. Infant's heads and faces must not be covered. Infants must not be allowed to sleep in car seats, swings, or other apparatus. Any variations to sleep position must be supported with medical documentation. All cries must be investigated. Staff must complete Health and Safety Overview, which covers content specific to this standard.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **A FFN or RCE provider must employ practices known to promote a safe sleep environment. ARM 37.95.1005 Practices required: Infants laid down for sleep must be placed on their backs on a firm surface with no incline and with no blankets or loose items other than a pacifier in the crib. Sleep sacks may be used if arms are not confined. Infant's heads and faces must not be covered. Infants must not be allowed to sleep in car seats, swings, or other apparatus. Any variations to sleep position must be supported with medical documentation. All cries must be investigated. Staff must complete Health and Safety Overview, which covers content specific to this standard. Director and all teachers must complete Infant Safety Essentials within 30 days of hire, which covers content specific to this standard.**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

5.3.3 Administration of medication, consistent with standards for parental consent health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the administration of medication for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **To administer medication to a child in care in a licensed center, Montana's administrative rules (ARM 37.95.181, ARM 37.95.182, ARM 37.95.141) require the following practices: providers must have a written medication administration policy that includes parental consent and a medication storage policy. Any medication brought into the facility by the parent or legal guardian of a child shall be dated and kept in the original container labeled with the child's information, dosage information, and stored at proper temperatures in a location inaccessible to the children in care or in a locked box. Written authorization must include dosage instructions. If medications are administered at the facility, the provider must also maintain a medication administration log. A program's Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers**

content regarding these standards.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **To administer medication to a child in care in a licensed family child care home, Montana’s administrative rules (ARM 37.95.181, ARM 37.95.182, ARM 37.95.141) require the following practices: providers must have a written medication administration policy that includes parental consent and a medication storage policy. Any medication brought into the facility by the parent or legal guardian of a child shall be dated and kept in the original container labeled with the child's information, dosage information, and stored at proper temperatures in a location inaccessible to the children in care or in a locked box. Written authorization must include dosage instructions. If medications are administered at the facility, the provider must also maintain a medication administration log. A program’s Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding these standards.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **To administer medication to a child in care for a license-exempt in-home, Montana’s administrative rules (ARM 37.95.181, ARM 37.95.182, ARM 37.95.141) require the following practices: providers must have a written medication administration policy that includes parental consent and a medication storage policy. Any medication brought into the facility by the parent or legal guardian of a child shall be dated and kept in the original container labeled with the child's information, dosage information, and stored at proper temperatures in a location inaccessible to the children in care or in a locked box. Written authorization must include dosage instructions. If medications are administered at the facility, the provider must also maintain a medication administration log. Staff must complete Health and Safety Overview, which covers content regarding these standards.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **To administer medication to a child in care for a license-exempt in-home, Montana’s administrative rules (ARM 37.95.181, ARM 37.95.182, ARM 37.95.141) require the following practices: providers must have a written medication administration policy that includes parental consent and a medication storage policy. Any medication brought into the facility by the parent or legal guardian of a child shall be dated and kept in the original container labeled with the child's information, dosage information, and stored at proper temperatures in a location inaccessible to the children in care or in a locked box. Written authorization must include dosage instructions. If medications are administered at the facility, the provider must also maintain a medication administration log. Staff must complete Health and Safety Overview, which covers content regarding these standards.**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps,



day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

- b. Provide the standards, appropriate to the provider setting and age of children, that address obtaining permission from parents to administer medications to children for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: **No child care employee, owner, or operator at a licensed center may administer any medication to a child without the written authorization of the parents including the signature of the child's parent or guardian per Montana's Administrative Rules (ARM 37.95.181, ARM 37.95.141). Practices required: Regulations are in place that require providers to have a written medication administration policy that includes parental consent and a medication storage policy. Director and all teaching staff of all program types must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding these standards.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **No child care employee, owner, or operator at a licensed family child care home may administer any medication to a child without the written authorization of the parents including the signature of the child's parent or guardian per Montana's Administrative Rules (ARM 37.95.181, ARM 37.95.141). Practices required: Regulations are in place that require providers to have a written medication administration policy that includes parental consent and a medication storage policy. Director and all teaching staff of all program types must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding these standards.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  

Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **No child care employee, owner, or operator at licensed exempt in-home care may administer any medication to a child without the written authorization of the parents including the signature of the child's parent or guardian per Montana's Administrative Rules (ARM 37.95.181, ARM 37.95.141). Practices required: Regulations are in place that require providers to have a written medication administration policy that includes parental consent and a medication storage policy. Staff must complete Health and Safety Overview, which covers content regarding these standards.**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **No child care employee, owner, or operator at licensed exempt in-home care may administer any medication to a child without the written authorization of the parents including the signature of the child's parent or guardian per Montana's Administrative Rules (ARM 37.95.181, ARM 37.95.141). Practices required: Regulations are in place that require providers to have a written medication**

administration policy that includes parental consent and a medication storage policy. Staff must complete Health and Safety Overview, which covers content regarding these standards.

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

5.3.4 Prevention of and response to emergencies due to food and allergic reactions health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the *prevention* of emergencies due to food and allergic reactions for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Providers will take steps to prevent food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 39.95.139). Practices required: Regulations are in place that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be consistently implemented by the provider.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Providers will take steps to prevent food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 39.95.139). Practices required: Regulations are in place that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet**

and feeding schedule. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be consistently implemented by the provider.

- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana's Monitoring conducted on July 11 - 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure the prevention emergencies due to food and allergic reactions for license-exempt in home providers. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. In the interim, the Lead Agency is taking steps so providers are trained to prevent food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 37.95.139). Practices required: Regulations are in place for all other provider types that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. The Child Care Licensing Program asks license exempt providers to follow these provisions, however, it is not enforceable until the updated Child Care Licensing rule package is in effect. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. Staff must complete the Health and Safety Overview, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be consistently implemented by the provider.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from**

the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11 – 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure the prevention emergencies due to food and allergic reactions for license-exempt in home providers. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. In the interim, the Lead Agency is taking steps so providers are trained to prevent food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 37.95.139). Practices required: Regulations are in place for all other provider types that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. The Child Care Licensing Program asks license exempt providers to follow these provisions, however, it is not enforceable until the updated Child Care Licensing rule package is in effect. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. Staff must complete the Health and Safety Overview, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be consistently implemented by the provider.

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**
- b. Provide the standards, appropriate to the provider setting and age of children, that address the *response* to emergencies due to food and allergic reactions for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Providers will take steps to prevent food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 39.95.139). Practices required: Regulations are in place that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or**

guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be consistently implemented by the provider.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Providers will take steps to prevent food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 39.95.139). Practices required: Regulations are in place that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be consistently implemented by the provider.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  

Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana's Monitoring conducted on July 11 - 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure that these providers can respond to emergencies due to food and allergic reactions. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. In the interim, the Lead Agency is taking steps so providers are trained to respond to food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 37.95.139). Practices required: Regulations are in place for**

all other provider types that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. The Child Care Licensing Program asks license exempt providers to follow these provisions, however, it is not enforceable until the updated Child Care Licensing rule package is in effect. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. Staff must complete the Health and Safety Overview, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be consistently implemented by the provider.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11 – 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure that these providers can respond to emergencies due to food and allergic reactions. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. In the interim, the Lead Agency is taking steps so providers are trained to respond to food and allergic reactions. Providers will know how to respond to food and other allergic reactions (ARM 37.95.139). Practices required: Regulations are in place for all other provider types that require providers to have a plan in place for emergencies as well as a first aid policy that includes the prevention and response to food and allergic reactions. The Child Care Licensing Program asks license exempt providers to follow these provisions, however, it is not enforceable until the updated Child Care Licensing rule package is in effect. All teaching staff must have current certification in CPR and pediatric first aid so that they can be prepared to respond to choking. Prior to a child being enrolled or entered a child care facility, written information on each child explaining any special needs of the child, including allergies must be on file. For children under 19 months old, an individualized diet and feeding schedule must be provided according to a written plan submitted by the parents or by the infant's physician with the knowledge and consent of the parents or guardian. A change of diet and schedule shall be noted on each infant's daily diet and feeding schedule. Staff must complete the Health and Safety Overview, which covers content regarding this standard including information about choking hazards. ARM 37.95.711 requires that meal and snack service to children and the preparation of food by children shall be carefully supervised. Proper methods of handling, preparing, and serving food in a safe and sanitary manner shall be

**consistently implemented by the provider.**

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

5.3.5 Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from building and physical premises hazards for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127). Practices required: Regulations are in place that require providers to maintain safe indoor and outdoor environments free from hazards. Providers are required to store cleaning and other hazardous materials out of reach. Guns must be safely and securely stored. Pets must be friendly and vaccinated. Extension cords must not be used for permanent wiring. Indoor and outdoor play areas must be reasonably clean and free from hazards. Toys and equipment must be safe and well maintained. The building must have approved and unobstructed exits. Children must have a smoke-free environment. Outdoor play areas must have a 4-foot fence with no gaps greater than 4 inches.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127). Practices required: Regulations are in place that require providers to maintain safe indoor and outdoor environments free from hazards. Providers are required to store cleaning and other hazardous materials out of reach. Guns must be safely and securely stored. Pets must be friendly and vaccinated. Extension cords must not be used for permanent wiring. Indoor and outdoor play areas must be reasonably clean and free from hazards. Toys and equipment must be safe and well maintained. The building must have approved and unobstructed exits. Children must have a smoke-free environment. Outdoor play areas must have a 4-foot fence with no gaps greater than 4 inches.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  

Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127). Practices required: Regulations are in place that require providers to maintain safe indoor and outdoor environments free from**

hazards. Providers are required to store cleaning and other hazardous materials out of reach. Guns must be safely and securely stored. Pets must be friendly and vaccinated. Extension cords must not be used for permanent wiring. Indoor and outdoor play areas must be reasonably clean and free from hazards. Toys and equipment must be safe and well maintained. The building must have approved and unobstructed exits. Children must have a smoke-free environment. Outdoor play areas must have a 4-foot fence with no gaps greater than 4 inches.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127).** Practices required: Regulations are in place that require providers to maintain safe indoor and outdoor environments free from hazards. Providers are required to store cleaning and other hazardous materials out of reach. Guns must be safely and securely stored. Pets must be friendly and vaccinated. Extension cords must not be used for permanent wiring. Indoor and outdoor play areas must be reasonably clean and free from hazards. Toys and equipment must be safe and well maintained. The building must have approved and unobstructed exits. Children must have a smoke-free environment. Outdoor play areas must have a 4-foot fence with no gaps greater than 4 inches.
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**
- b. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from bodies of water for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127, ARM 37.95.1004)** Practices required: Proper fencing must be in place in areas that are next to bodies of water such as ditches, creeks, etc that are a minimum of 4 feet high and no gap larger than 4 inches, all water receptacles must be emptied after use, swimming pools and hot tubs must be inaccessible to children while not in use, supervision and ratio must be maintained in portable swimming pools or have lifeguard training in larger pools, supervision must be maintained if a child requires a bath.
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127, ARM 37.95.1004)** Practices required: Proper fencing must be in place in areas that are next to bodies of water such as ditches, creeks, etc that are a minimum of 4 feet high and no gap larger than 4 inches, all water receptacles must be emptied after use, swimming pools and hot tubs must be inaccessible to children while not in use, supervision and ratio must be maintained in portable swimming pools or have lifeguard training in larger pools, supervision must be maintained if a child requires a bath.



- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
  - Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127, ARM 37.95.1004) Practices required: Proper fencing must be in place in areas that are next to bodies of water such as ditches, creeks, etc that are a minimum of 4 feet high and no gap larger than 4 inches, all water receptacles must be emptied after use, swimming pools and hot tubs must be inaccessible to children while not in use, supervision and ratio must be maintained in portable swimming pools or have lifeguard training in larger pools, supervision must be maintained if a child requires a bath.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Providers must know how to mitigate the hazards and risks in the environment and implement policies and practices that protect children from harm (ARM 37.95.121, ARM 37.95.127, ARM 37.95.1004) Practices required: Proper fencing must be in place in areas that are next to bodies of water such as ditches, creeks, etc that are a minimum of 4 feet high and no gap larger than 4 inches, all water receptacles must be emptied after use, swimming pools and hot tubs must be inaccessible to children while not in use, supervision and ratio must be maintained in portable swimming pools or have lifeguard training in larger pools, supervision must be maintained if a child requires a bath.**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**
- c. Provide the standards, appropriate to the provider setting and age of children, that address the identification of and protection from vehicular traffic hazards for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Regulations are in place that require providers to maintain safe outdoor areas by installing a fence that meets minimum requirements of 4 feet high and no gaps larger than 4 inches if the outdoor play area is adjacent to traffic areas. Providers must have a transportation policy, have vehicles insured with proper vehicle restraints, and use equipment that meets National Highway Transportation Safety Administration recommendation. Providers are prohibited from leaving children alone in the vehicle and must have doors locked while vehicle is in motion.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Regulations are in place that require providers to maintain safe outdoor areas by installing a fence that meets minimum requirements of 4 feet high and no gaps larger than 4 inches if the outdoor play area is adjacent to traffic areas. Providers must have a transportation policy, have vehicles insured with proper vehicle**

restraints, and use equipment that meets National Highway Transportation Safety Administration recommendation. Providers are prohibited from leaving children alone in the vehicle and must have doors locked while vehicle is in motion.

- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Regulations are in place that require providers to maintain safe outdoor areas by installing a fence that meets minimum requirements of 4 feet high and no gaps larger than 4 inches if the outdoor play area is adjacent to traffic areas. Providers must have a transportation policy, have vehicles insured with proper vehicle restraints, and use equipment that meets National Highway Transportation Safety Administration recommendation. Providers are prohibited from leaving children alone in the vehicle and must have doors locked while vehicle is in motion.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Regulations are in place that require providers to maintain safe outdoor areas by installing a fence that meets minimum requirements of 4 feet high and no gaps larger than 4 inches if the outdoor play area is adjacent to traffic areas. Providers must have a transportation policy, have vehicles insured with proper vehicle restraints, and use equipment that meets National Highway Transportation Safety Administration recommendation. Providers are prohibited from leaving children alone in the vehicle and must have doors locked while vehicle is in motion.**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

5.3.6 Prevention of shaken baby syndrome, abusive head trauma, and maltreatment health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the prevention of shaken baby syndrome and abusive head trauma and indicate the age of children it applies to for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Providers must use appropriate forms of discipline and child guidance. (ARM 37.95.163, ARM 37.95.171). Practices required: Regulations are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. Director and all teaching staff must complete Infant Safety Essentials" within 30 days of hire, which covers content specific to these standards.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Providers**

must use appropriate forms of discipline and child guidance. (ARM 37.95.163, ARM 37.95.171). Practices required: Regulations are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. Director and all teaching staff must complete "Infant Safety Essentials" within 30 days of hire, which covers content specific to these standards.

- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **n January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11<sup>th</sup> 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure that these providers have adequate training to prevent shaken baby syndrome and abusive head trauma. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. Until it is in effect, the Child Care Licensing program requests license-exempt in-home providers. Providers must use appropriate forms of discipline and child guidance (ARM 37.95.163, ARM 37.95.171), including following regulations that are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. Staff must complete the Health and Safety Overview, which covers content specific to these standards.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11<sup>th</sup> 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure that these providers have adequate training to prevent shaken baby syndrome and abusive head trauma. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. Until it is in effect, the Child Care Licensing program requests license-exempt in-home providers. Providers must use appropriate forms of discipline and child guidance (ARM 37.95.163, ARM 37.95.171), including following regulations that are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage**

**positive guidance and redirection. Staff must complete the Health and Safety Overview, which covers content specific to these standards.**

- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**
- b. Provide the standards, appropriate to the provider setting and age of children, that address the prevention of child maltreatment and indicate the age of children it applies to for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Providers must use appropriate forms of discipline and child guidance. (ARM 37.95.163, ARM 37.95.171). Practices required: Regulations are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. Director and all teaching staff must complete Infant Safety Essentials" within 30 days of hire, which covers content specific to these standards.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Providers must use appropriate forms of discipline and child guidance. (ARM 37.95.163, ARM 37.95.171). Practices required: Regulations are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. Director and all teaching staff must complete Infant Safety Essentials" within 30 days of hire, which covers content specific to these standards.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11<sup>th</sup> 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure that these providers have adequate training to prevent child maltreatment. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. Until it is in effect, the Child Care Licensing program requests license-exempt in-home providers use appropriate forms of discipline and child guidance. (ARM 37.95.163, ARM 37.95.171). Practices required: Regulations are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome,**

abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. Staff must complete the Health and Safety Overview, which covers content specific to these standards.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11<sup>th</sup> 13, 2023. OCC identified Inspections for license- exempt in-home care as lacking sufficient monitoring provisions to ensure that these providers have adequate training to prevent child maltreatment. The Lead Agency is anticipating coming into compliance with this provision following Sine Die of the 2025 Montana Legislative Session when an updated Child Care Licensing rules package goes into effect. Until it is in effect, the Child Care Licensing program requests license-exempt in-home providers use appropriate forms of discipline and child guidance. (ARM 37.95.163, ARM 37.95.171). Practices required: Regulations are in place that require providers maintain staff who have been trained in the prevention of shaken baby syndrome, abusive head trauma, and mandatory reporting of child abuse and neglect. Regulations prohibit inappropriate discipline and encourage positive guidance and redirection. Staff must complete the Health and Safety Overview, which covers content specific to these standards.**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

### 5.3.7 Emergency preparedness and response planning standard

Identify by checking below that the emergency preparedness and response planning due to natural disasters and human-caused events standard includes procedures in the following areas:

- i.  Evacuation
- ii.  Relocation
- iii.  Shelter-in-place
- iv.  Lock down
- v. Staff emergency preparedness
  - Training
  - Practice drills
- vi. Volunteer emergency preparedness
  - Training
  - Practice drills
- vii.  Communication with families
- viii.  Reunification with families
- ix.  Continuity of operations

- x. Accommodation of
  - Infants
  - Toddlers
  - Children with disabilities
  - Children with chronic medical conditions

xi. If any of the above are not checked, describe:

5.3.8 Handling and storage of hazardous materials and the appropriate disposal of biocontaminants health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the handling and storage of hazardous materials for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Cleaning materials, flammable liquids, detergents, aerosol cans, and other poisonous and toxic materials must be kept in their original containers and in a place inaccessible to children. They must be used in such a way that will not contaminate play surfaces, food, food preparation areas, or constitute a hazard to the children.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Cleaning materials, flammable liquids, detergents, aerosol cans, and other poisonous and toxic materials must be kept in their original containers and in a place inaccessible to children. They must be used in such a way that will not contaminate play surfaces, food, food preparation areas, or constitute a hazard to the children.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**
    - Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Cleaning materials, flammable liquids, detergents, aerosol cans, and other poisonous and toxic materials must be kept in their original containers and in a place inaccessible to children. They must be used in such a way that will not contaminate play surfaces, food, food preparation areas, or constitute a hazard to the children.**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Cleaning materials, flammable liquids, detergents, aerosol cans, and other poisonous and toxic materials must be kept in their original containers and in a place inaccessible to children. They must be used in such a way that will not contaminate play surfaces, food, food preparation areas, or constitute a hazard to the children.**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

- b. Provide the standards, appropriate to the provider setting and age of children, that address the disposal of bio contaminants for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: **Child care facilities must be free from environmental hazards. Providers must properly use, store, and dispose of hazardous materials (ARM 37.95.121). Practices required: Regulations are in place for providers to practice safe handling for bio-contaminants including blood, bodily fluids, and other infectious materials must be properly disposed of. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Child care facilities must be free from environmental hazards. Providers must properly use, store, and dispose of hazardous materials (ARM 37.95.121). Practices required: Regulations are in place for providers to practice safe handling for bio-contaminants including blood, bodily fluids, and other infectious materials must be properly disposed of. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Child care facilities must be free from environmental hazards. Providers must properly use, store, and dispose of hazardous materials (ARM 37.95.121). Practices required: Regulations are in place for providers to practice safe handling for bio-contaminants including blood, bodily fluids, and other infectious materials must be properly disposed of. Staff must complete Health and Safety Overview, which covers content specific to this standard.**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Child care facilities must be free from environmental hazards. Providers must properly use, store, and dispose of hazardous materials (ARM 37.95.121). Practices required: Regulations are in place for providers to practice safe handling for bio-contaminants including blood, bodily fluids, and other infectious materials must be properly disposed of. Staff must complete Health and Safety Overview, which covers content specific to this standard.**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

5.3.9 Precautions in transporting children health and safety standard

Provide the standards, appropriate to the provider setting and age of children, that address precautions in transporting children for the following CCDF-eligible providers:

- i. All CCDF-eligible licensed center care. Provide the standard: **Providers who choose to transport children must implement policies and practices that protect children from harm during transport (ARM 37.95.132). Practices required: Providers must have written consent from parents to transport children. Providers must develop a written transportation policy outlining safe transport practices and how all children will be supervised and accounted for during the transitions to and from the vehicle. This policy must be made available to parents. Transportation plans must be available to the parents. Drivers must be at least 18 years of age and possess a valid driver's license. Vehicles must be locked while in motion. Children must have safety restraints required by law according to age and weight and may not be double buckled. Children must never be left unattended in a vehicle. There must be at least one adult in addition to the driver for each four children under age two being transported. An adult must accompany each child to and from the vehicle to the child's home or authorized drop-off. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.**
- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Providers who choose to transport children must implement policies and practices that protect children from harm during transport (ARM 37.95.132). Practices required: Providers must have written consent from parents to transport children. Providers must develop a written transportation policy outlining safe transport practices and how all children will be supervised and accounted for during the transitions to and from the vehicle. This policy must be made available to parents. Transportation plans must be available to the parents. Drivers must be at least 18 years of age and possess a valid driver's license. Vehicles must be locked while in motion. Children must have safety restraints required by law according to age and weight and may not be double buckled. Children must never be left unattended in a vehicle. There must be at least one adult in addition to the driver for each four children under age two being transported. An adult must accompany each child to and from the vehicle to the child's home or authorized drop-off. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Providers who choose to transport children must implement policies and practices that protect children from harm during transport (ARM 37.95.132). Practices required: Providers must have written consent from parents to transport children. Providers must develop a written transportation policy outlining safe transport practices and how all children will be supervised and accounted for during the transitions to and from the vehicle. This policy must be made available to parents. Transportation plans must be available to the parents. Drivers must be at least 18**



years of age and possess a valid driver's license. Vehicles must be locked while in motion. Children must have safety restraints required by law according to age and weight and may not be double buckled. Children must never be left unattended in a vehicle. There must be at least one adult in addition to the driver for each four children under age two being transported. An adult must accompany each child to and from the vehicle to the child's home or authorized drop-off. Staff must complete Health and Safety Overview, which covers content specific to this standard.

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Providers who choose to transport children must implement policies and practices that protect children from harm during transport (ARM 37.95.132). Practices required: Providers must have written consent from parents to transport children. Providers must develop a written transportation policy outlining safe transport practices and how all children will be supervised and accounted for during the transitions to and from the vehicle. This policy must be made available to parents. Transportation plans must be available to the parents. Drivers must be at least 18 years of age and possess a valid driver's license. Vehicles must be locked while in motion. Children must have safety restraints required by law according to age and weight and may not be double buckled. Children must never be left unattended in a vehicle. There must be at least one adult in addition to the driver for each four children under age two being transported. An adult must accompany each child to and from the vehicle to the child's home or authorized drop-off. Staff must complete Health and Safety Overview, which covers content specific to this standard.**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

#### 5.3.10 Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR) health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address pediatric first aid for all staff for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **All early childhood teachers, directors, substitutes, and assistant teachers must have a current pediatric first aid certification. Ped First Aid rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require all teachers in a child care setting to be current in pediatric first aid. This training must be successfully completed within 30 days of hire and before providing unsupervised care to children.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **All early childhood teachers, directors, substitutes, and assistant teachers must have a current pediatric first aid certification. Ped First Aid rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require all teachers in a child care setting to be current in pediatric first aid. This training must be successfully completed within 30 days of hire and before providing unsupervised care to children.**

- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not licensed in-home care.**  
 Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Staff must have a current pediatric first aid certification. Pediatric First Aid rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require the RCE must current in pediatric first aid to provide care for child(ren).**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Staff must have a current pediatric first aid certification. Pediatric First Aid rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require the RCE must current in pediatric first aid to provide care for child(ren).**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**
- b. Provide the standards, appropriate to the provider setting and age of children, that address pediatric cardiopulmonary resuscitation for all staff for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: **All early childhood teachers, directors, substitutes, and assistant teachers must have a current pediatric CPR. Ped CPR rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require all teachers in a child care setting to be current in pediatric CPR. This training must be successfully completed within 30 days of hire and before providing unsupervised care to children.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **All early childhood teachers, directors, substitutes, and assistant teachers must have a current pediatric CPR. Ped CPR rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require all teachers in a child care setting to be current in pediatric CPR. This training must be successfully completed within 30 days of hire and before providing unsupervised care to children.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
  - iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **All early childhood teachers, directors, substitutes, and assistant teachers must have**

a current pediatric CPR. Ped CPR rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require the RCE must current in pediatric first aid to provide care for child(ren).

- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **All early childhood teachers, directors, substitutes, and assistant teachers must have a current pediatric CPR. Ped CPR rules are found in ARM sections 37.95.622.2(d), 37.95.160(a), and 37.95.163.2(a). Practices required: Regulations are in place that require the RCE must current in pediatric first aid to provide care for child(ren).**
- vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

#### 5.3.11 Identification and reporting of child abuse and neglect health and safety standard

- a. Provide the standards, appropriate to the provider setting and age of children, that address the identification of child abuse and neglect for the following CCDF-eligible providers:
  - i. All CCDF-eligible licensed center care. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.**
  - ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.**
  - iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not**

have licensed in-home care.

