

Program Operations Manual for Child Care Resource and Referral Entities



Author:

Maidie Rosengarden Ed.D.

Contributors:

Gwyn Bachtle and The Programs Design and Administration Office, DELC

Dana Bleakney-Huebsch

Jon Reeves and The Professional Learning Systems Office, DELC

Dorothy Spence and The Childcare Assistance Program Team, DELC

Special Thanks to:

Child Care and Resource Referral Agencies

Jordan Pargeter

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Introduction

This Operations Manual directs current Baby Promise contractors (hereafter known as the Child Care Resource and Referral, or CCR&R). Caring for our most vulnerable population is a serious undertaking, offering work of value, meaning, and profound joy for those whose calling is to care for and educate babies and toddlers.

Like the rest of the country, Oregon is experiencing a true crisis in infant and toddler care, as the state lacks a supply of qualified and prepared early learning and care program options for our youngest children. There are many barriers that Oregon families experience such as long wait lists, limited choices of providers, and costs of care that rival the cost of college tuition. The Department of Early Learning and Care (DELIC) is continuously working towards increasing families' access to care and stabilizing and strengthening existing early learning and care programming in communities around Oregon.

DELIC strives to ensure that children and families have access to high-quality early care and education. Research continues to demonstrate the importance of high-quality early care and education for children's brain development, social-emotional growth, and school readiness skills. DELIC launched the Baby Promise Program in March of 2020 to address this issue.

The purpose of the Baby Promise Program is to both increase access to high-quality infant- toddler care (6 weeks through 3 years of age) and to enhance quality in existing Early Learning and Care Programs in Oregon. Baby Promise offers funded slots to children of families who are income eligible for the ERDC Program. Over time, Baby Promise will increase the number of high-quality programs available to serving families who qualify.

The Baby Promise Program is targeted to serve low-income families in communities struggling to find and keep high-quality care for infants and toddlers. DELIC distributes the Baby Promise grant funds to regional organizations or agencies.

The Child Care Resource and Referral Agency (CCR&R) is the organization currently designated by DELIC in some regions of the state to administer the Baby Promise Program through separate grant agreements. The work of the CCR&R shall align with the mission of DELIC to support all of Oregon's young children and families to learn and thrive. DELIC's values include equity, making a positive impact for children and families, dedication, integrity, and collective wisdom – all with the goal of benefiting Oregon children and families and those who serve them. Finally, for children whose families choose or need out-of-home childcare, it is important that high-quality early care and education options are available and accessible.

Baby Promise Program objectives and principles:

- Baby Promise Program Providers engage with a system of Infant-Toddler Specialists (through CCR&Rs) who provide supports and professional development for networks of Early Learning and Care Programs who are participating in Baby Promise to ensure implementation of quality, relational care.
- CCR&Rs align with the mission of DELC to support all of Oregon's young children and families to learn and thrive.
- CCR&Rs assist programs to support inclusion and equity through individualized strategies to help address the needs of all children.
- CCR&Rs subcontracts with Early Learning and Care Programs in communities, allowing DELC and the CCR&R to be intentional about building sustainable, quality infant and toddler slots over time, address the need to reimburse providers for the true cost of high-quality infant and toddler care, and ensure that salary guidelines are implemented.
- DELC and the CCR&R prioritize communities with an extreme shortage of childcare and provide access for priority populations.
- DELC and the CCR&R support programs to meet standards associated with infant and toddler care quality and developmentally appropriate practices that result in high-quality environments and experiences.
- The Baby Promise Program incorporates a mixed-delivery approach to operationalize high-quality early learning experiences in a wide variety of settings. This provides options for family choice.

Terms and Definitions

The Baby Promise Operations Manual is divided into sections that outline the Baby Promise Program's programmatic specifications and reporting requirements necessary for the CCR&R to administer the program in its region. This Manual is intended to help the CCR&R navigate these requirements and direct the implementation and delivery of high-quality services. The Manual will be updated annually. CCR&Rs and Baby Promise Program Providers will be notified when revisions are made.

If a CCR&R is unable to meet a requirement of the Baby Promise Program before contracting with DELC or during the contract period the CCR&R or the Early Learning and Care Program (or provider), the CCR&R shall, pursuant to the terms of its grant agreement, contact the DELC Baby Promise Manager to determine if the need for a waiver, memorandum of understanding, or other appropriate action is necessary to

determine next steps.

