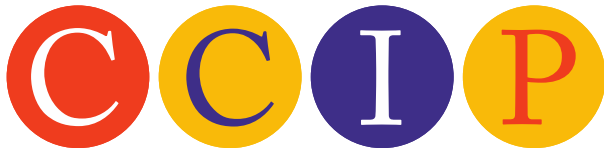


# Annual Conference 2018:CCIP Hot Topics



C A L I F O R N I A



Child Care Initiative Project



Join the Network CCIP Team for a conversation about recent trends and upcoming plans. Bring any burning questions or hot tips you'd like to discuss and share your thoughts about how to keep CCIP growing to better serve children, families, and the providers who work with them.



California Child Care Resource & Referral

N E T W O R K

# Ice Breaker



C A L I F O R N I A



Child Care Initiative Project

# Why do caregivers participate in CCIP?

---



C A L I F O R N I A



Child Care Initiative Project

# Agenda

---



- Updates
- CCIP expansion
- Upcoming due dates
- License-exempt care
- Activity: Hot topic groups

C A L I F O R N I A



Child Care Initiative Project



C A L I F O R N I A



Child Care Initiative Project



# Community Care Licensing Updates

---



- Expanding their reach
- New inspection tool
  - ❖ send comments and feedback to [inspectionprocess@dss.ca.gov](mailto:inspectionprocess@dss.ca.gov) by November 1st, 2018.
- Safe Sleep Regulations (see handout)

C A L I F O R N I A



Child Care Initiative Project

# QCC Training and Trainer Approval

---

Quality Counts California (QCC) Training and Trainer Approval Process (TTAP) is developing an approval process for QCC Professional Development (21hrs).

Intent:

- To improve and signal the quality of trainings broadly throughout the early learning and care community
- Use for the California Commission on Teacher Credentialing for permit renewals.



C A L I F O R N I A



Child Care Initiative Project

# California Early Childhood Online (CECO)

---

## Cohort Training

CECO online modules watched as a part of a group, in a cohort, can be utilized as a part of CCIP trainings.

- If you are using one device to view the video and have facilitated discussion and interaction with participants there is a way for participants to get a certificate of completion.
- Cohort training hours in English and Spanish can count towards Advanced Trainee hours. Cohort trainings in languages other than English or Spanish will have to be translated; therefore, they can count toward Trainee requirements.

<https://www.caearlychildhoodonline.org/>

C A L I F O R N I A



Child Care Initiative Project



# Preventative Health Training of Trainers

---



**Who:** California Childcare Health Program, UCSF School of Nursing

**Date:** March 11 & 12, 2019

**Location:** Sierra Health Foundation in Sacramento

C A L I F O R N I A



Child Care Initiative Project

# Preventative Health Training of Trainers



To meet new CCDBG/CCDF Requirements, CDE/ECLD will be requiring that providers complete:

- 1. First year: 16 hours of training: 8 CPR/FA + 8 PHSP**
- 2. Renewals/Annually: PHSP Training TBA (e.g. MCOE online training, CCIP H&S CCDF Aligned training guide, etc.). Topics to include:**
  - CPR/FA
  - Prevention and control of infectious diseases (including immunization);
  - SIDS and safe sleep practices;
  - Administration of medication;
  - Prevention/response to food allergies;
  - Building and physical premises safety;
  - Child Development
  - Shaken baby syndrome and head trauma;
  - Emergency preparedness and response planning, for natural or man-caused events;
  - Storage of hazardous materials and bio contaminants;
  - Precautions in transporting children; and

