Child Care and Development Fund (CCDF) Plan For Michigan FFY 2022-2024

1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. Respondents are asked to identify how match and maintenance-of-effort (MOE) funds are used. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems and describe their efforts on their disaster preparedness and response plans to support continuity of operations in response to emergencies.

1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency office to represent the state or territory as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto (658D; 658E(c)(1) and 98.16 (a)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

1.1.1 Which Lead Agency is designated to administer the CCDF program?

Identify the Lead Agency or joint interagency office designated by the state or territory. ACF will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here (658D(a) and 98.16(a)).

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a) Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: Michigan Department of Education

Street Address: 608 W. Allegan St, P.O. Box 30008

City: Lansing

State: MI

ZIP Code: 48909

Web Address for Lead Agency: www.michigan.gov/mde

b) Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Dr. Michael F.

Lead Agency Official Last Name: Rice

Title: State Superintendent

Phone Number: 517-241-0494

Email Address: ricem6@michigan.gov

1.1.2 Who is the CCDF Administrator?

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

a) CCDF Administrator Contact Information:

CCDF Administrator First Name: Lisa

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CCDF Administrator Last Name: Brewer Walraven

Title of the CCDF Administrator: Director, Child Development and Care

Phone Number: 517-241-6950

Email Address: brewer-walravenl@michigan.gov

b) CCDF Co-Administrator Contact Information (if applicable):

CCDF Co-Administrator First Name: n/a

CCDF Co-Administrator Last Name: n/a

Title of the CCDF Co-Administrator: n/a

Description of the Role of the Co-Administrator: n/a

Phone Number: n/a

Email Address: n/a

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as the Lead Agency retains overall responsibility for the administration of the program (658D(b) and 98.16 (d)(1)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards (98.16(i)(3)). Check one.

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a. All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
▶ b. Some or all program rules and policies are set or established by local entities or agencies. If checked, indicate which entities establish the following policie Check all that apply.
A. State or territory
Identify the entity: Michigan Department of Education
☐ B. Local entity (e.g., counties, workforce boards, early learning coalitions).
If checked, identify the entity and describe the eligibility policies the local entity(ies can set.
C. Other. Describe:
iii. Payment rates and payment policies are set by the:
✓ A. State or territory
Identify the entity:
Michigan Department of Education
B. Local entity (e.g., counties, workforce boards, early learning coalitions).
If checked, identify the entity and describe the sliding fee scale policies the local entity(ies) can set.
C. Other. Describe:

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İ۷	Licensing standards and processes are set by the:
	A. State or territory
	Identify the entity:
	Michigan Department of Education
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).
	If checked, identify the entity and describe the payment rates and payment policies the local entity(ies) can set.
	C. Other. Describe:
iv.	Licensing standards and processes are set by the:
	A. State or territory Identify the entity:
	Licensing and Regulatory Affairs
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).
	If checked, identify the entity and describe the type of licensing standards and processes the local entity(ies) can set.
	C. Other. Describe:
٧.	Standards and monitoring processes for license-exempt providers are set by the:
	A. State or territory I dentify the entity:
	Michigan Department of Education
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).

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	processes for license-exempt providers the local entity(ies) can set.
	C. Other. Describe:
	vi. Quality improvement activities, including QRIS are set by the: A. State or territory Identify the entity:
	B. Local entity (e.g., counties, workforce boards, early learning coalitions).
	C. Other. Describe: vii. Other. List and describe any other program rules and policies that are set at a level other than the state or territory level:
	n/a
other ag	e Lead Agency has broad authority to operate (i.e., implement activities) through jencies, as long as it retains overall responsibility. Complete the table below to which entity(ies) implements or performs CCDF services.
	Check the box(es) to indicate which entity(ies) implement or perform CCDF services. The conducts eligibility determinations? CCDF Lead Agency

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▼ TANF agency
Local government agencies
CCR&R
Community-based organizations
Who assists parents in locating child care (consumer education)?
CCDF Lead Agency
▼ TANF agency
Local government agencies
✓ CCR&R
Who issues payments?
☐ TANF agency
Local government agencies
CCR&R
Community-based organizations
Who monitors licensed providers?
☐ TANF agency
Local government agencies
CR&R
Community-based organizations
Who monitors license-exempt providers?
☐ TANF agency
Local government agencies
CCR&R
☑ Community-based organizations
Who operates the quality improvement activities?
CCDF Lead Agency

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TANF agency
Local government agencies
☑ CCR&R
Community-based organizations

b. Other. List and describe any other state or territory agencies or partners that implement or perform CCDF services and identify their responsibilities.

The Department has grant agreements with four Early Childhood Support Networks (ECSNs), comprised of four regions throughout the state of Michigan; Eastern, Northern, Southeast, and Western. The network regions are designed to provide development of, and facilitate access to, a coordinated, easy-to-navigate early childhood system for providers and families that addresses the needs of the whole child. The ECSNs facilitate cross-sector collaboration within the region for maximum utilization of federal, state, and local resources to promote quality childcare provision and equitable access to early childhood support and services. The ECSN provides systems development, professional learning, and technical assistance for the Great Start Network, which includes the Great Start to Quality (GSQ) Resource Centers, Great Start Collaboratives (GSCs) and Great Start Parent Coalitions (GSPCs).

The Department has an agreement with the Early Childhood Investment Corporation (ECIC) to implement the state's quality rating and improvement system, GSQ, and conducts the federally required health and safety visits for license exempt subsidized (formerly referred to as unlicensed, subsidized) providers.

The Department has a grant agreement with the Michigan Association for the Education of Young Children (MiAEYC) to implement the Teacher Education and Compensation Helps (T.E.A.C.H.) Early Childhood® Scholarship program as an integral part of Michigan's professional development system, including quality improvement efforts to ensure children have access to a high-quality learning setting.

The Department has an agreement with The Registry, Inc. for the operation of MiRegistry, Michigan's workforce registry, which also houses trainer and training approval.

The Department also has an agreement with the Genesee Intermediate School District (GISD) to facilitate the utilization of diverse federal, state, and private funding streams to provide full day, full year services to children ages 0-5 impacted by the Flint Declaration

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of Emergency. Funding allows for the expansion of high quality, comprehensive early childhood services, particularly in the areas of family engagement and physical, behavioral, and mental health.