If a Baby Promise Program Provider is unable to meet a requirement of the Baby Promise Program before subcontracting with the CCR&R or during the sub contractual period the CCR&R shall, pursuant to the terms of its grant agreement, contact the DELC Baby Promise Manager to determine if the need for a waiver, memorandum of understanding, or other appropriate action is necessary to determine next steps.

The following terms are important to consider while reading through this Manual:

- **MAY** – The word “may” when used in this Manual offers the CCR&R and/or the Baby Promise Program Provider options to consider when creating policies and procedures. The word “may” indicate an area where flexibility and problem solving can assist the CCR&R and the program to meet a requirement.
- **MUST** – The word “must” when used in this Manual, indicates a **requirement** of Baby Promise that is associated with a grant deliverable or health and safety, and is mandatory for Baby Promise Program Providers.
- **SHALL** – The word “shall” when used in this Manual, indicates how, or using which tools, a requirement of the Baby Promise Program can or will be met.

Definitions

For the purposes of this Manual, the term “Baby Promise Program Provider” is a subgrantee of the CCR&R with whom the CCR&R has subcontracted. The terms “Early Learning and Care Program” or “provider” are Early Learning and Care Programs that are businesses with a mission of caring for and educating young children, such as in home childcare providers, childcare facilities serving children of employees, Early Head Start classrooms or centers, or community-based organizations serving young children. For the purposes of this Manual, the term “Early Learning and Care Program” or “provider” is such a business and may not be a Baby Promise Program Provider. A “Baby Promise Program Provider” is such a business **and** a subgrantee of a CCR&R with the Baby Promise Program.

CCR&Rs may subcontract for eligibility and enrollment services with other entities, for example Early Learning Hub or Head Starts. Some enrollment processes outlined in this Manual may include collaboration with other agencies.

A glossary of additional terms and appendices that are helpful for Baby Promise implementation is included at the end of the guidebook.

Recruiting Programs for Baby Promise

Recruitment and Readiness.

The CCR&R must develop a strategy to locate and engage programs in their community. This strategy should include a process for assessing an Early Learning and Care Program's viability as well as developing a cost per child and budget.

The CCR&R shall use the DELC provided forms with Early Learning and Care Programs that seek to apply for Baby Promise subcontracts. The CCR&R shall assist programs wishing to use Baby Promise branded templates or forms through collaboration with the DELC Baby Promise Manager to ensure the language translation process is completed when possible. The CCR&R may request language translation for Baby Promise forms or templates when needed.

Prior to subcontracting with an Early Learning and Care Program, the CCR&R shall submit the name and license number (if applicable) of the program to DELC for review. To be eligible for participation in the Baby Promise Program, Early Learning and Care Programs must be listed with ERDC.

Technical assistance given to providers may vary based on a provider's need in preparing to become a Baby Promise Program Provider. Building positive long-term relationships with CCR&R Technical Assistance staff shall require CCR&Rs to approach providers with a growth mindset to support providers in operationalizing business strategies to maintain services, onboarding elements of infant toddler care, understanding regular cycles of assessment and growth.

The CCR&R must conduct a thorough, in person orientation with Early Learning and Care Programs when appropriate during the application process including a careful review of the Baby Promise Program Guidebook for Providers.

DELC may review Early Learning and Care Programs to determine if they meet the eligibility thresholds for Baby Promise. These thresholds include but are not limited to:

- Ability of the program to conduct itself in a manner aligned with the NAEYC Code of Ethical Conduct
- Ability to comply with USDA Food Program nutritional guidelines.
- Ability to meet minimum Early Educator/teacher qualification.
- No civil penalties in the past 24 months
- No open investigations with DELC and/or partner agencies

- No Serious Violation Findings within the past 24 months, which include:¹
 - Adults required to be enrolled in the Central Background Registry are present in the program without current enrollment.
 - Children are in imminent danger.
 - Children are not supervised.
 - Extreme unsanitary conditions.
 - Inappropriate guidance and discipline.
 - Multiple or serious fire, health, or safety hazards.
 - Providing care without being licensed with the Child Care Licensing Division (CCLD) as required by rule.
 - Safe Sleep Violations and,
 - There are more children than allowed.
- Spark Rating¹

Cost Per Child

CCR&R must work with Baby Promise Program Providers to develop a cost per child that includes:

- Formula and food
- Insurance
- Personal care items (e.g., Diapers, wipes, diaper cream, and sunscreen)
- Professional development costs
- Program and classroom materials
- Rent and utilities
- Shared services fee
- Staffing

To support the retention of highly prepared and qualified staff, Baby Promise Program Providers are required to compensate Early Educators at competitive and comparable salary levels with those of other Early Educators in their region serving publicly funded programs.