C A L I F O R N I A



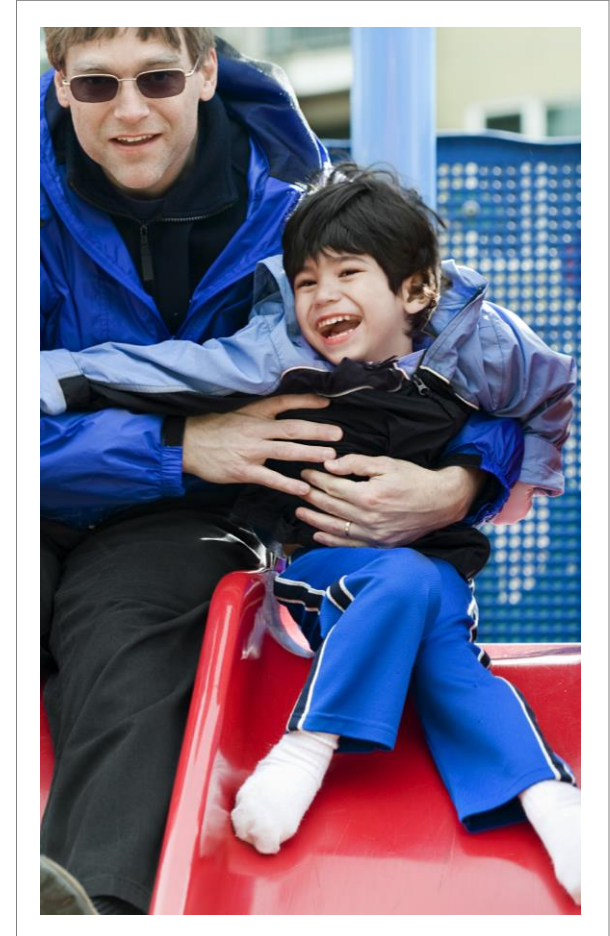
Child Care Initiative Project

# Family, Friend, & Neighbor/License-exempt Article

.....

“Helping Family, Friend, and Neighbor Care Providers Meet New Requirements Under the Child Care and Development Block Grants Reauthorization Law”, Karen Schulman and Daria Crawford

- **Inspections:** one annual inspection—which does not need to be unannounced—for license-exempt providers (except providers related to all children in their care) receiving CCDBG funds.
- **Training:** providers—including license-exempt providers—receiving CCDBG funds complete minimum pre-service or orientation health and safety training as well as ongoing training.
- **Background Checks:** license-exempt providers receiving CCDBG funds, except for relative providers—to undergo comprehensive criminal background checks prior to employment and to maintain employment.



C A L I F O R N I A



Child Care Initiative Project

# CCIP Expansion



C A L I F O R N I A



Child Care Initiative Project

# CCIP Expansion: Local Supports

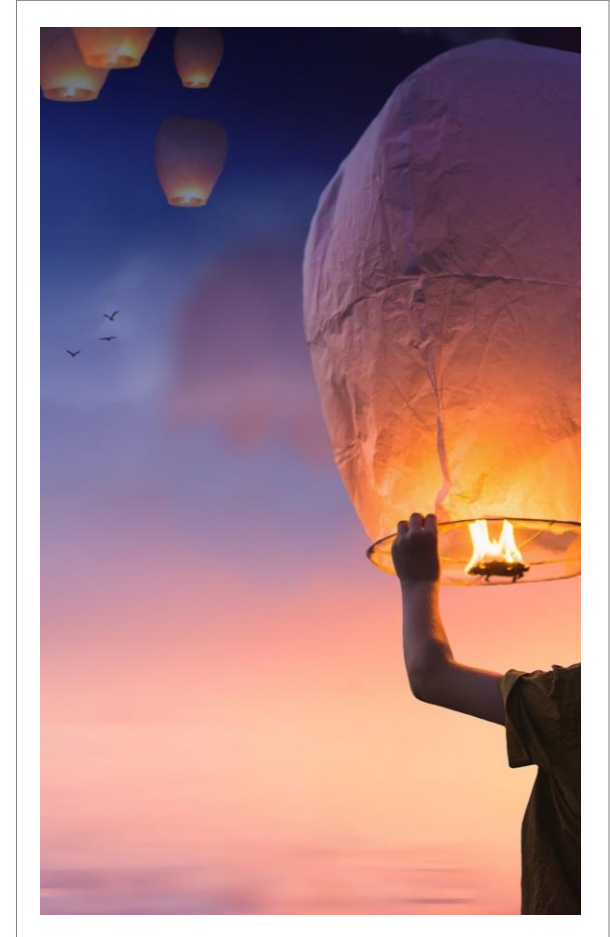
---

*Supporting the full continuum of home-based caregivers, while increasing access to healthy, safe, responsive care for infants & toddlers across California!*

## Capacity Building

### New Licensee:

- Technical Assistance
- Home visit (prior to CCL Pre-licensing visit)
- Up to \$1,000 in materials or reimbursable expenses for licensure, including: fingerprinting for the entire household (per CCLD), costs for CPR/FA/HS, fire extinguishers, baby gates, etc.