1.2.3 Describe the processes the Lead Agency uses to oversee and monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.1 and 1.2.2 (98.16(b)). In the description include:

Written agreements. Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project but must include at a minimum the elements below (98.11(a)(3)).

- -- Tasks to be performed
- --Schedule for completing tasks
- --Budget which itemizes categorical expenditures in accordance with CCDF requirements
- -- Monitoring and auditing procedures
- --Indicators or measures to assess performance of those agencies

Any other processes to oversee and monitor other agencies.

The lead agency is required to comply with Public Act 272 of 1986 (Section 18.1485 of the Michigan Compiled Laws) which requires each Michigan Department (1) to evaluate its systems of internal controls, (2) to develop a report that includes a description of any material inadequacy or weakness discovered during the internal control evaluation, and (3) to develop corrective action plans and a time schedule for correcting deficiencies identified. The lead agency has signed, written agreements with ECIC, The Registry, Inc., the MiAEYC, Eastern Upper Peninsula Intermediate School District (EUPISD), Calhoun Intermediate School District, Ingham Intermediate School District, United Way Southeast Michigan, and GISD to assist with the implementation of CCDF requirements. The Department maintains oversight through requirements laid out in each agreement. Each agreement includes a scope of work (activities to be performed), a schedule for completing the tasks, an approved

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budget, monitoring and auditing requirements and performance measures.

The State Child Care Administrator and other staff meet regularly with the Michigan Department of Health and Human Services (MDHHS), Licensing and Regulatory Affairs/Child Care Licensing Bureau (CCLB), ECIC, the Registry, Inc., MiAEYC, EUPISD, Calhoun Intermediate School District, Ingham Intermediate School District, UWSEM, and GISD to monitor efforts and address issues as they arise. On a monthly basis, the Department reviews the Statement of Expenditures for contracted services for all entities. The agreements require submission of written reports to the Department for monitoring purposes. In addition, the Department has an approved monitoring plan and regularly meets with various staff at all entities to get updates and review program implementation. The agreements also allow the Department to request other information it deems necessary to assure compliance with federal requirements. Department staff or its designee may visit the offices of any of the grantees to review and evaluate the work done under the agreement. This includes, but is not limited to, the Department's ability to conduct fiscal monitoring. In addition to our agreements with all entities they are also responsible for the monitoring of any contracts/sub recipients they may have to carry out the work. These contracts/sub recipients include, but are not limited to, agreements for systems that support GSQ, parental child care searches and the GSQ Resource Centers.

In addition, the lead agency has a performance agreement with the MDHHS, to provide funds for client eligibility determination, fraud investigations, social emotional consultation, and administrative hearings. The lead agency maintains oversight through requirements laid out in the agreement. MDHHS provides reimbursement requests and data on progress measures quarterly. Additionally, the State Child Care Administrator, along with other staff, meet with a designated point of contact (and other offices as needed) with MDHHS monthly to monitor efforts and address issues as they arise. The lead agency also has a Performance Agreement to provide funds for child care licensing and criminal history background checks through the CCLB at Licensing and Regulatory Affairs. The lead agency maintains oversight through requirements laid out in the agreement. CCLB provides reimbursement requests and data on progress measures quarterly. Additionally, the State Child Care Administrator and other staff meet with a designated point of contact with CCLB monthly to monitor efforts and address issues as they arise.

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1.2.4 Upon request, and to the extent practicable and appropriate, Lead Agencies must ensure any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available to other public agencies. This includes public agencies in other states, for their use in administering child care or related programs (98.15(a)(11)).

Assure by describing how the Lead Agency makes child care information systems systems (e.g., subsidy, registry, and QRIS systems) available to public agencies in other states.

Michigan currently utilizes Insight, a platform developed and managed by New World Now, for our professional development registry. This platform is utilized by other states including Minnesota, Wisconsin, Pennsylvania, Oklahoma, Montana, North Dakota, New York, South Carolina, and Palm Beach County Florida, allowing all states to benefit from changes made to the platform. Any state can access MiRegistry to view the training calendar or submit trainings for addition to the training calendar. In addition, Michigan utilizes WorkLife Systems to generate public facing information related to provider quality, star ratings, child care licensing reports and a 24/7 search engine for family use. Data on licensed providers and their star ratings is available for export by the public. This platform is also utilized by five other states within a consortium (Kansas, Missouri, Virginia, Oklahoma, Ventura Co, CA, Arizona-Private Consulting Firm) allowing states to benefit from changes made to the platform.

Michigan utilizes Bridges for Child Development and Care (CDC) eligibility determinations and provider enrollments. The basis of the system was adopted from other states such as Ohio and Texas and tailored to meet the needs of Michigan. The system is owned and supported by the Michigan Department of Health and Human Services (MDHHS), and it incorporates a PARIS (Public Assistance Reporting Information System) Interstate quarterly match which helps the MDHHS (along with the Michigan Department of Education (MDE) and CDC), and other states eliminate the possibility of clients receiving duplicate benefits in multiple states at one time. In addition, to this quarterly match, Michigan makes subsidy reporting data, referred to as Greenbook data, readily available to the public at large. This information can be obtained by visiting the public website, and contains data related to subsidy statistics, payments, case counts, and more for the CDC subsidy program.

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1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).

Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.

Paper records containing a social security number (SSN)/sensitive personal information (SPI) are required to be stored in a secure location. Paper records containing an SSN/SPI are not removed from the CDC program office, unless CDC business requires that they be transferred to another secure office. When an SSN/SPI is exchanged on paper, steps are taken so the data is not revealed. For a mailing, the SSN shall not appear in an envelope window. Paper documents containing SSN are shredded locally and disposed of properly. All employees must properly safeguard SSN/SPI data from loss, theft, or inadvertent disclosure. Laptops, and other electronic devices/media containing SSN/SPI are encrypted and/or password protected. Documents containing SSN/SPI are not sent to public fax machines. Voice mail messages do not contain SSN/SPI. Sending SSN/SPI over the internet or by email is prohibited unless done in a secure environment. Appropriate measures are taken to ensure confidentiality of fax and paper. Staff are required to certify annually that they are aware of the requirements and will adhere to them. In addition, staff have completed on-line training modules related to the SSN requirements.