¹ Early Learning and Care Programs with a single Serious Violation Finding within the past 24 months may be considered if they can successfully pass the [Spark Rating Review Process](#).

Pre/Post Evaluation

The CCR&R shall assess the quality of Baby Promise s participating in Baby Promise. Site observations must occur at the beginning and the end of the subcontract period. Data from relational and environmental assessments must be used to inform technical assistance, FCCN, Spark, and CoP activities, and shared with the program and DELC. Funding Guidelines for Subcontracted Programs

Baby Promise Funding

The CCR&R shall create and enter into subcontracts with Baby Promise Program Providers. The CCR&R will require Baby Promise Program Providers to deliver infant-toddler services according to defined programmatic and fiscal expectations and in accordance with this Manual. Each subcontract shall incorporate the relevant terms of this Manual.

The CCR&R is required to compensate Baby Promise Program Providers for those services according to the terms of the subcontract. Baby Promise funding from the CCR&R pursuant to the terms of the subcontract shall be contingent on the actual delivery of Baby Promise services by Baby Promise Program Providers. Baby Promise funding may be used only for the operation and delivery of Baby Promise services.

Annual Budget

The CCR&R shall require all Baby Promise Program Providers to submit an annual operating budget outlining the intended use of Baby Promise funds. Baby Promise Program Providers should be advised that the submission of a budget does not constitute CCR&R approval of the expenditures.

Baby Promise Program Providers shall develop a budget according to the allowable uses and expenses for the Baby Promise program, which may rely on self-attestation by the provider. All categories in the budget must be in compliance with this Manual and approved by the CCR&R.

Preliminary budgets are submitted to the CCR&R prior to the subcontract being fully executed. The CCR&R shall require the official budget to be completed no later than thirty (30) days after entering into a subcontract and annually thereafter.

Expenditure Guidelines

The CCR&R shall oversee Baby Promise Program Providers to ensure they expend funds provided for Baby Promise solely on the operation and delivery of Baby Promise services and in accordance with the program's annual budget and this Manual.

Subsidy Funds

Funding allocated for the subcontracted slot payments are solely for the direct care of children. The CCR&R cannot claim indirect expenditures on any of the subsidy funds per Child Care Development Block Grant requirements.

Indirect Rate

The CCR&R may take an indirect rate. This rate may vary depending upon the approved indirect rate from the backbone agency.

Subcontracted Slot Payments

Pursuant to the terms of each subcontract and this Manual, the CCR&R shall provide monthly pre-payments for subcontracted slots for eligible Baby Promise children to Baby Promise Program Providers. These payments will not be negatively impacted by minor fluctuations in a child's attendance (see attendance policy).

Prohibition Against Loans

Baby Promise funding cannot be loaned or advanced to individuals, corporations, organizations, public agencies, or private agencies. Baby Promise funds may not be used as collateral for loans.

Allowable Uses of Funds by CCR&Rs

Allowable uses of Baby Promise funds for the operation and delivery of Baby Promise services include, but are not limited to:

- Associated administrative overhead
- Coordination of social services for Baby Promise children and families
- Curriculum materials
- Diapers, formula, food, and other items for Baby Promise children
- Early Educator and other direct service personnel (i.e. transportation, foodservices) compensation and benefits
- Facilitation of Baby Promise eligible children's transition to prekindergarten
- Family engagement activities
- Materials for the environment
- Monthly staff meeting materials
- Paid preparation and planning time for Baby Promise Early Educators
- Professional and community events
- Professional development activities

- Screening and assessment tools
- Travel expenses; must be directly related to the implementation of the Baby Promise Program

Prohibited Expenditures for CCR&Rs

Baby Promise funds may not be used to supplant other public funding sources including, but not limited to, any state or federal funding. Baby Promise funds must be treated as restricted income and used solely to deliver Baby Promise services. Baby Promise funds may not be used to cover expenses that are not directly related to the Baby Promise Program. Prohibited expenses include, but are not limited to, the following:

- Bad debts, including losses arising from uncollectible accounts and any related legal costs
- Compensation to the members of the board of directors, if applicable
- Cost of idle facilities unless those costs are related to the Baby Promise Program and the costs of the idle facilities have been approved by the CCR&R and DELC
- Costs associated with the purchase of alcohol, drugs or for any associated use for gambling purposes
- Costs incurred after the subcontract has been terminated
- Costs of amusement or entertainment that do not benefit children in the Baby Promise Program
- Costs of legal, consulting and accounting services arising from claims against the Early Learning and Care Program
- Costs of organization of a nonprofit corporation such as incorporation fees or consultant fees
- Fundraising costs
- Investment management costs
- Non-sufficient funds/overdraft and ATM usage bank charges
- Personal or business loans including finance charges
- Projects or expenditures in excess of five thousand dollars (\$5,000), without prior approval
- Public relations consultant fees
- Purchase of vehicles or other transportation equipment

- Religious materials
- Travel expenses that are not directly related to the implementation of the Baby Promise Program

The CCR&R must ensure that that no Baby Promise funds are used by Baby Promise Program Providers to pay penalties associated with adverse actions imposed by licensing or governmental agencies. Baby Promise funds should be identifiable as separate from other federal and state funds.

Prohibition Against Loans

Baby Promise funding cannot be loaned or advanced to individuals, corporations, organizations, public agencies, or private agencies. Baby Promise funds may not be used as collateral for loans.

Allowable Uses of Funds by Baby Promise Program Providers

The CCR&R must include these allowable uses of funds in each subcontract with a Baby Promise Program Provider. Allowable uses of Baby Promise funds for the operation and delivery of Baby Promise services include, but are not limited to:

- Associated administrative overhead
- Coordination of social services for Baby Promise children and families
- Curriculum materials
- Diapers, formula, food, and other items for Baby Promise children
- Early Educator and other direct service personnel (i.e. transportation, foodservices) compensation and benefits
- Facilitation of Baby Promise eligible children's transition to prekindergarten
- Family engagement activities
- Materials for the environment
- Monthly staff meeting materials
- Paid preparation and planning time for Baby Promise Early Educators
- Professional and community events
- Professional development activities
- Screening and assessment tools
- Travel expenses; must be directly related to the implementation of the Baby Promise Program

Prohibited Expenditures for Baby Promise Program Providers

The CCR&R must include these prohibited expenditures in each subcontract with a Baby Promise Program Provider. Baby Promise funds may not be used to supplant other public funding sources including, but not limited to, any state or federal funding. Baby Promise funds must be treated as restricted income and used solely to deliver Baby Promise services. Baby Promise funds may not be used to cover expenses that are not directly related to the Baby Promise Program. Prohibited expenses include, but are not limited to, the following:

- Bad debts, including losses arising from uncollectible accounts and any related legal costs
- Compensation to the members of the board of directors, if applicable
- Cost of idle facilities unless those costs are related to the Baby Promise Program and the costs of the idle facilities have been approved by the CCR&R and DELC
- Costs associated with the purchase of alcohol, drugs or for any associated use for gambling purposes
- Costs incurred after the subcontract has been terminated
- Costs of amusement or entertainment that do not benefit children in the Baby Promise Program
- Costs of legal, consulting and accounting services arising from claims against the Early Learning and Care Program
- Costs of organization of a nonprofit corporation such as incorporation fees or consultant fees
- Fundraising costs
- Investment management costs
- Non-sufficient funds/overdraft and ATM usage bank charges
- Personal or business loans including finance charges
- Projects or expenditures in excess of five thousand dollars (\$5,000), without prior approval
- Public relations consultant fees
- Purchase of vehicles or other transportation equipment
- Religious materials
- Travel expenses that are not directly related to the implementation of the Baby

Promise Program

Prohibition Against Loans

Baby Promise funding cannot be loaned or advanced to individuals, corporations, organizations, public agencies, or private agencies. Baby Promise funds may not be used as collateral for loans.

Environmental Enhancements

The CCR&R may provide environmental enhancements to Baby Promise Program Providers to increase quality and/or meet licensing standards or expectations of the Baby Promise Program. The distribution of funds must be conducted in a manner that provides equitable offerings of materials and educational opportunities across programs within a given region. This may result in some programs receiving very little environmental enhancements while others may receive significant investments for multiple years, depending on need.

Enhancements are to support children 6 weeks to 3 years of age and the spaces and educators that serve them. For questions about appropriate expenditures, please consult DELC. Purchases should be made to secure high-quality, lasting materials that are durable and natural in nature.

Screens for children, most battery-operated toys and restrictive equipment such as saucers and swings are prohibited. For family-based programs, special considerations for high chairs may be appropriate for meal times only, but other accommodations that increase a child's independence and opportunities to interact with peers are preferred.