C A L I F O R N I A



Child Care Initiative Project



# CCIP Expansion: Local Supports Contin.

---

*Support to the full continuum of home-based caregivers*

## Quality Improvement

- Monthly activity for LEP/FFN beginning Jan., 2019
- Advanced Trainee (45 cumulative hrs. of training)



C A L I F O R N I A



Child Care Initiative Project

# CCIP Expansion: Network Supports

---



## GLC Play-based Curriculum for LEP/FFN

Expand support to the full continuum of home-based caregivers



## Consistent Messaging, Outreach, and Support

Establish a statewide outreach campaign & consistent support for new licensees



## CCDF aligned H&S Training for the full continuum (LEP/FCCH)

Develop training curriculum that complements the GLC Training Modules & meets CCDF H&S training requirements



## Quality Assurance

Develop a quality assurance tool

C A L I F O R N I A



Child Care Initiative Project

# GLC Modules Training Modules

---

1. The Vital Role of the Caring Provider: Safety, Health, and Nutrition
2. Discipline, Guidance, and Family Support; Character Education
3. Playing is Learning
4. Family Literacy

[https://www.rrnetwork.org/growing\\_learning\\_caring\\_glc\\_project](https://www.rrnetwork.org/growing_learning_caring_glc_project)

C A L I F O R N I A



Child Care Initiative Project

# Upcoming Due Dates



C A L I F O R N I A



Child Care Initiative Project

# Project Plan

---



Email from [smccullough@rrnetwork.org](mailto:smccullough@rrnetwork.org) on **September 28** went to Primary contacts and included a unique link to their agency's Project Plan.

What you need to know:

- It is a “living document”
- Please update your responses from FY 17 -18
- Answer new questions

***You will have 30 days after receiving your CCIP contract to submit the Project Plan to the Network.***

C A L I F O R N I A



Child Care Initiative Project



# State Match [www.rrnetwork.org/ccip\\_state\\_match](http://www.rrnetwork.org/ccip_state_match)

.....

*This electronic form needs to be completed by November 30, 2018:*

<https://form.jotform.com/ccip/ccip-state-match-fy-18--19>

## Documentation:

- **Acceptance** (requires a 2:1 local match that supports CCIP activities):
  - Local funder letter (doesn't need to reference CCIP)
  - or
  - Local funder contract cover sheet
- **Relinquishment** (if no local matching \$\$ are available)
  - Letter on agency letterhead

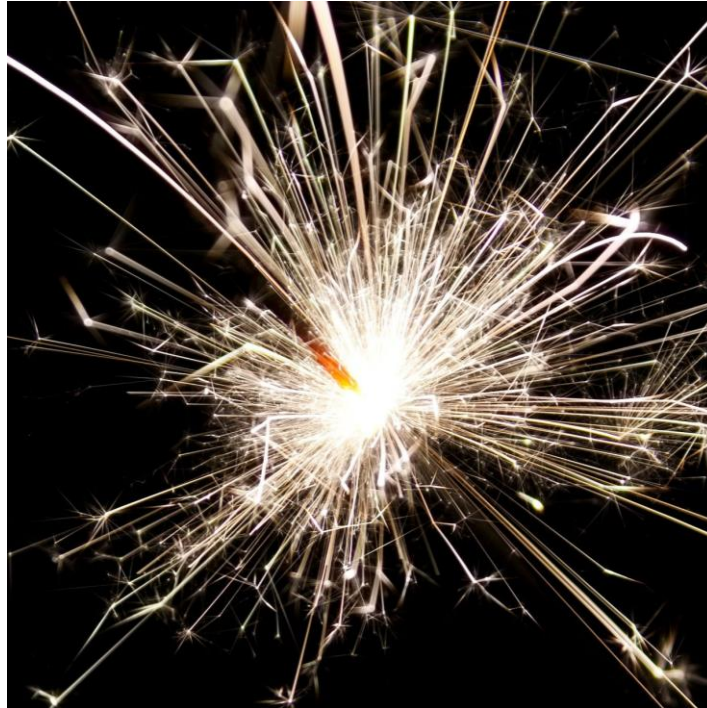
*If no funding is secured or additional support is needed, the Network is available to provide technical assistance.*