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan, which serves as the application for a 3-year implementation period. As part of the Plan development process, Lead Agencies must consult with the following:

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(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at

https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf.

- (2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).
- (3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

Consultation

involves meeting with or otherwise obtaining input from an appropriate agency in the development of the state or territory CCDF Plan. Describe the partners engaged to provide services under the CCDF program in question 1.4.1.

- 1.3.1 Describe the Lead Agency's consultation efforts in the development of the CCDF Plan. Note: Lead Agencies must describe in a. c. consultation efforts with required partners listed in Rule and Statute. ACF recognizes that there is great value in consulting with other entities and has provided element d. for Lead Agencies to identify consultation efforts with other agencies or organizations.
 - a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

MI utilizes a variety of locally led structures that bring together conversations around our four OGS outcomes. These locally led structures include general purpose government bodies as part of their membership. Primarily these groups are convened via the Great Start Collaboratives (GSCs) or the Early Childhood Support Networks (ECSNs).

b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.

The Office of Great Start (OGS) (created by an Executive Order and housed within MDE) has been charged with ensuring that all children birth to age eight, especially those in

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highest need, have access to high-quality early learning and development programs and enter kindergarten prepared for success. A single set of early childhood outcomes against which all public investments will be assessed: children born healthy; children healthy, thriving, and developmentally on track from birth to third grade; children developmentally ready to succeed in school at the time of school entry; and children prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.

The Great Start Operational Team (GSOT) serves as the State Advisory Council on Early Care and Education. GSOT membership includes the required agencies and partners in leadership roles in a mixed delivery system and seeks to ensure coordination of efforts that reach the four overarching goals of Michigan's system, of which child care is an integral part. In addition to serving as the State Advisory Council the group also guides operational coordination of interagency initiatives that align with the Governor's early childhood outcomes for the population of 0- to 8-year-olds; identify opportunities for reform, innovation, and alignment of resources in an efficient manner across agencies; and coordinate and conceptualize the preparation of interagency grant opportunities. This group meets monthly. During the drafting of the plan the GSOT spent three months in 2021 reviewing the draft and providing comments.

In addition to the State Board of Education (SBE), MDE OGS established an Advisory Council to help identify and define policy issues and determine how to best communicate with key stakeholders about the broader early childhood system in Michigan. The eighteen- member council is comprised of parents, providers, and community leaders. Both the SBE and the OGS Advisory Council were engaged in learning about CCDBG requirements as well as asked to provide feedback for the plan during the development.

c. Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for states to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many states and tribes have consultation policies and procedures in place. The Department worked with the Region V office to determine areas of interest specific to the FY22-FY24 CCDF State Plan and organized three sessions for consultation and coordination with tribal members during the drafting of the plan. In addition, the Market Rate Survey (MRS) draft was discussed. All tribal partners received an invitation to

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participate in the broader opportunities to provide feedback on the plan and participate in the survey polls, regional listening sessions and statewide hearings. Ongoing meetings will be scheduled with tribal partners for continued coordination and collaboration.

d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.

OGS staff, ECIC, ECSNs, Migrant Telamon, Michigan Department of Health and Human Services (MDHHS), Great Start Readiness Program (GSRP), Michigan Afterschool Partnership, Michigan Association for Infant Mental Health, T.E.A.C.H. Early Childhood® MICHIGAN, Great Start to Quality staff across the state, MiAEYC, Early On® Technical Assistance Network, MDE's Office of Career and Technical Education, MDE's Office of Professional Preparation Services, Head Start Training and Technical Assistance, Head Start Early Child Care Partnerships, Michigan Association of Infant Mental Health, MDE 21st Century Community Leaning Centers, Institutions of Higher Education, Head Start State Collaboration Office.

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date of the public hearing. 04/20/2021

Reminder: Must be no earlier than January 1, 2021, which is 9 months prior to the October 1, 2021, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g., the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in a. 03/29/2021

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Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement). c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

The Great Start Operations Team, Child Care Licensing Bureau, Head Start, Early Childhood Support Networks, GSQ Resource Centers, GSCs, GSPCs, the MDHHS, Early Childhood Administrators Network (ECAN), Tribal partners, Michigan Association for the Education of Young Children, ECIC, Hope Starts Here, Flint Early Childhood Partnership, Michigan's Children, Michigan League for Public Policy, Women's Commission, along with various other partners received an email with information about the plan and all opportunities for providing public comment. Opportunities included: five topical surveys, four regional listening sessions hosted by the ECSNs and the three public hearing dates. They were each asked to distribute notice of the opportunities through their listservs and networks. All survey links, listening session dates and public hearing dates were posted on the CDC website at MDE - PARTNERS (michigan.gov) and met Americans with Disabilities Act (ADA) compliance.

- d) Hearing site or method, including how geographic regions of the state or territory were addressed. Four statewide virtual hearings were held on April 20th, April 21st, April 29th, and May 5th.
- e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) The draft plan was posted (by section) at the CDC website at www.michigan.gov/childcare. The Great Start Operations Team, CCLB, Head Start, Early Childhood Support Networks, GSQ Resource Centers, GSCs, GSPCs, the MDHHS, Early Childhood Administrators Network (ECAN), Tribal partners, Michigan Association for the Education of Young Children, ECIC, Hope Starts Here, Flint Early Childhood Partnership, Michigan¿s Children, Michigan League for Public Policy, Women¿s Commission, along with various other partners received an email with information about the plan and all opportunities for providing public comment. They were each asked to distribute notice of the opportunity through their listservs and networks. They were each asked to distribute notice of the opportunities through their listservs and networks. All survey links, listening session dates and public hearing dates were posted on the CDC website and meet Americans with Disabilities Act (ADA) compliance. To expand participation and garner additional stakeholder feedback, the Department issued five

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surveys on five specific areas of the State Plan. These included: GSQ Resource Centers, the consumer education website, eligibility, health and safety requirements, and Great Start to Quality. These surveys were open from March 29 ¿ May 7, 2021. MDE also requested that the ECSNs hold regional listening sessions covering the same five topic areas. By providing the surveys, listening sessions and the four hearing dates Michigan provided a variety of opportunities for input and feedback to meet a variety of needs.