When selecting enhancements, CCR&Rs must ensure that materials are developmentally appropriate and are sufficient in quantity to allow for play by multiple children.

Funds may be used to cover insurance expenses in the following situations:

- For programs providing non-traditional/odd-hour care to off-set the cost of these exceptionally expensive policies
- For significant, unanticipated rate increases to help providers maintain coverage and participation in Baby Promise
- To support newly subcontracted programs in their first year of obtaining insurance coverage at the required thresholds

Additionally, CCR&Rs shall ensure that CCDF fund expenditures align with CCDF requirements, which do not allow construction or the purchase of sectarian materials, for example. Please see the [Code of Federal Regulations](#) for more information.

Restrictive Equipment

The CCR&R shall ensure that restrictive equipment such as saucers, swings, bouncy chairs, etc. are not used in Baby Promise Program Providers. High chairs may be used during mealtimes; however, in adherence to a relational model, children must be held during feeding if they are unable to sit safely. Once able to sit independently, it is preferred that children transition to small tables and chairs for interaction purposes with the other children in the program.

Provision of Supplies

Formula, Diapers, Sunscreen, Wipes

The CCR&Rs must ensure that Baby Promise Program Providers provide formula, diapers, sunscreen, and wipes (for use while the child is physically present at the program facility) to Baby Promise families. The program shall obtain written consent from the family to use the product provided by the program and program staff must use the product as specified by the manufacturer. For families with product preferences, providers are encouraged to provide a preference form for families and seek options that are reasonable for both the provider and the family.

Fiscal Reporting Requirements

Baby Promise Program Providers must send the CCR&R funding and expenditure information for the purpose of developing an accurate cost per child and to show that Baby Promise funds were spent as intended and in acceptable expenditure categories. If the CCR&R subcontracts with a sole proprietor (self-employed family childcare provider) the expenditure report will only include business expenses not including payroll. The funding not reported in those categories is considered the sole proprietor's income.

The CCR&R may withhold payments if the fiscal reports are late, not submitted, incomplete, or inaccurate. See Section on Expenditure Guidelines.

Annual Independent Audit

The CCR&R shall require the Early Learning and Care Program to submit a copy of their independent certified audit report and financial statements if they are subject to independent audit requirements. Audit reports must be submitted to CCR&R within thirty (30) days of receipt. If independent, certified audit reports or financial reports are not required for the Provider, they are not required to submit one.

Access to Records and Other Documentation

The CCR&R and DELC may require access to Baby Promise Program Providers records including, but not limited to:

- attendance and enrollment records
- bank statements and canceled checks
- by-laws, if applicable
- cash receipts and disbursement books
- children's assessment documentation
- consent forms
- documentation relating to family participation
- Early Learning and Care Program calendars
- family handbook
- general journals
- general ledgers, invoices and supporting documents
- growth and development plans (staff or program)
- insurance policies
- list of current Board of Directors, if incorporated
- lists specifying qualifications, dates of hire, and dates of termination
- marketing materials
- non-paid staff and volunteer sign-in sheets
- payroll ledgers and supporting documents
- records of children enrolled in the Baby Promise Program
- staff time sheets
- statements of income and expenses
- tax returns
- transportation and other related service subcontracts
- tuition rates

Fraudulent Use of Funds

The CCR&R and DELC may use information from other sources to assess the fiscal viability of the Early Learning and Care Program or to make decisions with respect to offering a subcontract or continuing to fund an Early Learning and Care Program. Misuse of funds may result in termination of Early Learning and Care Program's subcontract and the denial of future participation in the Baby Promise Program and other publicly funded programs.

Baby Promise Program Providers shall ensure that expenses charged to the Baby Promise funding source are not concurrently charged to another program fund source. Baby Promise Program Providers must ensure that no Baby Promise funds are used to pay penalties associated with adverse actions imposed by licensing or governmental agencies. Baby Promise funds should be identifiable as separate from other federal and state funds. Baby Promise Program Providers must return any funds determined to have been misspent, spent fraudulently, or not in accordance with the expectations of Baby Promise.

Continued Funding

The Baby Promise Program Providers has no vested right to continued funding for Baby Promise services beyond the end of its subcontract with the CCR&R. Any future funding will be conditioned on, among other things, the Early Learning and Care Program's agreement to Baby Promise Program modifications, should they be required to meet requirements of the Baby Promise Program.