Not applicable.

- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
  - v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Staff must complete Health and Safety Overview, which covers content specific to this standard.**
  - vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Staff must complete Health and Safety Overview, which covers content specific to this standard.**
  - vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**
- b. Provide your standards, appropriate to the provider setting and age of children, that address the reporting of child abuse and neglect for the following CCDF-eligible providers:
- i. All CCDF-eligible licensed center care. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24**

hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.

- ii. All CCDF-eligible licensed family child care homes. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Director and all teaching staff must complete "New Staff Health & Safety" course within 90 days of hire, which covers content specific to this standard.**
- iii. All CCDF-eligible licensed in-home care. Provide the standard: **Montana does not have licensed in-home care.**  
 Not applicable.
- iv. All CCDF-eligible license-exempt center care. Provide the standard: **Montana does not have license-exempt center care.**
- v. All CCDF-eligible license-exempt family child care homes. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Staff must complete Health and Safety Overview, which covers content specific to this standard.**
- vi. All CCDF-eligible license-exempt in-home care. Provide the standard: **Under Montana Law and Child Care Licensing rules, child care providers are mandated reporters of child abuse and neglect (ARM 37.95.171). Practices required: The director, assistant director or any staff member of the child care facility who has reason to suspect that any child is or has been abused or neglected is required to**

personally report the matter promptly to the department child abuse hotline at 1 (866) 820-5437. The child care provider or staff member shall make the report within 24 hours of receiving information concerning suspected child abuse or neglect. Teachers must learn the legal requirements for reporting abuse and neglect, as well as how, where and when to make a report of suspected abuse or neglect to Centralized Intake. Regulations are in place that require providers maintain staff who have been trained in mandatory reporting of child abuse and neglect. Staff must complete Health and Safety Overview, which covers content specific to this standard.

vii. All CCDF-eligible out-of-school programs (afterschool programs, summer camps, day camps, etc.). Provide the standard: **Montana does not have license-exempt out-of-school programs.**

c. Confirm if child care providers must comply with the [Lead Agency's](#) procedures for reporting child abuse and neglect as required by the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i):

Yes, confirmed.

No. If no, describe:

#### 5.3.12 Additional optional standards

In addition to the required health and safety standards, does the Lead Agency require providers to comply with the following optional standards?

Yes.

No. If no, skip to Section 5.4

If yes, describe the standard(s).

i. Nutrition. Describe: **Regulations are in place that require providers to provide meals that meet the USDA meal requirements. In addition, the regulations specify the number of meals required throughout the day. Centers are required to have a registered dietician approve menus (ARM 37.95.215 and ARM 37.95.711). There is no training required specific to this standard. Relative Care is exempt from this standard.**

ii. Access to physical activity. Describe: **The regulations require developmentally appropriate activities including physical growth. Outdoor play is required each day (ARM 37.95.715 and ARM 37.95.602). There is no training required specific to this standard. Relative care is exempt from this standard.**

iii. Caring for children with special needs. Describe: **The regulations require a Special Needs Health Care Plan for children with special needs. This plan**

should be utilized to meet the needs of the child. In addition, the requirements also do not allow for discrimination based on disabilities (ARM 37.95.103, 37.95.108). There is no training required specific to this standard. Relative care is exempt from this requirement.

- iv. Any other areas determined necessary to promote child development or to protect children’s health and safety. Describe: **The regulations indicate that screen time should be limited to child-appropriate programs and should not be excessive. ARM 37.95.715, 37.95.720. Montana Law (MCA 52-2-702). ARM 37.95.602 and ARM 37.95.613 There is no training required specific to this standard. Relative care is exempt from this requirement.**

#### 5.4 Pre-Service or Orientation Training on Health and Safety Standards

Lead Agencies must have requirements for all caregivers, teachers, and directors at CCDF providers to complete pre-service or orientation training (within 3 months of starting) on all CCDF health and safety standards and child development. The training must be appropriate to the setting and the age of children served. This training must address the required health and safety standards and the content area of child development. Lead Agencies have flexibility in determining the minimum number of training hours to require, and are encouraged to consult with Caring for our Children Basics for best practices.

Exemptions for relative providers’ training requirements are addressed in question 5.8.1.

##### 5.4.1 Health and safety pre-service/orientation training requirements

Lead Agencies must certify staff have pre-service or orientation training on each standard that is appropriate to different settings and age groups. Lead Agencies may require pre-service or orientation to be completed before staff can care for children unsupervised. In the table below, check the boxes for which you have training requirements.

	Is this standard addressed in the pre-service or orientation training?	Is the pre-service or orientation training on this standard appropriate to different settings and age groups?	Does the Lead Agency require staff to complete the training before caring for children unsupervised?
a. Prevention and control of infectious diseases (including immunizations)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. SIDS prevention and use of safe sleep practices	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

c. Administration of medication	[x]	[x]	[ ]
d. Prevention and response to food and allergic reactions	[x]	[x]	[ ]
e. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic	[x]	[x]	[ ]
f. Prevention of shaken baby syndrome, abusive head trauma and child maltreatment	[x]	[x]	[x]
g. Emergency preparedness and response planning and procedures	[x]	[x]	[x]
h. Handling and storage of hazardous materials and disposal of biocontaminants	[x]	[x]	[ ]
i. Appropriate Precautions in transporting children, if applicable	[x]	[x]	[ ]
j. Pediatric first aid and pediatric CPR (age-appropriate)	[x]	[x]	[x]
k. Child abuse and neglect recognition and reporting	[x]	[x]	[ ]
l. Child development including major domains of cognitive, social, emotional, physical development and approaches to learning.	[x]	[x]	[ ]

m. If the Lead Agency does not certify implementation of all the health and safety pre-service/orientation training requirements for staff in programs serving children receiving CCDF assistance, please describe: **All trainings are included.**



- n. Are there any provider categories to whom the above pre-service or orientation training requirements do not apply?

No

Yes. If yes, describe:

## 5.5 Monitoring and Enforcement of Licensing and Health and Safety Requirements

### 5.5.1 Inspections for licensed CCDF providers

Licensing inspectors must perform at least one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards, including an inspection for compliance with health and safety and fire standards. Lead Agencies must conduct at least one pre-licensure inspection for compliance with health, safety, and fire standards of each child care provider and facility in the State/Territory.

a. Licensed CCDF center-based providers

- i. Does your pre-licensure inspection for licensed center-based providers assess compliance with health standards, safety standards, and fire standards?

Yes.

No. If no, describe:

- ii. Identify the frequency of annual unannounced inspections for licensed center-based providers addressing compliance with health, safety, and fire standards:

Annually.

More than once a year. If more than once a year, describe:

Other. If other, describe:

- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed center-based providers?

Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.

No. If no, describe: **Montana does not have a differential monitoring approach and only utilizes full annual licensing inspections.**

- iv. Identify which department or agency is responsible for completing the inspections for licensed center-based providers. **The child care licensor assigned to that county completes the annual inspection for the DPHHS.**

b. Licensed CCDF family child care providers

- i. Does your pre-licensure inspection for licensed family child care homes assess compliance with health standards, safety standards, and fire standards?

Yes.

No. If no, describe:

- ii. Identify the frequency of annual unannounced inspections for licensed family

child care homes addressing compliance with health, safety, and fire standards:

Annually.

More than once a year. If more than once a year, describe:

Other. If other, describe:

- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed family child care providers?

Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.

No. If no, describe: **Montana does not have a differential monitoring approach and only utilizes full annual licensing inspections.**

- iv. Identify which department or agency is responsible for completing the inspections for licensed family child care providers. **The child care licenser assigned to that county completes the annual inspection for the DPHHS.**

c. Licensed in-home CCDF child care providers

- i. Does your Lead Agency license CCDF in-home child care (care in the child's own home) providers?

No.

Yes. If yes, does your pre-licensure inspection for licensed in-home providers assess compliance with health, safety, and fire standards?

Yes.

No. If no, describe:

- ii. Identify the frequency of annual unannounced inspections for licensed in-home child care providers for compliance with health, safety, and fire standards completed:

Annually.

More than once a year. If more than once a year, describe:

Other. If other, describe: **Montana does not have licensed in-home care.**

- iii. Does the Lead Agency implement a differential monitoring approach when monitoring licensed in-home child care providers?

Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.

No.

- iv. Identify which department or agency is responsible for completing the inspections for licensed in-home providers. **Montana does not have licensed in-home care.**

5.5.2 Inspections for license-exempt providers

Licensing inspectors must perform at least one annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety, and fire standards. Inspections for relative providers will be addressed in subsection 5.8.

Describe the policies and practices for the annual monitoring of:

- a. License-exempt CCDF center-based child care providers
  - i. Identify the frequency of inspections for compliance with health, safety, and fire standards for license-exempt center-based providers:  
 Annually.  
 More than once a year. If more than once a year, describe:  
 Other. If other, describe: **Montana does not have license-exempt centers.**
  - ii. Does the Lead Agency implement a differential monitoring approach when monitoring license-exempt center-based providers?  
 Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.  
 No.
  - iii. Identify which department or agency is responsible for completing the inspections for license-exempt center-based CCDF providers. **Montana does not have license-exempt centers.**
- b. License-exempt CCDF family child care providers
  - i. Identify the frequency of the inspections of license-exempt family child care providers to determine compliance with health, safety, and fire standards:  
 Annually.  
 More than once a year. If more than once a year, describe:  
 Other. If other, describe: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11~~th~~ 13, 2023. OCC found the Lead Agency does not post annual inspection reports for CCDF license-exempt Family, Friend, and Neighbor (FFN) providers for minimum of 3 years of results to the Lead Agency’s consumer education website. The Lead Agency will publish annual inspection reports for Family, Friend, and Neighbor license-exempt providers (FFN). These inspection reports were not being routinely published. This work is underway with FFN inspection reports being published as providers complete their annual inspections with Lead Agency facility inspectors and reports will be maintained on the website for 3 years. The Lead Agency expects to be in compliance with this provision by January 2025.**
  - ii. Does the Lead Agency implement a differential monitoring approach when monitoring license-exempt family child care providers?  
 Yes. If yes, describe how the differential monitoring approach is representative of the full complement of health and safety requirements.  
 No.

- iii. Identify which department or agency is responsible for completing the inspections for license-exempt family child care providers. **The Lead Agency’s Child Care Licensing program conducts these inspections.**

#### 5.5.3 Inspections for CCDF license-exempt in-home child care providers

Lead Agencies may develop alternate monitoring requirements for care provided in the child’s home that are appropriate to the setting. This flexibility cannot be used to bypass the monitoring requirement altogether.

- a. Describe the requirements for the annual monitoring of CCDF license-exempt in-home child care (care in the child’s own home) providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring procedures are used. **Announced inspections are conducted annually and follow similar monitoring procedures used in licensed facilities. However, on January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11~~th~~ 13, 2023. OCC found the Lead Agency does not post annual inspection reports for CCDF license-exempt Family, Friend, and Neighbor (FFN) providers for minimum of 3 years of results to the Lead Agency’s consumer education website. The Lead Agency will publish annual inspection reports for Family, Friend, and Neighbor license-exempt providers (FFN). These inspection reports were not being routinely published. This work is underway with FFN inspection reports being published as providers complete their annual inspections with Lead Agency facility inspectors and reports will be maintained on the website for 3 years. The Lead Agency expects to be in compliance with this provision by January 2025.**
- b. List the entity(ies) in your State/Territory responsible for conducting inspections of license-exempt CCDF in-home child care (care in the child’s own home) providers: **Child Care Licensors conduct all licensed-exempt in-home inspections.**

#### 5.5.4 Posting monitoring and inspection reports

Lead Agencies must post monitoring and inspection reports on their consumer education website for each licensed and CCDF child care provider, except in cases where the provider is related to all the children in their care. These reports must include the results of required annual monitoring visits and visits due to major substantiated complaints about a provider’s failure to comply with health and safety requirements and child care policies. A full report covers everything in the monitoring visit, including areas of compliance and non-compliance. If the Lead Agency does not produce any reports that include areas of compliance, the website must include information about all areas covered by a monitoring visit.

The reports must be in plain language or provide a plain language summary Lead Agency and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of monitoring and inspection reports.

- a. Does the Lead Agency post:
  - i.  Pre-licensing inspection reports for licensed programs.
  - ii.  Full monitoring and inspection reports that include areas of compliance and

non-compliance for all non-relative providers eligible to provide CCDF services.

- iii.  Monitoring and inspection reports that include areas of non-compliance only, with information about all areas covered by a monitoring visit posted separately on the website (e.g., a blank checklist used by monitors) for all non-relative providers eligible to provide CCDF services. If checked, provide a direct URL/website link to the website where a blank checklist is posted:
  - iv.  Other. Describe: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11<sup>th</sup> 13, 2023. OCC found the Lead Agency does not post annual inspection reports for CCDF license-exempt Family, Friend, and Neighbor (FFN) providers for minimum of 3 years of results to the Lead Agency’s consumer education website. The Lead Agency will publish annual inspection reports for Family, Friend, and Neighbor license-exempt providers (FFN). These inspection reports were not being routinely published. This work is underway with FFN inspection reports being published as providers complete their annual inspections with Lead Agency facility inspectors and reports will be maintained on the website for 3 years. The Lead Agency expects to be in compliance with this provision by January 2025.**
- b. Check if the monitoring and inspection reports and any related plain language summaries include:
- i.  Date of inspection.
  - ii.  Health and safety violations, including those violations that resulted in fatalities or serious injuries occurring at the provider. Describe how these health and safety violations are prominently displayed: **A deficiency statement citing the rule is posted along with details about how the intent of the rule was not met.**
  - iii.  Corrective action plans taken by the Lead Agency and/or child care provider. Describe: **The provider submits a written Plan of Correction and the licensing worker enters the Plan of Correction into the survey tool.**
  - iv.  A minimum of 3 years of results, where available.
  - v. If any of the components above are not selected, please explain: **On January 30, 2024, the Lead Agency received a Preliminary Notice of Non-Compliance from the Office of Child Care. This letter indicates the results of Montana’s Monitoring conducted on July 11<sup>th</sup> 13, 2023. OCC found the Lead Agency does not post annual inspection reports for CCDF license-exempt Family, Friend, and Neighbor (FFN) providers for minimum of 3 years of results to the Lead Agency’s consumer education website. The Lead Agency will publish annual inspection reports for Family, Friend, and Neighbor license-exempt providers (FFN). These inspection reports were not being routinely published. This work is underway with FFN inspection reports being published as providers complete their annual inspections with Lead Agency facility inspectors and reports will be maintained on the website for 3 years. The Lead Agency expects to be in compliance with this provision by January 2025.**
- c. Lead Agencies must post monitoring and inspection reports and/or any related summaries in a timely manner.

- i. Provide the direct URL/website link to where the reports are posted:  
**<https://dphhs.mt.gov/ecfsd/childcare/childcarelicensing/providersearch>**
  - ii. Identify the Lead Agency’s established timeline for posting monitoring reports and describe how it is timely: **Child Care providers have 10 days after receiving the Statement of Deficiencies to submit a plan of correction. After the 10-day period the report is posted publicly. If the provider requests an extension the licensing worker can offer an additional 10 days before posting publicly.**
- d. Does the Lead Agency certify that the monitoring and inspection reports or the summaries are in plain language that is understandable to parents and other consumers?
- Yes.
- No. If no, describe:
- e. Does the Lead Agency certify that there is a process for correcting inaccuracies in the monitoring and inspection reports?
- Yes.
- No. If no, describe:
- f. Does the Lead Agency maintain monitoring and inspection reports on the consumer education website?
- Yes.
- No. If no, describe:

#### 5.5.5 Qualifications and training of licensing inspectors

Lead Agencies must ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served.

Describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified and have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting. **The Montana Department of Administration has requirements in place under ARM2.21.3702 that identify the process for recruitment and selection. The Lead Agency Child Care Licensing Program has a current job description for licensing inspectors that identifies the qualifications required for the position. This includes a bachelor’s degree in social and behavioral sciences, early childhood education, elementary and secondary education, business, and public administration. In addition, the position also requires 3-4 years of job-related experience. Other combinations of education and experience may be considered. The job description emphasizes strong communication skills with individuals from varying socioeconomic backgrounds, including children of all ages, child welfare professionals, providers, and staff with less than an eighth-grade education to master’s level education and concerned families. The qualifications for this position also require knowledge of early childhood development, physical disabilities and other special needs and ability to research new problems and identify needed authoritative resources. All health and safety orientation courses have been set up so that licensing workers will be taking the same version of**

the trainings as providers. Additional resources are also available through the department and accommodations would be made for language or cultural issues.

#### 5.5.6 Ratio of licensing inspectors

Lead Agencies must ensure the ratio of licensing inspectors to child care providers and facilities in the State/Territory are maintained at a level sufficient to enable the Lead Agency to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, State, and local laws.

Provide the ratio of licensing inspectors to child care providers (i.e., number of inspectors per number of child care providers) and facilities in the State/Territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. **Each licensing worker is assigned a caseload based on the service area and the counties within that service area. The caseload may vary from area to area due to the number of providers in the area as well as the travel that is required. Each licensor is responsible for establishing their own survey schedule. Each licensor updates the Renewal Log monthly to reflect their licensing inspections. The Renewal Log is checked by the Licensing Program Manager and discussed with the licensor during bi-weekly staff meetings. The Child Care Licensing Program will review the provider to licensor ratio on a quarterly basis to ensure that the ratio does not exceed 120 facilities per licensing worker. To assist areas with higher ratios, the Program Manager may utilize licensing workers in other service areas to conduct licensing inspections. Overall, the workload and completion of assigned duties will be assessed quarterly by the Program Manager and any concerns will be reported to the Lead Agency Bureau Chief.**

## 5.6 Ongoing Health and Safety Training

Lead Agencies must have ongoing training requirements for all caregivers, teachers, and directors of eligible CCDF providers for health and safety standards but have discretion on frequency and training content (e.g., pediatric CPR refresher every year and recertification every 2 years). Lead Agencies have discretion on which health and safety standards are subject to ongoing training. Lead Agencies may exempt relative providers from these requirements.

### 5.6.1 Required ongoing training of health and safety standards

Describe any required ongoing training of health and safety standards for caregivers, teachers, and directors of the following CCDF eligible provider types.

- a. Licensed child care centers: **All providers, within 90 days of hire, must complete CPR/1st Aid, Early Childhood Essentials (3 hours), Infant Safety Essentials (2 hours), New Staff Health and Safety Orientation (6 hours), and Together We Grow (3 hours). All courses are available at no charge for providers on [childcaretraining.org](http://childcaretraining.org). All providers are required to take Health and Safety Review (3 hours) every three years. All courses are updated every three years with the most current best practice. The Lead Agency is currently developing a safe sleep review course. All federally required health and safety topics under CCDF are covered.**
- b. License-exempt child care centers: **Montana does not have license-exempt child care centers.**
- c. Licensed family child care homes: **N/A**

- d. License-exempt family child care homes: **Providers must complete the training course 'Health and Safety Overview of FFN/RCE Providers' prior to a FFN or RCE certification being issued and must complete 'Fundamentals of FFN/RCE Providers Orientation' within 60 days of the FFN/RCE certification's issue date. FFN providers must also have a current CPR and First Aid certification. All federal required health and safety topics under CCDF are covered.**
- e. Regulated or registered in-home child care: **All providers, within 90 days of hire, must complete CPR/1st Aid, Early Childhood Essentials (3 hours), Infant Safety Essentials (2 hours), New Staff Health and Safety Orientation (6 hours), and Together We Grow (3 hours). Directors and owners of Family/Group programs must also take Program Management Essentials (PME) (2 hours). All courses are free of charge for providers on [childcaretraining.org](http://childcaretraining.org). All courses are updated every three years with the most current best practice. The Lead Agency is currently developing a safe sleep review course. All federally required health and safety topics under CCDF are covered.**
- f. Non-regulated or registered in-home child care: **Providers must complete the training course 'Health and Safety Overview of FFN/RCE Providers' prior to a FFN or RCE certification being issued and must complete 'Fundamentals of FFN/RCE Providers Orientation' within 60 days of the FFN/RCE certification's issue date. FFN providers must also have a current CPR and First Aid certification.**

## 5.7 Comprehensive Background Checks

Lead Agencies must conduct comprehensive background checks for all child care staff members (including prospective staff members) of all child care providers that are (1) licensed, regulated, or registered under State/Territory law, regardless of whether they receive CCDF funds; or (2) all other child care providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible child care providers). Family child care home providers must also submit background check requests for all household members age 18 or older.

A comprehensive background check must include: three in-state checks, two national checks, and three interstate checks if the individual resided in another State or Territory in the preceding 5 years. The background check components must be completed at least once every five years.

All child care staff members must receive a qualifying result from either the FBI criminal background check or an in-state fingerprint criminal history check before working (under supervision) with or near children. Lead Agencies must apply a CCDF-specific list of disqualifying crimes for child care providers serving families participating in CCDF.

These background check requirements do not apply to individuals who are related to all children for whom child care services are provided. Exemptions for relative providers will be addressed in subsection 5.8.

### 5.7.1 In-state criminal history check with fingerprints

- a. Does the Lead Agency conduct in-state criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?  
**[x] Yes.**



No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct in-state criminal background checks with fingerprints.

- b. Does the Lead Agency conduct in-state criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers) other than relative providers?

Yes.

No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct in-state criminal background checks with fingerprints.

- c. Does the Lead Agency conduct the in-state criminal background check with fingerprints for all individuals age 18 or older who reside in a family child care home?

Yes.

No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive an in-state criminal background check with fingerprints.

#### 5.7.2 National Federal Bureau of Investigation (FBI) criminal history check with fingerprints

- a. Does the Lead Agency conduct FBI criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?

Yes.

No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct FBI criminal background checks with fingerprints.

- b. Does the Lead Agency conduct FBI criminal history background checks with fingerprints for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?

Yes.

No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct FBI criminal background checks.

- c. Does the Lead Agency conduct the FBI criminal background check with fingerprints for all individuals age 18 or older who reside in a family child care home?

Yes.

No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive an FBI criminal background check with fingerprints.

#### 5.7.3 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based check

The majority of NCIC NSOR records are fingerprint records and are automatically included in the FBI fingerprint criminal background check. But a small percentage of NCIC NSOR records are only

name-based records and must be accessed through the required name-based search of the NCIC NSOR.

- a. Does the Lead Agency conduct NCIC NSOR name-based background checks for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?

Yes.

No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct NCIC NSOR name-based background checks.

- b. Does the Lead Agency conduct NCIC NSOR name-based background checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?

Yes.

No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct NCIC NSOR name-based background checks.

- c. Does the Lead Agency conduct the NCIC NSOR name-based background check for all individuals age 18 or older who reside in a family child care home?

Yes.

No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive a NCIC NSOR name-based background check.

#### 5.7.4 In-state sex offender registry (SOR) check

- a. Does the Lead Agency conduct in-state SOR checks for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?

Yes.

No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct in-state SOR background checks.

- b. Does the Lead Agency conduct in-state SOR background checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?

Yes.

No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct in-state SOR background checks.

- c. Does the Lead Agency conduct the in-state SOR background check for all individuals age 18 or older who reside in a family child care home?

Yes.

No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive an in-state SOR background check.

#### 5.7.5 In-state child abuse and neglect (CAN) registry check

- a. Does the Lead Agency conduct CAN registry checks for all child care staff members (including prospective staff members) of licensed, regulated, or registered child care providers, regardless of CCDF participation?
- Yes.
- No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct CAN registry checks.
- b. Does the Lead Agency conduct CAN registry checks for all child care staff members (including prospective staff members) of all other child care providers eligible for CCDF participation (i.e., license-exempt providers)?
- Yes.
- No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct CAN registry checks.
- c. Does the Lead Agency conduct the CAN registry check for all individuals age 18 or older who reside in a family child care home?
- Yes.
- No. If no, describe individuals age 18 or older who reside in a family child care home who do not receive a CAN registry check.

#### 5.7.6 Interstate criminal history check

These questions refer to requirements for a Lead Agency to conduct an interstate check for a child care staff member (including prospective child care staff members) who currently lives in their State or Territory but has lived in another State, Territory, or Tribal land within the previous 5 years.

- a. Does the Lead Agency conduct interstate criminal history background checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years of licensed, regulated, or registered child care providers, regardless of CCDF participation?
- Yes.
- No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct interstate criminal history background checks.
- b. Does the Lead Agency conduct interstate criminal history background checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years eligible for CCDF participation (i.e., license-exempt providers)?
- Yes.
- No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate criminal history background checks.
- c. Does the Lead Agency conduct interstate criminal history background checks for all individuals age 18 or older who reside in a family child care home and resided in other state(s) in the past 5 years.
- Yes.

No. If no, describe why individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive an interstate criminal history background check.

#### 5.7.7 Interstate Sex Offender Registry (SOR) check

These questions refer to requirements for a Lead Agency to conduct an interstate check for a child care staff member (including prospective child care staff members) who currently lives in their State or Territory but has lived in another State, Territory, or Tribal land within the previous 5 years.

- a. Does the Lead Agency conduct interstate SOR checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years of licensed, regulated, or registered child care providers, regardless of CCDF participation?

Yes.

No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct interstate SOR checks.

- b. Does the Lead Agency conduct interstate SOR checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years eligible for CCDF participation (i.e., license-exempt providers)?

Yes.

No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate SOR checks.

- c. Does the Lead Agency conduct the interstate SOR checks for all individuals age 18 or older who resided in other state(s) in the past 5 years who reside in a family child care home?

Yes.

No. If no, describe individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive an interstate SOR check.

#### 5.7.8 Interstate child abuse and neglect (CAN) registry check

These questions refer to requirements for a Lead Agency to conduct an interstate check for a child care staff member (including prospective child care staff members) who currently lives in their State or Territory but has lived in another State, Territory, or Tribal land within the previous 5 years.