- f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Comments received by the public were reviewed and evaluated to determine whether any updates or edits needed to be made for the plan to ensure up to date information regarding Michigan; s implementation of the regulations. Any suggestions for implementation changes or policy changes will be reviewed and evaluated by MDE for future implementation.
- 1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: https://www.acf.hhs.gov/occ/resource/pi-2009-01)
 - a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

https://www.michigan.gov/mde/0,4615,7-140-63533 63534 71161-347829--,00.html

b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe
the strategies below, including any relevant website links as examples.
☐ Working with advisory committees.
Describe:
https://www.michigan.gov/mde/0,4615,7-140-63533_63534_71161-347829,00.html
✓ Working with child care resource and referral agencies.
Describe:
Updates are shared monthly during director meetings or through electronic messages

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as applicable.

Providing translation in other languages. Describe:
Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe:
Providing notification to stakeholders (e.g., parent and family groups, provider groups, advocacy groups). Describe: Describe:
Updates provided via partner emails and list servs as applicable.
Working with statewide afterschool networks or similar coordinating entities for out-of-school time.
Other.
Describe:

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

Lead Agencies are required to describe how the state or territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the federal, state/territory, and local levels for children in the programs listed below. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care (98.14(a)(1)).

1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(0); 98.12(a); 98.14(a)).

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This list includes agencies or programs required by law or rule, along with a list of optional partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services.

Include in the descriptions the goals of this coordination, such as:

- -- extending the day or year of services for families;
- -- smoothing transitions for children between programs or as they age into school;
- -- enhancing and aligning the quality of services for infants and toddlers through schoolage children;
- -- linking comprehensive services to children in child care or school age settings; or
- -- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

- a. The Lead Agency is required to coordinate with the following agencies. Provide a description for how coordination occurred.
 - i. Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals, processes, and results:

MI utilizes a variety of locally led structures that bring together conversations around our four OGS outcomes. These locally led structures include general purpose government bodies as part of their membersship. Primarily these groups are convened via the Great Start Collaboratives (GSCs) or the Early Childhood Support Networks (ECSNs)

ii. State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). Describe the coordination goals, processes, and results:

Meeting monthly, the Great Start Operational Team (GSOT) serves as the State Advisory Council on Early Care and Education. GSOT membership includes the required agencies and partners in leadership roles in a mixed delivery system and seeks to ensure coordination of efforts that reach the four overarching goals of Michigan's system, of which child care is an integral part. In addition to serving as the State Advisory Council the group also guides operational coordination of interagency initiatives that align with the Governor's early childhood outcomes for the population of 0-to 8-year-olds; identify

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opportunities for reform, innovation, and alignment of resources in an efficient manner across agencies; and coordinate and conceptualize the preparation of interagency grant opportunities. This group meets monthly.

In addition, the CDC program office is engaged by providing updates with the Michigan State Board of Education and the Office of Great Start Advisory Council to ensure that there are coordinated system building efforts.

Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

iii. Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals, processes, and results, including which tribe(s) was (were) consulted:

Consultation meeting sharing included topics that provided updates and opportunities for tribal partners to participate in the Departments' efforts to increase the quality of child care. These tribes, including; Bay Mills Indian Community, Grand Traverse Band of Ottawa and Chippewa Indians, Hannahville Indian Community, Nottawaseppi Huron Band of the Potawatomi, Keweenaw Bay Indian Community, Lac Vieux Desert Band of Lake Superior Chippewa Indians of Michigan, Little River Band of Ottawa Indians, Little Traverse Bay Bands of Odawa Indians, Match-e-be-nash-she-wish Band of Pottawatomi Indians of Michigan, Pokagon Band of Potawatomi Indians (Michigan and Indiana), Saginaw Chippewa Indian Tribe of Michigan, Sault Ste. Marie Tribe of Chippewa Indians of Michigan, included sharing the MRS overview, drafting of the Child Care Development Fund (CCDF) Plan, working to increase communication and sharing, breaking down barriers, increasing coordination and providing connections to quality improvement activities. In addition, consultation often included the CCLB and other partners.

N/A-Check here if there are no Indian tribes and/or tribal organizations in the state.

iv. State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Part B, Section 619 for preschool). Describe the coordination goals, processes, and results:

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The Michigan Interagency Coordinating Council (MICC) is authorized and required by Part C of the Individuals with Disabilities Education Act (IDEA) as amended by Public Law 105-17. MDE is the Lead Agency for the state. MICC is charged with advising and assisting the Lead Agency on the coordination of an early intervention system. The State of Michigan created the Office of Great Start to redesign and enhance the early childhood system. The OGS includes Part C of IDEA, Part B, Section 619, and the CDC entities for the state.

v. State/territory office/director for Head Start state collaboration. Describe the coordination goals, processes, and results:

Coordination goals are focused on ensuring low-income children have access to high quality care and that, for those who are eligible they can access child care subsidy to increase continuity of care and the utilization of maximum funding to support children and families. The two offices work in partnership to meet with the Early Head Start-Child Care (EHS-CC) Partnership grantees in Michigan. In addition, a partnership with the Michigan Head Start Association (MHSA) is in place to support grantees and ensure child care barriers for families are known and addressed and support efforts around the early childhood workforce and increase technical assistance availability. In addition, the CCDF Administrator, Head Start State Collaboration Director, the federal technical assistance providers, and the MHSA Director meet regularly to ensure coordination. The Head Start State Collaboration Office is also part of the OGS within MDE.

vi. State/territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals, processes, and results:

MDE works with the MDHHS (which has funding for public health initiatives, mental health initiatives, home visiting, and Medicaid) to ensure that children are born healthy, and children are healthy, thriving and developmentally on track by third grade. Efforts include home visiting initiatives, immunizations, social emotional consultation, and developmental screening coordination to ensure access to children/families. MDHHS representatives sit on advisory committees that focus on inclusion of children with special needs. In addition, Michigan has a cross sector Departmental leadership group, the GSOT, that allows for state government to coordinate early childhood policy, funding and programs leading to collaboration and integration at all levels.