C A L I F O R N I A



Child Care Initiative Project

# Hot Topic Groups



C A L I F O R N I A



Child Care Initiative Project

# Activity

---

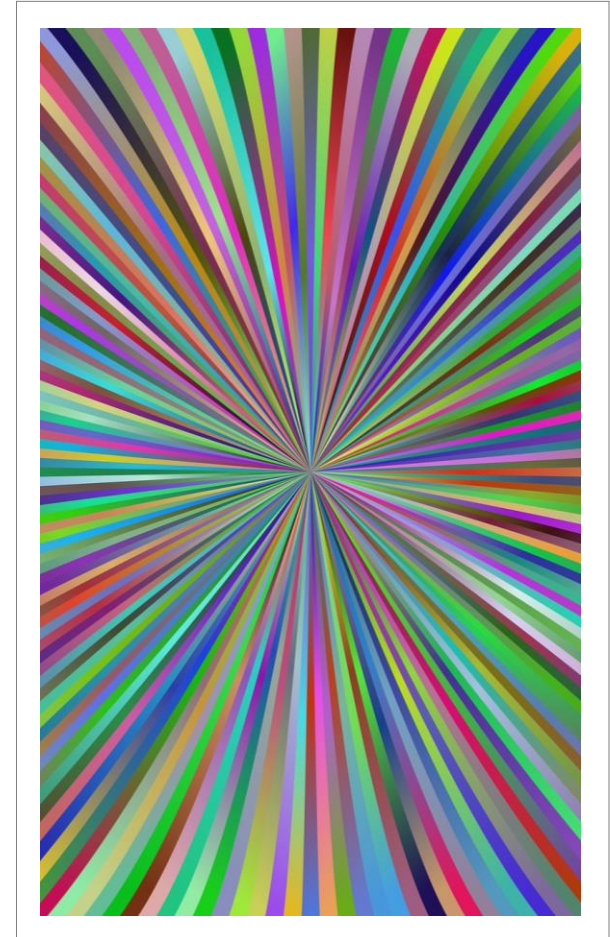
1. Identify a note taker
2. Elect a reporter (someone to share back)
3. Each group will be given 20 minutes to discuss the topic (the green table tent) at your table, they are:
  - Outreach
  - FFN Supports
  - Capacity Building
  - Quality Improvement
  - CCDF: Health & Safety

*Feel free to move to another table if you'd like.*

C A L I F O R N I A



Child Care Initiative Project



# Thank you!



*This workshop was funded by the California Department of Education (CDE), Early Learning and Care Division (ELCD)*

# Network Provider Services, CCIP Team

---

## Statewide CCIP Support

Domenica Benitez, Director of Provider Services: [dbenitez@rrnetwork.org](mailto:dbenitez@rrnetwork.org)

Helen Woodlee, Child Care Initiative Project Manager: [hwoodlee@rrnetwork.org](mailto:hwoodlee@rrnetwork.org)

Rita Edmunds, Training & Events Coordinator: [redmunds@rrnetwork.org](mailto:redmunds@rrnetwork.org)

Gretchen Schwab, Data & Technology Coordinator: [gschwab@rrnetwork.org](mailto:gschwab@rrnetwork.org)

Salaine McCullum, [smccullum@rrnetwork.org](mailto:smccullum@rrnetwork.org)

## Regional Coordinators (RC)

**Bay Area:** Grace Hartman: [ghartman@rrnetwork.org](mailto:ghartman@rrnetwork.org)

**North:** TBD (contact Helen Woodlee)

**South:** Disa Lindgren: [dlindgren@rrnetwork.org](mailto:dlindgren@rrnetwork.org)

**Central Valley:** Juan Ramirez: [jramirez@rrnetwork.org](mailto:jramirez@rrnetwork.org)

## ECE Workforce Registry: CCIP/RR-related Training & Technical Assistance

Pamela Becwar, [pbecwar@rrnetwork.org](mailto:pbecwar@rrnetwork.org)

C A L I F O R N I A



Child Care Initiative Project



# Track Your Professional Development!

---

Use the Guidebook App or the QR code to...

- Track your workshop attendance in the ECE Workforce Registry
- &
- Complete a workshop evaluation



C A L I F O R N I A



Child Care Initiative Project



Expansion FAQ  
FY 2018 -2019

## HISTORY

AB 2292 Billion for Babies was fully funded in the FY 2018-2019 California State Budget. The Child Care Initiative Project (CCIP) was designated to receive one-time federal Child Care and Development Fund dollars as a result of this legislation.