Fiscal Desk Reviews

DELIC reserves the right to perform detailed reviews of fiscal ledgers and receipts of the CCR&R at least once per biennium. Written notification will be provided to the CCR&R prior to the review and will include months to be reviewed and documentation requested.

Insurance Requirements

The terms of the grant agreement (and any amendments thereto) between DELIC and the CCR&R shall outline the minimum insurance requirements for the CCR&R and the requirements that must be met by the Baby Promise Program Providers that are awarded Baby Promise slots. These minimum insurance requirements are designed to support the professional capacity of the Baby Promise Program Providers and to provide a foundational protection for the businesses that operate while operating programs that use public funding to support high-quality services.

Baby Promise Program Providers are responsible for maintaining business, liability, and transportation insurance, in addition to any other coverage required to participate in the program as outlined in the yearly subcontracts with the CCR&R. In some cases where additional Baby Promise insurance requirements (beyond that of regular business coverage) add significant cost to programs and providers, they may reach out to the CCR&R for possible assistance.

CCR&R Personnel and Training

CCR&R Personnel Changes

Any CCR&R Baby Promise personnel changes shall be reported within 10 business to DELC. Note that currently, staff employed by the CCR&R hold a variety of titles including but not limited to:

- Coach
- Family Engagement Specialist
- Infant Toddler Specialist
- Program Manager
- Program Specialist
- Quality Improvement Specialist

It is the purview of the CCR&R to make employment related decisions that best suit the CCR&R regarding titles and job duties. Baby Promise Program Providers may work with several staff depending on the job duties assigned by the CCR&R. Roles and responsibilities for support staff may overlap, and it is DELC's expectation that Baby Promise Program Providers and CCR&R staff build positive relationships and share knowledge to provide continuous development of effective practices for staff and children. Baby Promise Program Providers are encouraged to work closely with the CCR&R to best understand the CCR&R's expectations of each CCR&R employee working with the program or provider and their staff.

Personnel

Key functions within the Baby Promise Program must be embedded within positions hired by the CCR&R. The CCR&Rs in Baby Promise regions must have at a minimum one full-time Infant Toddler Specialist, in addition to any other Infant Toddler Specialists employed using funds from their grant. This position must have expertise and content knowledge for providing support to programs serving infants and toddlers. During onboarding, the CCR&R must provide Infant Toddler Specialists with a hard copy of the Oregon Infant Toddler Specialist Practice Guide.

The Infant Toddler Specialist shall lead Focused Child Care Networks (comprised of Baby Promise Program Providers) and potentially Communities of Practice, specifically working with Early Educators or administrators/directors to develop their growth and development processes, provide professional development, individualized on-site coaching, and other supports to facilitate high-quality care amongst Baby Promise

Program Providers. Qualifications

Preferred Qualifications for Baby Promise Infant Toddler Specialists are as follows:

Strong Educational Background in Early Childhood Education
<ul style="list-style-type: none">✓ Bachelor's degree in early childhood education, bachelor's degree in a related field and coursework in early childhood education, or a step 10 or higher on the Oregon registry.
Experience Working with Infants and Toddlers
<ul style="list-style-type: none">✓ At least two years of experience in an early childhood or youth development program with specific experience working with the age group or focus area of the position.
Ability to Develop and Conduct Training for Early Educators
<ul style="list-style-type: none">✓ Oregon Registry Master Trainer
Cultural, Linguistic, and Equity Skills
<ul style="list-style-type: none">✓ Culturally competent, able to understand and avoid bias.✓ Demonstrated skills, education and abilities in anti-bias and cultural competency, ongoing training, and reflective supervision✓ Ability to meet the cultural and linguistic needs of Early Educators

If current staff or a future applicant does not meet the minimum qualifications set forth in the Grant, the Grantee must communicate this in writing to the Agency and must create a plan of collaboration with the Agency to ensure all individuals meet minimum qualifications within an Agency-determined timeline.

The CCR&R must have a position that fulfills the eligibility, recruitment, selection, and enrollment functions of children in Baby Promise. This position is responsible for reporting monthly and quarterly to DELC.

The CCR&R must have a designated position that fulfills the management and oversight of subcontracts with Baby Promise Program Providers. This position is responsible for administering subcontracted slot payments, maintaining records, billing, and monitoring each Early Learning and Care Program receiving Baby Promise subcontract funds.

Criminal Background Checks

The CCR&R must have documentation of a completed and satisfactory criminal

background check ([CBR](#)) on file for all positions associated with Baby

Baby Promise Program Providers

Personnel Changes

Any Baby Promise Program Provider personnel changes shall be reported within 14 calendar days to the CCR&R, and any staffing changes or extended leaves within the CCR&R that impact Baby Promise Programs and providers will be reported to the provider in a timely manner.