- a. Does the Lead Agency conduct interstate CAN registry checks for any staff member (or prospective staff member) that resided in other state(s) in the past 5 years of licensed, regulated, or registered child care providers, regardless of CCDF participation?

Yes.

No. If no, describe any categories of licensed, regulated, or registered child care providers for whom you do not conduct interstate CAN registry checks.

- b. Does the Lead Agency conduct interstate CAN registry checks for any staff member (or prospective staff member) who resided in other state(s) in the past 5 years eligible for CCDF participation (i.e., license-exempt providers)?

Yes.

No. If no, describe any categories of child care providers eligible for CCDF participation for whom you do not conduct interstate CAN registry checks.

- c. Does the Lead Agency conduct the interstate CAN registry checks for all individuals age 18 or older who resided in other state(s) in the past 5 years who reside in a family child care home?

Yes.

No. If no, describe individuals age 18 or older that resided in other state(s) in the past 5 years who reside in a family child care home that do not receive interstate CAN registry checks.

#### 5.7.9 Disqualifications for child care employment

The Lead Agency must prohibit employment of individuals with child care providers receiving CCDF subsidy payment if they meet any of the following disqualifying criteria:

- Refused to consent to a background check.
- Knowingly made materially false statements in connection with the background check.
- Are registered, or are required to be registered, on the State/Territory sex offender registry or repository or the National Sex Offender Registry.
- Have been convicted of a felony consisting of murder, child abuse or neglect, crimes against children (including child pornography), spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault, or battery.
- Have a violent misdemeanor committed as an adult against a child, including the following crimes: child abuse, child endangerment, sexual assault, or any misdemeanor involving child pornography.
- Convicted of a felony consisting of a drug-related offense committed during the preceding 5 years.

- a. Does the Lead Agency disqualify the employment of child care staff members (including prospective staff members) by child care providers receiving CCDF subsidy payment for CCDF-identified disqualifying criteria?

Yes.

No. If no, describe the disqualifying criteria:

- b. Does the Lead Agency use the same criteria for licensed, regulated, and registered child care providers regardless of CCDF participation?

Yes.

No. If no, describe any disqualifying criteria used for licensed, regulated, and registered child care providers:

- c. How does the Lead Agency use results from the in-state child abuse and neglect registry check?

Does not use them to disqualify employment.

Uses them to disqualify employment. If checked, describe: **Results from the state child abuse and neglect registry are used in determining employment qualification (ARM 37.95.176). The department, after written notice to the applicant, licensee, or registrant may deny, suspend, or revoke a registration certificate license or registration certification or may restrict or reduce to a provisional, or probationary status a registration certificate license or registration certification upon a finding that: the provider, any staff member, volunteer, or any person residing in the day care or anyone staying in the facility on a frequent or regular basis has been named as the perpetrator in a substantiated report of abuse or neglect.**

- d. How does the Lead Agency use results from the interstate child abuse and neglect registry check?

Does not use them to disqualify employment.

Uses them to disqualify employment. If checked, describe: **When an applicant has lived outside Montana in the past five years, an interstate background checks is required including checking the child abuse and neglect registry of those states where the applicant has previously resided. When an applicant has lived outside Montana in the past five years, an interstate background checks is required including checking the child abuse and neglect registry of those states where the applicant has previously resided. Results from the state child abuse and neglect registry are used in determining employment qualification (ARM 37.95.176). The department, after written notice to the applicant, licensee, or registrant may deny, suspend, or revoke a registration certificate license or registration certification or may restrict or reduce to a provisional, or probationary status a registration certificate license or registration certification upon a finding that: the provider, any staff member, volunteer, or any person residing in the day care or anyone staying in the facility on a frequent or regular basis has been named as the perpetrator in a substantiated report of abuse or neglect.**

#### 5.7.10 Privacy

Lead Agencies must ensure the privacy of a prospective staff member by notifying child care providers of the individual's eligibility or ineligibility for child care employment based on the results of the comprehensive background check without revealing any documentation of criminal history or disqualifying crimes or other related information regarding the individual.

Does the Lead Agency certify they ensure the privacy of child care staff members (including prospective child care staff member) when providing the results of the comprehensive background check?

Yes.

No. If no, describe the current process of notification:

#### 5.7.11 Appeals processes for background checks

Lead Agencies must provide for a process that allows child care provider staff members (and prospective staff members) to appeal the results of a background check to challenge the accuracy or completeness of the information contained in the individual's background check report.

Does the appeals process:

- i. Provide the affected individual with information related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal.  
 Yes.  
 No. Describe:
- ii. Provide the affected individual with clear instructions about how to complete the appeals process for each background check component if they wish to challenge the accuracy or completeness of the information contained in such individual's background report.  
 Yes.  
 No. Describe:
- iii. Ensure the Lead Agency attempts to verify the accuracy of the information challenged by the individual, including making an effort to locate any missing disposition information related to the disqualifying crime.  
 Yes.  
 No. Describe:
- iv. Get completed in a timely manner.  
 Yes.  
 No. Describe:
- v. Ensure the affected individual receives written notice of the decision. In the case of a negative determination, the decision must indicate (1) the Lead Agency's efforts to verify the accuracy of information challenged by the individual, (2) any additional appeals rights available to the individual, and (3) information on how the individual can correct the federal or State records at issue in the case.  
 Yes.  
 No. Describe:
- vi. Facilitate coordination between the Lead Agency and other agencies in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.  
 Yes.  
 No. Describe:

#### 5.7.12 Provisional hiring of prospective staff members

Lead Agencies must at least complete and receive a qualifying result for either the FBI criminal background check or a fingerprint-based in-state criminal background check where the individual resides before prospective staff members may provide services or be in the vicinity of children.

Until all the background check components have been completed, the prospective staff member must be supervised at all times by someone who has already received a qualifying result on a background check within the past five years.

Check all background checks for which the Lead Agency requires a qualifying result before a prospective child care staff member begins work with children.

a. FBI criminal background check.

Yes.

No. If no, describe:

b. In-state criminal background check with fingerprints.

Yes.

No. If no, describe:

c. In-state Sex Offender Registry.

Yes.

No. If no, describe:

d. In-state child abuse and neglect registry.

Yes.

No. If no, describe:

e. Name-based national Sex Offender Registry (NCIC NSOR).

Yes.

No. If no, describe:

f. Interstate criminal background check, as applicable.

Yes.

No. If no, describe: **Staff member must be supervised until satisfactory interstate results are received. If interstate results are not received within 45 days the staff member may complete an attestation for approval to work unsupervised. All In state checks must be completed.**

g. Interstate Sex Offender Registry check, as applicable.

Yes.

No. If no, describe: **Staff member must be supervised until satisfactory interstate results are received. If interstate results are not received within 45 days the staff member may complete an attestation for approval to work unsupervised. All In state checks must be completed.**

h. Interstate child abuse and neglect registry check, as applicable.

Yes.

No. If no, describe: **Staff member must be supervised until satisfactory interstate results are received. If interstate results are not received within 45 days the staff member may complete an attestation for approval to work unsupervised. All In state checks must be completed.**

i. Does the Lead Agency require provisional hires to be supervised by a staff member who



received a qualifying result on the comprehensive background check while awaiting results from the provisional hire's full comprehensive background check?

Yes.

No. If no, describe: **Staff member must be supervised until satisfactory interstate results are received. If interstate results are not received within 45 days the staff member may complete an attestation for approval to work unsupervised. All In state checks must be completed.**

#### 5.7.13 Completing the criminal background check within a 45-day timeframe

The Lead Agency must carry out a request from a child care provider for a criminal background check as expeditiously as possible, and no more than 45 days after the date on which the provider submitted the request

- a. Does the Lead Agency ensure background checks are completed within 45 days (after the date on which the provider submits the request)?

Yes.

No. If no, describe the timeline for completion for categories of providers, including which background check components take more than 45 days.

- b. Does the Lead Agency ensure child care staff receive a comprehensive background check when they work in your State but reside in a different State?

Yes.

No. If no, describe the current policy:

#### 5.7.14 Responses to interstate background check requests

Lead Agencies must respond as expeditiously as possible to requests for interstate background checks from other States/Territories/Tribes in order to meet the 45-day timeframe.

- a. Does your State participate in the National Crime Prevention and Privacy Compact or National Fingerprint File programs?

Yes.

No.

- b. Describe how the State/Territory responds to interstate criminal history, Sex Offender Registry, and Child Abuse and Neglect Registry background check requests from another state. **Montana responds to requests from other states and territories searching for background information by directing them to the following procedures: Interstate Criminal History Registry Check Procedures: This is a Montana-only name-based check. The link is <https://app.mt.gov/choprs>. For the public: go to CHOPRS - Criminal History Online Public Record Search and click on the Public Users "Start Service" button. To search, you must submit the individual's complete name and complete date of birth. Social Security numbers optional but are encouraged as they allow a more thorough search. Up to four alias names may be included in the search without further cost. You must also enter your name to comply with Section 44-5-215 of the Montana Code Annotated. You may pay the \$20.00 fee for each record search by credit card or eCheck.**

For registered users: Go to Criminal History Online Public Record Search and click on the Registered Users "Start Service" button. Enter your username and password. You will receive monthly bills that you may choose to pay by credit card, electronic payment, or invoice. To become a registered user, go to Criminal History Online Public Record Search and click the "Become a Registered User" button. Mail-in requests for name-based background checks should include: the name of the person being checked and, if possible, any aliases, nicknames, or maiden names the person's date of birth his or her Social Security number. Enclose: a self-addressed, stamped envelope the \$15.00 processing fee for each individual to be checked, paid by check or money order (U.S. Funds please) Mail the complete request to Montana Criminal Records.

2) Interstate Sex Offender Registry Check Procedures: The Montana Sexual and Violent Offender Registry is publicly available at <https://dojmt.gov/sexual-or-violent-offender-registry/>. States and Territories can check the registry by visiting the website and entering the applicant's last name. Any registered offender with the same last name will be listed along with first names and other details about the individual and the registered offenses.

Interstate Child Abuse and Neglect Registry Check Procedures: In accordance with Montana Code Annotated 41-3-205, a person or entity who is carrying out background, employment-related, or volunteer-related screening of current or prospective employees or volunteers who have or may have unsupervised contact with children through employment or volunteer activities may request and receive Child Abuse and Neglect Registry Check (CPS) for MT background checks. Instructions for how to request a Child Abuse and Neglect Registry Check for MT can be found at:

<https://dphhs.mt.gov/CFSD/BackgroundChecks>. There is currently no cost for Child Protective Service Background Checks. A request for a Child Protective Service (CPS) Background Check is made by submitting a completed, signed and notarized Montana Release of Information form to CFSD by mail or fax using the most appropriate form to describe the reason for requesting a Child Protective Service Background Check. These checks apply to Child Placing Agency staff including current or prospective employees or volunteers and applicants/providers of foster care, adoption, guardianship, kinship (licensed or unlicensed) and adult members of these providers' households, Day Care Center Staff including current or prospective employees or volunteers AND family and group child day care home providers and staff including volunteers and adult family members, Youth Care Facility Staff including current or prospective employees or volunteers.

Requests can be mailed to:

Records Request  
DPHHS/CFSD  
P.O. Box 8005  
Helena, MT. 59604-8005

Requests can be faxed to:

DPHHS/CFSD  
ATTN: Records Request  
FAX (406) 841-2046

Status requests can be made via e-mail requesting a return phone or by fax at (406) 841-2046. Status requests must include the name of the person for whom the background check was requested and the date the original request was sent to CFSD. Please allow at least ten working days between the time an original request for a background check is

**submitted and the time a status request is made.**

- c. Does your State/Territory have a law or policy that prevents a response to CCDF interstate background check requests from other States/Territories/Tribes?
- Yes. If yes, describe the current policy.
- No.

5.7.15 Consumer education website links to interstate background check processes

Lead Agencies must include on their consumer education website and the website of local Lead Agencies if the CCDF program is county-run, the policies and procedures related to comprehensive background checks. This includes the process by which a child care provider or other State or Territory may submit a background check request.

- a. Provide the direct URL/website link that contains instructions on how child care providers and other States and Territories should initiate background check requests for prospective and current child care staff members:

<https://dphhs.mt.gov/assets/ecfsd/childcarelicensing/fbibbackgroundcheckinstruction.pdf>

Check to certify that the required elements are included on the Lead Agency's consumer and provider education website for each interstate background check component.

- b. Interstate criminal background check:

- i.  Agency name
- ii.  Address
- iii.  Phone number
- iv.  Email
- v.  Website
- vi.  Instructions
- vii.  Forms
- viii.  Fees
- ix.  Is the State a National Fingerprint File (NFF) State?
- x.  Is the State a National Crime Prevention and Privacy Compact State?
- xi. If not all boxes above are checked, describe:

- c. Interstate sex offender registry (SOR) check:

- i.  Agency name
- ii.  Address
- iii.  Phone number
- iv.  Email
- v.  Website
- vi.  Instructions

- vii.  Forms
- viii.  Fees
- ix. If not all boxes above are checked, describe:
- d. Interstate child abuse and neglect (CAN) registry check:
  - i.  Agency name
  - ii.  Is the CAN check conducted through a county administered registry or centralized registry?
  - iii.  Address
  - iv.  Phone number
  - v.  Email
  - vi.  Website
  - vii.  Instructions
  - viii.  Forms
  - ix.  Fees
  - x. If not all boxes above are checked, describe:

#### 5.7.16 Background check fees

The Lead Agency must ensure that fees charged for completing the background checks do not exceed the actual cost of processing and administration.

Does the Lead Agency certify that background check fees do not exceed the actual cost of processing and administering the background checks?

Yes.

No. If no, describe what is currently in place and what elements still need to be implemented:

#### 5.7.17 Renewal of the comprehensive background check

Does the Lead Agency conduct the background check at least every 5 years for all components?

Yes.

No. If no, what is the frequency for renewing each component?

## 5.8 Exemptions for Relative Providers

Lead Agencies may exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles) from certain health and safety requirements. This exception applies only if the individual cares only for relative children.

### 5.8.1 Exemptions for relative providers

Does the Lead Agency exempt any federally defined relative providers from licensing requirements, the CCDF health and safety standards, preservice/orientation training, ongoing training, inspections, or background checks?

No.

Yes. If yes, which type of relatives do you exempt, and from what requirements (licensing requirements, CCDF health and safety standards, preservice/orientation training, ongoing training, inspections, and/or background checks) do you exempt them?  
**Licensing requirements. Relative providers are exempt from a portion of licensing requirements. Describe: Relative providers must meet background check requirements, be 18 years of age or older; limit the care they provide to a period of less than 24 consecutive hours; may care for either a sibling group of any size or no more than two unrelated children; and complete orientation approved by the department that includes health and safety training, Complete a health and safety review course at least every three years, and complete pediatric First Aid and CPR. Health and Safety Standards: Relative providers are exempt from all health and safety standard requirements. Health and Safety Training: Relative providers are exempt from a portion of all health and safety training requirements. Relative providers must attend 2 4-hour trainings in health and safety orientation and FFN Fundamentals training. Monitoring and Enforcement: Relative providers are exempt from all monitoring and enforcement. Background Checks: Relative providers must fully comply with all background check requirements.**

## 6 Support for a Skilled, Qualified, and Compensated Child Care Workforce

A skilled child care workforce with adequate wages and benefits underpins a stable high-quality child care system that is accessible and reliable for working parents and that meets their needs and promotes equal access. Positive interactions between children and caregivers provide the cornerstone of quality child care experiences. Responsive caregiving and rich interactions support healthy socio-emotional, cognitive, and physical development in children. Strategies that successfully support the child care workforce address key challenges, including low wages, poor benefits, and difficult job conditions. Lead Agencies can help mitigate some of these challenges through various CCDF policies, including through ongoing professional development and supports for all provider types and embedded in the payment policies and practices covered in Section 4. Lead Agencies must have a framework for training, professional development, and post-secondary education. They must also incorporate health and safety training into their professional development. Lead Agencies should also implement policies that focus on improving wages and access to benefits for the child care workforce. When implemented as a cohesive approach, the initiatives support the recruitment and retention of a qualified and effective child care workforce, and improve opportunities for caregivers, teachers, and directors to advance on their progression of training, professional development, and postsecondary education.

This section addresses Lead Agency efforts to support the child care workforce, the components and implementation of the professional development framework, and early learning and developmental guidelines.

### 6.1 Supporting the Child Care Workforce

Lead Agencies have broad flexibility to implement policies and practices to support the child care workforce.

6.1.1 Strategies to improve recruitment, retention, compensation, and well-being

- a. Identify any Lead Agency activities related to strengthening workforce recruitment and retention of child care providers. Check all that apply:
- i.  Providing program-level grants to support investments in staff compensation.
  - ii.  Providing bonuses or stipends paid directly to staff, like sign-on or retention bonuses.
  - iii.  Connecting family child care providers and center-based child care staff to health insurance or supporting premiums in the Marketplace.
  - iv.  Subsidizing family child care provider and center-based child care staff retirement benefits.
  - v.  Providing paid sick, personal, and parental leave for family child care providers and center-based child care staff.
  - vi.  Providing student loan debt relief or loan repayment for family child care providers and center-based child care staff.
  - vii.  Providing scholarships or tuition support for center-based child care staff and family child care providers.
  - viii.  Other. Describe:
- b. Describe any Lead Agency ongoing efforts and future plans to assess and improve the compensation of the child care workforce in the State or Territory, including increasing wages, bonuses, and stipends. **Programs participating in the Lead Agency's QRS receive quarterly quality incentive payments. The incentives are based on program type and QRS level. Incentives are paid at level 2-5. Incentives range from \$469 to \$5000 a quarter. Programs are required to budget and spend 20% - 50% of these incentives towards personnel dependent upon QRS level. Examples of personnel benefits can include funding professional development, staff bonuses, merit increases, health insurance, professional memberships, pay for staff training time, and more. Montana is expanding and enhancing its apprenticeship programming. Expansion has begun with the addition of a pre-apprenticeship pilot program which allows participants to complete a CDA. Continued focus on pre-apprenticeship will lead to the inclusion of an infant/toddler CDA and possible other credentials such as a director or leadership credential. Registered Apprenticeship programs require a wage increase at completion of the program.**
- c. Describe any Lead Agency ongoing efforts and future plans to expand access to benefits, including health insurance, paid sick, personal, and parental leave, and retirement benefits. **The Lead Agency contracted with Raise Montana to develop shared services for home-based providers. Services include, but are not limited to, insurance and substitute pools, accounting services and bulk purchasing. The substitute pool coordinated by Raise is available statewide. The partnership with Raise has afforded opportunities for home-based providers to explore how these and other shared services might benefit their programs. Another outcome of the shared services effort resulted in a telehealth, health insurance service. The Lead Agency will support a telehealth health insurance option in the business support contract. PDG B-5 is funding a program specialist who will dedicate time to improve access to benefits for child care workers. The research will cover**

insurance and leave options and inform the Lead Agency on the proper employee benefits to pursue in the future. The Lead Agency's QRS system offers incentives through the Redesign as stated in 6.1.1 (b). A percentage of the incentives must go towards personnel which can include paying for access to benefits.

- d. Describe any Lead Agency ongoing efforts and future plans to support the mental health and well-being of the child care workforce. **The Lead Agency is pursuing a blended funding model to implement Infant Early Childhood Mental Health Consultation (IECMHC). CCDF ARPA and PDG B-5 funding are being used to further develop the IECMHC infrastructure to build the consultation workforce, develop an alliance to guide implementation, and pilot consultation in child care. Lead Agency quality staff monitor contracted work to ensure deliverable completion, collaboration, and early partner engagement. The Lead Agency will use evaluation data to determine the specific child care implementation model, and plan to prioritize caregivers working with infants and toddlers. The following highlight IECMHC deliverables: (1) Workforce retention and staff burnout focused in-person, group, and virtual models and office hours; (2) Support and monitoring of mental health consultants providing IECMHC and IECMHC related services; (3) A Consultation-ready Montana mental health consultant workforce supported by professional development; (4) Reflective supervision; (5) Cultural responsiveness (6); A policy, procedure, and form housing hub. Montana's QRS, continues to offer incentives through the Redesign as stated in 6.1.1 (b). A percentage of the incentives must go towards personnel which can include paying for services that support mental health and well-being.**
- e. Describe any other strategies the Lead Agency is developing and/or implementing to support providers' recruitment and retention of the child care workforce. **The Lead Agency is expanding and enhancing its apprenticeship programming. The apprenticeship model is comprehensive. It meets many of the workforce goals the State hopes to accomplish in the next three years. Expansion has begun with the addition of a pre-apprenticeship pilot program which allows participants to complete a CDA. Continued focus on pre-apprenticeship will lead to the inclusion of an infant/toddler CDA and a recruitment strategy targeted towards high school students. The following deliverables provide more detail to the apprenticeship work mentioned above. (1) Develop an approach for child care providers to obtain all three CDA types within the apprenticeship system; (2) Develop pathways and programming for the Infant/toddler CDA; (3) Evaluate current pilot program (preschool and family/group CDA credential); (4) Plan implementation of all CDA credentials; (5) Pre-Apprenticeship programming to target high school students (recruitment strategy); (6) Work collaboratively with relevant partners to explore a targeted recruitment strategy from high school to the child care workforce; (7) Address the needs of schools, child care programs, providers, staff, and students leading to a defined pathway for high school students to enter the child care field. The Lead Agency is pursuing a blended funding model to implement IECMHC, as described in 6.1.1.d. The Lead Agency's model is focused on retention and staff burnout. Recruitment and retention of child care staff was a target goal within two CCDF ARPA contracts. Below are statements identifying related outcomes/deliverables. (1) Build child care program capability and capacity through training and technical assistance, recruitment, and mentoring; (2) Training and technical assistance for start-up business operations and long-term business plan development and sustainability; (3) Professional development for small Family, Friend, and Neighbor providers; (4) TA for providers wishing to become licensed or compliant with federal health and safety standards; (5) Recruitment of new**

child care providers in underserved areas. Child care recruitment is a key contract activity with all Lead Agency contractors. The Lead Agency saw promising outcomes from its contractors providing training on the implementation of best business practices. TA in this area will be part of future contracted services for all child care program types. Additionally, PDG B-5, currently offers recruitment and retention financial assistance to workers providing direct care to children in registered and licensed facilities. Workers making between 185 and 250% of the Federal Poverty Guideline (FPL) are eligible to receive financial assistance for 12 months to reduce the cost of childcare for staff.

#### 6.1.2 Strategies to support provider business practices

- a. Describe other strategies that the Lead Agency is developing and/or implementing to strengthen child care providers' business management and administrative practices. **The Lead Agency's QRS continues to support providers business practices by conducting Program Administration Scale (PAS) and Business Administration Scale (BAS) assessments. These assessments focus on several business practices such as Staff Orientation, Personnel Cost and Allocation, Fiscal Management, Program Planning and Evaluation, Family Partnerships, Marketing and Public Relations. PAS and BAS assessments are required for programs in QRS level 3-5. Assessments planned for 2024 and 2025 are not high stakes, due to the QRS redesign and scores not affecting a program's level. The results and feedback are for program CQI. QRS staff and the local contracted agencies support the providers with any needs regarding PAS and BAS assessments. Data is reviewed from these assessments and used to determine training needs and/or additional business supports. The new QRS launching in the Fall of 2025 will continue to offer business practice supports. The Lead Agency business supports contractor provides both individual and community business supports.**
- b. Check the topics addressed in the Lead Agency's strategies for strengthening child care providers' administrative business practices. Check all that apply:
  - i.  Fiscal management.
  - ii.  Budgeting.
  - iii.  Recordkeeping.
  - iv.  Hiring, developing, and retaining qualified staff.
  - v.  Risk management.
  - vi.  Community relationships.
  - vii.  Marketing and public relations.
  - viii.  Parent-provider communications.
  - ix.  Use of technology in business administration.
  - x.  Compliance with employment and labor laws.
  - xi.  Other. Describe any other efforts to strengthen providers' administrative business:

#### 6.1.3 Strategies to support provider participation



Lead Agencies must facilitate participation of child care providers and staff with limited English proficiency and disabilities in the child care subsidy system. Describe how the Lead Agency will facilitate this participation, including engagement with providers to identify barriers and specific strategies used to support their participation:

- a. Providers and staff with limited English proficiency: **Montana has recently seen an increase in the number of people whose first languages is not English. While this increase is observed across the state, it is more pronounced in the larger urban areas of Billings, Bozeman, and Missoula. Missoula has also historically been the site of refugee resettlement efforts. To support providers who are not proficient in English, the Lead Agency has a contract with Language Link to be able to provide the contracted Child Care Resource and Referral Agencies with easy and accessible real time translation services for a wide range of languages. The Lead Agency has as also recently begun a Spanish language translation project to convert documents into Spanish. The first step was to convert licensing application materials and support materials into Spanish. That phase is completed and those documents are available on the Lead Agency’s website and through the contracted CCR&R agencies.**
- b. Providers and staff who have disabilities: **Accommodations in accordance with the Americans with Disabilities Act are available to providers with disabilities for trainings and participation on the Practitioner Registry. The Lead Agency contractors, Child Care Licensing, and other state partners coordinate to meet the needs of providers through accessibility accommodations as needed. The Early Childhood Project (ECP) Policies and Procedures are available on their website and outline the following: - The ECP shall assure quality services and comply with the American with Disabilities Act (ADA) of 1990. The Early Childhood Project reviews all content that goes out to the public to assure it meets specific requirements: diversity of families in imagery, language, accessibility in written text, pictures, and videos. The Lead Agency prioritizes accessible documents and webpages so providers with disabilities gain access to CCDF information.**

## 6.2 Professional Development Framework

A Lead Agency must have a professional development framework for training, professional development, and post-secondary education for caregivers, teachers, and directors in child care programs that serve children of all ages. The framework must include these components:

(1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing. CCDF provides Lead Agencies flexibility on the strategies, breadth, and depth of the framework. The professional development framework must be developed in consultation with the State Advisory Council on Early Childhood Education and Care or a similar coordinating body.

