



Comments on the Mississippi Department of Human Services Division of Early Childhood Care and Development Proposed Child Care Payment Program (CCPP) Policy Manual

Mississippi Low-Income
Childcare Initiative

August 26th, 2016

**Division of Early Childhood Care and Development
Mississippi Department of Human Services
750 North State Street, Suite 507
Jackson, MS 39202**

To MDHS DECCD,

We are the Mississippi Low Income Child Care Initiative (MLICCI), a non-profit advocacy organization founded in 1998 to address issues low-income parents face in obtaining affordable child care and issues providers face serving primarily low-income communities. We work with parents and providers to understand how child care policies operate on the ground and to find solutions to problems we discover. We are submitting comments on the proposed Child Care Payment Program (CCPP) Policy Manual. We offer our recommendations by section and we appreciate your consideration of our input in finalizing CCPP policies.

We are pleased to see efforts to implement policies governing the new requirements of the 2014 Child Care Development Block Grant Act and Child Care Development Fund (CCDF) regulations. We commend efforts to ensure improvements made in the federal law are fully implemented in Mississippi. Policies aimed at avoiding interruption of service for parents and children are welcomed, such as extending the job search period upon eligibility redetermination to 90 days if the parent is unemployed, ensuring enough funds are in place to guarantee CCDF parents the same access to child care as non-CCDF parents and basing the state payment system on already most common practices in Mississippi. Other new policies, such as the requirement to assess poverty and unmet child care need by county, may lead to successful strategies at the local level.

We appreciate the opportunity to comment on the proposed policy manual. On August 20th, 2016, MLICCI hosted a meeting with more than 200 child care providers and stakeholders from across Mississippi who rely on the Child Care Payment Program (CCPP).

At the meeting, we discussed some concerns about requirements of the new law and some issues with Mississippi's child care certificate program. Of 162 child care providers we surveyed, 86% think their voices go unheard and their input is ignored by the state.

To give these voices input in the process of making policy that affects their livelihood and the families they serve, we provided comments at the public hearing on August 22nd and submitted 128 letters of input about Mississippi's child care system with signatures of providers from across Mississippi who interact with CCPP every day.

While we note the state's efforts to implement new CCDF rules, issues that affect low-income parents receiving subsidies and child care providers still need to be resolved.

We welcome the new policy manual's requirement that the state conduct a county-level analysis of poverty and affordable child care need to help identify target areas, but we note that such an analysis will consistently reveal a higher level of need than resources to meet it. Our most recent data obtained from MDHS through a records request in December 2015 showed 19,700 children receiving certificates and 14,000 on the Pending Funding list. The most recent Census data shows that an estimated 165,100 Mississippi children under the age of 12 live below the poverty level (2010-2014 American Community Survey, Table B17001).

Child care providers serving low-income communities need a robust system of CCDF delivery because they rely on subsidies to serve low-income communities. For many, a robust CCDF program would lend them more stability in serving low-income parents while offering low-income parents the most vital component of achieving work stability and economic security.

The State Should Maximize Current Year TANF Transfer to CCDF

Eighty-eight percent of child care providers we surveyed at our recent meeting said the child care certificate program did not provide enough revenue to stay open.

The certificate program, for many parents and providers, falls short of its potential. More funding is needed both to serve more eligible children and to increase reimbursement rates so providers can continue to serve low-income communities. Before Mississippi adds layers to the child care subsidy system, it should serve as many children as possible.

The state of Mississippi is currently and will likely remain in a perpetual state of unmet need. However, more unspent, carryover TANF funds spent directly on non-assistance child care for working TANF parents and on assistance child care for those in a 90-day job search/application period would help free up current fiscal year funds to be transferred to CCDF to serve more working parents who are not served by TANF but whose income is below 85% of SMI.

Mississippi can transfer up to \$8.7 million more from its TANF block grant to CCDF. This amount is enough to serve more children while also retaining adequate carryover TANF funds to be spent directly on child care assistance. This amount is also far less than how much the state typically carries over from the previous year. The unobligated TANF block grant at the end of FFY 2014 totaled \$21 million. These are funds that can be spent directly on TANF child care.

We note that Mississippi currently transfers the maximum 30% from its TANF block grant, 20% to CCDF and 10% to the Social Services Block Grant (SSBG). We note that the \$8.7 million dollar transfer to SSBG, while not directly supporting child care, does fund critical services such as protective services, case management, special investigations and *Olivia Y* compliance. We urge the state to explore if services paid for by a current year transfer from TANF to SSBG could instead be paid for directly with TANF carryover funds from the previous year or other sources. Mississippi should consider maximizing its current year TANF transfer to CCDF, given that it

provides working parents earning up to 85% of SMI with what research shows is the most effective support in keeping parents employed.

We note the state published the reimbursement rates in the CCDBG State Plan, but not in the CCPP Policy Manual. We recommend publishing these rates in both. Additional funding is needed to raise reimbursement rates, but not at the cost of serving fewer children. We recommend the state consider assessing how much additional funding would be required to raise reimbursement rates while serving more children.

The State Should Consider Implementing Allowable Alternatives to QRIS

Seventy-eight percent of child care providers we surveyed at our recent meeting said Mississippi should eliminate the Quality Rating System.

New federal rules do NOT require a Quality Rating and Improvement System (QRIS).

A multi-year MLICCI study found the average cost of attaining higher rating levels under the state's current QRS was \$11,500 per classroom, far too expensive to be within reach of providers serving low-income communities.

The state currently spends more on quality than is required by law and new rules require all states to spend more. With so many eligible children still unserved in Mississippi, the state must make tough choices. Right now, that choice should be spending only the required amount on quality and spending as much as possible on child care certificates.

The new federal rules outline 10 quality activities and states are required to spend quality funds on "...at least one of the 10 activities, (98.53)"

Given issues with the state's QRS identified through multiple MLICCI projects, we recommend the state opt for another allowable quality improvement activity and eliminate the costly QRS. The state should use quality improvement funds to finance wage stipends for child care workers to obtain higher levels of education and an incentive program to keep these workers in the child care field.

This quality improvement strategy would align with one of the allowable 10 activities under new CCDF rules:

98.53(1). Supporting the training, professional development, and postsecondary education of the child care workforce as part of a progression of professional development.

This strategy has already proven to be effective in North Carolina's WAGES program.

The State Should Create a CCPP Provider Advisory Council

Lastly, the new CCDF rules require costly and time consuming new requirements for providers, including minimum hours of staff orientation and extensive training in 10 health and safety standards by the date these policies go into effect.