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vii. State/territory agency responsible for employment services/workforce development. Describe the coordination goals, processes, and results:

Michigan Economic Development Corporation-Workforce Development Agency (WDA) and the CDC Program coordinate with the Partnership, Accountability, Training, Hope, (PATH) program implemented by the WDA designed to establish and maintain a connection to the labor market for Temporary Assistance for Needy Families (TANF) recipients and recipients of child care assistance. Participants often also receive CDC services and are placed into employment and education and training programs.

viii. State/territory agency responsible for public education, including Prekindergarten (PreK). Describe the coordination goals, processes, and results:

MDE is the lead agency for CCDF. In addition, MDE manages the state funded prekindergarten program, the 21st Century Community Learning Centers, early intervention, and early childhood special education programs under Part B (Section619) and C of IDEA. These programs are all part of OGS. MDE representatives sit on advisory committees that focus on inclusion of children with special needs. In addition, Michigan has a cross sector Departmental leadership group, the GSOT, that allows for state government to coordinate early childhood policy, funding and programs leading to collaboration and integration at all levels. MDE participates in this group to ensure coordination across programs. MDE also participates with ECAN (Early Childhood Administrators Network), which is the leadership group for state Pre-k. MDE coordinates across these programs to ensure access throughout the mixed delivery system, by holding joint meetings to discuss policy and implementation in order to make changes that meet the needs of children and families.

ix. State/territory agency responsible for child care licensing. Describe the coordination goals, processes, and results:

CCLB is located in the Department of Licensing and Regulatory Affairs (LARA) and they act as the lead agency for ensuring that all licensing rules and regulations are being met by licensed and registered child care providers across the state. OGS coordinates with CCLB related to criminal history checks, implementation of new rules for programs, and GSQ. CCLB is also represented on the GSOT.

x. State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals,

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processes, and results:

As part of the lead agency, the CDC program shares information with CACFP (including home-based providers and license exempt providers who are related to the child) to facilitate recruitment of programs. This includes program information, such as reimbursement rates and income guidelines; how to apply to the program; forms and instructions; operational memos; training, such as webinars, as well as the training schedule; regulatory information; resources, including financial resources; and related websites. This information is provided through website and is sorted by topic area. Additional partners include the United States Department of Agriculture-Food and Nutrition Services (USDA-FNS) and the USDA-Team Nutrition. In addition, connections exist for the state's QRIS, GSQ by allowing for programs who participate to earn points towards their star rating.

xi. McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons. Describe the coordination goals, processes, and results: The McKinney-Vento State Coordinator and Special Populations Manager, also part of the lead agency, worked with the program to develop a "working with homeless children and families" training that is offered through the GSQ Resource Centers across the state. Regular meetings ensure the training is up to date and relevant. Beyond the regular meetings there are also opportunities for the homeless liaisons in local communities to share information about the child care program with families.

xii. State/territory agency responsible for the Temporary Assistance for Needy Families (TANF) program. Describe the coordination goals, processes, and results:

The program goal is to provide accessibility to services that that are intended to allow children to be cared for in their own homes or in the home of relatives or to end the dependence of needy parents on government benefits by promoting job preparation and work. In January 2018, a simplified assistance application was launched, allowing a client to apply for all five major programs. This application is the culmination of many state and private agencies, with public testing and feedback, working together for over two years to achieve an application that is 80% smaller than its predecessor, customer focused rather than program focused, and the start of more customer focused initiatives in technology and case work. In 2020, a pilot was implemented to simplify the redetermination for all five of major programs. Statewide implementation was September 2020. TANF funds are

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used to provide direct support services to help CDC clients achieve self- sufficiency. Direct support services include employment support services (i.e., transportation, special clothing, tools, vehicle purchases and vehicle repair), family support services (i.e., classes and seminars, counseling services and commodities), provide consumer education about the CDC subsidy program and parental provider choices. Additionally, families participating in Michigan's TANF funded cash assistance program, the Family Independence Program (FIP), qualify for CDC. Copayments are waived for these families as well.

xiii. Agency responsible for Medicaid and the state Childrenâs Health Insurance Program. Describe the coordination goals, processes, and results:

MDHHS is responsible for public health initiatives, mental health initiatives, and Medicaid. Representatives from these areas are also GSOT members. Coordination of Medicaid funding to help bring access to infant/mental health social emotional consultation to children and famlies is the mixed-delivery system.

xiv. State/territory agency responsible for mental health. Describe the coordination goals, processes, and results:

MDE is currently working with the MDHHS to enhance the quality of services, through the work of the state's social emotional consultants, funded through the Professional Development Grant (PDG) B-5 grant and CCDF. Social emotional consultants (18 counties) are providing training and ongoing coaching around infant mental health and Center on the Social Emotional Foundations for Early Learning (CSEFEL) strategies to increase the overall quality of social emotional services and health for providers, children, and families. In addition, statewide supports are being developed to support via trainings and peer support groups as we navigate through the pandemic. These social emotional consultants are focused on the highest risk populations, birth to 5 years, and linking providers and families to comprehensive community resources.

xv. Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Describe the coordination goals, processes, and results:

MDE partners (via agreements) with four regional ECSNs, GSQRCs, ECIC, MiAEYC who all assist providers with participating in GSQ, provide workforce development,

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scholarships, operating lending libraries and assisting parents without access to the 24/7

online database with finding child care.

The Michigan Farm to ECE Network, a group of over 30 organizations working together for over two years, collaborates so children ages birth to 5 can grow, choose, and eat nutritious local food in early care and education settings. The network exists to improve access to healthy food and early childhood outcomes, increase nutritional awareness and healthy outcomes, and support early childhood education providers as they work to improve children's learning environments. We do this by sharing resources and making connections between community and state partners, producers, early childhood education providers, and families.

xvi. Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals, processes, and results:

A CS Mott Foundation grant that funds the Michigan Afterschool Network - the Michigan After-School Partnership (MASP), which works to increase the supply and quality of programming for children in Michigan. MDE/OGS supports and coordinates with the MASP to extend the day or year of services for families and smooth transitions for all children including vulnerable populations, between programs or as they age into school by ensuring inclusion of before-school, after-school, and summer programming options for families by linking MASP data on program offerings with family information resources. Provide training/professional development and quality supports for programs participating in GSQ; QRIS. Networks are being developed to assist with transition from early childhood programs to out-of-school time (OST) programs with aligned standards of quality and continuity of supports for OST providers.

xvii. Agency responsible for emergency management and response. Describe the coordination goals, processes, and results:

As the lead agency, the MDE/CDC coordinated with the MDE Emergency Management Coordinator (EMC). The MDE EMC coordinates with the MDHHS and CCLB EMCs to help with coordination and management of emergency procedures for child care providers.