### 6.2.1 Updates and consultation

- a. Did the Lead Agency make any updates to the professional development framework since the FFY 2022-2024 CCDF Plan was submitted?

**[x]** Yes. If yes, describe the elements of the framework that were updated and describe if and how the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body was consulted: **The Montana Career Path (referred to as 'the Career Path') was updated in 2024 to launch in the Summer. The updates to the Career**

Path were determined following a review of feedback from practitioners and researching other career pathways nationwide. The Career Path revisions were requested by The Montana Early Childhood Higher Education Consortium (MECHEC) as well as the Lea Agency. Updates support early childhood professionals to advance their careers and improve the quality of early childhood education in the state. The revised Career Path framework includes new opportunities for years of experience and secondary degrees in non-related fields used to advance their placement on the career path.

No.

- b. Did the Lead Agency consult with other key groups in the development of their professional development framework?

Yes. If yes, identify the other key groups: Updates on prospective changes to the Career Path were shared with apprenticeship and PDG B-5 workgroups, as well as practitioners with whom these changes directly affect. The Early Childhood Project (ECP) collected letters of support and emailed suggestions in favor of proposed revisions. The ECP researched various career ladders in registries nationwide considering how other states implement their career pathways. By actively engaging with stakeholders and conducting thorough research, revisions were made to not only meet the needs of practitioners but align with national trends and best practices. This collaborative approach has helped to build consensus and support for the proposed revisions, ensuring a successful implementation of the updated Career Path in Montana.

No.

#### 6.2.2 Description of the professional development framework

- a. Describe how the Lead Agency's framework for training and professional development addresses the following required elements:

- i. Professional standards and competencies. For example, Lead Agencies can include information about which roles in early childhood education are included (such as teachers, directors, infant and toddler specialists, mental health consultants, coaches, licensors, QIS assessors, family service workers, home visitors). **Montana's Early Care and Education Knowledge Base (referred to as the 'Knowledge Base')** outlines the professional standards and competencies for what early childhood practitioners need to know, understand, and be able to demonstrate. The Knowledge Base is the foundation of Montana's career development system and was first published in 1997. It underwent subsequent revisions in 2004, 2008, 2013, 2018 and 2022. It is used as the basis for all training and professional development approval in Montana. The Knowledge Base content areas are structured around 'personal dispositions' and include Observation, Documentation, and Assessment, Teaching and Engagement, Family and Community Partnerships, Curriculum and Learning Environment, Professionalism, and Child Development. Knowledge. General competencies related to cultural, linguistic, ethnic, and developmental diversity are embedded throughout the document. Diversity related competencies remain a subcomponent of each content area. Two courses on inclusion are available to all child care staff for college credit and are embedded in the Lead Agency's QRS standards. The Montana Early Learning Standards (MELS) are designed to guide the work of early

childhood professionals in a variety of early childhood settings. Professionals who utilize MELS help ensure children from birth to age five develop the skills and knowledge they need to achieve success in learning and assist in reaching their full potential in life. MELS are currently undergoing a revision to ensure the standards are up to date and relevant. The Lead Agency will continue to promote the Inclusion I and Inclusion II trainings, the Knowledge Base, and the MELS.

- ii. Career pathways. For example, Lead Agencies can include information about professional development registries, career ladders, and levels. **The Career Path is a framework for professional development in early childhood education. It promotes professional development for early care and education practitioners by recording and recognizing experience, training, and educational accomplishments. The Career Path is housed on the Practitioner Registry and managed by ECP. It has been modified to accommodate new pathways several times since its adoption in 1998 including in 2024. The Career Path outlines ten levels of career development which are based on training, education, and experience, ranging from a high school diploma/HiSet or GED certificate to advanced degrees in early childhood education. When a provider applies to join the Practitioner Registry, they are placed on the Career Path following verification of their transcripts, employment, and other documents submitted to the ECP. The Membership Status supports individuals who are currently enrolled in high school, or who are working to complete their HiSet/GED. Upon completion of the HiSet/GED, providers receive a one-time stipend. Training hour requirements were also adjusted at the time of the new CCDF Rule Regulation to a standard 16 hours annually across all levels on the Career Path. In 2022, the groundwork for a revision to the career path began, driven by feedback from practitioners and informed by the research and efforts of the ECP staff. A key focus of the 2024 revision was to create career pathway advancement opportunities for practitioners without requiring advanced degrees. New pathways are based on work experience and professional development and align with the current early childhood landscape. The updated Career Path framework includes changes to acknowledge and accommodate practitioners with diverse backgrounds and expertise. With a focus on practitioners, the revised Career Path promotes inclusivity, recognizes diverse pathways to professional growth, and provides opportunities for all individuals to thrive and advance in their careers in early childhood.**
- iii. Advisory structure. For example, Lead Agencies can include information about how the professional development advisory structure interacts with the State Advisory Council on Early Childhood Education and Care. **The ECP is an outreach program within the Montana State University Department of Health and Human Development. ECP was founded in 1985 with the sole focus to improve the quality of programs and services for Montana's youngest children and their families through supports to the early childhood workforce. The Lead Agency contracts with the ECP to address CCDF regulations specific to professional development and the early care and education workforce. The ECP coordinates with state-level programs and early childhood state and federal grants to further align strategies and support the workforce through partnerships with QRS, PDG B-5, Part C/Early Intervention, and Early Childhood Apprenticeship and Pre-Apprenticeship programs with the Department of Labor and Industries. The ECP, due to its**

placement within higher education, has access to early childhood programs in colleges and universities across the state delivering content, curricula, student placements, and connections with state policy leaders. The ECP convenes the Career Development Advisory Board (CDAB) biannually to examine current data, trends, and issues related to the operation of the various programs it administers including the Registry, the PD Approval System, incentives and awards, Apprenticeship Programs, Director Credential, grants, annual leadership professional development events, and policies and procedures. CDAB convenes partners with strategic ties specific to the workforce. The CDAB grew out of the initial task force convened to plan for an Early Care and Education Career Development program in 1995. Key statewide partners preside on the CDAB board contributing to policy and key initiatives specific to ECE professional development system. CDAB representation expands depending on new areas of focus. Current representation includes the: Montana Child Care Resource and Referral Network, Tribal Child Care Administrators and/or Tribal Head Start/Early Head Start, Early Childhood Higher Education Consortium, Montana Association for the Education of Young Children, Head Start State Collaboration Office, Head Start Association, Child Care plus+, Center on Inclusion in Early Childhood (UM), Child and Adult Care Food Program, Montana Department of Labor and Industry Apprenticeship Program and Training, Office of Public Instruction, and Montana's distance learning contractor. The ECP Director is appointed to the Child Care Advisory Council, CCAC which provides additional opportunities for outreach for workforce initiatives. The CCAC recognizes the importance of professional development in the field of early care and education and provides a space to gather and share workforce related information.

- iv. **Articulation.** For example, Lead Agencies can include information about articulation agreements, and collaborative agreements that support progress in degree acquisition. **The Montana Early Childhood Higher Education Consortium (MECHEC) convenes bi-annually to coordinate topics specific and relevant to advancing early care and education in higher education settings. The collective voice from institutions of higher education represents an expert lens on issues, trends, and needs in early childhood professional preparation. Members of the consortium include faculty from all higher education programs, including community and tribal colleges, to ensure articulation and collaboration across the state. The MECHEC is coordinated through the ECP and a faculty member at Montana State University facilitates the meetings. Articulation is a key focus of the partnership the MECHEC offers to the state. MECHEC is designed to stand as the leadership body for articulation agreements regarding credit transfers, common coding for ECE courses offered in higher education, registry level appeals, and new initiatives that require input and design by this group of stakeholders. The partnership between the ECP and the MECHEC is vital and provides a communication bridge between higher education and the Lead Agency. The MECHEC serves as a valuable resource and sounding board for the project, offering expertise and guidance in problem-solving early childhood related coursework questions.**
- v. **Workforce information.** For example, Lead Agencies can include information about workforce demographics, educator well-being, retention/turnover surveys,

actual wage scales, and/or access to benefits. **Workforce data is available from the ECP’s Practitioner Registry. Following licensing changes made in 2018, child care licensing rule change, program staff in a state licensed care must participate on the Registry to meet licensing compliance standards. Verified data is used for policy and program development related to requirements in child care licensing rule, QRS, and the Registry. Data, such as career level advancement, number of providers in the field, and training hours are utilized in grant writing and legislative proposals to advance early care and education in Montana. Compensation information is encouraged in the Registry employment verification process, though it is currently collected on a voluntary basis. Data related to the early care and education workforce is shared on a quarterly basis with the across Lead Agency leadership. The ECP has a Data Research Analyst to conduct data analysis. Survey data collected at various points throughout the year helps the ECP to better understand the needs and preferences of the practitioners in the field. Survey results help ECP identify areas for improvements. Regular assessments of customer satisfaction allow the ECP to ensure practitioners feel supported throughout their careers. Surveys related to new developments and processes are crucial in meeting the needs and expectations of those directly impacted by the changes. The ECP makes informed decisions and adjustments to improve the overall user experience. The commitment to continuous improvement ultimately leads to a more positive and rewarding experience. The ECP contributes to the National Workforce Registry Alliance dataset.**

- vi. Financing. For example, Lead Agencies can include information about strategies including scholarships, apprenticeships, wage enhancements, etc. **The Lead Agency contracts with the ECP to carry out training and professional development requirements including the maintenance of the Practitioner Registry. All orientation, ongoing health, and safety, and QRS trainings are offered free of charge to all providers. Any additional training costs, to meet the annual required 16 hours, are the responsibility of the provider. Costs vary depending on the type of courses chosen. ECP processes and creates payment files for the Professional Development Incentive Award for higher education and incentives connected to child care apprenticeship programs, which are paid by the Lead Agency, for individuals obtaining a degree credential in Early Childhood. The revised Career Path and the QRS redesign will give the Lead Agency an opportunity to explore a structure to incentivize progression along the Career Path and recognize provider’s advancements through professional development, degree, and credential attainment, and/or additional years of experience.**

b. Does the Lead Agency use additional elements?

Yes.

If yes, describe the element(s). Check all that apply.

- i.  Continuing education unit trainings and credit-bearing professional development. Describe: **Inclusion I, Inclusion II, and CDA-A: Child Development and Brain Building are offered for training credit with an option to receive college credit through the University of Montana.**
- ii.  Engagement of training and professional development providers, including

higher education, in aligning training and educational opportunities with the Lead Agency's framework. Describe: **The Higher Education/Professional Development (HE/PD) committee has worked on training and credential alignment from early childhood to higher education with a variety of stakeholders. The committee is currently paused and will reconvene in the fall of 2025.**

iii.  Other. Describe:

No.

### 6.2.3 Impact of the Professional Development Framework

Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors and identify what data are available to assess the impact.

- a. Professional standards and competencies. For example, do the professional standards and competencies reflect the diversity of providers across role, child care setting, or age of children served? **The Montana Early Learning Standards and the Knowledge Base serve as a foundation for early childhood professionals. All training approved through the ECP is required to align with the standards and competencies. The alignment reinforces for the trainer and the participant the importance of the standards and competencies. It supports the repetition of the standards and ensures the trainings offered fit within the framework increasing the likelihood of high-quality offerings. Data analysis of trainings and competencies provide valuable insights into areas of strength and areas in need of improvement. By examining this data, stakeholder can identify which professional development competencies and standards are prioritized and valued. The Lead Agency QRS has a variety of free trainings for all early childhood staff to provide diverse content. Specific trainings are required based on role-type or sometimes ages served. Providers can participant in any QRS offered training. Data-based decisions are being thoughtfully made to determine what trainings will stay in the new QRS being launched in the Fall of 2025. The Lead Agency will continue to promote and support QRS offerings and guide participants engaged in QRS to the standards and competencies.**
- b. Career pathways. For example, has the Lead Agency developed a wage ladder that provides progressively higher wages as early educators gain more experience and credentials? What types of child care settings and staff roles are addressed in career pathways, such as licensed centers and family child care homes? **The ECP is working to incorporate new opportunities to group trainings together and earn a badge. The introduction of badging will provide practitioners with a unique opportunity to enhance their professional development records in an innovative way. The first phase of badges includes trainings around (1) Health & Safety, (2) Trauma informed care, and 3) Business practices. The second phase includes badges for trainings regarding (1) Preschool, (2) Infant/Toddler, (3) CDA, (4) CPR/First Aid, and (5) Family/Group license type specific trainings. By earning and collecting badges, practitioners can showcase their expertise and accomplishments in specialized content areas or topics. Badging may present a way for practitioners to intentionally engage in targeted professional development that aligns with their interests and goals. Badges symbolize an early childhood professionals' expertise and dedication to continuous learning and improvement. The implementation of badging can open new opportunities for incentives and career advancement for practitioners.**
- c. Advisory structure. For example, has the advisory structure identified goals for child care

workforce compensation, including types of staff and target compensation levels? Does the Lead Agency have a Preschool Development Birth-to-Five grant and is part of its scope of work child care compensation activities? Are they represented in the advisory structure? **The Preschool Development Grant Birth-Five (PDG B-5) has facilitated new connections between the ECP and its partners to focus on the revision of the MELS, while also providing support for the implementation of the Career Path and badging development. The updated Career Path will continue to offer opportunities to tie incentives and future stipends to individuals within the registry meaning practitioners can receive additional support and recognition based on their level of professional development and badge achievements. This approach recognizes the dedication and expertise of early childhood professionals and encourages ongoing professional development and growth within the workforce.**

- d. **Articulation.** For example, how does the advisory structure include training and professional development for providers, including higher education, to assist in aligning training and education opportunities? **The Career Path coupled with advisory council input provides a structured framework for individuals to progress in their careers and access potential incentives and opportunities for advancement. By outlining clear pathways for professional growth and development, individuals can navigate through the career path, receive recognition for their achievements, and access resources to support their ongoing learning and advancement. Continued collaboration with advisory structures like the MEHEC aids in aligning training and education opportunities. The recent MOU created between the ECP, Walter R. McDonald and Associates (WRMA), and the Council for Professional Recognition is an example of how alignment and collaboration streamlines the process early childhood professionals undergo to obtain credentials like a CDA. The MOU ensures that the Registry’s professional development records are recognized and approved as valid documentation for the CDA process. This collaboration helped simplify the credentialing process and reduce barriers for practitioners seeking to advance their careers and qualifications.**
- e. **Workforce information.** For example, does the Lead Agency have data on the existing wages and benefits available to the child care workforce? Do any partners such as the Quality Improvement System, child care resource and referral agencies, Bureau of Labor Statistics, and universities and research organizations collect compensation and benefits data? Does the Lead Agency monitor child care workforce wages and access to benefits through ongoing data collection and evaluation? Can the data identify any disparities in the existing compensation and benefits (by geography, role, child care setting, race, ethnicity, gender, or age of children served)? **The ECP plays a large role in collecting and tracking wage data for practitioners. While wage information is optional for individuals to provide, the project can compile data on wages that have been entered and collaborate with partnering agencies and the Department of Labor and Industry. This collaboration helps to ensure accurate data is shared to inform state level decision making and policy development. In addition to data sharing, the ECP participates in national data collection efforts through the National Workforce Registry Alliance contributing to a broader understanding of the workforce trends and needs in early childhood education. The ECP collects information on various factors such as geography, child care settings, race, ethnicity, gender, and ages of children served, to identify potential disparities on workforce participation. The ECP’s data driven approach allows stakeholders to advocate for policies and initiatives that support equity and quality in the early childhood field. The**

State's QRS embeds Program Administration Scale (PAS) assessments for child care centers and Business Administration Scale (BAS) assessments for family/group home into its standards at all levels. High stakes assessments have been conducted at programs levels 3-5. ECP's workforce data compares access to benefits and wage increases at the state and local program levels.

- f. Financing. For example, has the Lead Agency set a minimum or living wage as a floor for all child care staff? Do Lead Agency-provider subsidy agreements contain requirements for staff compensation levels? Do Lead Agencies provide program-level compensation grants to support staff base salaries and benefits? Does the Lead Agency administer bonuses or stipends directly to workers? **Through the Registry, the ECP and Lead Agency staff administered ongoing Professional Development Incentive Awards (PDIAs) for higher education attainment. The Career Path creates opportunities for providers to be guided to advancement in a structure whereby future incentive opportunities can be tied. The framework created helps to provide resources and opportunities for practitioners to enhance their skills, knowledge, and qualifications. The Registry, given its established infrastructure, expertise in managing incentive programs, and commitment to supporting early childhood professionals, is well equipped to administer new financial incentives and bonuses should they arise. When wage information is entered during the verification process, the ECP can help to ensure the wage is at least the state's minimum to ensure both the employee and employer meet the requirement.**

### 6.3 Ongoing Training and Professional Development

#### 6.3.1 Required hours of ongoing training

Provide the number of hours of ongoing training required annually for CCDF-eligible providers in the following settings:

- a. Licensed child care centers: **16**
- b. License-exempt child care centers: **0**
- c. Licensed family child care homes: **16**
- d. License-exempt family child care homes: **0**
- e. Regulated or registered in-home child care: **16**
- f. Non-regulated or registered in-home child care: **0**

#### 6.3.2 Accessibility of professional development for Tribal organizations

Describe how the Lead Agency's training and professional development are accessible to providers supported through Indian tribes or Tribal organizations receiving CCDF funds (as applicable).

**Tribal-based, state licensed child care providers are eligible to participate in QRS. Participation affords access to a variety of trainings across content areas. There are tribal organizations who currently participate in the QRS. The Lead Agency contractors, ECP and Child Care Training (CCT), operate a statewide training calendar and catalog. Both are accessible to all practitioners, including early childhood staff in tribal programs. The ECP and CCT operate under contract language and internal processes to monitor and evaluate trainings with close attention placed on the cultural and linguistic needs of Montana's early childhood workforce. The ECP is contracted to**



work with providers and tribal organizations to access the Practitioner Registry, trainings, and professional development resources. Lead agency outreach contractors' partner with individual tribes, at the local level, to access required trainings and trainings of interest. The Lead Agency receives technical assistance through an Impact Project grant to improve partnerships with all tribal CCDF and 477 Agencies. The need for more accessible trainings was an identified topic of possible focus during the initial stakeholder meeting.

### 6.3.3 Professional development appropriate for the diversity of children, families, and child care providers

Describe how the Lead Agency's training and professional development requirements reflect the diversity of children, families, and child care providers participating in CCDF. To the extent practicable, how does professional development include specialized training or credentials for providers who care for infants or school-age children; individuals with limited English proficiency; children who are bilingual; children with developmental delays or disabilities; and/or Native Americans, including Indians, as the term is defined in Section 900.6 in subpart B of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians? **The Lead Agency's professional development approval process ensures trainings are aligned to the Knowledge Base and MELS. This required alignment guides trainers to address family cultural, linguistic diversity and inclusion of children with disabilities. The Lead Agency offers a mixed delivery system for training, which includes in-person and virtual, allowing greater accessibility. Providers within all program-types, serving children of all ages can attend trainings online at times convenient for them. The Lead Agency's contractor for distance learning courses, CCT, offers translation services in multiple languages for course content. The Lead Agency offers two inclusion courses, available for college credit, to support child care provider interactions with children with special needs and their families. Inclusion I and II are required courses at the highest levels of the QRS. Course topics include: Introduction to Inclusion, Recognizing Young Children's Strengths and Needs, Creating an Accessible Environment, Building Partnerships with Parents and Families, and Being Part of the Team, Maintaining a Safe and Healthy Environment, Arranging the Environment for Learning, Increasing the Playability of Toys and Play Materials, Guiding the Behavior of Young Children, Facilitating Young Children's Communication, Positioning Young Children, and Inclusion and Beyond.**

### 6.3.4 Child developmental screening

Describe how all providers receive, through training and professional development, information about: (1) existing resources and services the State/Territory can make available in conducting developmental screenings and providing referrals to services when appropriate for children who receive assistance under this part, including the coordinated use of the Early and Periodic Screening, Diagnosis, and Treatment program (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) how child care providers may utilize these resources and services to obtain developmental screenings for children who receive assistance and who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays: **The Lead Agency QRS requires directors and lead teachers in programs approved at a level 3-5 level to complete a 4-hour course titled, Developmental Screening: Develop a process to identify and support individual child development, promote family engagement, and enhance program quality. The training assists programs in effectively**

implementing a developmental screening process. It's free to all child care providers and staff. The QRS, launching in the Fall of 2025, will have an intentional pathway focused on developmental screening. The Lead Agency supports the use of the Ages and Stages Questionnaire (ASQ) and provides free resources to QRS level 3-5 programs. Providers, implementing developmental screening must provide annual screening data regarding the number of children screened and the number of children referred. The Lead Agency provides screening information on its developmental screening homepage. While funding allows, programs can receive the following ASQ resources from their local Child Care Resource Agency: ASQ-3 starter kit, ASQ-3 User's Guide, ASQ-3 Quick Start Guide, ASQ-3 Learning Activity books, ASQ:SE-2 Questionnaire kit, ASQ:SE-2 User's Guide, ASQ:SE-2 Quick Start Guide, ASQ:SE-2 Learning Activity books.

## 6.4 Early Learning and Developmental Guidelines

Lead Agencies must develop, maintain, or implement early learning and developmental guidelines appropriate for children from birth to kindergarten entry. Early learning and developmental guidelines should describe what children should know and be able to do at different ages and cover the essential domains of early childhood development, which at a minimum includes cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning.

### 6.4.1 Early learning and developmental guidelines

- a. Check the boxes below to certify the Lead Agency's early learning and developmental guidelines are:
  - i.  Research-based.
  - ii.  Developmentally appropriate.
  - iii.  Culturally and linguistically appropriate.
  - iv.  Aligned with kindergarten entry.
  - v.  Appropriate for all children from birth to kindergarten entry.
  - vi.  Implemented in consultation with the educational agency and the State Advisory Council on Early Childhood Education and Care or similar coordinating body.
  - vii. If any components above are not checked, describe:
- b. Check the boxes below to certify that the required domains are included in the Lead Agency's early learning and developmental guidelines.
  - i.  Cognition, including language arts and mathematics.
  - ii.  Social development.
  - iii.  Emotional development.
  - iv.  Physical development.
  - v.  Approaches toward learning.
  - vi.  Other optional domains. Describe any optional domains:
  - vii. If any components above are not checked, describe:

- c. When were the Lead Agency’s early learning and developmental guidelines most recently updated and for what reason? **The MELS was reviewed in 2021. Revisions were determined to be necessary by a broad stakeholder group of early childhood partners. Under the leadership of PDG B-5 and the Lead Agency Quality Team, the MELS is being reviewed and updated. Revisions are scheduled for completion December 2025.**
- d. Provide the Web link to the Lead Agency's early learning and developmental guidelines. **<https://opi.mt.gov/Portals/182/Page%20Files/Early%20Childhood/Docs/14EarlyLearningStandards.pdf>**

6.4.2 Use of early learning and developmental guidelines

- a. Describe how the Lead Agency uses its early learning and developmental guidelines. **The MELS is a tool available for every early childhood and related service professional working with young children and their families. The MELS is used by early care and education practitioners, elementary school teachers, early interventionists, parent/family educators, family support specialists, home visitors, mental health providers, and child/family health practitioners. The MELS is a tool for those who plan and provide early childhood professional and career development, including college instructors, high school teachers, professional development specialists, and technical assistance personnel. The MELS is available on several websites and a booklet copy is provided free upon request. It is one of several resources sent to all QRS participants. The current versions of MELS is used to: (1) Acknowledge the diverse value systems in which children learn and grow; (2) Assist early childhood professionals in communication/collaboration with policy makers, community members, and key stakeholders; (3) Develop training and education programs for adults working with children and their families; (4) Emphasize the importance of early care and education to the community; (5) Help teachers focus on what children can do and reinforce the idea that children are capable learners; (6) Help teachers meet children’s developmental needs, including those of children with disabilities, at the level they require and in an individual capacity; (7) Help teachers recognize the critical need to meet children’s emotional/social needs and that meeting those needs serves as the basis for a child’s future learning; (8) Help teachers recognize their own value and abilities; (9) Improve quality in early care and education programs and serve as a model for teaching and building secure relationships with young children; (10) Increase the flow of information among early childhood teachers, professionals, and policy makers; (11) and to support teachers in learning more about child development. The Lead Agency’s QRS has embedded a training titled “Introduction to the Montana Early Learning Standards” at level 2 which the Director and lead teachers are required to complete. The curriculum is required to be aligned with The MELS at level 3. The Lead Agency will continue to support and promote the use of The MELS and MELS training in the new QRS, set to launch in the Fall of 2025.**
- b. Check the boxes below to certify that CCDF funds are not used to develop or implement an assessment for children that:
  - i.  Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF.
  - ii.  Will be used as the primary or sole basis to provide a reward or sanction for an individual provider.

- iii.  Will be used as the primary or sole method for assessing program effectiveness.
- iv.  Will be used to deny children eligibility to participate in CCDF.
- v. If any components above are not checked, describe:

## 7 Quality Improvement Activities

The quality of child care directly affects children’s safety and healthy development while in care settings, and high-quality child care can be foundational across the lifespan. Lead Agencies may use CCDF for quality improvement activities for all children in care, not just those receiving child care subsidies. OCC will collect the most detailed Lead Agency information about quality improvement activities in annual reports instead of this Plan.

Lead Agencies must report on CCDF child care quality improvement investments in three ways:

1. In this Plan, Lead Agencies will describe the types of activities supported by quality investments over the 3-year period.
2. An annual expenditure report (the ACF-696). Lead Agencies will provide data on how much CCDF funding is spent on quality activities. This report will be used to determine compliance with the required quality and infant and toddler spending requirements.
3. An annual Quality Progress Report (the ACF-218). Lead Agencies will provide a description of activities funded by quality expenditures, the measures used to evaluate its progress in improving the quality of child care programs and services within the State/Territory, and progress or barriers encountered on those measures.