To seek planned and focused development, the CCR&R, in partnership with Baby Promise Program Providers, shall monitor the professional environment and instructional support given to Baby Promise participant's staff. The following conditions shall be present in every program with Baby Promise slots:

Training Costs and Reimbursement to Staff

Baby Promise Program Providers may include reasonable amounts for professional development/training opportunities in their cost per child calculations, substitutes and mileage costs associated with travel to the training opportunities. Mileage and associated per diems will be reimbursed at the current state government rates. [Per Diem Rates](#)

Early Educator Qualifications

Early Educators participating in Baby Promise must have an Infant Toddler Child Development associate degree, an associate degree in early childhood education, a related degree, or Oregon Registry Step 8 or higher with training or equivalent coursework that includes 12 credits in early childhood development with a focus on infant and toddler development. Programs with Early Educators that do not currently meet these requirements will need to directly address this issue in their Continuous Growth and Development Plans.

Salary

To support the retention of highly prepared and qualified staff, Baby Promise Program Providers are required to compensate Early Educators at competitive and comparable salary levels with those of other Early Educators in their region serving publicly funded programs.

Preparation and Planning Time

Baby Promise Program Providers shall provide Early Educators with a reasonable amount of paid preparation and planning time each week, without children present.

Paid Time Off

Baby Promise Program Providers participating in Baby Promise shall offer program personnel paid time off (sick, personal, vacation) per Oregon employment law, [BOLI](#) (Bureau of Labor and Industry) rules and guidance, and applicable Collective Bargaining Agreements. Business coaching from the CCR&R will be provided to programs that do not offer paid time off for employees or are developing these policies.

Training and Professional Development

Early Educators in Baby Promise Programs are required to have Professional Development Plans (PDP) and participate in at least twenty (20) hours of professional development activities per Program Year. The CCR&R must establish partnerships with local community colleges and universities to ensure that Early Educators have access to achieve an Infant Toddler Child Development associate degree or other higher education degree.

To improve the quality of instruction in Baby Promise Programs, the CCR&R must monitor the professional environment and instructional support given to Early Learning and Care Program staff. The following conditions may be present in every Baby Promise Program:

Central Background Registry

Baby Promise Program Providers and providers must have documentation of a completed and satisfactory Central Background Registry check on file for all positions within the program. Note that this registry requires fingerprinting.

Safe Sleep Training

All Baby Promise staff must take the Safe Sleep for Oregon's Infants (SS) Training. Link: [Safe Sleep Training](#)

Staff Requirement: ZERO TO THREE.

[\(Zero to Three\)](#) Program staff working directly with children must complete the Zero to Three training offered by the CCR&R within 18 months of hire.

Child and Family Eligibility for Baby Promise

Eligibility Process

The CCR&R shall identify families that may qualify for Baby Promise Further, the CCR&R shall work closely with the Employment Related Day Care (ERDC) program to identify

potential Baby Promise families. The CCR&R shall maintain a waiting list for Baby Promise per the enrollment forms provided by DELC.

The CCR&R must work closely with Baby Promise Program Providers to fill open Baby Promise slots. Families eligible for Baby Promise slots may choose the Baby Promise Program Provider that best meets their needs.

Age Requirement

Children in the Baby Promise Program shall be at least six (6) weeks of age and can be served until the child is eligible for preschool (3 years old on or before September 1st of the program year). See the section on transition planning for more detail.

Baby Promise Program Providers with waiting lists that include families that are income eligible, or currently receiving care with ERDC, may refer families to the CCR&R for potential placement in a Baby Promise slot, or placement on the Baby Promise waiting list held by the CCR&R or Early Learning Hub. Baby Promise Program Providers may not offer, promise, or enroll families in Baby Promise slots. Placement in a Baby Promise slot is the responsibility of the CCR&R.

Only families who meet the eligibility thresholds for ERDC will be eligible for Baby Promise. If a family's income no longer meets eligibility thresholds for ERDC during the sub contractual period with the program the CCR&R shall not reimburse the program for that family effective as of the date that eligibility is discontinued. If ineligibility is the result of an error the CCR&R may consult with the DELC Baby Promise Program Manager to determine reimbursement.