1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist

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children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).

- b. The following are examples of optional partners a state might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination goals, processes and results.
- ☑ i. State/territory/local agencies with Early Head Start Child Care Partnership grants.

Describe

Coordination goals focus on ensuring low-income children and families have access to high- quality care, particularly full-day, full-year services through an agreement. Increased access to child care subsidy as a mechanism for ensuring continuity of care and maximization of funding resources for full year, full day care. Meet quarterly with Michigan's EHS-CC Partnership grantees, the HSSCO Director and MHSA; coordinate with the MHSA and the HSSCO Director to support grantees and identify access barriers; coordinate conversations with local MDHHS offices to address eligibility issues; and support efforts around the early childhood workforce and provision of technical assistance. An MOU was created for all EHS-CC Partnership grantees to allow for blending of CCDF funding to ensure access to full-year, full-day care.

☑ ii. State/territory institutions for higher education, including community colleges

Describe

To support quality child care services, the lead agency partners with both associate and bachelor's degree granting institutions to ensure coursework is aligned to our core knowledge and core competencies and to promote strong articulation agreements for ease of moving from the Child Development Association (CDA) to an associate or bachelor's degree. We have hosted higher education summits to connect and continue toward the ultimate goal of a competent workforce. In addition, we have partnered with 10 higher education institutions to develop infant and toddler specific coursework. Each college was required to develop a minimum of one new college course that would be included as part of their early childhood degree program. Support was provided by Zero to Three and participating colleges were part of a cohort model. With the implementation of our new teacher certification structure, Michigan will now offer a birth through kindergarten and a preschool through third

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grade certification band. We heavily engaged both associate and bachelor's degree granting institutions in the writing of the standards for each of the new bands and are currently working with our associate degree granting colleges on some alignment documents to support the field and ease transfer and articulation agreements going forward.

iii. Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services.

Describe

n/a

iv. State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.

Describe

The MDHHS provides leadership for the Michigan Home Visiting Initiative (MHVI), which includes the Maternal, Infant and Early Childhood Home Visitation Program for which they are fiduciary, as well as home visiting programs funded with Medicaid, state public health, mental health, children's trust fund resources, and state school aid. The purpose of the Michigan Home Visiting Initiative (MHVI) is described in the initiative's overall goals: 1) to build the evidence-based home visiting (EBHV) systemin the state, and 2) to integrate the home visiting system within the comprehensive Great Start Early Childhood system. Representatives from the Initiative participate on the GSOT with the State Child Care Administrator and other agency staff. Agencies bring forward requests for coordination of services or supports for young children and their families, as well as ensuring that GSOT is aware of program or agency goals that may impact or need cross-sector coordination.

v. Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.

Describe

Medicaid is administered by the MDHHS. Representatives from this program participate on the GSOT with MDE. The goal of the efforts is to increase the number of children receiving screenings. With our PDG B-5 funding MDE will be starting a state scan to determine what developmental screenings are being used across the state and where the universal screenings are being conducted. In addition, with PDG B-5

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funding we will be creating tools and training to better support child care providers.

☑ vi. State/territory agency responsible for child welfare.

Describe

The goal of the CDC program is to support low-income families by providing access to high-quality, affordable, and accessible early learning and development opportunities and to assist the family in achieving economic independence and self-sufficiency. The CDC program is intended to promote continuity of care and to extend the time an eligible child has access to child care assistance by providing a subsidy for child care services for qualifying families. In order to ensure access to the most vulnerable of this population, all age-eligible children whose family has a need and the child is in foster care, the family receives TANF, the parent or child receive supplemental security income (SSI), the parent is a migrant farmworker, the child is experiencing homelessness, or the family has an active substantiated neglect/abuse case qualify for protective services and shall be considered without an income test and is determined on a case by case basis. Additionally, children experiencing homelessness and those placed in licensed foster care are determined under expedited processing and presumptive eligibility that waives most verification requirements temporarily. MDE meets regularly with MDHHS staff from child welfare/foster care to ensure the policies and practices in place or proposed are serving this vulnerable population.

vii. Provider groups or associations.

Describe

n/a

viii. Parent groups or organizations.

Describe

The lead agency interacts with provider groups and associations through a variety of activities (webinars and in person meetings) to gather program feedback and offer guidance.

ix. Other.

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Describe

GSCs and GSPCs. The lead agency coordinates with the 60 GSPCs across Michigan by information sharing with their 9,000 members regarding quality child care to ensure information can be used for local planning with families.

In addition, MDE is a member of the T.E.A.C.H. Early Childhood®, Michigan advisory team. Staff from the department are also involved in committees and workgroups of MiAEYC.

The CDC Director also participates as an advisory member for the Child Care Innovation Fund housed at ECIC.

Optional Use of Combined Funds:

States and territories have the option to combine CCDF funds with any program identified as required in 1.4.1. These programs include those operating at the federal, state, and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers and school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, state/territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a state/territory may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or state/territory prekindergarten requirements in addition to state/territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start - Child Care Partnerships:

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https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf).

1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

GSRP funds are used for some populations of children who also utilize or could utilize child care subsidy, creating layered funding streams.

b) Which funds you will combine

At least 90% of the funds from GSRP, Michigan's State-funded pre-K program, serve four-year-old children from families at or below 250% of the federal poverty level (FPL). 31.16% of GSRP slots are being operated with community-based partners, many in child care centers. CCDF funds may be used for before/aftercare while state funds in the form of GSRP cover up to 6.5 hours of care for up to four days per week in a high-quality setting for working families who utilize both GSRP and child care subsidy. This use of GSRP funds for many children who would be eligible for child care subsidy combined with the subsidy dollars that pay for care for other eligible children, in effect allows the CCDF funding to serve many more children who would be eligible for subsidy. An increasingly common program model in Michigan is the Head Start-GSRP blend, currently representing 16% of all children served in GSRP where a half-day Head Start slot and half-day GSRP slot combine to provide a full-day experience. Use of this model expands the number of children receiving high-quality, full-day programming with Head Start comprehensive services. All Head Start and GSRP policies and regulations apply to blended slots, and adherence to the most stringent of either program's standard is required. Head Start and Early Head Start programs also partner with child care programs in several ways, including for wraparound care. Michigan received five EHS-CC partnership grants and these grantees plan to layer child care subsidy and EHS-CCP funds to provide full-day, full-year infant and toddler care.