In this section of the Plan, Lead Agencies will describe their quality activities needs assessment and identify the types of quality improvement activities where CCDF investments are being made using quality set-aside funds.

### 7.1 Quality Activities Needs Assessment

#### 7.1.1 Needs assessment process and findings

- a. Describe the Lead Agency needs assessment process for expending CCDF funds on activities to improve the quality of child care, including the frequency of assessment, how a diverse range of parents and providers were consulted, and how their views are incorporated: **The State of Montana has received three iterations of the Preschool Development Grant, PDG B-5. DPHHS has administered two, a planning grant in 2019 and a renewal grant 2023-25. Under the 2019 PDG B-5 Planning Grant the state completed a comprehensive ECE needs assessment and strategic plan. The assessment had a significant focus on engaging family and providers. Researchers employed a mixed methods approach, using administrative, secondary, and primary data to complete the needs assessment. Primary data was collected in three different ways: parent/family and provider survey (1217 responses), focus groups with families and providers (291 in-person participants in 13 locations plus virtual focus groups), and individual interviews. The two**

most common parts of the early childhood system used by survey respondents we're healthcare at 86% and early care and education at 66%. Additionally, 25% used early intervention, 22% home visiting 9% child welfare. Recommendations from the needs assessments, informed by families and providers, led to a full child care licensing evaluation in 2022 redesigned to improve the clarity and transparency of child care licensing for its customers – child care providers, families, partner agencies, businesses, and communities. The assessment collected stakeholder input concerning gaps and opportunities related to the understanding and prioritization of licensed child care facility health requirements, child care staff qualifications, information sharing and data systems, and support and enforcement mechanisms. The following research questions drove the evaluation. (1) How well does Montana’s child care licensing program function for providers, staff, and families? (2) What are the gaps in the child care licensing program? (3) How do child care licensing strengths and gaps vary by provider characteristics? (4) How can child care licensing be improved to better support families, providers, and partners? (5) How can the child care licensing program reduce barriers to becoming licensed? An updated needs assessment and strategic plan will be finalized in June 2024 using the renewal grant. All quality related needs assessment questions were reviewed by Lead Agency quality staff. The question alignment will allow the Lead Agency to note changes over time and identify next steps. A QRS provider survey is administered annually to guide assessment decisions. In November of 2024, the annual provider survey provided relevant feedback for the Lead Agency’s CQI process and QRS redesign efforts. In February of 2023, the Lead Agency used federal technical assistance to facilitate a CCDF strategic planning process, whereby goals and outcomes for all compliance sections were set. Internal staff and key stakeholders were invited to provide suggestions on all aspects of the plan: Goals, Outcomes, Metrics, Action steps, Strategies, and Timeline.

- b. Describe the findings of the assessment, including any findings related to needs of different populations and types of providers, and if any overarching goals for quality improvement were identified: **Key findings and recommendations from the needs assessment process described in 7.1.1 a. are provided in more detail below. Data clearly points to several overarching goals for quality improvement. First is to improve the supply and quality of care for infants and toddlers, a vulnerable population group. The Lead Agency will focus on this in 3 ways: (1) Relationship-based Care training, (2) the development of an Infant Toddler Network, and (3) an Infant Early Childhood Mental Health Consultation (IECMHC) pilot. Findings also indicate a redesign for the QRS framework leading to measurable quality improvements for all program types. QRS redesign goals were driven by assessment findings, leadership input, and strategic planning. Several changes within the Lead Agency’s quality system have occurred based on relevant findings and recommendations from the 2019 needs assessment. Based on findings or recommendations, the following quality initiatives are in progress or being planned: participate in the CCDF Impact Project to improve child care access in tribal communities, another vulnerable population, and exploration licensing reciprocity with tribal CCDF programs; QRS redesign will offer increased subsidy payments for greater participation in QRS and include all licensed providers; QRS will provide more choice/provider-type options and fewer requirements; the Lead Agency will re-evaluate Head Start’s participation in QRS; increase family consumer education; and increase contract deliverables to support the acquisition of a child care licensing. While the entire licensing project is important some of the following recommendations have a greater**

impact on CCDF quality initiatives and support key differences among child care providers: (1) Promoting and enhancing information about what it means to be a licensed child care provider. (2) Having a more inclusive approach to training content acceptance. (3) Reconsidering education and credential acceptance. (4) Implementing a centralized, consistent communication process. Additionally, several key findings related to workforce directed changes in the state’s training and registry system including more distance and advanced learning options, boarder training acceptance, and an updated career path. An annual survey sent to child care providers in to gather feedback from participants in the state’s current QRS captured data on technical assistance and support, the value of required trainings, coaching, and accreditation (interest, values, barriers). This year’s survey had a 52% response rate. Based on the data, Health and Safety and Relationships are the two standard areas most important to current providers. As the Lead Agency re-visions how quality funding will support child care programs the data indicates program mini-grants as the most appreciated and beneficial strategy, at 59%.

## 7.2 Use of Quality Set-Aside Funds

Lead Agencies must use a portion of their CCDF expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care. They must use the quality set-aside funds on at least one of 10 activities described in CCDF and the quality activities must be aligned with a Statewide or Territory-wide assessment of the State's or Territory’s need to carry out such services and care.

### 7.2.1 Quality improvement activities

- a. Describe how the Lead Agency will make its Quality Progress Report (ACF – 218) and expenditure reports, available to the public. Provide a link if available. **The Lead Agency website shares relevant documents and resources related to its work. The Lead Agency Quality Progress Reports (QPR) are located on the website and contain expenditure reports including a link to the QPR: <https://dphhs.mt.gov/ecfsd/ChildCare/DocumentsAndResources>**
- b. Identify Lead Agency plans, if any, to spend CCDF funds for each of the following quality improvement activities. If an activity is checked “yes”, describe the Lead Agency’s current and/or future plans for this activity.
  - i. Supporting the training and professional development of the child care workforce, including birth to five and school-age providers.
 

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **The Lead Agency is currently in contract with the Early Childhood Project (ECP), an outreach program within the Montana State University Department of Health and Human Development. ECP’s improves the quality of programs and services for Montana's youngest children and their families through the CCDF Professional Development Framework describe in Section 6. CCDF quality funds support another contract to provide on-line professional development (PD), Child Care Training (CCT). CCT offers statewide early childhood distance learning opportunities in partnership with the Lead Agency, other quality contractors, and ECP. They maintain a reliable and expansive platform for web-based learning and provide administrative and**

organizational oversight and assistance for instructors and users of the distance learning program. The Lead Agency is aware of the eminent need to prioritize efforts and funding on the recruitment and retention of the child care workforce. Several plans outlined below promise to expand existing initiatives and implement innovative approaches. (1) A new career path, designed by ECP in response to data gathered during the 2019 needs assessment and the 2021 licensing project, will begin implementation in 2024. ECP will educate and support providers during the transition. The new career path will include greater recognition of EC experiences and unrelated degree attainment. (2) In partnership with PDG B-5, the Lead Agency will operationalize the 2022 Montana Early Childhood Education Knowledge Base. The Knowledge Base represents a core body of knowledge, skills, values, and dispositions all early childhood educators must demonstrate to effectively support the development, learning, and well-being of young children and their families. The Knowledge Base can guide program planning and will be used in the new QRS framework as a self-assessment tool. (3) ECP will develop accessible resources and training supports for child care providers to increase their skills and improve program quality. (4) ECP may explore an option to **“badge”** or cluster identified trainings into groups. This feature will be used by the Lead Agency and other contractors to simplify credential attainment. (5) ECP has expanded the registry to include out-of-school time providers in preparation of the new licensing rule package incorporation of this unique group of caregivers. ECP will work with the Lead Agency to make the needed adjustments to training content and requirements to adapt and meet the needs of these new professionals. (6) The Lead Agency will host a **“train the trainer”** event for all ECE professionals interested in offering Relationship Based Care (RBC) training as a foundation for an increase in infant toddler specific PD. Through technical assistance with the Infant/Toddler Specialist Network, the Lead Agency plans to create an infant toddler network in Montana. (7) The Lead Agency will continue its on-going partnership with the Department of Labor and Industry (DLI). CCDF and PDG B-5 funding will be used to fund a child care specialist position in the DLI to support the expansion of registered apprenticeships. The collaboration led to a CDA pilot and will continue to expand CDA opportunities. The work will also develop an evaluation methodology, strategies for more CDA aligned training, and improved approaches for mentors and organizations in which apprenticeships occur. (8) The Lead Agency is pursuing a blended funding model to implement Infant Early Childhood Mental Health Consultation (IECMHC). The Lead Agency’s model focuses on staff retention and burnout, attempting to increase IECMHC desirability across a mixed delivery system. The Lead Agency will use evaluation data to determine the specific child care model to be used following the pilot but plans to use CCDF funds and prioritize caregivers working with infants and toddlers. (9) CCDF Quality funds pay for CCDF and QRS required training. Providers are encouraged, during the QRS redesign phase to complete QRS identified trainings. Although they are not required as part of QRS participation, they can be used for the 16-hour annual registry renewal requirement. (10) The Lead Agency will support working professionals at out of school time care programs and school age providers with professional development and training in the Guiding Principles for Quality Out of School Time Programs.

- ii. Developing, maintaining, or implementing early learning and developmental guidelines.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **The Montana Early Learning Standards (MELS) is a tool available for every early childhood and related service professional working with young children and their families. The MELS has been used by early care and education practitioners, elementary school teachers, early interventionists, parent/family educators, family support specialists, home visitors, mental health providers, and child/family health practitioners. The MELS is also a tool for those who plan and provide early childhood professional and career development, including college instructors, high school teachers, PD specialists, and TA personnel. It is available on several websites and a booklet copy is provided free upon request. It is one of several resources sent to all QRS participants. An Introduction to the MELS training is currently available to all child care staff, free of charge, and an embedded resources in QRS. Efforts to revise the MELS or adopt another set of standards has begun and will continue for the next 12 to 16 months. The Lead Agency, in partnership with PDG B-5, will engage stakeholder in the use, or future use, of the new standards. The State may expand early learning standards to include the development of older children based on State funding for Targeted Literacy Classrooms in schools and the addition of the out-of-school time licensing track in the new rule package.**

- iii. Developing, implementing, or enhancing a quality improvement system.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **The Lead Agency is currently redesigning Montana’s Quality Recognition System (QRS). The new QRS framework is set to launch October 2025. Lead Agency goals for this project is a quality system that’s simple, flexible, and family focused. The framework places all licensed programs automatically at level one. Programs can then choose to engage in the QRS framework at higher level but may remain at level one as a licensed program. The Lead Agency’s comprehensive data system manages CCDF related data and provides data solutions for the redesign. QRS redesign goals: (1) Increase consumer education for families to inform decisions about quality child care; (2) Rebrand the quality system; (3) Encourage greater provider participation in the Best Beginning Child Care Scholarship program; (4) Create an initial step for all licensed or registered providers, a foundation of child care quality; (5) Use data to inform decisions; (6) Increase access to quality infant/toddler and after-school care; (7) Reflect broader distribution of quality funds; (8) Create a user-friendly, quality system offering choice and flexibility.**

- iv. Improving the supply and quality of child care services for infants and toddlers.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **In addition to the expansion of the infant toddler professional development and workforce supports, the Lead Agency is planning to partner with Early Head Starts (EHS) programs to discover how to increase EHS-Child Care Partnerships and expand**



service hours to increase access for families needing infant toddler care. The Lead Agency will look to increase provider usage of developmental and social/emotional screening tools when making care decisions and referring families to additional evaluation and services. In partnership with PDG B-5, Ages and Stages "train the trainer" offerings will rebuild a body of trainers able to support providers to use screening data to make informed decisions. IECMHC will support infant and toddler professionals.

- v. Establishing or expanding a statewide system of CCR&R services.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **The Lead Agency has successfully contracted services required under CCDF regulations for many years and will continue to rely on contract partnerships to implement many services for children and families. During the next contract cycle the Lead Agency has defined the following quality contractor outcomes: (1) Support the recruitment, retention, and sustainability of newly licensed/registered child care programs for all licensed/registered provider types; (2) Facilitate community-based solutions to expand child care options; (3) Encourage partnerships between existing child care and early education entities to increase the supply and quality of child care services; (4) Provide technical assistance to prospective providers and support them throughout their first year of licensure; (5) Enhance the knowledge of the workforce, support best practices for child development, and offer support to navigate the licensing renewal process; (6) Support quality initiatives that support the development of individual's skills; (7) Generally support best business practices.**

- vi. Facilitating compliance with Lead Agency child care licensing, monitoring, inspection and health and safety standards.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **An important improvement delivered by the 2021 Licensing Project is the implementation of formal and informal child care licensing, CCL Support Plans. These plans are initiated by licensors and supported through collaboration with contracted TA services. The plans may be required (formal) or voluntary (informal) and range from supporting a licensing deficiency to navigating the licensing renewal process. The QRS redesign is exploring for implementation several resources to support meeting and expanding basic health and safety requirements. The intentional focus on consumer education defined in the QRS goals is designed to build the public's understanding of the program quality achieved through licensing. The Lead Agency markets to families and the public the value of becoming a licensed child care program.**

- vii. Evaluating and assessing the quality and effectiveness of child care services within the State/Territory.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **The Lead Agency contracts with the University of Montana Western to employ three Early Childhood**

Assessors to conduct assessments throughout the state. The Environment Rating Scale (ERS) assessment tools, Early Childhood Environment Rating Scale (ECERS-3) for preschool age, Infant/Toddler environment Rating Scale (ITERS-3), and Family Child Care Environment Rating Scale (FCCERS-3) for family/group homes) are used to assess the quality and effectiveness of the children’s environment. The Lead Agency also uses the Program Administration Scale (PAS) assessment for child care centers and the Business Administration Scale (BAS) assessment for family/group homes to assess and evaluate the business practices. The data gained from using these tools identifies child care program strengths, areas of need, and the prioritization of supports. A voluntary LearnERS Pilot Project is being implemented in collaboration with PDG B-5. It consists of two cohorts. The pilot will operate through March of 2025. The LearnERS training modules were chosen based on data. One cohort is participating in the coaching model. The second is participating in the self-paced model. Outcomes from the pilot will drive future spending decisions. As part of the redesign process, the Lead Agency is reimagining program quality measurement concurrently with an evaluation methodology redesign. Utilizing a comprehensive logic model, mission and vision statements, goals, and evaluation questions the redesign team is thinking through evaluation as the framework is being constructed. Below are several key evaluation questions that will guide the development and identification of quality performance indicators to be collected at the launch of QRS. QRS Key Evaluation Questions: (1) To what extent have supports increased the qualifications and stability of the workforce; (2) To what extent did consumer education improve family’s ability to make informed child care choices; (3) To what extent did Montana increase access to and participation in high-quality early childhood care and education across the mixed delivery system; (4) To what extent does the Quality system increase school readiness? In addition to the evaluative efforts connected to the redesign, the Lead Agency is developing new aligned indicators, for the next contract cycle, to effectively monitor outcomes.

viii. Accreditation support.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **In the new QRS set to launch in the Fall of 2025, the Lead Agency will incorporate an alternate pathway to a higher stage of quality for programs who are accredited or who may become accredited through NAEYC, NAFCC or Montessori. Standards and key practices within the pathways in the new QRS will align with NAEYC standards and can assist programs in obtaining accreditation status by moving through the new QRS. The new QRS system and the revised Knowledge Base align quality efforts with NAEYC accreditation standards to support program’s accreditation attainment. The Lead Agency provides incentives to programs seeking accreditation and recognizes accreditation as the highest stage of quality. The Lead Agency will develop a process whereby providers can propose other accreditation options for review and potential adoption into the QRS framework.**

ix. Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments. **The Lead Agency utilizes research standards as the foundation for quality efforts.**

- x. Other activities determined by the Lead Agency to improve the quality of child care services and the measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry.

No plans to spend in this category of activities at this time.

Yes. If yes, describe current and future investments.

## 8 Lead Agency Coordination and Partnerships to Support Service Delivery

Coordination and partnerships help ensure that the Lead Agency’s efforts accomplish CCDF goals effectively, leverage other resources, and avoid duplication of effort. Such coordination and partnerships can help families better access child care, can assist in providing consumer education to parents, and can be used to improve child care quality and the stability of child care providers. Such coordination can also be particularly helpful in the aftermath of disasters when the provision of emergency child care services and the rebuilding and restoring of child care infrastructure are an essential part of ensuring the well-being of children and families in recovering communities.

This section identifies who the Lead Agency collaborates with to implement services, how match and maintenance-of-effort (MOE) funds are used, coordination with child care resource and referral (CCR&R) systems, and efforts for disaster preparedness and response plans to support continuity of operations in response to emergencies.

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

Lead Agencies must coordinate child care services supported by CCDF with other federal, State/Territory, and local level programs. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care.

#### 8.1.1 Coordination with required and optional partners

Describe how the Lead Agency coordinates and the results of this coordination of the provision of child care services with the organizations and agencies to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families.

The Lead Agency must coordinate with the following agencies:

- a. State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe the coordination and results of the coordination: **The CCDF Advisory Council's exists to improve collaboration and coordination across government and non-profit organizations providing early childhood services and to bridge gaps between community and State early childhood needs. Duties include the following objectives: families with young children are supported in their community; social, emotional, and mental health needs of young children and families are supported; children have access to high quality early childhood programs, child care is recognized as an integral component of strong economies and business environments**

throughout the state. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input.

- b. Indian Tribe(s) and/or Tribal organization(s), at the option of the Tribe or Tribal organization. Describe the coordination and results of the coordination, including which Tribe(s) was (were) involved: **A representative for tribes sits on the CCDF Advisory Council. The Head Start State Collaboration Director employed within the Lead Agency sits on the Building Strong Foundations for Families workgroup committed to the inclusion of American Indian content and leadership in infant and toddler care statewide. The Head Start State Collaboration Director coordinates with tribal organizations in the following ways: Coordination with all tribal HS programs; Coordination and regular communication with the AIAN HSCO, and members of the AIAN HSCO National Advisory Council; and tribal collaboration with the Office of Public Instruction. On May 16, 2024, representatives of the Lead Agency met with Tribal child care representatives from Northern Cheyenne, Crow, Chippewa-Cree, Salish and Kootenai Tribes. The meeting was held in Billings, MT. with options for in person and remote attendance. This body met to review Montana's 2025-2027 State Plan draft. The assembled body also agreed to future meeting agenda items including continuity of services for Tribal families who move on and off Tribal Lands. This topic will be a standing agenda item moving forward.**

Not applicable. Check here if there are no Indian Tribes and/or Tribal organizations in the State/Territory.

- c. State/Territory agency(ies) responsible for programs for children with disabilities, including early intervention programs authorized under the Individuals with Disabilities Education Act. Describe the coordination and results of the coordination: **Children's Special Health Services (CSHS) is a program within the Lead Agency. Children and youth with special health needs are children and youth who have or are at risk for chronic physical, developmental, behavioral, or emotional conditions, and who also require additional health or related services. Children served in this program include children in foster care and/or children residing on reservations. The Lead Agency is working to increase referrals to early intervention. Part C is a program within the Lead Agency. Montana Milestones/Part C of the IDEA Early Intervention Program is Montana's comprehensive system of early intervention services and supports for families who have infants or toddlers, from birth through three, who have significant developmental delays or disabilities or have been diagnosed with an established condition associated with significant delays in development. The Montana Family Support Services Advisory Council (FSSAC) serves as Montana's interagency coordinating council to advise and assist Montana's Part C Program to plan, develop, and implement Montana's multi-disciplinary, coordinated program of early intervention and family support services for children with disabilities, birth through age two, and their families. Members of the Lead Agency are part of the FSSAC.**
- d. State/Territory office/director for Head Start State collaboration. Describe the coordination and results of the coordination: **The Montana Head Start State Collaboration Office (HSSCO) Director is supervised by the part of the Lead Agency. The HSSCO Director has a seat on the CCDF Advisory Council. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the**

**council member's input.**

- e. State/Territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination and results of the coordination: **Representation from the Children's Mental Health Bureau sits on the CCDF Advisory Council. In addition, joint projects occur among these partner agencies such as with the Family and Community Health Bureau, and the Public Health office on Immunization training and outreach. The Council provides advisory capacity for comprehensive early childhood services in Montana, including CCDF. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input.**
- f. State/Territory agency responsible for employment services/workforce development. Describe the coordination and results of the coordination: **The Lead Agency's coordination with the Department of Labor and Industry and their work with Apprenticeship program has led to an increase in the number of apprenticeship participants including the development of a pre-apprentice program to support workforce growth for students still in high school. Students can get college credit for some of the course work they take. A member of DLI has a seat on the CCDF Advisory Council. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input.**
- g. State/Territory agency responsible for public education, including pre-Kindergarten. Describe the coordination and results of the coordination: **OPI has representation for the Homeless Children and Youth Specialist on the CCDF Advisory Council. Results of this coordination include a data sharing agreement between the Lead Agency and OPI to better track and report longitudinal data, ongoing work between early years special needs services and elementary through secondary special needs services, and ongoing work and resource sharing around transitions. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input.**
- h. State/Territory agency responsible for child care licensing. Describe the coordination and results of the coordination: **The Child Care Licensing Program is part of the Lead Agency and participates in monthly meetings with other programs. Programs shares data with licensing and vice versa. There is significant collaboration between the subsidy, quality, and licensing state staff. The coordination has resulted in comprehensive services to recruit and retain child care providers.**
- i. State/Territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination and results of the coordination: **CACFP is located within the Lead Agency. CACFP has representation on the CCDF Advisory Council. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input. Coordination with CACFP results in an improved access to nutritional meals at licensed child care facilities, layered financial support for providers, and a more streamlined**

administration of the CACFP program.

- j. McKinney-Vento State coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination and results of the coordination: **The State Coordinator for Homeless Education is housed in OPI and is part of the CCDF Advisory Council. Results of this crossover include updates to subsidy program policy to allow for greater flexibility when gathering documentation provided to families experiencing homelessness. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input.**
- k. State/Territory agency responsible for the TANF program. Describe the coordination and results of the coordination: **The state's TANF program has a seat on the CCDF Advisory Council. Results of this work include an annual review of the subsidy process for a TANF family eligible for the scholarship.**
- l. State/Territory agency responsible for Medicaid and the State Children's Health Insurance Program. Describe the coordination and results of the coordination: **Many families accessing the Best Beginnings Scholarship are also eligible for Medicaid or are current Medicaid participants. The Lead Agency works with the Medicaid and Health Services Branch, which administers Medicaid and the state Children's Health Insurance Program and includes the Children's Mental Health Services Bureau (CMHB). The CHMB is responsible for supporting Medicaid reimbursements that support children in a variety of ways including supporting providers who serve children with emotional disturbances and other diagnosed conditions related to mental health. The Lead Agency is working to strengthen partnerships with CMHB to concretize support for mental health services using Medicaid codes and other avenues for children and families.**
- m. State/Territory agency responsible for mental health services. Describe the coordination and results of the coordination: **Staff from the Lead Agency sit on the Montana Access to Pediatric Psychiatry Network (MAPP-Net) advisory council. MAPP-Net is within the Lead Agency's division, the Early Childhood and Family Support Division (ECFSD) of the Department of Public Health and Human Services (DPHHS). The Lead Agency is working to support the social emotional and mental health needs of children and families. The coordination results have been the infant/toddler mental health initiative. A staff member from MAPP-Net sits on the Advisory Council. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input.**
- n. Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination and results of the coordination: **Scholarship contractor and provider support contractor agency leadership sits on the CCDF Advisory Council. Also, the Lead Agency and the contracting agencies hold monthly meetings to review quarterly data, brainstorm and address challenges and opportunities to further professional development and training. The Lead Agency contracts with Child Care Training.org (CCT), a long-distance on-line training organization, to create and deliver required child care**

trainings. CCT provides the Lead Agency with quarterly report data to monitor outcomes and contract deliverables. In addition, CCT and the Lead Agency conduct regular meetings to review data, coordinate efforts, and plan for implementation of new professional development and training opportunities.

- o. Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination and results of the coordination: **The Montana Afterschool Alliance is the organization body for afterschool advocacy and policy making in Montana. The Afterschool Alliance is represented on the Advisory Council. The goal of the coordination is to encourage afterschool providers to become licensed and open school-age slots for children receiving the scholarship. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member’s input. The coordination results in an increased awareness of after school time care needs by the State legislature and in new rules negotiations.**
- p. Agency responsible for emergency management and response. Describe the coordination and results of the coordination: **The Lead Agency coordinates with the State Continuity and Emergency Management Office (SCEMO) to develop, maintain, and review the Continuity of Operations Plan (COOP) for the Lead Agency. The purpose of the coordination with SCEMO is to support the procedures that facilitate organized decision-making during times of chaos. Results of the coordination include a comprehensive statewide child care disaster plan, increased communication between SCEMO and the Lead Agency, and the availability of emergency management resources, supports, and information. SCEMO assists the Lead Agency in the following processes: (1) Decision making on priority issues in potentially volatile environments; (2) Process ranking information to assist in the allocation of limited recovery resources at the time of an incident; (3) Recovery procedures for a variety of incidents; (4) Protect State assets; (5) Preserve the State’s image and public confidence; (6) Communicate appropriately to the press and staff the nature and resolution of the incident coordination. The COOP establishes and supports an on-going continuity planning process that will: (1) Evaluate the impact of significant incidents that may adversely affect the processes identified in this plan; (2) Develop and maintain a plan to ensure the organization can restore the processes according to the priorities identified in this plan; (3) Support the National Essential Functions of Government for the citizens and businesses in the state of Montana in a timely manner; (4) Maintain external relationships and agreements with a wide variety of entities. This includes communications and interactions, as necessary, during a crisis with critical partners and organizations, including the federal government, other state, territorial, tribal and local governments, and private sector and non-profit organizations.**
- q. The following are examples of optional partners a Lead Agency might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination and results of the coordination.
  - i.  State/Territory/local agencies with Early Head Start – Child Care Partnership grants. Describe: **The Head Start Collaboration Director for Montana is responsible for supporting the Early Head Start Partnership grantees and alignment within the state early childhood system. This group includes representation from the Lead Agency. The group meets as needed to coordinate smooth transitions for children**

between programs and to align quality of services. The partnership helps to increase awareness of program and family needs for Early Head Start, improve understanding of eligibility policies for Early Head Start programs, and align PD efforts.