Mississippi's proposed policy manual fails to contemplate additional costs for providers to comply with these new requirements. There is no additional funding to help providers comply.

MDHS needs input on and feedback about the child care certificate program from providers who use and rely on certificates. A CCPP Provider Advisory Council could provide a mechanism to achieve this. Providers that are using the CCPP can keep MDHS abreast of how the program is working. This group could also advise MDHS when new plans are being developed and all through the on-going implementation of the new rules to identify what issues they are having, such as new staff training requirements, and what solutions would work for them.

Summary of Key Recommendations

Below, we offer a summary of key recommendations followed by our comprehensive feedback by section.

Eliminate Child Support Action as a Condition for Eligibility for CCDF/CCPP

4.2(2)(E)

Ninety-one percent of child care providers we surveyed said the state's requirement that single parents initiate child support actions against the other parent keeps eligible people from applying to the program.

The new CCDF rules make clear that a primary objective for states is to increase the number and percentage of low-income children in high quality child care. This can be achieved by ensuring as many CCDF/CCPP slots go to eligible parents as possible. We recommend that Mississippi eliminate policies that act as barriers to participation for low-income single parents seeking CCDF/CCPP assistance.

To better align with the goal of new CCDF rules and to avoid policies that have disparate impacts on low-income communities of color, **MDHS DECCD should remove the requirement for parents to initiate child support action as a condition for CCDF/CCPP eligibility.**

This current state option contributes to the gap in people served vs. eligible and is particularly harmful to African American single mothers.

Extend Minimum 12-Month CCDF/CCPP Eligibility to "Referred Clients"

4.3(1)

Fifty-six percent of child care providers we surveyed said most of their child care certificates are through TANF parents AND **91% said TANF parents frequently lose their child care**

certificates. TANF and other vulnerable parents, such as those receiving assistance through TCC, need a seamless system in place. Extending minimum 12-month eligibility for TANF parents and other vulnerable groups would provide continuous care that is essential both for stabilizing families and for aligning with the CCDBG Act of 2014.

New CCDF regulations encourage states to give eligible children 12 continued months of eligibility. This is one of the key components of the new rules, meant to avoid harmful disruptions in child care which can lead to employment disruptions for parents.

The 12-month minimum eligibility period should apply to all of Mississippi’s “Referred Clients”: TANF parents, TCC, homeless, children in protective custody and HHM, whether or not their eligibility for these programs changes due to temporary or permanent ineligibility, prior to 12 months of continuous eligibility. States have this flexibility. Mississippi’s proposed policy manual makes clear that these populations are priority when referred for CCDF/CCPP certificates, however, Mississippi is holding onto the option of eliminating CCDF/CCPP prior to 12 months if parents lose TANF eligibility or eligibility under guidelines for the individual referred groups. The policy also leaves room for “Referred Clients” to be eligible for longer than a 12-month period, but providers overwhelmingly report that TANF parents lose certificates frequently.

ACF makes clear in the new CCDF NPRM that exceptions to 12-month eligibility conflict with the intent of the CCDBG Act, which clearly provides 12-month eligibility to all populations.

Based on feedback from States and various stakeholders, ACF has already considered possible exceptions to the minimum 12-month eligibility period for certain populations, such as children in families receiving TANF and children in protective services, but has decided that such special considerations would be in conflict with the CCDBG Act, which clearly provides 12-month eligibility for all children.

<https://www.federalregister.gov/articles/2015/12/24/2015-31883/child-care-and-development-fund-ccdf-program#h-47>

Mississippi’s current policy, in its failure to guarantee at minimum 12 months of eligibility to “Referred Clients” while still exempting them from redetermination, conflicts with the new CCDF regulation’s overarching goal of avoiding interruption of child care services, increasing stability for low income working parents and ensuring that CCDF families have the same access to child care that non-CCDF families do. While being exempt from redetermination may be on the surface a lesser burden for “Referred Clients”, the alternative of re-application after a formal termination of child care assistance with no guarantee of an automatic extension of assistance (no guaranteed certificate) may result in a more severe disruption of service than requiring “Referred Clients” to be re-determined every 12 months along with other populations.

Remove Requirement for Referred Clients, Particularly TANF Parents, to Reapply to CCDF/CCPP Due to Eligibility Changes for Referral Programs Prior to Minimum 12-month Eligibility Period

4.4

Mississippi's policy manual makes clear in 4.3(1), 4.3(2) and 4.4(1) that all families and children are afforded a minimum of 12 months of eligibility as long as they are still eligible for CCDF/CCPP and that redetermination occurs at the end of the 12-month period.

4.3 12-MONTH CCPP ELIGIBILITY PERIOD

(1) In accordance with CCDBG (658E(c)(2)(N)(i)(I)), families who are determined eligible to participate in the CCPP shall be afforded a minimum of twelve (12) months of eligibility for assistance provided that the family remains eligible. The 12-month eligibility period begins on the date that the client is determined eligible.

(2) At the end of the 12-month eligibility period, a redetermination of eligibility for families who receive assistance from CCPP will occur per the procedures described in Section 4.4.

4.4 REDETERMINATION OF ELIGIBILITY

(1) Children receiving child care assistance through CCPP shall be redetermined for eligibility at the end of the 12-month eligibility period in accordance with CCDBG 658E(c)(2)(N).

However, Mississippi's policy manual requires "Referred Clients" to reapply if they become ineligible for the program through which they were referred to CCDF/CCPP 4.4(2)(A) because they are "exempt from redetermination". While TANF parents, for instance, may be eligible for CCDF/CCPP for a longer period than 12 months as long as they maintain eligibility for TANF, they also may not receive TANF for 12 consecutive months. For example, Mississippi's policy would require TANF parents who are still eligible for CCDF/CCPP but lose their eligibility for TANF prior to the end of the 12-month eligibility period to go through another application process after MDHS formally terminates their child care assistance. The policy does not make clear that a certificate is guaranteed upon reapplication for "Referred Clients," while it does guarantee an extension of 12 months of eligibility for other priority groups that are re-determined as eligible at their 12-month anniversary.

While we urge the state to maintain an exemption from 12-month redetermination for "Referred Clients" if still eligible for the program through which they were referred to CCDF/CCPP, we recommend clarifying that "Referred Clients" are allotted a minimum 12-month eligibility period and are re-determined for eligibility at the 12-month anniversary just as all other priority groups.