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c. What is your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care, or developing the supply of child care for vulnerable populations? Note: Responses should align with the goals, processes and results describe in 1.4.1.

To reduce transitions for children and families, creates higher quality settings in the form of additional training supports and combined resources, as well as creates full-day care in high quality settings for populations at or below 250% FPL.

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

A majority, currently 86%, of children in GSRP are now in school daycare, usually scheduled at 6.5 hours per day, four days per week, while their parents are working. This represents both the GSRP school-day option as well as the Head Start-GSRP blend option. Where GSRP operates, this creates the reduced need for CCDF funding to only require wrap-around before/after care.

e) How are the funds tracked and method of oversight

Funding streams are tracked/monitored separately as funds may be used in combination at the center level.

1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)?

Note:

Lead Agencies that use Prekindergarten funds to meet matching requirements must check Prekindergarten funds and public and/or private funds.

Use of PreK for Maintenance of Effort: The CCDF final rule clarifies that public preK funds may also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate preK and child care services to expand the availability of child care while using

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public preK funds as no more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for preK services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

a. N/A - The territory is not required to meet CCDF matching and MOE requirements	
b. Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.	
i. If checked, identify the source of funds:	
State general funds.	
 c. Private donated funds are used to meet the CCDF matching funds requirement Only private funds received by the designated entities or by the Lead Agency may counted for match purposes (98.53(f)). i. If checked, are those funds: 	
A. Donated directly to the State?	
B. Donated to a separate entity(ies) designated to receive private donated funds?	
ii. If checked, identify the name, address, contact, and type of entities designated	to
receive private donated funds:	
d. State expenditures for ProK programs are used to most the CCDE matching	

d. State expenditures for PreK programs are used to meet the CCDF matching funds requirement.

If checked, provide the estimated percentage of the matching fund requirement that will be met with Prekindergarten expenditures (not to exceed 30 percent): 29

i. If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:

Both the pre-K program and the child care program are part of the same agency. In

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addition to child care funds supporting wrap-around care for eligible pre-K children, the pre-K program requires all programs to be rated at least three stars in QRIS and ensures that 30% of pre-K programs are located in community-based organizations, including Head Start programs.

ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents:

GSRP requires 30% of all enrollments be in pre-k programs located in community-based organizations, including private child care and Head Start programs.

- e. State expenditures for Prekindergarten programs are used to meet the CCDF maintenance-of-effort requirements. If checked,
 - i. Assure by describing how the Lead Agency did not reduce its level of effort in full-day/full-year child care services, pursuant to 98.55(h)(1) and 98.15(a)(6).

The State of Michigan has not reduced its MOE amount from State general funds for, at minimum, the past 10 years.

ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents:

GSRP, Michigan's pre-K program for four-year-olds determined to be at-risk for school failure, requires parent involvement in decision making at the local and grantee levels, in part to ensure that GSRP services meet the needs of parents. Several aspects of GSRP requirements support meeting those needs. Decisions are made at the local level as to the program options intermediate school districts (ISD) as grantees and local partners will offer to families. Programs may either be part-day, school-day or a GSRP/Head Start blend. Recent years have seen a continuing move from part-day to the other two options, specifically in response to the needs of working parents.

- iii. Estimated percentage of the MOE Fund requirement that will be met with Prekindergarten expenditures (not to exceed 20 percent): 20
- iv. If the percentage is more than 10 percent of the MOE requirement, describe how the state will coordinate its Prekindergarten and child care services to expand the availability of child care:

GSRP plays an active role in the School Readiness Advisory Committee of their

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GSC's work on building the local early childhood system. As a part of this effort the committee annually looks at the need for overall early childhood education and care services within the area as well as the need for GSRP sites. Parents are a part of this committee. The committee works on developing additional community partners, encouraging current child care center partners to expand services to new areas and increasing the ability of current child care centers to participate in GSQ. GSRP often assists in these efforts by sharing professional learning opportunities with local child care providers.

f. The same funds are used to meet at least some of the CCDF MOE and TANF MOE requirements.

i. If known, what percent of funds used to meet CCDF MOE also is used to meet TANF MOE requirements? 36.4

1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

1.6.1 Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of the CCDBG Act. Include in the response any public-private partnerships that have emerged from the response to the COVID-19 pandemic (98.16(d)(2)) and if applicable, how those partnerships will be continued post-pandemic.

The Head Start State Collaboration Office and the CDC program developed, through a Memorandum of Understanding, a pilot program centered on Michigan's Early Head Start-Child Care Partnership grants. The pilot allows EHS-CCP child care partners to bill for the

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full amount of subsidy a partnership-enrolled child is eligible for (current subsidy policy disallows reimbursement for the portion of the day funded by another public funding source, including Early Head Start). Justification for a departure from current policy for the EHS-CCP pilot includes facilitation of the EHS-CCP layered funding model advanced by the Offices of Head Start and Child Care; encouraging continuity of care for infants and toddlers in poverty; and, increasing the capacity of providers to provide quality care to low-income infants and toddlers. Layering of subsidy will allow EHS-CCP grantees to utilize the partnership dollars to improve the quality of care provided by their partners.

MDE also has an agreement with the GISD to facilitate the utilization of diverse federal, state, and private funding streams to provide full day, full year services to children ages 0-5 impacted by the Flint Declaration of Emergency. Funding allows for the expansion of high quality, comprehensive early childhood services, particularly in the areas of family engagement and physical, behavioral, and mental health.