- ii. **[x]** State/Territory institutions for higher education, including community colleges. Describe: **Representatives of higher education, including community colleges, participate in the CCDF Advisory Council. The Lead Agency partners with Montana State University - Western to assign and align assessors for the QRS program in Montana. The Montana Early Childhood Higher Education Consortium (MECHEC) convenes bi- annually to coordinate topics specific and relevant to advancing early care and education in higher education settings. The collective voice from institutions of higher education represents an expert lens on issues, trends, and needs in the early childhood professional field. Members of the consortium include faculty from all higher education programs, including community and tribal colleges, to ensure articulation and collaboration across the state. These partnerships help to increase enrollment in and completion of an Early Childhood Education degree. Thereby expanding the ECE candidate pool in Montana.**
- iii. **[x]** Other federal, State, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe: **The Children's Trust Fund is part of the Lead Agency. The Children's Trust Fund works to prevent abuse and neglect in Montana. A Children's Trust Fund representative is on the Advisory Council. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input. Coordination with Children's Trust Fund results in an improved identification of vulnerable populations within CCDFs target audience.**
- iv. **[x]** State/Territory agency responsible for implementing the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) programs grant. Describe: **The Healthy Montana Families program provides home visiting services throughout Montana and is located within the Lead Agency's parent division. Home visiting services are voluntary and serve pregnant and newly parenting women and families/caregivers with infants and young children. The Healthy Montana Families home visiting program works with families referred by the Child and Family Services Division (CFSD). The Lead Agency maintains a strong state-level partnership with CFSD.**
- v. **[x]** Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment Program. Describe: **Many families accessing the Best Beginnings Scholarship (child care subsidy) are also Medicaid eligible or Medicaid participants. Medicaid and Health Services administers Medicaid and the state Children's Health Insurance Program. This branch includes the Children's Mental Health Bureau (CMHB) while the Healthy Montana Families (HMF) home visiting program, WIC, and the Maternal and Child Health Block Grant programs remain within the Lead Agency's parent division. HMF requires child clients to receive well- child checkups as recommended by the American Academy of Pediatrics Bright Futures. In Montana, this requirement is aligned with the EPSDT benefit. These partnerships familiarize families with the need for regular well-child visits and recommended immunization schedules, ensuring children in child care arrive with current**



immunizations and documentation.

- vi.  State/Territory agency responsible for child welfare. Describe: **CFSD is responsible for child welfare in Montana and has a seat on the CCDF Advisory Council. Referrals from CFSD are accepted by the Lead Agency and determined eligible for child care assistance. Regular meetings occur between Lead Agency and CFSD leadership to ensure collaboration. Lead Agency representatives sit on coordinating boards for the prevention of child abuse and neglect and coordinate with CFSD, utilizing a shared strategic plan, to reduce the number of CPS cases and foster care placements. Healthy Mothers, Healthy Babies directs the Period of Purple Crying for the Children's Trust Fund Board. These organizations, along with the Child Protective Services Administrator represent child welfare and sit on the Advisory Council. These partnerships promote a shared understanding of policies and programs. They blend funding models through shared conferences and programs to mitigate child abuse and neglect.**
- vii.  Child care provider groups or associations. Describe: **There are regional family and group provider organizations operating throughout the state. A child care provider representative is on the Advisory Council. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input. Coordination with providers results in the creation of tools and resources to support the business and regulatory components of the industry.**
- viii.  Parent groups or organizations. Describe: **Coordination efforts with parent groups and organizations are supported through scholarship contractor and provider support contractor agencies. A parent representative is on the Advisory Council. The CCDF Advisory Council meets at least twice per year and more often if needed for consultation. During a meeting, feedback and input is given, notes are taken, and the Lead Agency can evaluate proposals based off the council member's input. Coordination with parents results in a more family friendly approach in our consumer education efforts and application processes.**
- ix.  Title IV B 21<sup>st</sup> Century Community Learning Center Coordinators. Describe:
- x.  Other. Describe:

## 8.2 Optional Use of Combined Funds, CCDF Matching, and Maintenance-of-Effort Funds

Lead Agencies may combine CCDF funds with other Federal, State, and local child care and early childhood development programs, including those in 8.1.1. These programs include preschool programs, Tribal child care programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care.

Combining funds may include blending multiple funding streams, pooling funds, or layering funds from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers, and school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, Lead Agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a Lead

Agency may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or State/Territory pre-Kindergarten requirements in addition to State/Territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start and Early Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs.

### 8.2.1 Combining funding for CCDF services

Does the Lead Agency combine funding for CCDF services with Title XX of the Social Services Block Grant (SSBG), Title IV B 21<sup>st</sup> Century Community Learning Center Funds, State-only child care funds, TANF direct funds for child care not transferred into CCDF, Title IV-B, IV-E funds, or other federal or State programs?

No. (If no, skip to question 8.2.2)

Yes.

i. If yes, describe which funds you will combine. Combined funds may include, but are not limited to:

Title XX (Social Services Block Grant, SSBG)

Title IV B 21<sup>st</sup> Century Community Learning Center Funds (Every Student Succeeds Act)

State- or Territory-only child care funds

TANF direct funds for child care not transferred into CCDF

Title IV-B funds (Social Security Act)

Title IV-E funds (Social Security Act)

Other. Describe: **Montana State general funds**

ii. If yes, what does the Lead Agency use combined funds to support, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care, or developing the supply of child care for vulnerable populations? **A combination of TANF, IV-E and state general funds allows the state to support a supply of child care for vulnerable populations.**

### 8.2.2 Funds used to meet CCDF matching and MOE requirements

Lead Agencies may use public funds and donated funds to meet CCDF match and maintenance of effort (matching MOE) requirements.

*Note:* Lead Agencies that use State pre-Kindergarten funds to meet matching requirements must check State pre-Kindergarten funds and public and/or private funds.

Use of private funds for match or maintenance-of-effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match.

However, Lead Agencies must identify and designate in the State/Territory CCDF Plan the donated funds given to public or private entities to implement the CCDF child care program.

Not applicable. The Lead Agency is a Territory (skip to 8.3.1).

a. Does the Lead Agency use public funds to meet match requirements?

Yes. If yes, describe which funds are used:

No.

b. Does the Lead Agency use donated funds to meet match requirements?

Yes. If yes, identify the entity(ies) designated to receive donated funds:

i.  Donated directly to the state.

ii.  Donated to a separate entity(ies) designated to receive donated funds. If checked, identify the name, address, contact, and type of entities designated to receive private donated funds:

No.

c. Does the Lead Agency certify that, if State expenditures for pre-Kindergarten programs are used to meet the MOE requirements, the following is true:

- The Lead Agency did not reduce its level of effort in full-day/full-year child care services.
- The Lead Agency ensures that pre-Kindergarten programs meet the needs of working parents.
- The estimated percentage of the MOE requirement that will be met with pre-Kindergarten expenditures (does not to exceed 20 percent).
- If the percentage is more than 10 percent of the MOE requirement, the State will coordinate its pre-Kindergarten and child care services to expand the availability of child care.

Public pre-Kindergarten funds may also serve as MOE funds as long as the State can describe how it will coordinate pre-Kindergarten and child care services to expand the availability of child care while using public pre-Kindergarten funds as no more than 20 percent of the State's MOE or 30 percent of its matching funds in a single fiscal year.

If expenditures for pre-Kindergarten services are used to meet the MOE requirement, does the Lead Agency certify that the State or Territory has not reduced its level of effort in full-day/full-year child care services?

Yes.

No. If no, describe:

### 8.3 Coordination with Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system or network of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined by the Lead Agency, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (such as a statewide CCR&R network).

If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency:

- Provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act.
- Collect data and provide information on the supply of and demand for child care services in areas of the State and submit the information to the Lead Agency.
- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the State and, as appropriate, coordinate their activities with the activities of the Lead Agency and local agencies that administer funds made available through CCDF.

#### 8.3.1 Funding a system or network of CCR&R organization(s)

Does the Lead Agency fund a system or network of local or regional CCR&R organization(s)?

No. The Lead Agency does not fund a system or network of local or regional CCR&R organization(s) and has no plans to establish one.

No, but the Lead Agency has plans to develop a system or network of local or regional CCR&R organization(s).

Yes. The Lead Agency funds a system or network of local or regional CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the activities outlined above carried out by the CCR&R organization(s), as directed by the Lead Agency: **The Lead Agency has scholarship contractor and provider support contractor agencies that offer the following activities: 1) Provide parents consumer education information concerning the full range of child care options including child care provider types and providers with non-traditional business hours; 2) Work directly with families receiving assistance to support them in selecting the most appropriate high quality child care provider for their child(ren)'s needs; 3) Establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services; and 4) Collect data and submit information on the supply and demand of child care services Montana.**

## 8.4 Public-Private Partnerships

Lead Agencies must demonstrate how they encourage partnerships among other public agencies, Tribal organizations, private entities, faith-based organizations, businesses, or organizations that promote business involvement, and/or community-based organizations to leverage existing

service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) to leverage existing child care and early education service delivery systems and to increase the supply and quality of child care services for children younger than age 13.

#### 8.4.1 Lead Agency public-private partnerships

Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of CCDF: **The Lead Agency maintains robust partnerships with private and academic organizations to provide professional development to early childhood education professionals. The Lead Agency’s partnership with the ECP at MSU results in a comprehensive provider registry, early childhood career path, and certification process. The Lead Agency contracts with Child Care Training, an online training agency, to provide on demand courses to ECE staff. The Lead Agency also subcontracts coaching and mental health consultation supports for local providers. Lead Agency leadership host recurring meetings with The Department of Labor and Industry, and Chambers of Commerce to discuss and review business models.**

### 8.5 Disaster Preparedness and Response Plan

Lead Agencies must establish a Statewide Child Care Disaster Plan and demonstrate how they will address the needs of children—including the need for safe child care before, during, and after a state of emergency declared by the Governor or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122)—through a Statewide Disaster Plan.

#### 8.5.1 Statewide Disaster Plan updates

- a. When was the Lead Agency’s Child Care Disaster Plan most recently updated and for what reason? **The Lead Agency’s Statewide Child Care Disaster Plan was last revised in 2021. Updates were made to all sections of the plan during this time, including: Purpose, Preparedness, Assumptions, Consultation & Coordination, Communication, Guidelines for Continuation of Child Care Subsidies and Services, and Resources. Revisions were also made to clarify terminology, roles, communication, and coordination.**
- b. Please certify compliance by checking the required elements the Lead Agency includes in the current State Disaster Preparedness and Response Plan.
  - i. The plan was developed in collaboration with the following required entities:
    - State human services agency.
    - State emergency management agency.
    - State licensing agency.
    - State health department or public health department.
    - Local and State child care resource and referral agencies.
    - State Advisory Council on Early Childhood Education and Care or similar coordinating body.
  - ii.  The plan includes guidelines for the continuation of child care subsidies.

- iii.  The plan includes guidelines for the continuation of child care services.
- iv.  The plan includes procedures for the coordination of post-disaster recovery of child care services.
- v. The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:
  - Procedures for evacuation.
  - Procedures for relocation.
  - Procedures for shelter-in-place.
  - Procedures for communication and reunification with families.
  - Procedures for continuity of operations.
  - Procedures for accommodations of infants and toddlers.
  - Procedures for accommodations of children with disabilities.
  - Procedures for accommodations of children with chronic medical conditions.
- vi.  The plan contains procedures for staff and volunteer emergency preparedness training.
- vii.  The plan contains procedures for staff and volunteer practice drills.
- viii. If any of the above are not checked, describe:
- ix. If available, provide the direct URL/website link to the website where the Statewide Child Care Disaster Plan is posted:  
<https://dphhs.mt.gov/assets/ecfsd/childcare/documentsandresources/StateofMontanaChildCareDisasterPlan.pdf>

## 9 Family Outreach and Consumer Education

CCDF consumer education requirements facilitate parental choice in child care arrangements, support parents as child care consumers who need information to make informed choices regarding the services that best suit their family’s needs, and the delivery of resources that can support child development and well-being. Lead Agency consumer education activities must provide information for parents receiving CCDF assistance, the general public, and, when appropriate, child care providers. Lead Agencies should use targeted strategies for each group to ensure tailored consumer education information and take steps to ensure they are effectively reaching all individuals, including those with limited English proficiency and those with disabilities.

In this section, Lead Agencies address their consumer education practices, including details about their child care consumer education website, and the process for collecting and maintaining a record of parental complaints.

### 9.1 Parental Complaint Process

Lead Agencies must maintain a record of substantiated parental complaints against child care providers and make information regarding such complaints available to the public on request.

Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request. Lead Agencies are not required to limit the complaint process to parents.

#### 9.1.1 Parental complaint process

- a. Describe the Lead Agency’s hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process: **Parents and other individuals can submit complaints by completing an online Child Care Complaint Form (<https://mt.accessgov.com/dphhs/Forms/Page/dphhs-ecfs/childcarecomplaint/>) or by calling the main Child Care Licensing office at (406) 444-2012. Parents may also report concerns by calling the Child Abuse & Neglect Hotline at (866) 820-5437. Complaints made to the Child Abuse & Neglect Hotline are forwarded to licensing by the intake specialist.**
- b. Describe how the parental complaint process ensures broad access to services for families that speak languages other than English: **In addition to English, the website is available in many other languages using the Google Translate feature in the top right-hand corner of the website**
- c. Describe how the parental complaint process ensures broad access to services for persons with disabilities: **The website, per state regulations, is ADA compliant per Federal Section 508, Accessibility Requirements. All local documents including Child Care Licensing forms are ADA Compliant.**
- d. For complaints about providers, including CCDF providers and non-CCDF providers, does the Lead Agency have a process and timeline for screening, substantiating, and responding to complaints, including information about whether the process includes monitoring?  
  
**[x] Yes. If yes, describe: An online complaint process is available by visiting the Child Care Complaint website. Lead Agency licensors are assigned to submitted complaints based on geographic area. Complaints are screened by the childcare licensor assigned to the case. An investigation is initiated when a complaint is determined to be licensing-related, and the information received has been assessed by Child Care Licensing to determine potential violations of licensing rules. The licensor conducts an inspection within seven days of receiving the complaint. A complaint investigation is substantiated (validated) when the licensing worker has enough information to determine that the complaint allegations occurred, or are occurring, or that a regulation violation occurred during the investigation. The complaint process is the same for all licensed facilities. The Lead Agency Child Care Licensing Program has limited authority to investigate un-licensed providers except for determining if the facility requires licensure according to statute. If a complaint alleges a provider is operating illegally, Child Care Licensing may determine if the provider requires licensure per statute. After the initial visit to determine any violations, there may be additional monitoring needed. This monitoring may include a Support Plan in which both the licensors and our contracting agencies will monitor the progress of the provider to make necessary changes. Monitoring also may consist of just one follow up visit to ensure that needed changes have been implemented. It depends**

on the risk level of the violation and what is needed to make lasting change.

No.

- e. For substantiated parental complaints, who maintains the record for CCDF and non-CCDF providers? **The information available in the Lead Agency’s database is maintained permanently. The information available on the public portal supplies inspection information for the last three years. A copy of the inspections and any attached correspondence are maintained in electronic facility files. Information kept in hard files are maintained until it meets the five-year retention schedule. This is the same for CCDF and non-CCDF records.**
- f. Describe how information about substantiated parental complaints is made available to the public; this information can include the consumer education website discussed in subsection 9.2: **Inspection reports for complaint investigations resulting in a reportable deficiency are available on the Lead Agency’s Child Care Licensing Webpage. The information available on the website includes inspection information for the previous three-year period. If a complaint is not substantiated, its information is not available to the public.**

## 9.2 Consumer Education Website

Lead Agencies must provide information to parents, the general public, and child care providers through a State or Territory website, which is consumer-friendly and easily accessible for families who speak languages other than English and persons with disabilities. The website must:

- Include information to assist families in understanding the Lead Agency’s policies and procedures, including licensing child care providers;
- Include monitoring and inspection reports for each provider and, if available, the quality of each provider;
- Provide the aggregate number of deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings;
- Include contact information for local CCR&R organizations to help families access additional information on finding child care; and
- Include information on how parents can contact the Lead Agency and other organizations to better understand the information on the website.

### 9.2.1 Consumer-friendly website

Does the Lead Agency ensure that its consumer education website is consumer-friendly and easily accessible?

- i. Provide the URL for the Lead Agency’s consumer education website homepage:  
**<https://dphhs.mt.gov/ecfsd/childcare/>**
- ii. Does the Lead Agency certify that the consumer education website ensures broad access to services for families who speak languages other than English?

Yes.

No. If no, describe:



- iii. Does the Lead Agency certify that the consumer education website ensures broad access to services for persons with disabilities?

Yes.

No. If no, describe:

#### 9.2.2 Additional consumer education website links

Provide the direct URL/website link for the following:

- i. Provide the direct URL/website link to how the Lead Agency licenses child care providers: <https://dphhs.mt.gov/ecfsd/childcare/childcarelicensing/index>
- ii. Provide the direct URL/website link to the processes for conducting monitoring and inspections of child care providers:  
<https://dphhs.mt.gov/assets/ecfsd/childcarelicensing/CCL006MonitoringActivities.pdf>
- iii. Provide the direct URL/website link to the policies and procedures related to criminal background checks for staff members of child care providers:  
<https://dphhs.mt.gov/assets/ecfsd/childcarelicensing/StaffBackgroundCheckReconsiderationPolicy.pdf>
- iv. Provide the direct URL/website link to the offenses that prevent individuals from being employed by a child care provider:  
<https://dphhs.mt.gov/assets/ecfsd/childcarelicensing/StaffBackgroundCheckReconsiderationPolicy.pdf>

#### 9.2.3 Searchable list of providers

- a. The consumer education website must include a list of all licensed providers searchable by ZIP code.
  - i. Does the Lead Agency certify that the consumer education website includes a list of all licensed providers searchable by ZIP code?  
 Yes.  
 No. If no, describe:
  - ii. Provide the direct URL/website link to the list of child care providers searchable by ZIP code: <https://dphhs.mt.gov/ecfsd/childcare/childcarelicensing/providersearch>
  - iii. In addition to the licensed child care providers that must be included in the searchable list, are there additional providers included in the Lead Agency's searchable list of child care providers? Check all that apply:
    - License-exempt center-based CCDF providers.
    - License-exempt family child care CCDF providers.
    - License-exempt non-CCDF providers.
    - Relative CCDF child care providers.
    - Other (e.g., summer camps, public pre-Kindergarten). Describe:

- b. Identify what additional (optional) information, if any, is available in the searchable results by ZIP code. Check the box when information is provided.

Provider Information Available in Searchable Results					
	All licensed providers	License-exempt CCDF center-based providers	License-exempt CCDF family child care home providers	License-exempt non-CCDF providers	Relative CCDF providers
Contact information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enrollment capacity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hours, days, and months of operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provider education and training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Languages spoken by the caregiver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring reports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to accept CCDF certificates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ages of children served	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Specialization or training for certain populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care provided during nontraditional hours	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- c. Identify any other information searchable on the consumer education website for the child care provider type listed below and then, if checked, describe the searchable information included on the website.

- i.  All licensed providers. Describe: **The Lead Agency hosts an additional provider dashboard at the following website URL where consumers can search for licensed providers by county, city, provider type, PV number, ages of children served, and license status: <https://dphhs.mt.gov/childcareprovidersdashboard>**
- ii.  License-exempt CCDF center-based providers. Describe:
- iii.  License-exempt CCDF family child care providers. Describe:
- iv.  License-exempt, non-CCDF providers. Describe:
- v.  Relative CCDF providers. Describe:

- vi.  Other. Describe:

#### 9.2.4 Provider-specific quality information

Lead Agencies must identify specific quality information on each child care provider for whom they have this information. Provider-specific quality information must only be posted on the consumer education website if it is available for the individual child care provider.

- a. What specific quality information does the Lead Agency provide on the website?
  - i.  Quality improvement system.
  - ii.  National accreditation.
  - iii.  Enhanced licensing system.
  - iv.  Meeting Head Start/Early Head Start Program Performance Standards.
  - v.  Meeting pre-Kindergarten quality requirements.
  - vi.  School-age standards.
  - vii.  Quality framework or quality improvement system.
  - viii.  Other. Describe:
- b. For what types of child care providers is quality information available?
  - i.  Licensed CCDF providers. Describe the quality information: **The Lead Agency webpage, <https://dphhs.mt.gov/childcareprovidersdashboard>, has a list of providers that participate in the QRS program. The list includes program name, program type, QRS levels, city, and contracted services region.**
  - ii.  Licensed non-CCDF providers. Describe the quality information: **The Lead Agency webpage, <https://dphhs.mt.gov/childcareprovidersdashboard>, has a list of providers that participate in the QRS program. The list includes program name, program type, QRS identifiers, city, and contracted services region**
  - iii.  License-exempt center-based CCDF providers. Describe the quality information:
  - iv.  License-exempt FCC CCDF providers. Describe the quality information:
  - v.  License-exempt non-CCDF providers. Describe the quality information:
  - vi.  Relative child care providers. Describe the quality information:
  - vii.  Other. Describe:

#### 9.2.5 Aggregate data on serious injuries, deaths, and substantiated abuse

Lead Agencies must post aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year on the consumer education website. This aggregate data must include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.

This aggregate information on serious injuries and deaths must be separated by category of care (e.g., centers, family child care homes, and in-home care) and licensing status (i.e., licensed or license-exempt) for all eligible CCDF child care providers in the State/Territory. The information on

instances of substantiated child abuse does not have to be organized by category of care or licensing status. Information must also include the total number of children in care by provider type and licensing status, so that families can better understand the data presented on serious injuries, deaths, and substantiated cases of abuse.

- a. Certify by checking below that the required elements are included in the Aggregate Data Report on serious incident data that have occurred in child care settings each year.
  - i.  The total number of serious injuries of children in care by provider category and licensing status.
  - ii.  The total number of deaths of children in care by provider category and licensing status.
  - iii.  The total number of substantiated instances of child abuse in child care settings.
  - iv.  The total number of children in care by provider category and licensing status.
  - v. If any of the above elements are not included, describe:
- b. Certify by providing:
  - i. The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care and describe how the Lead Agency obtains the aggregate data from the entity: **Licensed and registered child care providers are required to report injuries which result in a child being hospitalized, requiring ambulance transport or intervention, or requiring physician treatment. Relative Care Exempt providers are not required to submit these reports. Licensed providers must report serious injuries or deaths of children to the Lead Agency's Child Care Licensing program within 24 hours following the incident. The report is located on the Child Care Licensing website. The report is broken out by facility type. Data is captured via reports on complaints, CPS reports, and other reported information from providers.**
  - ii. The definition of "substantiated child abuse" used by the Lead Agency for this requirement: **The Lead Agency uses the following Child and Family Services' definition of substantial child abuse - ☑Upon investigation, the child protection specialist has determined that the facts showing that abuse, neglect, sexual abuse, or exploitation occurred are more convincing than the facts offered to show the abuse, neglect, sexual abuse, or exploitation did not occur."**
  - iii. The definition of "serious injury" used by the Lead Agency for this requirement: **The Lead Agency uses the following Child and Family Services' definition of serious injury - "An incident, act, omission, or gross negligence resulting in medical care due to substantial skin bruising, internal bleeding, substantial injury to skin, subdural hematoma, burns, bone fractures, extreme pain, permanent or temporary disfigurement, or impairment of any bodily organ or function.☑**
- c. Provide the direct URL/website link to the page where the aggregate number of serious injuries, deaths, and substantiated child abuse, and the total number of children in care by provider category and licensing status are posted:  
**<https://dphhs.mt.gov/assets/ecfsd/childcarelicensing/InjuriesDeathsandChildAbuseinChildCareSettings.pdf>**

### 9.2.6 Contact information on referrals to local child care resource and referral organizations

The Lead Agency consumer education website must include contact information on referrals to local CCR&R organizations.

- a. Does the consumer education website include contact information on referrals to local CCR&R organizations?  
 Yes.  
 No.  
 Not applicable. The Lead Agency does not have local CCR&R organizations.
- b. Provide the direct URL/website link to this information:  
**<https://dphhs.mt.gov/ecfsd/childcare/childcareresourceandreferral>**

### 9.2.7 Lead Agency contact information for parents

The Lead Agency consumer and provider education website must include information on how parents can contact the Lead Agency or its designee and other programs that can help the parent understand information included on the website.

- a. Does the website provide directions on how parents can contact the Lead Agency or its designee and other programs to help them understand information included on the website?  
 Yes.  
 No.
- b. Provide the direct URL/website link to this information:  
**<https://dphhs.mt.gov/ecfsd/childcare/>**

### 9.2.8 Posting sliding fee scale, co-payment amount, and policies for waiving co-payments

The consumer education website must include the sliding fee scale for parent co-payments, including the co-payment amount a family may expect to pay and policies for waiving co-payments.