We strongly urge the state to eliminate the re-application requirement for TANF parents particularly and all "Referred Clients" to avoid being at odds with section 658E(c)(2)(N)(i)(II) of the CCDBG Act, and with CCDF § 98.21(d), "...which requires the Lead Agency to establish procedures and policies to ensure that parents, especially parents receiving TANF assistance, are not required to unduly disrupt their education, training, or employment in order to complete the eligibility redetermination process."

Undue disruption. Pursuant to section 658E(c)(2)(N)(i)(II) of the CCDBG Act, we are adding § 98.21(d), which requires the Lead Agency to establish procedures and policies to ensure that parents,

especially parents receiving TANF assistance, are not required to unduly disrupt their education, training, or employment in order to complete the eligibility redetermination process. This provision of the law seeks to protect parents from losing assistance for failure to meet renewal requirements that place unnecessary barriers or burdens on families, such as requiring parents to take leave from work in order to submit documentation in person or requiring parents to resubmit documents that have not changed (*e.g.*, children's birth certificates).

<https://www.federalregister.gov/articles/2015/12/24/2015-31883/child-care-and-development-fund-ccdf-program#h-47>

While the 90-day continued assistance for the application period will help “Referred Clients”, it is burdensome for the parent and administratively inefficient for the agency to require TANF and other vulnerable parents to reapply if they are still eligible for CCDF under federal regulation and based on information captured by the MDHS DECCD, even if their TANF eligibility has lapsed permanently or temporarily. Making “Referred Clients” reapply prior to 12 months of continued eligibility without a guarantee of an automatic extension of service if still eligible as in other redetermination processes for other priority groups risks stripping child care from parents who just moved off of TANF and fails to advance the overarching goal of the CCDBG Act to increase stability of child care for low-income working parents.

Requiring TANF parents and other “Referred Clients” to reapply when the MDHS DECCD has data still indicating their eligibility for CCDF/CCPP places an undue burden on low-income parents. This is disruptive particularly because the reapplication requirement does not guarantee the parent who is eligible for 12 months another slot.

We recommend that DECCD revise the policy so that if a TANF parent or other “Referred Client” is eligible for and receiving CCDF/CCPP and they become ineligible for TANF or other referral programs prior to 12 months of continued eligibility for CCDF/CCPP, the parent shall continue receiving CCDF/CCPP assistance for the remainder of the 12-month period if they are still eligible for CCDF/CCPP assistance. As a result of the parent’s move out of Priority Group 1, they will shift into another priority population, but we recommend not allowing this change to affect their eligibility for CCDF/CCPP if it occurs within the 12-month eligibility period. Such parents could be designated as making a priority population shift within their eligibility period and then treated the same as other priority groups at redetermination.

Mississippi should also consider not capping the eligibility period to 12 months, particularly for eligible parents in chronic poverty or those served by other assistance programs. The federal regulation stipulates that:

Nothing in this rule prohibits Lead Agencies from establishing eligibility periods longer than 12 months or lengthening eligibility periods prior to a redetermination.

<https://www.federalregister.gov/articles/2015/12/24/2015-31883/child-care-and-development-fund-ccdf-program#h-47>

This provision allows states the option of aligning CCDF/CCPP eligibility with other programs in which eligible families may participate in that have eligibility periods extending beyond the 1-year anniversary of their CCDF/CCPP eligibility.

Increase the Priority Level of Working Parents Not Referred through Other Programs and Clarify How Priority Populations Guide the Initiation/Termination of CCDF/CCPP Assistance

4.1

We commend the state for dedicating CCDF funding for the most vulnerable group of parents and children—specifically, those parents and children served by TANF, TCC, child protective services, and children who are homeless. While these efforts will ensure child care is provided for parents in need of work supports as they work toward self-sufficiency, we note that as of our most recent records request in December 2015, of the 19,739 children served through CCDF/CCPP, 56.5% would be in priority groups 3 and 4 under the proposed regulation and 43.4% would be in priority group 1.

A majority of people benefitting from CCDF/CCPP are working parents who are not referred through another assistance program but who are eligible based on earnings below 85% of state median income. CCDF was designed to be a crucial support for the working poor, especially single working parents. **We recommend that DECCD not impose arbitrary priority groupings that would place these parents on the bottom of the list.**

We also note that in our December 2015 records request, 13,973 children were on the Pending Funding list. While records provided did not indicate the number of children on the Pending Funding list by priority group, we assume that given the current policy manual also identifies TANF recipients as a first-served priority population, a large number of those on the Pending Funding list are likely working poor parents who were not referred through another assistance program. For parents working in low-income jobs and raising a family, CCDF/CCPP assistance is likely one of the few, if not only, work supports they receive.

While the dedication of funds for Referred Clients may help align the state with requirements of the new federal regulations, specifically with regard to homeless children, there is an adequate amount of funding to cover Referred Clients, particularly when a large share could also be served through carryover TANF funds spent directly on non-assistance child care for working TANF and TCC parents and assistance child care for those in periods of 90-day job search. **We recommend the state spend more carryover funds (in FFY 2014 there was \$21 million in unliquidated) in this manner so that a larger number of working parents not referred through other programs earning below 85% SMI, or the current priority groups 3 and 4, who are also likely a larger number of those on the Pending Funding list, can be served through a transfer of current year TANF block grant funds to CCDF.**

We recommend that DECCD clarify how priority populations guide the initiation and termination of CCPP participation, particularly with regard to how they function in relation to parents on the Pending Funding list.

We further recommend that DECCD assign higher priority to working parents not referred to CCPP through other assistance programs and clarify how current priority

levels will ensure that eligible CCDF/CCPP parents not referred through other assistance programs will be ensured equal access to child care, as required by the CCDBG Act of 2014.

The state's current policy manual clearly states the procedure to determine how families are served from the Pending Funding list (previously, the "Waiting List"). Specifically, the state makes clear that, aside from the highest priority groups such as TANF parents, people are served based on the date of application by priority group. Under the soon to be revised policy, it is conceivable that people received assistance on a "first come, first served" basis and, specifically, that a person who applied in a lower priority group on a date before a person who applied in a higher priority group would not get bumped in place of the higher priority person, because the process first considers date, then priority groups on that date (it is conceivable that a person applying the same day as the hypothetical lower priority group person would be bumped for applicants on the same day who were higher priority).

At 3.4 (2) of the proposed regulations pertaining to the procedure for applications with a "Pending Funding" status, the proposed CCPP policy manual states:

Once funding becomes available, applications with a status of "Pending Funding" shall be served according to the date of application.

There is no mention of priority population in section 3.4 (2).