## CAPACITY BUILDING

New Licensee Supports:

### *\$1,000 Reimbursement*

Up to \$1,000 in materials or reimbursable expenses for licensure may be spent to support a CCIP participant, including: CCL Orientation fee, application fee, fingerprinting for prospective provider and others in the household 18+ years, cost of CPR/FA and Preventative Health & Safety Practices certification, TB test, fire extinguisher and other equipment that may be needed for a prospective child care provider to become licensed e.g., smoke detector, baby gate, cabinet locks, etc. (see [Policies & Procedures](#), page 4).

- Q: Should the start- up cost of up to \$1000 be reimbursed incrementally or after a participant is licensed?

A: It will be most helpful to the participant if expenses are reimbursed incrementally, for example, first the application fee and fingerprinting, then moving onto the health and safety

training, and a fire extinguisher could be given to the prospective licensee during the home visit provided by CCIP prior to the CCL pre-licensing inspection.

- Q: Can start-up costs incurred before June 30th by participants licensed in July be reimbursed after July 1st?

A: Reimbursable expenses must be paid for during the same fiscal year that they were incurred.

- Q: Do prospective licensees need to complete 25 hours of training in order to be reimbursed for licensing related costs?

A: No, the purpose of the reimbursements and material support is to increase the number of child care slots in family child care, particularly for infants and toddlers. CCIP training is provided to improve the quality of care and is not a capacity building activity.

- Q: Is there a limit to how much each agency can reimburse a New Licensee for? Is there a limit to the number of New Licensees an agency can provide reimbursement to?

A: Each New Licensee can be reimbursed up to \$1,000. How many New Licensees an agency can provide reimbursements for depends on the amount of the CCIP expansion received and the way each contractor budgets the funding received.

- Q: What start-up costs can't be reimbursed?

A: Costs that can't be reimbursed are outlined in the CCIP program requirements

<https://www.cde.ca.gov/fg/aa/cd/documents/ccip1819.doc> (see page 5 & 6). These funds may not be used to pay for: gift certificates or gift cards, stipends or cash payments, construction of a facility to meet basic licensing requirements, purchase or improvements of land, or food.

- Q: Can the \$1,000 pay for mileage reimbursement to attend Health & Safety training?

Prospective providers sometimes need to travel out of the county to access this required training.

A: Yes, if an agency's Health and Safety Activities (CHST) contract has already been expended.

### *Home visits*

A pre-licensing home visit should be offered by each CCIP contractor to Prospective New Licensees prior to the Community Care Licensing (CCL) Pre-Licensing Inspection.

- Q: What if a provider declines the visit?

A: CCIP participants are not required to accept this home visit, but they have proven to be

helpful to those seeking CCL licensure. It is important to communicate that the intention of the

visit is to assist the Prospective New Licensee with preparation for the CCL Pre-licensing Inspection. We have heard from CCL staff across the state that these CCIP home visits result in participants being able to open their home to children as New Licensees sooner and more efficiently.

# QUALITY IMPROVEMENT

## Advanced Trainee

An Advanced Trainee is a CCIP participant who has completed a total of 45 hours of CCIP training. Since CCIP training is cumulative, a participant does not need to complete all of the training in a single year. These 45 hours of training align with Level 3 of the California Early Learning Career Lattice, which requires 16 hours of health & safety training and mandated reporter training + 45 hours of training (state approved and/or Resource & Referral agency training).

- Q: Can someone be both a Trainee and an Advanced Trainee during the same year?

A: Yes, the new report being built in the ECE Workforce Registry will date stamp when a participant meets project requirements. This will allow you to tally your Trainees and Advanced Trainee according to project year.

## Family, Friend, & Neighbor (FFN)/License-exempt (LE) Activity

Starting in January 1, 2019, one activity must be offered each month to license-exempt home-based child care providers (i.e., family, friend, neighbor, nanny) in the service area. These monthly activities should be available particularly to home-based license-exempt child care providers serving children with a child care subsidy.

- Q: What activities should CCIP be conducting for FFN providers?

A: Here is a list of acceptable activities:

- |   |                            |
|---|----------------------------|
| – CPR/First Aid (EMSA-approved 8 hours)                           | – Nanny training           |
| – Preventative Health and Safety training (EMSA-approved 8 hours) | – Babysitting?             |
| – Home visit  | – Lending Library          |
|   | – Grandparent class        |
|   | – Lending library activity |

- Q: Winter weather often prevents people from coming to CCIP events; can I offer more than one event in a month during another time of year instead?