- a. Does the Lead Agency certify that their consumer education website includes the sliding fee scale for parent co-payments, including the co-payment amount a family may expect to pay and policies for waiving co-payments?  
 Yes.  
 No.
- b. Provide the direct URL/website link to the sliding fee scale.  
**[https://dphhs.mt.gov/assets/ecfsd/childcare/policymanual/Sliding\\_Fee\\_Scale\\_2023.pdf](https://dphhs.mt.gov/assets/ecfsd/childcare/policymanual/Sliding_Fee_Scale_2023.pdf)**

## 9.3 Increasing Engagement and Access to Information

Lead Agencies must collect and disseminate information about the full range of child care services to promote parental choice to parents of children eligible for CCDF, the general public, and child care providers.

### 9.3.1 Information about CCDF availability and eligibility

Describe how the Lead Agency shares information with eligible parents, the general public, and child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible. The description should include, at a minimum, what is provided (e.g., written materials, the website, and direct communications) and what approaches are used to tailor information to parents, the general public, and child care providers. **The Lead Agency shares information with families, providers, and the public on the availability of child care services and other programs in two ways: the Lead Agency website; and contractors who employ eligibility and outreach specialists. The website has separate pages based on audience, so families, providers, and the public can access a variety of resources and information relevant to their needs. Lead Agency website - The Lead Agency's family focused webpage covers in plain language such topics as finding child care, child care options, paying for care, and information about child care services and eligibility programs such as the Best Beginnings child care scholarship program (BCCS). The Lead Agency's provider focused webpage covers such topics as industry best practices, subsidy programs, resource documents, quality trainings, licensing, and safety standards. Information is written to encourage child care provider participation in CCDF programs with the goal of improving the quality and increasing the number of licensed providers statewide. Both webpages link directly to a comprehensive list of additional programs and services that support children and families including Child and Family Services, Children's Mental Health and Special Needs, Children's Trust Fund, Temporary Assistance for Needy Families, Women Infants and Children, Child and Adult Care Food Program, Head Start, Supplemental Nutrition Assistance Program, Low Income Home Energy Assistance Program, and IDEA Part C and Part B. Program information includes a general description that is applicable to all audience types and provides relevant links to find out more information. They also link to a child care provider dashboard showing the availability of licensed care with other general consumer information. Additionally, The Lead Agency issues a consumer education statement flyer titled, "Best Beginnings Scholarship Program: Supporting Montana Families and Providers with Child Care Financial Assistance" to families and providers online and in hard copy. It includes information on equal access for families through the Best Beginnings Child Care Scholarship Program, reliable compliant process, eligibility, outreach and quality contractors, Montana's Quality Rating and Improvement System, health and safety standards, and licensing inspection and monitoring processes. Finally, the website includes data and statistics that may be helpful to constituents such as policy makers, legislators, and legislative representatives. Contracted services - Lead Agency contractor(s) offer families and providers information on the quality and quantity of child care services. Referrals provided by contractors include the availability and number of child care inquiries, the various types of facilities, and personal preferences for child care providers. These agencies collaborate with the state Advisory Council, Best Beginnings local coalitions, non-profits, and child care providers to improve the supply of child care. Additionally, they connect families and providers with services addressing special needs, including community access to IDEA services, support for homelessness, and information on immunizations. This information is shared electronically and through direct communications via phone and in-person and diffuse communications including email lists, mailers, and general brochures. The Lead Agency also contracts with a marketing firm (Windfall) to execute a media campaign to alert families and providers of the BCCS offerings.**

### 9.3.2 Information about child care and other services available for parents

Does the Lead Agency certify that it provides information described in 9.3.1 for the following required programs?

- Temporary Assistance for Needy Families (TANF) program.
- Head Start and Early Head Start programs.
- Low Income Home Energy Assistance Program (LIHEAP)
- Supplemental Nutrition Assistance Program (SNAP).
- Women, Infants, and Children Program (WIC) program.
- Child and Adult Care Food Program (CACFP).
- Medicaid and Children’s Health Insurance Program (CHIP).
- Programs carried out under IDEA Part B, Section 619 and Part C.

Yes.

No. If no, describe:

### 9.3.3 Consumer statement for parents receiving CCDF services

Lead Agencies must provide parents receiving CCDF services with a consumer statement in hard copy or electronically that contains general information about the CCDF program and specific information about the child care provider they select.

Please certify if the Lead Agency provides parents receiving CCDF services a consumer statement that contains the following 8 requirements:

1. Health and safety requirements met by the provider
2. Licensing or regulatory requirements met by the provider
3. Date the provider was last inspected
4. Any history of violations of these requirements
5. Any voluntary quality standards met by the provider
6. How CCDF subsidies are designed to promote equal access
7. How to submit a complaint through the hotline
8. How to contact a local resource and referral agency or other community-based organization to receive assistance in finding and enrolling in quality child care

Does the Lead Agency provide to families, either in hard copy or electronically, a consumer statement that contains the required information about the provider they have selected, including the eight required elements above?

Yes.

No. If no, describe:

### 9.3.4 Informing families about best practices on child development

Describe how the Lead Agency makes information available to parents, providers, and the general public on research and best practices concerning children’s development, including physical health and development, and information about successful parent and family engagement. At a minimum, the description should include what information is provided; how the information is provided; any distinct activities for sharing this information with parents, providers, the general public; and any partners in providing this information. **The Lead Agency shares information with families, providers and the public on the physical growth and development of young children in three ways: the Lead Agency website; the Lead Agency’s QRS program; and through contractors who employ eligibility and outreach specialists. Information is shared in a variety of ways to reach various audiences. Formats for sharing include written materials, flyers, brochures, training modules, and website links. The target audiences include parents, providers, the public, agency staff, partner agencies’ staff, contractors, local, state, and federal policy makers. The Lead Agency has a tailored webpages, one for parents and the other for early childhood providers. Visitors to the website self-select as a parent or as a provider on the homepage and are then directed to the appropriate internal webpages. Lead Agency website - Information shared on the website includes general information on child growth and development and more specific resources such as developmental screening processes, the Pyramid Model, the Knowledge Base the Montana Early Learning Standards (MELS) and other health and nutrition programs. The Lead Agency’s website hosts information for families and providers on the Child and Adult Care Food Program, along with other resources relevant to the health of children. The Lead Agency webpage, Documents & Resources, hosts the following information on child physical health and development under the Children's Health and Nutrition tab: ADA Brochure Asthma Action Plan - American Lung Association Diabetes Health Care Plan Feeding Infants - A Guide for Use in the Child Nutrition Programs HIPAA Brochure - Meal Pattern Seizure Care Plan Log Topic. Additional tools, tips and flyers for providers on Parent Involvement and Family Engagement strategies can be found on the Child Growth and Development page. Contracted services - The Lead Agency partners with parentingmontana.org to provide families with children aged 0-19 relevant, information, training, and supports. During the Best Beginnings Child Care Scholarship eligibility determination process, an Eligibility Specialist may provide information on a variety of topics, including child growth and development. If a parent indicates their child may need additional support the eligibility contractors refer the family to appropriate child development training opportunities or interventions. QRS program - Providers participating in the Lead Agency QRS program commit to research-based child development best practices, specifically in social emotional supports, family engagement, child physical health and nutrition, and staff in their programs. The QRS website offers an abundance of resources for providers, including individualized personal care plans for infant and toddlers, feeding children in child care, transition plans, and more. The Lead Agency partners with the Early Childhood Project (ECP) to disseminate information to providers about training opportunities and requirements.**

9.3.5 Unlimited parental access to their children

Does the Lead Agency have procedures to ensure that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds:

Yes.

No. If no, describe:

9.3.6 Informing families about best practices in social and emotional health



Describe how the Lead Agency shares information with families, providers, and the general public regarding the social-emotional and behavioral and mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age: **The Lead Agency shares information to support the social-emotional health of young children in three ways: the Lead Agency website; the Lead Agency QRS program; and through contracted outreach services.** Lead Agency website - General information for families shared on the website includes examples of positive behavioral interventions and social-emotional supports linked on the child growth and development webpage. It also includes specific resources such as the Knowledge Base and the Montana Early Learning Standards (MELS). These documents are accessible through the Lead Agency’s website and are the foundation for supporting all early learning programs and activities. The MELS promotes the well-being and positive development of the whole child while also promoting the importance of social and emotional health of young children. It is organized by domain and offers quick references so that parents and providers can easily communicate about each topic area. Contracted services - The Lead Agency partners with parentingmontana.org to provide families with children aged 0-19 social-emotional training coursework. Additionally, the Lead Agency has an Infant and Early Childhood Mental Health Consultation (IECMHC) contract with Mountain Pacific Quality Health to provide web-based information on the importance of supporting the social-emotional development of children. Their website allows child care providers and families to request IECMHC services. The IECMHC contractor promotes social-emotional development and IECMHC to providers, families, and the public across Montana through a comprehensive branding and marketing campaign. The Lead Agency funds and promotes provider specific social-emotional training options like the pyramid model, child temperament, and trauma informed care courses for both licensed and non-licensed providers through childcaretraining.org. Finally, during the Best Beginnings Child Care Scholarship eligibility determination process, an eligibility contractor may provide information on a variety of topics, including social and emotional well-being. If a parent indicates their child may need additional support the Specialist will refer them to additional DPPHS services. QRS program - Child care providers who participate in the Lead Agency’s QRS program receive access to IECMHC, training course options (including social-emotional trainings), and other screening resources. Participating QRS providers must meet many research based, best practice criteria, specifically in social emotional supports, and family engagement. Providers are required to get 16 hours of trainings per year to remain licensed and may select trainings of their choice to fulfill this requirement. The QRS Toolkit website offers an abundance of Pyramid Model resources for providers. Providers are encouraged to share these resources with families in their program.

9.3.7 Policies on the prevention of the suspension and expulsion of children

- a. The Lead Agency must have policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds. Describe those policies and how those policies are shared with families, providers, and the general public: **The Lead Agency has policies to prevent the suspension and expulsion of children from birth to age five in the Administrative Rules of Montana (37.80.301). It requires providers have a policy on preventing and reducing expulsion and suspension. The policy must include reasons for expulsion, procedures for expulsion, how the provider will assist the child and parent with transitions, and the types of referrals the provider will make such as those to a community agency that could offer additional supports to the family. The policy on preventing suspension and expulsion is available on the Lead Agency**

website for parents, providers, and the public. Lead Agency contracted agencies meet with child care providers and child care provider associations in their regions to share expulsion policies. Contracted agency staff assist child care providers in writing expulsion policies and help them implement solutions to avoid the suspension and expulsion of children. The Lead Agency, following the policy guidance of the US Departments of Education and Health and Human Services, implements a multi-tiered systems of support to prevent and severely limit expulsions and suspensions in early learning settings. For example, the Lead Agency QRS program uses training and coaching on Pyramid Model practices at the program and classroom level to address challenging behaviors that may lead to suspensions and expulsions.

- b. Describe what policies, if any, the Lead Agency has to prevent the suspension and expulsion of school-age children from child or youth care settings receiving CCDF funds: **The Lead Agency has policies to prevent the suspension and expulsion of school age children in the Administrative Rules of Montana (37.80.301). It requires providers have a policy on preventing and reducing expulsion and suspension. The policy must include reasons for expulsion, procedures for expulsion, how the provider will assist the child and parent with transitions, and the types of referrals the provider will make such as those to a community agency that could offer additional supports to the family. The policy on preventing suspension and expulsion is available on the Lead Agency website for parents, providers, and the public. Lead Agency contracted agencies meet with child care providers and child care provider associations in their regions to share expulsion policies. Contracted agency staff assist child care providers in writing expulsion policies and help them implement solutions to avoid the suspension and expulsion of children. The Lead Agency, following the policy guidance of the US Departments of Education and Health and Human Services, implements a multi-tiered systems of support to prevent and severely limit expulsions and suspensions in early learning settings.**

## 9.4 Providing Information on Developmental Screenings

Lead Agencies must provide information on developmental screenings to parents as part of the intake process for families participating in CCDF and to child care providers through training and education. This information must include:

- Existing resources and services that the State can make available in conducting developmental screenings and providing referrals to services when appropriate for children who receive child care assistance, including the coordinated use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under Title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C; and,
- A description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays.

Information on developmental screenings, as in other consumer education information, must be accessible for individuals with limited English proficiency and individuals with disabilities.

### 9.4.1 Developmental screenings

Does the Lead Agency collect and disseminate information on the following:

- a. Existing resources and services available for obtaining developmental screening for parents receiving CCDF, the general public, and child care providers.

Yes.

No. If no, describe:

- b. Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program—carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.)—and developmental screening services available under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

Yes.

No. If no, describe:

- c. Developmental screenings to parents receiving a subsidy as part of the intake process.

Yes. If yes, include the information provided, ways it is provided, and any partners in this work: **The following information is included on the developmental screening webpage for families and providers: Information on what is developmental screening, how often should developmental screening be done, who can perform a developmental screening on a child, where families can find help getting a developmental screening for their child, where providers can get trained in using a developmental screening tool, etc. The Lead Agency website also links to the federal Office of Early Childhood Development Birth To 5: Watch Me Thrive! webpage for more information on developmental screenings. Finally, the Lead Agency partners with the IDEA Early Intervention Program to provide screening services to children with disabilities or special needs.**

No. If no, describe:

- d. How families receiving CCDF services or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for children at risk for cognitive or other developmental delays.

Yes.

No. If no, describe:

## 10 Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. As stewards of federal funds, Lead Agencies must ensure strong and effective internal controls to prevent fraud and maintain continuity of services to meet the needs of children and families. In order to operate and maintain a strong CCDF program, regular evaluation of the program's internal controls as well as comprehensive training for all entities involved in the administration of the program are imperative. In this section, Lead Agencies will describe their internal controls and how those internal controls effectively ensure integrity and accountability. These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors and should apply to all CCDF funds.

### 10.1 Effective Internal Controls

Lead Agencies must ensure the integrity of the use of CCDF funds through effective fiscal management and must ensure that financial practices are in place. Lead Agencies must have effective fiscal management practices in place for all CCDF expenditures.

#### 10.1.1 Organizational structure to support integrity and internal controls

Describe how the Lead Agency's organizational structure ensures the oversight and implementation of effective internal controls that promote and support program integrity and accountability. Describe: **The Lead Agency has one CCDF Administrator. CCDF program activities are housed in the Early Childhood Services Bureau (ECSB) and Child Care Bureau (CCB) within the Early Childhood and Family Support Division (ECFSD) of the Department of Public Health and Human Services. There is a separate fiscal team in the Fiscal Operations Bureau (FOB) within ECFSD. The ECFSD Administrator oversees the entire program, in collaboration with the Director's Office and Legislative Audit Division (LAD). LAD completes independent audits of CCDF. The Lead Agency contracts eligibility determination processes to contractors across the state. These staff are charged with processing Best Beginnings Scholarship applications, including gathering the required documentation from families, making eligibility determinations, and reviewing and approving invoices for payment. For eligibility determination, they follow a two-step internal review process wherein a determination is evaluated by a second staff before being approved or denied. These staff are trained and supported by CCB's Policy Unit. In addition to offering regular training and technical assistance, the Policy Unit maintains a manual that aids contract staff in navigating the eligibility and payment processes. The Policy Unit conducts monthly case file reviews with the Best Beginnings Scholarship contractors. This process mirrors the Federal Improper Payment Initiative. The results of these reviews are used to identify any errors and trends and inform manual updates, training, or technical assistance. The Policy Unit also leads any investigation into all instances of alleged or suspected fraud, either by family or provider. The subsidy contractors assist in collecting documentation to support investigative efforts. The Lead Agency's grants and contracts are reimbursement-based. Invoices are submitted to the designated contract liaison; this is the program manager of the relevant program being supported by the contract. The contract liaison reviews the invoice for contract alignment and either certifies the program's approval or returns to the contractor for clarification or correction. Once approved, the invoice is submitted to FOB and the dedicated Budget Analyst provides a second level review. Only after the second level approval is granted is payment authorized and released to the contractor. Contractors are required to submit monthly invoices, unless otherwise specified, to reduce instances of unallowable and un-reimbursable activities. Management from both the Early Childhood Services Bureau and the Child Care Bureau and the FOB Bureau Chief meet with the dedicated CCDF Budget Analyst twice a month to review the budget, expenditures, trends, obligations, grant targets, and reporting.**

Include the following elements in your description:

1. Assignment of authority and responsibilities related to program integrity.
2. Delegation of duties.
3. Coordination of activities.
4. Communication between fiscal and program staff.
5. Segregation of duties.
6. Establishment of checks and balances to identify potential fraud risks.

7. Other activities that support program integrity.

10.1.2 Fiscal management practices

Describe how the Lead Agency ensures effective fiscal management practices for all CCDF expenditures, including:

- a. Fiscal oversight of CCDF funds, including grants and contracts. Describe: **The Lead Agency’s computer database automatically releases invoices for payment. The monthly authorized amount is paid when a child is authorized for care for the entire month and attends for at least one day in the service month allowing for the quick approval of invoices and subsequent payments. When the Lead Agency is unable to obtain program critical services within the ECFSD, it may seek to procure those services through an outside agency by means of a formalized agreement. Such procurements may take the form of a Request for Proposal, Sole Source, Inter-Agency Agreements, Memoranda of Understanding, or Contractor Engagement Proposal. The Montana Office of Administration establishes state procurement rules and offers guidelines in developing, securing, and monitoring contracts. ECFSD’s Fiscal and Operations Bureau (FOB) supports the Lead Agency team in securing contracts, reviewing agreements with program managers for allowable costs and activities, adherence to procurement rules and guidelines during the procurement process, and subsequent contract monitoring. Prior to pursuing a procurement, the Lead Agency must demonstrate the need for the procurement. This is a formal request process in which the Lead Agency establishes the need, provides supporting documentation, and fiscal impact, if appropriate. FOB informs the Lead Agency during this process and determines the appropriate procurement method. Once approved, FOB conducts the contracting. Contracts include a statement of work with identifiable deliverables, performance metrics, and reporting and monitoring criteria. In addition, contractors must attest to their ability to adhere to relevant federal and state regulations. Following an award, contractors must follow ECFSD policy and submit monthly budget invoices to program and fiscal staff for review and approval prior to payment. FOB, program managers, and the CCDF Administrator meet regularly to review contract budgets and expenditures, program budgets and expenditures, and review contract budget requests for allowable costs. Both fiscal and program input is needed to determine allowability. Following ECFSD policy, all contractors submit monthly invoices to the Lead Agency. The monthly invoice includes budget line-item details. The manager reviews the invoices for appropriate and allowable cost, contract deliverable alignment, and correct allocation of funds against budget line-item expenditures. If approved, the invoice is sent to FOB for review and upon approval, the invoice is processed for payment. All costs and contracts are tracked in the Lead Agency database.**
- b. Tracking systems that ensure reasonable and allowable costs and allow for tracing of funds to a level of expenditure adequate to establish that such funds have not been used in violation of the provision of this part. Describe: **Following Lead Agency policy, all contractors submit monthly invoices to the program contract manager. The monthly invoice includes budget line-item details. The program contact manager reviews the invoices for appropriate and allowable cost, contract deliverable alignment, and correct allocation of funds against budget line-item expenditures. If approved, the invoice is sent to FOB for review and upon approval, the invoice is processed for payment. All costs and contracts are tracked in the Lead Agency’s database.**

- c. Processes and procedures to prepare and submit required state and federal fiscal reporting. Describe: **All state and federal fiscal reporting involves both the program management and FOB fiscal team which meet twice monthly to address budget oversight. The FOB’s CCDF Budget Analyst presents the budget to the CCDF Administrator, Fiscal Bureau Chief, Early Child Services Bureau Chief, and program managers within the Lead Agency at each meeting. The first meeting covers the CCDF expenditures for the multiple grant years, the internal ACF-696 Federal Financial Report targets, and addresses any concerns for the open grant years. The second meeting covers the quality programming of CCDF. For example, the FOB fiscal team prepares the ACF-696 in collaboration with the Business and Financial Services Division (BFSD). The final step is a review by the CCDF Administrator.**
- d. Other. Describe:

#### 10.1.3 Effectiveness of fiscal management practices

Describe how the Lead Agency knows there are effective fiscal management practices in place for all CCDF expenditures, including:

- a. How the Lead Agency defines effective fiscal management practices. Describe: **Effective fiscal management means CCDF has met its required financial obligations and been used efficiently.**
- b. How the Lead Agency measures and tracks results of their fiscal management practices. Describe: **CCDF program management and FOB fiscal team which meet twice monthly to address budget oversight. The Budget Analyst presents the budget to the CCDF Administrator, Fiscal Bureau Chief, Early Child Services Bureau Chief, and program managers within the Lead Agency at each meeting. The first meeting covers the CCDF expenditures for the multiple grant years, the internal ACF-696 Federal Financial Report targets, and addresses any concerns for the open grant years. The second meeting covers the quality programming of CCDF.**
- c. How the results inform implementation. Describe: **Financial forecasting meets financial targets. The budget tools that the Fiscal Bureau team uses to inform the CCDF teams of expenditures are evolving documents. It is regularly updated as program needs dictate. Monitoring CCDF expenditures through this tool and accompanying analysis provided by the Fiscal Bureau informs the implementation of CCDF. The Lead Agency monitors the CCDF direct service target, quality and infant/toddler earmarks, and operating within the 5% administrative cap. Any expenditure trends that would result in the Lead Agency missing targets drives policy decisions, such as decreasing copayments, to meet those targets. The regular budget analysis also allows the Lead Agency to forecast and then subsequently monitor policy implementations.**
- d. Other. Describe:

#### 10.1.4 Identifying risk

Describe the processes the Lead Agency uses to identify risk in the CCDF program including:

- a. Each process used by the Lead Agency to identify risk (including entities responsible for implementing each process). Describe: **1) The Lead Agency conducts an annual review of policy and procedure. The Policy Unit reviews policy and procedure for accuracy and**

alignment with current rule. Policies and procedures are assessed on an ongoing basis to determine risk the level of exposure or risk. This process is informed using error trends identified during monthly error rate reviews Error trend mitigation strategies include training, manual updating, and targeted technical assistance. 2) The Lead Agency's database requires dual approval for all contracts and agreements before such action is authorized. The database automatically holds payment for all subsidy invoices that exceed 10% of the authorized amount. Cases are reviewed by an eligibility supervisor and approved before payment is executed. 3) The Lead Agency works with scholarship contractor agencies to assign and conduct reviews on scholarship cases, monthly. Upon completion of the reviews, the file reviews report is submitted to the Lead Agency.

- b. The frequency of each risk assessment. Describe: **1) The Lead Agency conducts an annual review of policy and procedure. 2) Subsidy invoices that exceed 10% of the authorized amount are reviewed on an as needed basis. Only when an invoice meets the requirement is a review required. 3) File reviews are completed monthly.**
- c. How the Lead Agency uses risk assessment results to inform program improvement. Describe: **1) Through the annual review of policy and procedure, the Lead Agency can identify outdated, ineffective, or changing text. This review ensures policy and procedure are continuously improved. 2) Through subsidy invoices that exceed 10% of the authorized amount requiring a secondary approval, the Lead Agency can identify subsidy payments that may not follow policy. When policy is not followed, investigation into a child care provider or family's subsidy case is triggered. 3) Through file reviews, the Lead Agency is able to ensure policy is followed in determining a family's subsidy case, how a payment was made, and if a child care provider's attendance records followed.**
- d. How the Lead Agency knows that the risk assessment processes utilized are effective. Describe: **The Lead Agency will know the risk assessment processes are effective when the error rate remains under the federal threshold, invoices are processed in a timely manner, and financial obligations are met.**
- e. Other. Describe:

#### 10.1.5 Processes to train about CCDF requirements and program integrity

Describe the processes the Lead Agency uses to train staff of the Lead Agency and other agencies engaged in the administration of CCDF, and child care providers about program requirements and integrity.

- a. Describe how the Lead Agency ensures that all staff who administer the CCDF program (including through MOUs, grants, and contracts) are informed and trained regarding program requirements and integrity.
  - i. Describe the training provided to staff members around CCDF program requirements and program integrity: **Lead Agency leadership holds monthly meetings with Lead Agency CCDF contractors to review CCDF requirements and policy implementation. The Lead Agency's Child Care Licensing and the CCDF Policy Unit meet regularly to review policy and clarify process around implementation and monitoring. The Lead agency program managers and FOB's CCDF fiscal analyst monitor contractors to ensure compliance with CCDF rules.**
  - ii. Describe how staff training is evaluated for effectiveness: **The Lead Agency works**

with scholarship contractor agencies to assign and conduct reviews on scholarship cases, monthly. Upon completion of the reviews, the file reviews report is submitted to the Lead Agency.

- iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing staff training needs: **If the Lead Agency finds errors in the file reviews, then training can be targeted to the identified risk. In some cases, a corrective action plan for a contractor may be necessary.**
- b. Describe how the Lead Agency ensures all providers for children receiving CCDF funds are informed and trained regarding CCDF program requirements and program integrity:
  - i. Describe the training for providers around CCDF program requirements and program integrity: **The Lead Agency requires an annual review of the Provider Rights and Responsibilities document for any provider that participates in the Best Beginnings Scholarship.**
  - ii. Describe how provider training is evaluated for effectiveness: **Lead Agency scholarship contractor agencies report informal and formal technical assistance provided to child care providers within their service area. Trends are evaluated in quarterly data reports.**
  - iii. Describe how the Lead Agency uses program integrity data (e.g., error rate results, risk assessment data) to inform ongoing provider training needs: **Through case reviews, the Lead Agency tracks and evaluates trends. The Lead Agency develops training and consumer education can to meet the needs identified through the case reviews.**

#### 10.1.6 Evaluate internal control activities

Describe how the Lead Agency uses the following to regularly evaluate the effectiveness of Lead Agency internal control activities for all CCDF expenditures.