At 4.1, the manual states that people are served on a "first come, first served basis,"; that services to "...any and all populations are dependent upon the availability of funds"; that funds are dedicated for referred clients; and that for "all other populations", presumably priority groups 2, 3 and 4, DECCD will use the priority list "...when determining how to initiate or terminate authorizations for child care".

We recommend clarifying 4.1 to remove potentially confusing information

We recommend clarifying if "first come, first served basis" is congruous with 3.4 (2) "...date of application". Further, we recommend clarifying if the process is "first come, first served" AND priority group, or just "first come, first served." Currently, the language does not make clear that "Referred Clients" are given priority without regard to the date of application. Stating that funds are dedicated seems to imply that "Referred Clients" are not subject to the Pending Funding list or the availability of funds or the "first come, first served" rule. We recommend clarifying that if the priority list is used to determine eligibility for all other groups other than "Referred Clients", whether or not the date of application as referenced in 3.4 (2) also applies to decisions to initiate or terminate child care certificates.

We recommend adding language to 3.4 (2) regarding priority grouping.

We recommend using consistent terminology to indicate the order of priority for service based on when the family applies and specifically employing either "date of application" or "first come, first served", AND, if these two terms are NOT congruous, to clarify what they mean in

the relevant sections, 3.4 (2) and 4.1 as they pertain to eligibility determination, particularly from the Pending Funding list.

Clarifying this language will help to understand how the policy treats a scenario in which a parent in the 3rd priority population currently on the Pending Funding list applied after the date that a parent in the 4th priority population currently on the Pending Funding list had applied. Under current language—Section 3.4 (2) could be interpreted to mean that the parent in the 4th priority population would be served first because the date of their application is before the parent in the 3rd priority group.

In 4.1, however, the statements that families are served on a “first come, first served basis” and that DECCD “shall rely on the priority list” when determining authorizations are disjointed. This disjointed language may lead to confusion and may lead to an interpretation in which the parent in the 3rd priority group would be served before the person in the 4th priority group because the order of services first depends on priority group and secondarily the “first come, first served” within that priority group.

We recommend employing consistent language that makes clear that applicants other than “Referred Clients” will be processed by date of application AND priority group, or if the policy means applicants other than “Referred Clients” will be processed by priority group first, then date of application—subject to funding availability.

We recommend reconciling the statement that services to “...any and all populations are dependent upon the availability of funds” with the statement that funds are “dedicated” for “Referred Clients.” We recommend clarifying whether or not the dedication of funds for “Referred Clients” means that a CCDF/CCPP certificate is guaranteed and if “Referred Clients” are thus not subject to the Pending Funding list.

We recommend clarifying that “first come, first served” does not apply to “Referred Clients” if funds are “dedicated,” if the meaning is that a certificate is guaranteed.

Comments and Recommendations by Section

2. General

2.2 Purpose

2.2 (2)

We support the state’s defined purpose to assist Mississippi’s low-income working families by creating a seamless system of child care assistance for CCDF/CCPP recipients participating in work, education, or job training via the state’s “established workforce system”.

We recommend clarifying the term “workforce system” and the procedures that will contribute to seamlessness between CCDF/CCPP and state-administered workforce development services.

We note that in other sections of the CCPP policy manual, it is clear that MDHS DECCD acknowledges job search at WIN Job Centers as qualifying work activities for low-income working families eligible for CCDF/CCPP.

We urge the state to more specifically describe how CCDF/CCPP seamlessly interacts with not only WIN Job Centers, but also low-income, eligible parents participating in On-the-Job-Training (OJT) and those served through Individual Training Accounts (ITAs).

We recommend clarifying the mechanisms that make CCDF/CCPP services seamless. For instance, we recommend describing if staff at WIN Job Centers are or will be trained in CCDF/CCPP eligibility guidelines so that they can identify and inform a parent conducting job search of their potential eligibility. Also, for instance, we recommend that the job referral process and training program referral process include an assessment of whether hours will total at least 25 per week and whether wages will surpass 85% of SMI so that the parent knows if they qualify for CCDF/CCPP assistance and can factor such assistance in or out of the financial viability of the job referral or training program.

We also recommend describing in more detail whether or not information about Mississippi's workforce system opportunities will be made available to parents who are applying for CCDF/CCPP but who may not have interacted with the state's workforce system (for instance, will such parents be automatically referred to a WIN Job Center or a workforce training program?).

3. Applications Procedures for Families

3.2 (1)

Current language at 3.2(1) states that all eligible families "...shall be served on a first-come, first-serve basis by date of application." We recommend clarifying how the terms "first-come, first serve" and "date of application" are NOT congruous. We recommend adding language about priority populations to maintain consistency with 4.1. Current language at 3.2(1) does not make clear that decisions regarding termination and initiation of assistance are also guided by priority grouping.

Please see comments pertaining to Section 4.1.

3.2 (2)

We recommend that MDHS DECCD contemplate a lack of internet *devices* in addition to its acknowledgement of a lack of internet *service* as a potential barrier for parents applying for CCDF/CCPP in 3.2(2), which requires all applications to be completed online.

While we commend efforts to modernize and increase the ease of access and efficiency of the CCDF/CCPP application process for Mississippi low-income parents, we are concerned about

eligible parents living in areas in which access to local public entities that can provide internet access requires travelling long distances. We are also concerned that some parents may lack necessary skills to navigate online systems and we acknowledge the state's provision regarding parents requiring technical assistance to contact DECCD or the provider at 3.2(2)(d).

However, we note that 3.2(2)(d) lacks a description of how technical assistance will be provided to a parent and it also lacks a guarantee that such assistance will be provided.

We recommend the state add a description of a procedure to identify such barriers on the front end of the application process so that parents are not turned away from applying due to technological barriers.

Further, we recommend offering transportation assistance for those without internet service or devices who must travel long distances to access a public entity.

Finally, we recommend that DECCD establish an alternative application process for parents who face technological barriers in their application process. Such a process could include the option to mail in applications.

3.2 (2) (B)

See comments pertaining to 3.2(2).

3.2 (2) (C)

We recommend clarifying the timeframe (i.e. immediate, within two working days, etc.) by which DECCD must send the parent an email listing additional documentation necessary to complete the eligibility determination process after the parent submits the application. We recommend describing a procedure if the parent fails to receive DECCD's response (i.e. will DECCD receive electronic confirmation that the email has been delivered? If the email has not been received, what steps should the applicant or DECCD take?). We recommend creating an alternative option to receiving the list of required information, such as by phone, by mail, or both.