A: CCIP activities need to be offered on a monthly basis. If your CCIP resources are sufficient, you can offer more than one activity for FFN participants per month.



- Q: Can we use CCIP dollars to provide incentives to license-exempt child care providers?  
A: Yes

# REPORTING

Starting this year, collecting and reporting outreach and incentive data will be required. This information will need to be entered into the [CCIP Database](#). The CCIP [sign-in sheet](#), a required form, has also been updated to collect information from CCIP participants regarding the number of children in care and type of child care provider. Tracking forms are available to assist you in collecting this data, [here](#).

- Q: Do the monthly CCIP activities conducted for license-exempt providers need to be added to the CA ECE Workforce Registry? Do these activities need to be tracked in a new way to identify license-exempt caregivers specifically as a target audience?

A: Yes, the Registry is the state's data collection system for quality improvement professional growth activities. In order to be able to track license-exempt providers in the Registry, they will each need a Registry ID. Please keep your sign-in sheets as additional documentation as we know that not all license-exempt providers have Registry IDs. We will ask you to write about your license-exempt activities in the CCIP Year-End report. Note: These new funds are targeted to serve child care providers who care for children with a subsidy.

- Q: If a Preventative Health and Safety training is provided as a CCIP training, should this be recorded in the registry? What funding stream should we use?

A: CPR/First Aid/PHP are activities that should be entered in the Registry using your California Health and Safety Training & California Preventative Health and Safety Training program codes. Whether the CCIP program code is used for CPR and First Aid training, depends on if CCIP is paying for staff time/contractor time or if your agency is reimbursing the provider's cost (as an incentive).



## Expansion

Starting July 1, 2018

*Working to increase access to quality infant & toddler care!*

### Primary Focuses of the CCIP Expansion



Support  
the Continuum  
of Home-based  
Child Care



Consistent  
Messaging,  
Outreach, and  
Support



Monthly License-  
Exempt Activities



Quality Assurance  
Tracking

### Monthly license-exempt activities, such as:



Growing Learning Caring (GLC) Groups



Preventative H&S/CPR/First Aid  
Training (EMSA approved- 16 hrs.)



Home Visits

These activities should include family, friend, neighbor, and nanny caregivers, caring for children receiving a subsidy.

### New Licensee supports:



Technical Assistance



Home Visit (prior to the CCL  
pre-licensing inspection)



Reimburse Start-up Cost

Up to a \$1,000 of in material or FCC licensing expenses including but not limited to: orientation & application fees, fingerprints for the entire household, CPR/FA/HS, etc.

### Reporting & Tracking:

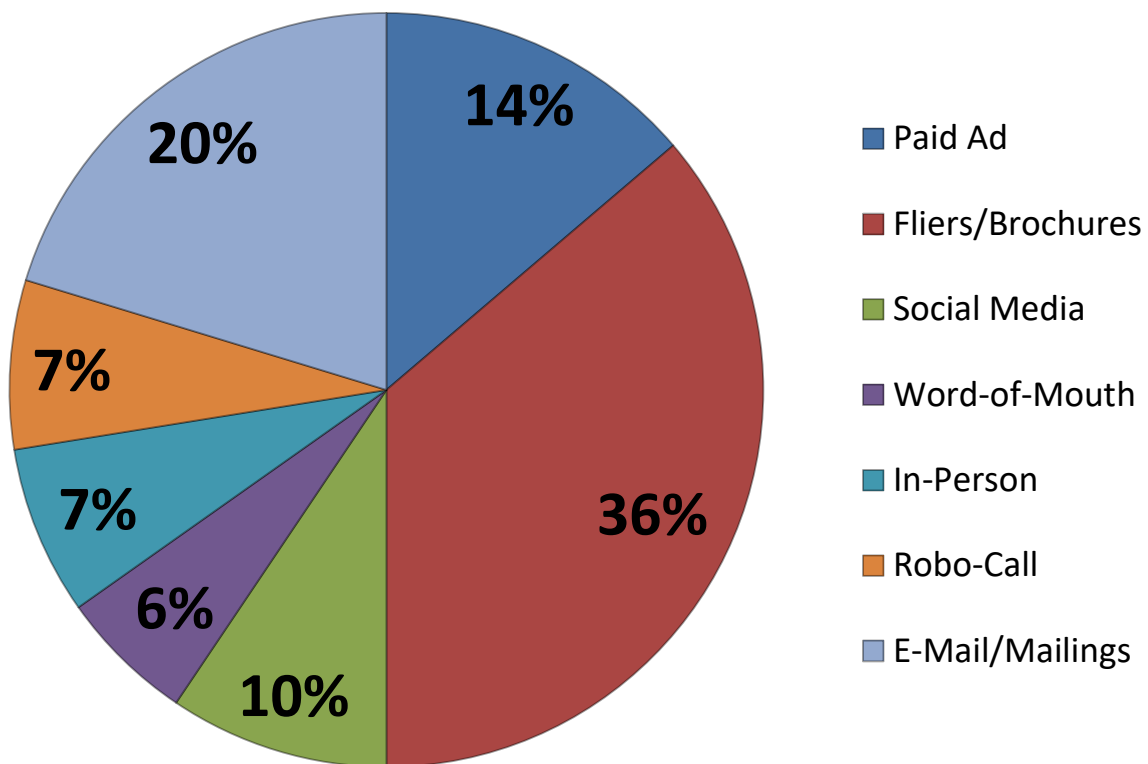
New fields will be collected in the CCIP Database. Sites will be notified as soon as the CCIP Database is updated. All home-based providers' quality improvement efforts are collected in the California Early Care and Education Workforce Registry.