The Michigan Women's Commission (MWC), housed within the Michigan Department of Labor and Economic Opportunity (LEO) is currently implementing the MI Tri-Share Child Care Pilot Program. This program is an innovative public/private partnership that seeks to increase access to high quality, affordable child care for working families that also helps remove a barrier to employment and helps employers retain talent. Through Tri-Share, the cost of child care is shared equally by an eligible employee, their employer and the State of Michigan, with coordination provided regionally by a facilitator hub. The pilot is currently underway in three regions of the state: Muskegon County, the Great Lakes Bay Region and a five-county rural region in northwest lower Michigan. Facilitator hubs in each region are actively working with local employers to identify eligible employees and to help connect those employees with child care providers that meet the unique needs of each family. MDE is a state level partner supporting the implementation of the pilot.

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1.7 Coordination With Local or Regional Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system or network of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined by the state/territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (such as a statewide CCR&R network) (658E(c)(3)(B)(iii); 98.52).

If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency:

- Provide parents in the state with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.
- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).
- Collect data and provide information on the coordination of services and supports, including services under Part B, Section 619 and Part C of the Individuals with Disabilities Education Act.
- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State.
- Work to establish partnerships with public agencies and private entities, including faith- based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

Nothing in the statute or rule prohibits States from using CCR&R agencies to conduct or provide

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additional services beyond those required by statute or rule.

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, describe what services are provided and how it is structured. Use subsection 7.5 to address the services provided by the local or regional child care resource and referral agencies and the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

1.7.1 Does the Lead Agency fund a system of local or regional CCR&R organizations?

No No	. The state/territory	does not fund	a CCR&R	organization(s)	and has	no	plans
to	establish one.						

Yes. The state/territory funds a CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the following:

How are CCR&R services organized? Include how many agencies, if there is a statewide network, and if the system is coordinated:

The Department has an agreement with four regional ECSNs and ECIC to implement specific aspects of the state's quality set aside activities.

The Early Childhood Support Network is comprised of 4 regions throughout the state of Michigan: eastern, northern, southeastern, and western. The network regions are designed to provide development of, and facilitate access to, a coordinated, easy-to-navigate early childhood system for licensed early learning and development program, license exempt subsidized providers and families that addresses the needs of the whole child.

The ECSNs facilitate cross-sector collaboration within the region for maximum utilization of federal, state, and local resources to promote quality childcare provision and equitable access to early childhood support and services. The ECSN provides systems development, professional learning, and technical assistance for the Great Start Network, which includes the Great Start to Quality Resource Centers, Great Start Collaboratives and Parent Coalitions.

ECIC implements the state's quality rating improvement system, Great Start to Quality, and conducts the federally required health and safety visits for license exempt subsidized (formerly referred to as unlicensed, subsidized) providers.

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GSQ launched in the fall of 2011 and encompasses a 24/7 searchable database for families, a network of regional network or resource centers, the quality rating system, MiRegistry, and T.E.A.C.H. Early Childhood® MICHIGAN. Great Start to Quality is a continuum of quality improvement supports and services for license exempt subsidized providers and licensed early learning and development programs. Research demonstrates that young children with high needs benefit most from participation in high quality early learning and development programs. GSQ is designed to support all children in all early learning and development programs, early childhood educators, and license exempt subsidized providers with supports and services and provide intensive consultation to those early learning and development programs serving children with high needs.

A key component of Great Start to Quality is the provision of GSQ Resource Centers. The Resource Centers provide a comprehensive system of supports and services designed to improve quality across all early learning and development settings. These include:

- professional development opportunities.
- quality improvement consultations, coaching, supports, and resources for licensed early learning and development programs and license exempt subsidized providers.
- provide consumer education to families concerning a full range of child care options and work directly with families to support their informed decision-making about a child care setting that best suits their needs.

GSQ Resource Centers provide consultation to early learning and development programs serving infants and toddlers through a cadre of quality improvement consultants. The quality improvement consultants offer consultation to identify areas for improvement, develop quality improvement plans, and conduct quality assessments.

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1.8 Disaster Preparedness and Response Plan

In past disasters, and in response to the COVID-19 pandemic, the provision of emergency child care services and rebuilding and restoring of child care infrastructure has emerged as an essential service. Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they will address the needs of children - including the need for safe child care before, during, and after a state of emergency declared by the Governor, or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122) - through a Statewide Disaster Plan. The effective date for the establishment of this Statewide Disaster Plan was October 1, 2018.

1.8.1 Did you make any updates to the Statewide Disaster Plan since the FY 2019-2021 CCDF Plan was submitted? Please consider any updates that were made as a result of the Lead Agencyâs experiences in responding to the COVID-19 pandemic. (Note: It is a Lead Agency decision on how often a plan should be updated and which entities, if any, should be collaborated with in the updating process.)

☑ No	
Yes	
If yes, o	describe the elements of the plan that were updated: Click or tap here to enter
text.	
n/a	

1.8.2 To demonstrate continued compliance with the required elements in the Statewide Disaster Plan, certify by checking the required elements included in the current State Disaster Preparedness and Response Plan.

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[☑] i. State human services agency

[☑] ii. State emergency management agency

- iii. State licensing agency
- v. State health department or public health department
- v. Local and state child care resource and referral agencies
- vi. State Advisory Council on Early Childhood Education and Care or similar coordinating body
- ☑ b. The plan includes guidelines for the continuation of child care subsidies.
- ☑ c. The plan includes guidelines for the continuation of child care services.
- d. The plan includes procedures for the coordination of post-disaster recovery of child care services.
- e. The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:
- i. Procedures for evacuation
- ii. Procedures for relocation
- iii. Procedures for shelter-in-place
- ☑ iv. Procedures for communication and reunification with families
- v. Procedures for continuity of operations
- vi. Procedures for accommodations of infants and toddlers
- vii. Procedures for accommodations of children with disabilities
- ☑ viii. Procedures for accommodations of children with chronic medical conditions
- f. The plan contains procedures for staff and volunteer emergency preparedness training.
- ☑ g. The plan contains procedures for staff and volunteer practice drills.

1.8.3 If available, provide the direct URL/website link to the website where the statewide child care disaster plan is posted:

https://www.michigan.gov/documents/michiganprepares/MDHHS_EOP_Base_Plan_2020_Final_710680_7.pdf

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