3.2 (2) (D)

We recommend clarifying if this provision *requires* DECCD and the selected child care provider to provide technical assistance if needed. If yes, we urge DECCD to acknowledge limitations in capacity among providers and that providing such assistance, while critical to ensuring eligible parents are served by CCDF/CCPP, may be outside of what some providers can offer.

3.2 (3)

Current language states:

After submitting the application, parents shall return all required documentation at the request of DECCD via postal mail, electronic mail, or uploaded via web form.

We recommend revising:

“After submitting the application, parents shall...”

To,

“After the parent has received an email from DECCD containing a list of additional documentation they must submit, parents shall...”

Making this revision will be consistent with 3.2(2)(C).

See comments pertaining to 3.2(2)(C).

We recommend adding language regarding “date of application” or “first come, first-served” to the following provision dealing with issuance of certificates, which includes only language regarding the priority grouping:

If the parent falls within an eligibility priority group for which funds are available, a certificate shall be issued and emailed to the parent and the selected child care provider within one (1) business day of completion of the approval process.

See comments pertaining to 4.1 for more explanation.

3.3 (1)

We recommend that upon DECCD’s notification to a parent that they are being placed on the Pending Funding list as per 3.4(1) that additional information be included on such notice regarding the potential availability of slots through a DECCD-Approved Slot Provider with instructions on how to access available slot providers through Mississippi’s Consumer Education Website.

3.3 (2)

We recommend developing an alternative option for parents to access a list of slot providers other than on the DECCD website if a technological barrier exists, either by phone or by mail.

See comments pertaining to Section 3.2(2) regarding lack of internet access.

3.3 (3)

We recommend that DECCD set a minimum length of time that a slot provider must hold a slot open until the parent completes the online application. While we understand that slot providers are better judges of their circumstances than the state, we urge the state to take steps to mitigate potential issues for both parents and providers. It is not in the provider’s interest to have a constant flow of parental complaints if different providers hold slots for different amounts of time. If slot providers have a uniform minimum length of time, which should not be an amount

of time in which the slot provider risks the loss of another eligible family for the slot, parents will receive this information up front in notice or information posted on the consumer education website.

It is in DECCD’s interest to ensure this policy does not lead to slot providers holding slots for longer or shorter periods of time for individual parents. If DECCD establishes a minimum amount of time that slot providers must hold slots while parents complete the online application, it will be able to assess if the application was completed within that period should parental complaints arise.

For parents, setting a minimum amount of time a slot is held will give them a timeline to plan and to resolve any technological issues that emerge.

We support the provision requiring parents to contact slot providers if they fail to complete the application before the expiration date.

Current language states:

“If the slot provider still has an available slot [after the parent contacts them for failing to complete the application before the expiration date], he or she *can* extend the expiration date.” [emphasis added]

We recommend revising:

“...he or she *can* extend the expiration date.”

To,

“...he or she *shall* extend the expiration date.”

Further, we recommend designating a period of time for which such an extension should last at minimum.

3.3 (4)

We recommend that DECCD clarify the definition of “pre-approval process” and “pre-approved slots” by adding these terms to the Glossary of Terms.

3.4 (1)

We support the provision allowing parents on the Pending Funding list to update their application once per year online. We recommend clarifying how notice to update the application online will be provided—mail and email, mail only, or email only.

3.4 (2)

See comments on Section 4.1

4. Eligibility Requirements for Children

4.1 (Eligibility Priority Populations)

We commend the state for dedicating CCDF funding for the most vulnerable group of parents and children—specifically, those parents and children served by TANF, TCC, child protective services, and children who are homeless. While these efforts will ensure child care is provided for parents in need of work supports as they work toward self-sufficiency, we note that as of our most recent records request in December 2015, of the 19,739 children served through CCDF/CCPP, 56.5% would be in priority groups 3 and 4 under the proposed regulation and 43.4% would be in priority group 1.

A majority of people benefitting from CCDF/CCPP are working parents who are not referred through another assistance program but who are eligible based on earnings below 85% of state median income. CCDF was designed to be a crucial support to the working poor, especially single working parents. **We recommend that DECCD not impose arbitrary priority groupings that would place these parents on the bottom of the list.**

We also note that in our December 2015 records request, 13,973 children were on the Pending Funding list. While records provided did not indicate the number of children on the Pending Funding list by priority group, we assume that given the current policy manual also identifies TANF recipients as a first-served priority population, a large number of those on the Pending Funding list are likely working poor parents who were not referred through another assistance program. For parents working in low-income jobs and raising a family, CCDF/CCPP assistance is likely one of the few, if not only, work supports they receive.

While the dedication of funds for Referred Clients may help align the state with requirements of the new federal regulations, specifically with regard to homeless children, there is an adequate amount of funding to cover Referred Clients, particularly when a large share could also be served through carryover TANF funds spent directly on non-assistance child care for working TANF and TCC parents and assistance child care for those in periods of 90-day job search. **We recommend the state spend more carryover funds (in FFY 2014 there was \$21 million in unliquidated) in this manner so that a larger number of working parents earning below 85% SMI, or the current priority groups 3 and 4, who are also likely a larger number of those on the Pending Funding list, can be served through a transfer of current year TANF block grant funds to CCDF.**

We recommend that DECCD clarify how priority populations guide the initiation and termination of CCPP participation, particularly with regard to how they function in relation to parents on the Pending Funding list.

We further recommend that DECCD assign higher priority to working parents not referred to CCPP through other assistance programs and clarify how current priority levels will ensure that eligible CCDF/CCPP parents not referred through other assistance programs will be ensured equal access to child care, as required by the CCDBG Act of 2014.

The state's current policy manual clearly states the procedure to determine how families are served from the Pending Funding list (previously, the "Waiting List"). Specifically, the state makes clear that, aside from the highest priority groups such as TANF parents, people are served based on the date of application by priority group. Under the soon to be revised policy, it is conceivable that people received assistance on a "first come, first served" basis and, specifically, that a person who applied in a lower priority group on a date before a person who applied in a higher priority group would not get bumped in place of the higher priority person, because the process first considers date, then priority groups on that date (it is conceivable that a person applying the same day as the hypothetical lower priority group person would be bumped for applicants on the same day who were higher priority).

At 3.4 (2) of the proposed regulations pertaining to the procedure for applications with a "Pending Funding" status, the proposed CCPP policy manual states:

Once funding becomes available, applications with a status of "Pending Funding" shall be served according to the date of application.

There is no mention of priority population in section 3.4 (2).