## Outreach

**Know your audience:** The tools that will be most effective for your agency depends on who you're trying to reach. Assess what has worked for you in the past, and if possible, consider testing out an alternative.

### Percentage of Outreach by Type of Outreach



- Paid ads include radio, television, newspaper, etc.
- Social media users prefer **Facebook**, however a few agencies use **Twitter** and **Pinterest**. Another popular platform is **Instagram**.
- In-Person outreach was generally conducted at job fairs or community college campuses, with an emphasis on interested individuals being able to **start their own small business**. Attend community events, resource and job fairs, and community college workshops.



WILL LIGHTBOURNE  
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY  
**DEPARTMENT OF SOCIAL SERVICES**  
744 P Street • Sacramento, CA 95814 • [www.cdss.ca.gov](http://www.cdss.ca.gov)



EDMUND G. BROWN JR.  
GOVERNOR

## Safe Sleep Regulation Concepts Community Care Licensing – Child Care Program

### Sleep Surface:

- Mattresses must be firm with a fitted sheet that is appropriate to the mattress size that fits tightly on the mattress, and overlaps the underside of the mattress so it cannot be dislodged
- Mattresses shall be made specifically for the size crib or play yard in which they are placed
- No loose articles and soft objects in the crib or play yard
- Bumper pads are not allowed
- No objects can be hanging above or attached to the side of the crib

### Family Child Care Home:

- Crib or play yard placement will not hinder entrance or exit to and from the space where infants are sleeping
- Each infant's bedding will be used for him/her only
- Bedding shall be changed and sanitized daily, or more often if needed.

### Pacifiers:

Pacifiers are allowed in cribs/ play yards if the following provisions are in place:

- An infant cannot be forced to take a pacifier when put down to sleep
- Nothing can be attached to the pacifier
- The pacifier must be specific to the infant it is being given to

### Individual Sleeping Plan:

- An Individual Sleeping Plan will be completed for each infant that is 12 months of age or younger that the facility has in care and maintained in the child's record

The Plan will include the following:

- Usual Sleeping Times
- Equipment the infant sleeps in
- Length of time that is usual for them to sleep
- Pacifier use
- Infant's ability to roll over and back on their own
- Medical Exemption documentation

### Back to Sleep

- The licensee must place infants aged 12 months or younger on their backs for sleeping
- The requirements set forth in the above may not apply if there is a medical exception included in the infant's Individual Infant Sleeping Plan
  - Medical exemptions must be signed by a licensed physician or their designee
  - The medical exemption must be included in the child's file
- Infants must have an Individual Infant Sleeping Plan completed and signed by an authorized representative. The plan should indicate that the infant is able to roll from their back to their tummy as well as from their tummy to their back. However, they must be placed on their back when first laid down to sleep; in the event the infant changes position they may remain in the position that suits them if the plan is completed appropriately

- If the infant is able to roll back and forth for the first time in care the provider may then fill out the appropriate section of the Individual Infant Sleeping Plan, notify the authorized representative and have them sign the form when they pick up the child