- a. Error rate review triennial report results (if applicable). Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: **The Lead Agency underwent a federal reporting year in FFY2021 for error rate case reviews and had the following findings: improper payments (2.28%); cases with an error (8.33%); and cases with an improper payment (5.43%). These findings demonstrate the effectiveness of internal controls. The Lead Agency policy staff conduct regular reviews of policy, process, and procedures to ensure they are accurate and aligned. Lead Agency staff conduct testing in the database as new programming warrants and conduct a security review every six months. Database monitoring ensures user information is accurate and up-to-date, permission levels are correctly assigned, and inactive users are removed. Designated staff from the Lead Agency meet monthly with the database contractor to receive status reports on new programming and resolution of issues, monitor contract deliverables, and review requested modifications. The database contractor's work is also monitored and tracked using the JIRA platform. This tool allows for issue tracking and product management. The Lead Agency's multilevel procurement process provides strict oversight of contracts for allowable costs, and adherence to federal, state and program rules before a contract is executed. Executed contracts are the subjected to ongoing monitoring by both fiscal and program managers to ensure continuing compliance.**



- b. Audit results. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls: **Montana’s Legislative Audit Division conducts biennial audits of Montana state programs including CCDF. Audits are either fiscal or performance in nature during which state auditors review the Lead Agency’s policies, procedures, fiscal records, systems and databases, and relevant documents to determine compliance with state and federal rule. Audits provide the Lead Agency with regular outside analysis of program operations and potential weaknesses in the system. Audit reports are publicly available on the State of Montana website.**
- c. Other. Describe who this information is shared with and how the Lead Agency uses the information to evaluate the effectiveness of its internal controls:

#### 10.1.7 Identified weaknesses in internal controls

Has the Lead Agency or other entity identified any weaknesses in its internal controls?

- a.  No. If no, describe when and how it was most recently determined that there were no weaknesses in the Lead Agency’s internal controls.
- b.  Yes. If yes, what were the indicators? How did you use the information to strengthen your internal controls? **In the September 2022 audit by the Legislative Audit Division, titled “Ensuring Montana’s Child Care is Affordable, Accessible, and Safe: Distribution of the Child Care and Development Fund,” the following findings were noted: 1) CCDF funding is not based on need; 2) Goals and measurement tools needed to demonstrate effectiveness and efficiency; and 3) Licensing needs additional steps in background check and relevant trainings. The Department of Public Health and Human Services responded and has implemented the following resolutions to the findings: 1) Using county level data to analyze policy decisions (ex: 2023 Market Rate Survey); 2) Utilizing the CCDF State Plan to demonstrate measurable goals; 3) Implementing address checks in the Sexual and Violent Offender Registry (SVOR); (4) and ongoing training for child care licensing staff.**

## 10.2 Fraud Investigation, Payment Recovery, and Sanctions

Lead Agencies must have the necessary controls to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process and other review processes, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition.

### 10.2.1 Strategies used to identify and prevent program violations

Check the activities the Lead Agency employs to ensure program integrity, and for each checked activity, identify what type of program violations the activity addresses, describe the activity and the results of these activities based on the most recent analysis.

- a.  Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).

- i.  Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **The Child and Adult Care Food Program (CACFP) relies on the Lead Agency’s Child Care Licensing program to ensure a program is in good standing and eligible to participate. CACFP provides data on programs issued an IPV to the Lead Agency QRS program. Providers with CACFP violations are ineligible to participate in the QRS program. Montana’s SNAP, TANF, and Medicaid data is maintained in the Lead Agency database. This system functions to conduct client analysis and issue benefits. The Lead Agency’s subsidy and licensing database interfaces with family portal to determine express client eligibility, i.e. a TANF approved family is eligible for the child care subsidy program. Clients determined ineligible due to fraud are made ineligible for child care subsidy funds. Between 2020-2022, CACFP cited eight child care providers for being seriously deficient, and one child care provider was terminated and disqualified from participation in CACFP. None of them were disqualified from participating in the QRS program. Between 2020-2022, there are no instance where a client was found ineligible for the child care subsidy program.**
- ii.  Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice:
- iii.  Agency errors. Describe the activities, the results of these activities, and how they inform better practice::
- b.  Run system reports that flag errors (include types).
  - i.  Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **A daily report of payment issues is automatically created and recorded in an error log. A designated program specialist reviews the daily report and works with child care providers and individuals to resolve payment issues. The Lead Agency’s database invoicing process automatically flags invoices that exceed 10% of the authorized amount requiring a review by a scholarship contractor’s eligibility supervisor. Invoices justified in the over authorized amount can be fully paid, otherwise they are reduced to the authorized amount. The database generates a daily error log. This report logs payments that the payment system was unable to processes in the previous day. A program specialist reviews this log to determine the reason for the error. Once the cause is determined, they use that information to address the failed payment, including reissuing the payment if necessary and reporting the issue to FOB for technical assistance. The result of these activities are a quick remediation of payment errors and a reduction of payment errors due to technological errors. Montana’s Department of Administration reissued eight checks for payment in 2021 and lowered the number to one reissued check in 2022. The Lead Agency saw a rise in documentation issues resulting in a delayed payment from 19 in 2021 to 47 in 2022. An example of a documentation issue is a missing W-9. When a child care provider uses online invoicing, the invoice and payment are processed quicker. Additionally, online invoices are processed by the database through auto-releasing. As of May 2023, 84% of Montana’s child care providers participate in online invoicing, 52% of which are auto-released by the database.**

- ii. **[x]** Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **A daily report of payment issues is automatically created and recorded in an error log. A designated program specialist reviews the daily report and works with child care providers and individuals to resolve payment issues. Montana’s Department of Administration reissued eight checks for payment in 2021 and lowered the number to one reissued check in 2022. The Lead Agency saw a rise in documentation issues from 19 in 2021 to 47 in 2022 that delayed a payment. An example of a documentation issue is a missing W-9.**
  - iii. **[x]** Agency errors. Describe the activities, the results of these activities, and how they inform better practice: **A daily report of payment issues is automatically created and recorded in an error log. A designated program specialist reviews the daily report and works with child care providers and individuals to resolve payment issues. Review of this report identifies agency errors in the automated payment process. Errors are referred to ECFSD’s FOB team for correction. Most payment issues are resolved by a program specialist. Some payment issues are system wide and require the FOB team’s support. One issue in 2021 and two issues in 2022 were referred to the fiscal team.**
- c. **[x]** Review enrollment documents and attendance or billing records.
- i. **[x]** Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **A monthly invoice for a selected child, submitted by a child care provider, is reviewed as part of the error-rate review process. Reviewing monthly invoices aids in the identification and prevention of fraud and intentional program violations because it requires a review of actual attendance against the authorized hours of care for a child. Child care providers are required to retain attendance records for six years after date of attendance. The results of this practice are an identification of providers who need technical assistance to detect of improper invoicing, recover improper payments, and reduce improper payments made. A review of sign-in/sign-out records was added to case file reviews in 2023. During 2020-2022, monitoring of child care provider’s sign-in/sign-out records was completed routinely. In three months of case file reviews, technical assistance has been given to 25% of the child care providers. Additionally, the Lead Agency has worked to standardize technical assistance efforts with scholarship contractor agencies.**
  - ii. **[x]** Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Scholarship contractor agency staff conduct investigations into invoices. Invoices subject to inquiry are those that appear to practice block billing, are over authorized hours, or that claim a child in more than one program during the same period. During the investigative process, scholarship contractor agency staff request provider attendance records to review. The Lead Agency aids in these reviews as needed. Records reviewed include sign-in/sign-out sheets, invoices, and authorization plans. If staff are unable to reconcile attendance records with the invoice, the case is referred to the Lead Agency. A Lead Agency specialist reviews the case and determines the overpayment to be assessed. Providers are required to retain attendance records for six years after the attendance date. Providers determined to have an**

overpayment as the result of an unintentional program violation are issued a technical assistance letter in addition to the notification of overpayment. In 2020, there were 23 investigations, with technical assistance given to 17 child care providers. In 2021, there were 18 investigations technical assistance given to 13 child care providers. In 2022, there were 7 investigations, technical assistance given to 3 child care providers.

- iii.  Agency errors. Describe the activities, the results of these activities, and how they inform better practice:
- d.  Conduct supervisory staff reviews or quality assurance reviews.
  - i.  Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Monthly eligibility cases are selected by the Lead Agency for a second level review by the scholarship contractor agency eligibility supervisors. These supervisor reviews mirror the error-rate review process at the state level. Monthly supervisor reviews aid in the identification and prevention of fraud and intentional program violations because they allow for a review of eligibility cases where potential fraud can be identified. Results of the supervisor reviews are shared with the Lead Agency and include the actions the scholarship contractor agency has taken to resolve the errors, and processes established to prevent the recurrence of similar errors. This process allows the Lead Agency to provide targeted technical assistance and training to specific scholarship contractor agency staff based on their need. This results in better trained eligibility staff who can more readily identify errors to reduce instances of intentional program violations and fraud. In 2023, the Lead Agency and scholarship contractor agencies meet monthly to discuss monthly case reviews and identify errors and trends. In three months of scholarship contractor case file reviews, technical assistance has been given to 25% of the child care providers.**
  - ii.  Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **Each month, the Lead Agency randomly selects case files from each scholarship contractor region. These cases are reviewed at the scholarship contractor level by each agency's eligibility supervisor to determine if eligibility determinations and child care payments are accurate and in accordance with Best Beginnings Child Care Scholarship policy. The supervisor shares the result with the Lead Agency along with mitigation strategies and processes they have employed to prevent reoccurrence of an identified error. The Lead Agency conducts monthly reviews of eligibility supervisor case files. Results of the supervisor reviews are shared with the state and include the actions the scholarship contractor agency has taken to resolve the errors, and any processes established to prevent the recurrence of similar errors. This allows the state to provide targeted technical assistance and training to specific scholarship contractor agency staff based on need. Better trained eligibility staff can more readily identify errors that lead to unintentional program violations and prevent them from occurring. Lead Agency and scholarship contractor agencies meet monthly to discuss monthly case reviews, errors, and trends. In three months of scholarship contractor case file reviews, technical assistance has been given to 25% of the child care providers.**

- iii. **[x]** Agency errors. Describe the activities, the results of these activities, and how they inform better practice: **Each month, the Lead Agency conducts error rate reviews, even in non-reporting years. Eligibility supervisors provide the Lead Agency with an overview of the reviews including the nature of the errors discovered. Lead Agency staff review the summary and follow-up with reviews on individual cases to ensure accuracy. An agency with an error rate higher than 10% must submit a plan of correction to the Lead Agency detailing their plan to address errors and prevent similar errors from arising in the future. The Lead Agency must approve the plan. The plan is satisfied when the error rate returns below 10%. Any agency found with a repeated error rate higher than 10% must submit a plan for approval to the Lead Agency outlining plans to address their errors. In the event of repeated 10% or higher error rates, the agency is placed into a corrective action plan. The results of these activities are a reduction in agency errors. One scholarship contractor agency was on a corrective action plan in 2021. There was no corrective action plans in 2022.**
- e. **[x]** Audit provider records.
  - i. **[x]** Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **The scholarship contractor agency staff conduct investigations into invoices. Invoices subject to inquiry are those that appear to practice block billing, e.g. same time in and time out for a child during an invoice period, are over authorized hours, or that claim a child in more than one program during the same period. During the investigative process of a program, scholarship contractor agency staff request provider attendance records to review. The Lead Agency aids in these reviews as needed. Records reviewed include sign-in/sign-out sheets, invoices, and authorization plans. If a scholarship contractor agency staff member is unable to reconcile attendance records with the invoice, the case is referred to the Lead Agency. A Lead Agency specialist reviews the case and determines the overpayment to be assessed and, if applicable, an intentional program violation. Record reviews aid in the identification of provider technical assistance needs and in the reduction of instances of fraud and intentional program violations. In 2020, there were 23 investigations, with four resulting intentional program violations issued and technical assistance given to 17 child care providers. In 2021, there were 18 investigations, with six resulting intentional program violations and technical assistance given to 13 child care providers. In 2022, there were 7 investigations, with one resulting intentional program violation and technical assistance given to 3 child care providers.**
  - ii. **[x]** Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **The scholarship contractor agency staff conduct investigations into invoices. Invoices subject to inquiry are those that appear to practice block billing, e.g. same time in and time out for a child during an invoice period, are over authorized hours, or that claim a child in more than one program during the same period. During the investigative process of a program, scholarship contractor agency staff request provider attendance records to review. The Lead Agency aids in these reviews as needed. Records reviewed include sign-in/sign-out sheets, invoices, and authorization plans. If a scholarship**

contractor agency staff member is unable to reconcile attendance records with the invoice, the case is referred to the Lead Agency. A Lead Agency specialist reviews the case and determines the overpayment to be assessed and if the error is the result of an unintentional program violation. Providers found to have an unintentional program violation are provided a technical assistance letter. In 2020, there were 23 investigations, with technical assistance given to 17 child care providers. In 2021, there were 18 investigations technical assistance given to 13 child care providers. In 2022, there were 7 investigations, technical assistance given to 3 child care providers.

- iii.  Agency errors. Describe the activities, the results of these activities, and how they inform better practice:
- f.  Train staff on policy and/or audits.
  - i.  Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **All scholarship contractor agency eligibility staff are required to complete the state’s subsidy policy course, Eligibility Basics, at the onset of their onboarding with their agency. In addition, new eligibility staff are required to have a training plan prior to assuming a caseload. The Lead Agency provides ongoing training for this group. Trainings address policy and rule changes and updates. When either a payment or an administrative error is identified during the error-rate review process, the scholarship contractor agency eligibility supervisor is required to train all regional eligibility staff on the applicable policy and procedure. This aids in the identification and prevention of fraud and intentional program violations. Well trained staff are better able to identify fraud and intentional program violations. For the federal error-rate review years, 2018 and 2021, the Lead Agency has maintained a federal improper payment percentage under 3% and less than 10% of cases had errors.**
  - ii.  Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice: **When either a payment or an administrative error is identified during the error-rate review process, the scholarship contractor agency eligibility supervisor is required to train all regional eligibility staff on the applicable policy and procedure. This aids in the identification and prevention of fraud and intentional program violations. Well-trained staff have reduced the number of unintentional program violations. For the federal error-rate review years, 2018 and 2021, the Lead Agency has maintained a federal improper payment percentage under 3% and less than 10% of cases had errors.**
  - iii.  Agency errors. Describe the activities, the results of these activities, and how they inform better practice: **When either a payment or an administrative error is identified during the error-rate review process, the scholarship contractor agency eligibility supervisor is required to train all scholarship contractor agency eligibility staff on the applicable policy and procedure. This aids in the identification and prevention of fraud and intentional program violations. The scholarship contractor agency informs the Lead Agency on internal procedures to address training needs. The Lead Agency is available to provide technical assistance and training input as**

needed. The results of these activities are a reduction of agency error. For the federal error-rate review years, 2018 and 2021, the Lead Agency has maintained a federal improper payment percentage under 3% and less than 10% of cases had errors.

- g.  Other. Describe the activity(ies):
  - i.  Intentional program violations. Describe the activities, the results of these activities, and how they inform better practice:
  - ii.  Unintentional program violations. Describe the activities, the results of these activities, and how they inform better practice:
  - iii.  Agency errors. Describe the activities, the results of these activities, and how they inform better practice:

#### 10.2.2 Identification and recovery of misspent funds

Lead Agencies must identify and recover misspent funds that are a result of fraud, and they have the option to recover any misspent funds that are a result of unintentional program violations or agency errors.

- a. Identify which agency is responsible for pursuing fraud and overpayments (e.g., State Office of the Inspector General, State Attorney): **The State’s Business and Financial Services Division pursues the collection of fraud and overpayments.**
- b. Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Consider in your response potential fraud committed by providers, clients, staff, vendors, and contractors. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:
  - i.  Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: **The Lead Agency’s policy does not pursue repayment under \$100. If a household or provider receives any amount of subsidy funds to which they are not entitled, an overpayment may occur. Once an overpayment has been determined and assessed, the head of household or provider establishes a payment plan with BFS. A household who is not current on their overpayment is not eligible for child care assistance, and a provider who is not current is not eligible for subsidy payments until payments are current. In 2021-2022, child care providers with overpayments may have still received subsidy payments. Now, child care providers with an overpayment must maintain compliance to receive subsidy payments. At initial and annual re-determination, a parent’s overpayment compliance is verified. If a parent is not in compliance, then the parent is not eligible for child care assistance. The Lead Agency plans to track this information to determine if there are denials of eligibility based on these criteria.**
  - ii.  Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: **When an**

improper payment is determined, the Lead Agency works with BFSF to establish an accounts receivable for the improper payment. BFSF manages the recovery of improper payments. BFSF submits a monthly aging report to the subsidy program manager and the FOB. This report allows the Lead Agency to determine which overpayment cases are current and which are delinquent. Parties in overpayment who have not made a payment after 30 days receive a notification. A second notification is issued after 60 days of inactivity. Cases without payment activity for 90 days are referred to tax offset for collection of the remaining amount. In 2021 and 2022, one child care provider each year was issued an overpayment and were sent to tax offset for payment collection.

- iii.  Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: **BFSF can work with a household or a provider with an established improper payment to determine a repayment plan. Provider or family payment plans allow the Lead agency to recover improper payments. BFSF establishes a repayment plan with a client unless the client chooses to pay the improper payment in full. The Lead Agency works with BFSF on ensure overpayments have a current repayment agreement. In 2021-2022, child care providers may have had a current overpayment and still received subsidy payments. In 2023, Montana began to enforce a child care provider with an overpayment must be in compliance to receive subsidy payments. Four child care providers had current overpayments and are in compliance with paying their overpayments. At initial and annual re-determination, a parent's overpayment compliance is verified. If a parent is not in compliance, then the parent is not eligible for child care assistance. The Lead Agency tracks this data to determine if there are denials of eligibility based on these criteria.**
  - iv.  Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis:
  - v.  Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: **When a parent or child care provider is in default on an improper payment, BFSF will establish a tax intercept. An account is determined to be in default if there is no activity over the previous 90 days. This ensures an improper payment can be recovered if a parent or child care provider receives a state tax refund. In 2021 and 2022, one child care provider each year was issued an overpayment and not paying timely and sent to tax offset for payment collection.**
  - vi.  Recover through other means. Describe the activities and the results of these activities based on the most recent analysis:
  - vii.  Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis:
  - viii.  Other. Describe the activities and the results of these activities:
- c. Does the Lead Agency investigate and recover improper payments due to unintentional program violations?



No.

Yes.

If yes, check and describe below any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity.

- i.  Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: **The Lead Agency does not pursue repayment on amounts below \$100. The Lead Agency tracks improper payments below \$100. These are often a small error and do not require technical assistance. For example, a child care provider may enter incorrect hours for one day, causing an overpayment that is less than \$100.**
- ii.  Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: **When an improper payment is determined, the Lead Agency works with BFSD to establish an accounts receivable for the improper payment. BFSD manages the payments and recovery of the improper payment. The provider or family is issued an overpayment notification letter, which includes the determination, amount of overpayment, and directions for appeal. Only one improper payment was appealed in 2020. 2021-2022 there were no appealed improper payments.**
- iii.  Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: **BFSD can work with a household or provider with an established improper payment to determine a repayment plan. Provider or family payment plans allow the Lead Agency to recover improper payment. BFSD establishes a repayment plan with a client unless the client chooses to pay the improper payment in full. The Lead Agency will work with BFSD on tracking that overpayments have a current repayment agreement. In 2021-2022, child care providers may have had a current overpayment and still received subsidy payments. Now, child care providers with an overpayment must maintain compliance to receive subsidy payments. At initial and annual re-determination, a parent's overpayment compliance is verified. If a parent is not in compliance, then they are not eligible for child care assistance The Lead Agency tracks this data to determine if there are denials of eligibility based on these criteria.**
- iv.  Reduce payments in subsequent months. Describe the activities and the results of these activities based on the most recent analysis:
- v.  Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: **When a parent or child care provider is in default on an improper payment, BFSD will establish a tax intercept. This ensures an improper payment can be recovered if a child care provider receives a state tax refund. In 2021 and 2022, one child care provider**

**each year was issued an overpayment and sent to tax offset for payment collection.**

- vi.  Recover through other means. Describe the activities and the results of these activities based on the most recent analysis:
  - vii.  Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis:
  - viii.  Other. Describe the activities and the results of these activities:
- d. Does the Lead Agency investigate and recover improper payments due to agency errors?

No.

Yes.

If yes, check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- i.  Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe the activities and the results of these activities based on the most recent analysis: **If an investigation determines an improper payment is due to an error caused by the Lead Agency or a scholarship contractor agency, the Lead Agency does not pursue repayment. However, if a family receiving benefits is determined to be above 85% state median income, then recovery of the improper payment is sought. The family is issued an overpayment notification letter, which includes the facts of the determination of overpayment, amount of overpayment, direction to satisfy the overpayment, and direction for appeal of the overpayment assessment. During 2020-2023, no overpayment was pursued based off a family being over 85% SMI.**
- ii.  Coordinate with and refer to the other State/Territory agencies (e.g., State/Territory collection agency, law enforcement agency). Describe the activities and the results of these activities based on the most recent analysis: **The Business and Financial Services Division (BFSD) is the state agency tasked with the pursuit of overpayment collections. A family in overpayment status establishes a payment plan with BFSD. The plan is in effect until the overpayment is satisfied with no outstanding balance. BFSD furnishes the Lead Agency with a monthly status on all overpayments resulting in the collection of improperly issued funds. The Lead Agency meets regularly with BFSD to pursue overpayments based on fraud and to bring both child care providers and parents into compliance.**
- iii.  Recover through repayment plans. Describe the activities and the results of these activities based on the most recent analysis: **BFSD establishes improper payment to determine a repayment plan. Provider or family p payment plan allow the Lead Agency to recover improper payments in full. The Lead Agency meets regularly with BFSD to pursue overpayments based on fraud and to bring both child care providers and parents into compliance.**
- iv.  Reduce payments in subsequent months. Describe the activities and the results

of these activities based on the most recent analysis:

- v.  Recover through State/Territory tax intercepts. Describe the activities and the results of these activities based on the most recent analysis: **When a family is in default on an improper payment, BFSB establishes a tax intercept ensuring the improper payment is recoverable if a family receives a state tax refund. The result of this activity is a higher recovery rate of improperly issued funds. In 2021 and 2022, one child care provider each year was issued an overpayment and sent to tax offset for payment collection.**
  - vi.  Recover through other means. Describe the activities and the results of these activities based on the most recent analysis:
  - vii.  Establish a unit to investigate and collect improper payments and describe the composition of the unit. Describe the activities and the results of these activities based on the most recent analysis:
  - viii.  Other. Describe the activities and the results of these activities:
- e. What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to intentional program violations or fraud? Check and describe all that apply:
- i.  Disqualify the client. Describe this process, including a description of the appeal process for clients who are disqualified. Describe the activities and the results of these activities based on the most recent analysis: **In its Administrative Rule, the Lead Agency can issue an Intentional Program Violation (IPV) whether an overpayment is issued or not. Clients may be disqualified from participation after the second IPV is issued up to a period of seven years. Clients can appeal the IPV through the Fair Hearing Process. Directions for appealing are included with all IPV notifications. The process begins with an appeal for an administrative review by the Lead Agency of the case. The review is conducted by a member of the Lead Agency's subsidy unit. If the review is found in the client's favor, the client is reinstated in the program. If the administrative review upholds the previous disqualification, the client may seek redress through the Office of Administrative Hearing. The client submits a request for a hearing through the Office of Administrative Hearing. The office schedules a hearing with the client and the Lead Agency as well as any other parties relevant to the case. Hearings are presided over by an administrative law judge. The administrative law judge decides the outcome and instructs the Lead Agency in writing to either uphold the previous decision or to reinstate the client. Between 2020-2022 there were no appealed improper payments for clients. No parent was disqualified from receiving the child care subsidy.**
  - ii.  Disqualify the provider. Describe this process, including a description of the appeal process for providers who are disqualified. Describe the activities and the results of these activities based on the most recent analysis: **In its Administrative Rule, the Lead Agency can issue an Intentional Program Violation (IPV) whether an overpayment is issued or not. Providers may be disqualified from participation after the second IPV is issued up to a period of seven years. Providers can appeal the IPV through the Fair Hearing Process. Directions for appealing are included**

with all IPV notifications. The process begins with an appeal for an administrative review by the Lead Agency of the case. The review is conducted by a member of the Lead Agency's subsidy unit. If the review is found in the provider's favor, the provider is reinstated in the program. If the administrative review upholds the previous disqualification, the provider may seek redress through the Office of Administrative Hearing. The provider submits a request for a hearing through the Office of Administrative Hearing. The office schedules a hearing with the provider and the Lead Agency as well as any other parties relevant to the case. Hearings are presided over by an administrative law judge. The administrative law judge decides the outcome and instructs the Lead Agency in writing to either uphold the previous decision or to reinstate the provider. Between 2020-2022 there were no appealed improper payments for providers. No child care provider was disqualified from receiving the child care subsidy.

- iii.  Prosecute criminally. Describe the activities and the results of these activities based on the most recent analysis:
- iv.  Other. Describe the activities and the results of these activities based on the most recent analysis:

## Appendix 1: Lead Agency Implementation Plan

The Appendix will be available for Lead Agencies to use in CARS after the Plan approval letter is issued.

For each non-compliance, Lead Agencies must describe the following:

- **Action Steps:** List the action steps needed to correct the finding (e.g., update policy manual, legislative approval, IT system changes, etc.). For each action step list the:
  - **Responsible Entity:** Indicate the entity (e.g., agency, team, etc.) responsible for completing the action step.
  - **Expected Completion Date:** List the expected completion date for the action step.
- **Overall Target Date for Compliance:** List date Lead Agency anticipates completing implementation, achieving full compliance with all aspects of the findings. (Note: Compliance will not be determined until the FFY 2025-2027 CCDF Plan is amended and approved).

## Appendix 1: Form

[Plan question with non-compliance and associated provision will pre-populate based on preliminary notice of non-compliance]

A. Action Steps for Implementation	B. Responsible Entity(ies)	C. Expected Completion Date
Step 1:		
Step 2 (as necessary):		
[Additional steps added as necessary]		
Overall Target Date for Compliance:		