At 4.1, the manual states that people are served on a "first come, first served basis,"; that services to "...any and all populations are dependent upon the availability of funds"; that funds are dedicated for referred clients; and that for "all other populations", presumably priority groups 2, 3 and 4, DECCD will use the priority list "...when determining how to initiate or terminate authorizations for child care".

We recommend clarifying 4.1 to remove potentially confusing information

We recommend clarifying if "first come, first served basis" is congruous with 3.4 (2) "...date of application". Further, we recommend clarifying if the process is "first come, first served" AND priority group, or just "first come, first served." Currently, the language does not make clear that "Referred Clients" are given priority without regard to the date of application. Stating that funds are dedicated seems to imply that "Referred Clients" are not subject to the Pending Funding list or the availability of funds or the "first come, first served" rule. We recommend clarifying that if the priority list is used to determine eligibility for all other groups other than "Referred Clients", whether or not the date of application as referenced in 3.4 (2) also applies to decisions to initiate or terminate child care certificates.

We recommend adding language to 3.4 (2) regarding priority grouping.

We recommend using consistent terminology to indicate the order of priority for service based on when the family applies and specifically employing either "date of application" or "first

come, first served”, AND, if these two terms are NOT congruous, to clarify what they mean in the relevant sections, 3.4 (2) and 4.1 as they pertain to eligibility determination, particularly from the Pending Funding list.

Clarifying this language will help to understand how the policy treats a scenario in which a parent in the 3rd priority population currently on the Pending Funding list applied after the date that a parent in the 4th priority population currently in the Pending Funding list had applied. Under current language—Section 3.4 (2) could be interpreted to mean that the parent in the 4th priority population would be served first because the date of their application is before the parent in the 3rd priority group.

In 4.1, however, the statements that families are served on a “first come, first served basis” and that DECCD “shall rely on the priority list” when determining authorizations are disjointed. This disjointed language may lead to confusion and may lead to an interpretation in which the parent in the 3rd priority group would be served before the person in the 4th priority group because the order of services first depends on priority group and secondarily the “first come, first served” within that priority group.

We recommend employing consistent language that makes clear that applicants other than “Referred Clients” will be processed by date of application AND priority group, or if the policy means applicants other than “Referred Clients” will be processed by priority group first, then date of application—subject to funding availability.

We recommend reconciling the statement that services to “...any and all populations are dependent upon the availability of funds” with the statement that funds are “dedicated” for “Referred Clients.” We recommend clarifying whether or not the dedication of funds for “Referred Clients” means that a CCDF/CCPP certificate is guaranteed and if “Referred Clients” are thus not subject to the Pending Funding list.

We recommend clarifying that “first come, first served” does not apply to “Referred Clients” if funds are “dedicated,” if the meaning is that a certificate is guaranteed.

4.2 (2) (E) (Child Support)

First, we note that there are two “E” sub-sections and we assume this is done in error. We recommend correcting this error to avoid confusion in referencing the CCPP manual.

Ninety-one percent of child care providers we surveyed said the state’s requirement that single parents initiate child support actions against the other parent keeps eligible people from applying to the program.

The new CCDF rules make clear that a primary objective for states is to increase the number and percentage of low-income children in high quality child care. This can be achieved by ensuring as many CCDF/CCPP slots to eligible parents as possible. We recommend that Mississippi eliminate policies that act as barriers to participation for low-income single parents seeking CCDF/CCPP assistance.

To better align with the goal of new CCDF rules and to avoid policies that have disparate impacts on low-income communities of color, **MDHS should remove the requirement for parents to initiate child support action as a condition of CCDF/CCPP eligibility.**

This current state option contributes to the gap in people served vs. eligible and is particularly harmful to African American single mothers.

4.2 (3) (D) (v)

We recommend adding language addressing requirements for a two-parent family in which both parents have a disability or clarifying where such a scenario is addressed in the policy manual.

4.3(1) (12-Month CCPP Eligibility Period)

Fifty-six percent of child care providers we surveyed said most of their child care certificates are through TANF parents AND **91% said TANF parents frequently lose their child care certificates.** TANF and other vulnerable parents, such as those receiving assistance through TCC, need a seamless system in place. Extending minimum 12-month eligibility for TANF parents and other vulnerable groups would provide continuous care that is essential both for stabilizing families and for aligning with the CCDBG Act of 2014.

New CCDF regulations encourage states to give eligible children 12 continued months of eligibility. This is one of the key components of the new rules, meant to avoid harmful disruptions in child care which can lead to employment disruptions for parents.

The 12-month minimum eligibility period should apply to all of Mississippi’s “Referred Clients”: TANF parents, TCC, homeless, children in protective custody and HHM, whether or not their eligibility for these programs changes due to temporary or permanent ineligibility, prior to 12 months of continuous eligibility. States have this flexibility. Mississippi’s proposed policy manual makes clear that these populations are priority when referred for CCDF/CCPP certificates, however, Mississippi is holding onto the option of eliminating CCDF/CCPP prior to 12 months if parents lose TANF eligibility or eligibility under guidelines for the individual referred groups. The policy also leaves room for “Referred Clients” to be eligible for longer than a 12-month period, but providers overwhelmingly report that TANF parents lose certificates frequently.

ACF makes clear in the new CCDF NPRM that exceptions to 12-month eligibility conflict with the intent of the CCDBG Act, which clearly provides 12-month eligibility to all populations.

Based on feedback from States and various stakeholders, ACF has already considered possible exceptions to the minimum 12-month eligibility period for certain populations, such as children in families receiving TANF and children in protective services, but has decided that such special considerations would be in conflict with the CCDBG Act, which clearly provides 12-month eligibility for all children.

<https://www.federalregister.gov/articles/2015/12/24/2015-31883/child-care-and-development-fund-ccdf-program#h-47>

Mississippi's current policy, in its failure to guarantee at minimum 12 months of eligibility to "Referred Clients" while still exempting them from redetermination, conflicts with the new CCDF regulation's overarching goal of avoiding interruption of child care services, increasing stability for low income working parents and ensuring that CCDF families have the same access to child care that non-CCDF families do. While being exempt from redetermination may be on the surface a lesser burden for "Referred Clients", the alternative of re-application after a formal termination of child care assistance with no guarantee of an automatic extension of assistance (no guaranteed certificate) may result in a more severe disruption of service than requiring "Referred Clients" to be re-determined every 12 months along with other populations.

4.4 (Redetermination)

Mississippi's policy manual makes clear in 4.3(1), 4.3(2) and 4.4(1) that all families and children are afforded a minimum of 12 months of eligibility as long as they are still eligible for CCDF/CCPP and that redetermination occurs at the end of the 12-month period.