### **Sleeping**

- Infants must not be swaddled while in care
- Infants head must not be covered while sleeping
- If an infant falls asleep before being placed in a crib or play yard, the licensee must move the infant to a crib or play yard as soon as possible

#### **Family Child Care Home:**

- No infant shall be forced to sleep, to stay awake or to stay in the sleeping area

### **Supervision:**

#### **Family Child Care Home:**

The licensee must supervise infants while they are sleeping and adhere to the following requirements:

- The licensee will physically check on the infant every 15 minutes while the infant is sleeping, as well as look for any signs of distress and take proper emergency steps as detailed in the proposed regulations
- The licensee must be near enough to the sleeping infant to be able to hear them should they awaken
- If the infant/s is sleeping in a separate room from where the licensee is stationed, the door to the room the infant/s is sleeping in must remain open at all times
- The licensee must be on the same floor as the sleeping infant
- A monitor may be used in the home in addition to the above requirements for supervision but cannot be used in place of them

#### **Child Care Center:**

- A staff person must be in the designated sleeping area, visually observing and able to hear the infants at all times
  - A transparent wall or half wall does not take the place of a staff person being in the designated sleeping area with constant visual supervision
- While supervising sleeping infants a staff person must look for any signs of distress and take proper emergency steps as detailed in the proposed regulations

### **Overnight Care:**

#### **Family Child Care Home:**

- In addition to all Infant Safe Sleep requirements the following requirements must be followed:
- The provider must remain awake whenever children are awake
- The door to the room where the provider is sleeping as well as the door to the room where the children in care are sleeping must remain open
- If the sleeping arrangements are not situated in such a way that the provider can be assured of hearing a child waken, a monitor system must be used
- The monitor must be maintained and in good working order at all times
- The monitor may be used in place of 15 minute checks if infant has fallen asleep and the licensee is going to sleep as well.
- Clean bedding and nightclothes must be available to children in care



**INDIVIDUAL INFANT SLEEPING PLAN**

Date of plan: \_\_\_\_\_

**SECTION A: INFANT'S INFORMATION**

Infant's Name	Gender	Birth Date
Authorized Representative's Name (Primary Contact)		Phone Number
Authorized Representative's Name (Secondary Contact)		Phone Number

**SECTION B: SLEEPING ENVIRONMENT INFORMATION**

At home, the infant sleeps in: <input type="checkbox"/> Crib <input type="checkbox"/> Play Yard* <input type="checkbox"/> Other (Specify) _____	What are the usual sleeping hours? _____ _____
*Not applicable to Child Care Centers. Play Yard is defined in CCR, Title 22 for Family Child Care Homes 102352. Approximately how long does the infant generally sleep for at a time during the daytime? _____ minutes _____ hours	Does the infant use a pacifier? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Sometimes If yes, brand: _____

**SECTION C: INFANT'S ABILITY TO ROLL**

My child, \_\_\_\_\_ is able to roll from their back to stomach and stomach to back beginning \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

Authorized Representative Signature	Date
-------------------------------------	------

**SECTION D: FIRST TIME INFANT ROLLED OVER (If while in care in current facility)**

\_\_\_\_\_ is able to roll from their back to stomach and stomach to back in care on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ at \_\_\_\_\_ the authorized representative was notified at \_\_\_\_\_.

Authorized Representative Signature (to be completed upon pick up or no later than next business day)	Date
---	------

**SAMPLE** JUN 5 2010

**SECTION E: MEDICAL EXEMPTION**

Does the infant have a medical exemption? Yes ☐ No ☐

If the infant has a medical exemption to sleep in a position other than on their back as required, have a licensed physician provide instruction on an alternate sleeping position.

The following shall be included with the medical exemption:

- Position and instructions on how the infant shall be placed to sleep
- Duration the exemption is to be in place
- The licensed physician's contact information
- Signature from the approving physician

ATTACH REQUIRED DOCUMENTS TO THIS FORM AND MAINTAIN IN INFANT'S FILE PURSUANT TO TITLE 22, SECTION 101221(d) FOR CHILD CARE CENTERS OR SECTION 102425(c)(2) FOR FAMILY CHILD CARE HOMES.

I certify that all information contained in this form is complete and accurate to the best of my ability.

Authorized Representative Signature

Date