4.3 12-MONTH CCPP ELIGIBILITY PERIOD

(1) In accordance with CCDBG (658E(c)(2)(N)(i)(I)), families who are determined eligible to participate in the CCPP shall be afforded a minimum of twelve (12) months of eligibility for assistance provided that the family remains eligible. The 12-month eligibility period begins on the date that the client is determined eligible.

(2) At the end of the 12-month eligibility period, a redetermination of eligibility for families who receive assistance from CCPP will occur per the procedures described in Section 4.4.

4.4 REDETERMINATION OF ELIGIBILITY

(1) Children receiving child care assistance through CCPP shall be redetermined for eligibility at the end of the 12-month eligibility period in accordance with CCDBG 658E(c)(2)(N).

However, Mississippi's policy manual requires "Referred Clients" to reapply if they become ineligible for the program through which they were referred to CCDF/CCPP 4.4(2)(A) because they are "exempt from redetermination". While TANF parents, for instance, may be eligible for CCDF/CCPP for a longer period than 12 months as long as they maintain eligibility for TANF, they also may not receive TANF for 12 consecutive months. For example, Mississippi's policy would require TANF parents who are still eligible for CCDF/CCPP but lose their eligibility for TANF prior to the end of the 12-month eligibility period to go through another application process after MDHS formally terminates their child care assistance. The policy does not make clear that a certificate is guaranteed upon reapplication for "Referred Clients," while it does guarantee an extension of 12 months of eligibility for other priority groups that are re-determined as eligible at their 12-month anniversary.

While we urge the state to maintain an exemption from 12-month redetermination for "Referred Clients" if still eligible for the program through which they were referred to CCDF/CCPP, we recommend clarifying that "Referred Clients" are allotted a minimum 12-month eligibility period and are re-determined for eligibility at the 12-month anniversary just as all other priority groups.

We strongly urge the state to eliminate the re-application requirement for TANF parents particularly and all "Referred Clients" to avoid being at odds with section 658E(c)(2)(N)(i)(II) of the CCDBG Act, and with CCDF § 98.21(d), "...which requires the

Lead Agency to establish procedures and policies to ensure that parents, especially parents receiving TANF assistance, are not required to unduly disrupt their education, training, or employment in order to complete the eligibility redetermination process.”

Undue disruption. Pursuant to section 658E(c)(2)(N)(i)(II) of the CCDBG Act, we are adding § 98.21(d), which requires the Lead Agency to establish procedures and policies to ensure that parents, especially parents receiving TANF assistance, are not required to unduly disrupt their education, training, or employment in order to complete the eligibility redetermination process. This provision of the law seeks to protect parents from losing assistance for failure to meet renewal requirements that place unnecessary barriers or burdens on families, such as requiring parents to take leave from work in order to submit documentation in person or requiring parents to resubmit documents that have not changed (e.g., children's birth certificates).

<https://www.federalregister.gov/articles/2015/12/24/2015-31883/child-care-and-development-fund-ccdf-program#h-47>

While the 90-day continued assistance for the application period will help “Referred Clients”, it is burdensome for the parent and administratively inefficient for the agency to require TANF and other vulnerable parents to reapply if they are still eligible for CCDF under federal regulation and based on information captured by the MDHS DECCD, even if their TANF eligibility has lapsed permanently or temporarily. Making “Referred Clients” reapply prior to 12 months of continued eligibility without a guarantee of an automatic extension of service if still eligible as in other redetermination processes for other priority groups risks stripping child care from parents who just moved off of TANF and fails to advance the overarching goal of the CCDBG Act to increase stability of child care for low-income working parents.

Requiring TANF parents and other “Referred Clients” to reapply when the MDHS DECCD has data still indicating their eligibility for CCDF/CCPP places an undue burden on low-income parents. This is disruptive particularly because the reapplication requirement does not guarantee the parent who is eligible for 12 months another slot.

We recommend that DECCD revise the policy so that if a TANF parent or other “Referred Client” is eligible for and receiving CCDF/CCPP and they become ineligible for TANF or other referral programs prior to 12 months of continued eligibility for CCDF/CCPP, the parent shall continue receiving CCDF/CCPP assistance for the remainder of the 12-month period if they are still eligible for CCDF/CCPP assistance. As a result of the parent’s move out of Priority Group 1, they will shift into another priority population, but we recommend not allowing this change to affect their eligibility for CCDF/CCPP if it occurs within the 12-month eligibility period. Such parents could be designated as making a priority population shift within their eligibility period and then treated the same as other priority groups at redetermination.

Mississippi should also consider not capping the eligibility period to 12 months, particularly for eligible parents in chronic poverty or those served by other assistance programs. The federal regulation stipulates that:

Nothing in this rule prohibits Lead Agencies from establishing eligibility periods longer than 12 months or lengthening eligibility periods prior to a redetermination.

This provision allows states the option of aligning CCDF/CCPP eligibility with other programs in which eligible families may participate in that have eligibility periods extending beyond the 1-year anniversary of their CCDF/CCPP eligibility.

5. Co-Payment Fees

5.2 and 5.2 (4)

Clarify whether or not other priority populations, particularly TCC parents, will be assessed minimum co-payment or are exempt from co-payment.

We recommend treating TCC parents as TANF parents and remove the co-payment requirements. Short of exempting TCC parents, DECCD should apply minimum co-payments.

5.2 (5)

We recommend alerting parents through notice and through the consumer education website that providers could charge co-payment fees that exceed the assigned amount if costs of the child care to the general public are higher than the amount paid by the CCPP.

5.3 (1)

Clarify calendar day relative to the last day of the month by which providers must notify DECCD of nonpayment of copayment fees.

Current regulations state:

“Non-payment of co-payment fees shall result in termination of the parent from CCPP.”

We recommend that MDHS DECCD contemplate scenarios in which providers may mistakenly report a parent as not having paid co-payment fees or scenarios in which a parent experiences an abrupt interruption in cash flow, and other scenarios in which an immediate termination of CCDF/CCPP eligibility would likely act only to interrupt the continuity of child care for which the parent is likely still eligible.

We further recommend to clarify the word “...fees” so as to make clear if termination of the parent from CCPP results only after multiple non-payments of a monthly *fee* (i.e. Is the use of the word “fees” meant to indicate more than one month of nonpayment results in termination) and if so precisely how many months must accrue before termination, OR if termination of the parent from CCPP results after one month of nonpayment of a monthly fee.

We recommend that MDHS DECCD establish procedures to notify parents that they have been reported as having not paid co-payment fees, including a timeline for the parent to either appeal an erroneous report made by the provider or to make the owed copayment and for DECCD to make a determination on the parent’s claim of error or for the provider to report on the status of the copayment to DECCD whether paid or still unpaid.

5.4 (1) and 5.4. (2)

We recommend that MDHS DECCD clarify by calendar day a timeline by which providers must reimburse parents if they charge a rate higher than the correct fee and a timeline by which parents must reimburse providers if they pay an amount lower than the correct fee. MDHS DECCD should clarify if such payments are to be in lump sum if the error spans multiple months and if not, MDHS DECCD should establish a procedure for multiple payments until such time the reimbursement—whether from the provider or parent—is paid in full.

6. Interruption of Child Care Services

6.1 (1)

We recommend reducing the duration of the period of ineligibility for CCPP from the current 12 months if parents are terminated from CCPP for nonpayment of copayment fees.

We recommend that MDHS DECCD contemplate scenarios in which providers may mistakenly report a parent as not having paid co-payment fees or scenarios in which a parent experiences an abrupt interruption in cash flow, and other scenarios in which an immediate termination of CCPP subsidies may act only to interrupt the continuity of child care for which the parent is likely still eligible.

We further recommend to clarify the word “...fees” so as to make clear if termination of the parent from CCPP results only after multiple non-payments of a monthly *fee* (i.e. Is the use of the word “fees” meant to indicate more than one month of nonpayment results in termination?) and if so precisely how many months must accrue before termination, OR if termination of the parent from CCPP results after one month of nonpayment of a monthly fee.

We recommend that MDHS DECCD establish procedures to notify parents that they have been reported as having not paid co-payment fees, including a timeline for the parent to either appeal an erroneous report made by the provider or to make the owed copayment and for DECCD to make a determination on the parent’s claim of error or for the provider to report on the status of the copayment to DECCD whether paid or still unpaid.

We recommend that during the procedures to substantiate a report of nonpayment of copayment fees, CCPP assistance should continue until such time DECCD substantiates the claim of nonpayment, after which we recommend reducing the period of time in which the parent is not eligible to apply for or receive CCPP assistance from the current 12 months to: 2 months for the

first instance of nonpayment, 4 months for the second instance of nonpayment, 6 months for the third instance of nonpayment and 12 months only if more than 3 instances of nonpayment are substantiated.

6.1 (3)

We recommend that MDHS DECCD clarify that child care certificates may be terminated upon the request of the parent *receiving the subsidy*, unless that parent is deceased and the legal guardian makes such request.

6.2 (1)

We recommend clarifying “extenuating circumstances” that would constitute a valid reason to give less than two weeks of notice to a current provider before withdrawing the child from the center (for instance, the family is making an abrupt move within the state or there is a personal conflict between parents and providers) and further to clarify that the authority to validate “extenuating circumstances” rests with DECCD.

7. Child Care Consumer Education

7.1 (1) (I)

While we note federal regulations call for states to make aggregate data on the number of deaths, serious injuries, and substantiated instances of child abuse in child care settings public, we urge the DECCD to establish a comprehensive policy protecting the privacy of both children and caregivers in individual child care settings. Not all instances of serious injury or death are the fault of the child care provider and DECCD should be cautious about how it reports this sensitive information that may also potentially be misleading without information on the full context of the incident. We recommend that when the DECCD publishes such information for individual child care settings, that it also provide the full detailed context of the incident so that parents are able to make informed decisions to protect children and so that providers will be shielded from the potentially negative effect if such information is misleading and suggestive of provider fault if in fact the provider was not at fault for the incident. While we recommend to provide more detail on incidents to give context about details that may affect a parent’s perception of the provider’s reliability, we are also concerned that families of children who are victims may wish to maintain their privacy. We urge DECCD to conduct thorough reviews of such incidents to determine the risk of disclosure to the public and weigh any other extenuating circumstances, such as the family’s wishes.

8. Parental Complaints and Complaint Investigations

8.2

We recommend establishing a policy to offer an allowed period for mediation and resolution of the issue, if both parties are in mutual agreement, between parent and provider if the complaint is found to be the result of personal animus and NOT the result of abuse and neglect or regulatory practices, before issuing a finding or a recommendation for corrective action.

We recommend exercising caution for this provision to ensure that it cannot be used to retaliate against a child care center that is outspoken on state policy practices. It is crucial that this provision emphasizes substantiation of complaints in the relevant categories.

9. Providers

9.2 (1) (C)

We recommend adding language to establish an alternative option to the e-ledger training webinar if technological barriers exist and/or adding language to provide technical assistance to those who are facing technological barriers.

9.4

While we note that federal regulations require providers to comply with training requirements for health and safety standards, providers in Mississippi are very concerned about potential associated costs of compliance. Many already conduct such training and are unsure if their current practices satisfy the requirements of the new rules.

We urge the state to contemplate potential associated costs of providing a minimum of 15 hours of orientation training within 90 days of hiring staff. We recommend a procedure for providers in the event they are unable to complete this requirement and we recommend including allowable exceptions to not completing 15 orientation hours within 90 days of hiring.

9.6

We support the policy to publish reimbursement rates on the DECCD and child care consumer websites. We recommend clarifying whether or not the Market Rate Survey will be updated every 3 years along with the review period for reimbursement rates or if it will occur each year and if the 3-year review of reimbursement rates will be based on a Market Rate Survey spanning multiple years.

9.7 (C)

We urge the state to provide the full context and all relevant information for inspection reports and corrective actions made publicly available on the state's child care consumer education website both to prevent misleading information about the provider and to ensure the parent has comprehensive information upon which to base their decision.

9.9

While we note that federal regulations require providers to comply with training requirements for health and safety standards, providers in Mississippi are very concerned about potential associated costs of compliance. Many already conduct such training and are unsure if their current practices satisfy the requirements of the new rules.

We urge the state to contemplate potential associated costs of requiring providers to establish a process for developmental and behavioral screenings and scenarios in which providers have limited capacity in that they are not trained to conduct the screenings and/or are in areas with severe primary health care provider shortages. We recommend that DECCD establish a procedure for providers in the event they are unable to complete this requirement and we recommend including allowable exceptions and offering assistance to those providers who are unable to comply with this requirement.

9.10

We strongly support the provisions in 9.10 and offer our assistance in helping DECCD achieve them.

9.11

See comments pertaining to 9.4.

We appreciate MDHS DECCD's consideration of our written comments and for the opportunity to provide oral comments at the recent public hearing.

Sincerely,

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