The CCR&R will work with the program and the family to best meet both parties' needs if a Baby Promise family wishes to change to a provider who is not a Baby Promise provider. A family or child may lose ERDC eligibility if they have moved out of state, requested their ERDC benefits to close, or exceeded the income threshold.

Income Eligibility for ERDC

At the time of enrollment in the Baby Promise Program children must be members of families whose incomes meet the ERDC eligibility thresholds. For more information visit: [ERDC Provider Information](#)

Residency Requirement

Children participating in the Baby Promise Program must be Oregon residents and residing within Baby Promise counties. Families will continue to be eligible for ERDC benefits for the full 12-month certification even if they move out of the Baby Promise pilot counties unless they meet one of the expectations outlined above.

Requirements for Hours in Care

Baby Promise slots are designated for families that meet the eligibility criteria.

Transition Planning

A smooth transition ensures each child continues to receive enriching early child development services and that each family continues to receive the support services necessary to promote healthy family development. The CCR&R must work with DELC's data gathering systems to ensure that all types of transition plans are tracked.

To ensure the most appropriate placement and services following participation in Baby Promise, the Program must plan for the transition for each child and family at least six months prior to the child's third birthday (or known transition before aging out of the Baby Promise Program). The Program shall consider the child's health status and developmental level; current and changing family circumstances; the availability of other child development services in the community (i.e., ERDC, Preschool Promise, EI/ECSE, and Head Start), and engagement of Early Educators from current and potential transition programs and other partnering organizations.

If the child turns 3 within the program year, they are eligible to receive Baby Promise services until August 31st of that year. If continued placement in a Baby Promise slot is in the best interest of the child and is limited in duration, the CCR&R, on a case-by-case basis, must submit a transition plan to extend care for a child over 3 years of age to DELC for approval.

The CCR&R may work with Baby Promise Program/provider and family to facilitate the transition process from Baby Promise into a spot in their current ERDC subsidy program or into other, high-quality programs and support services when the child leaves the Baby Promise Program.

As part of any transition process (e.g. from one Baby Promise site to another, from Baby Promise to a community setting, transition to a publicly funded preschool program or to another preschool setting) and upon written request/release of information from the family, the CCR&R, in partnership with the Early Learning and Care Program, will forward copies of a child's records to the new environment.

Enrollment Processes

Enrollment

The Early Learning Hub or CCR&R is responsible for enrolling families with Baby Promise Program Providers. The Early Learning Hub or CCR&R must follow the enrollment process outlined in the DELC provided enrollment forms. The forms

provide directions for creating and using wait lists for Baby Promise slots. See the eligibility section for more information. Inclusionary Practices

Baby Promise Program Providers must develop written enrollment policies to meet the needs of children and families in the community. Enrollment policies must state that the infant-toddler program is open and does not discriminate against a child or family based on race, ethnicity, religion, gender, gender identity, gender expression, sexual orientation, or any other protected class. Written enrollment policies must be verified by the CCR&R, provided to families, and available upon request.

Baby Promise Program Providers offering Baby Promise slots shall comply with, and make accommodations for, children identified as eligible for special education and/or related services under the Individuals with Disabilities Education Act ([IDEA](#)) and the ADA ([Americans with Disabilities Act](#)).

The CCR&R must verify that the Early Learning and Care Program conducts individualized assessments to facilitate the successful integration of children with identified special needs with accommodations and/or modifications. The child's Individualized Family Service Plan (IFSP) and recommendations of the relevant placement committee or team will determine appropriate placement for special education and related services.

Exclusionary Practices

Baby Promise Program Providers must commit to substantially reducing and preventing suspension, expulsion, and other exclusionary practices in early learning settings. The CCR&R is committed to ensuring all children have access to and are successful in high-quality early learning environments, which support kindergarten readiness skills and social emotional development.

The CCR&R requires Baby Promise Program Providers caring for children receiving childcare assistance to have an inclusive policy that is expressly communicated to families and related to anti-exclusionary practices.

The CCR&R shall work closely with Baby Promise Program Providers and providers to provide training and resources needed to enhance family and Early Educator knowledge and skills in supporting children's physical, social, emotional, and cognitive development. The training shall address how Baby Promise Program Providers can make program modifications to prevent a child's removal or exclusion from the early learning and care environment.

Baby Promise Program Providers are prohibited from "trial periods" (a trial period is a period during which the program may expel a child and family). Programs are encouraged to utilize the CCR&R for support if they experience challenges with a family

that may require additional facilitation from the CCR&R.

Program Fees

Baby Promise Program Providers are prohibited from charging families of Baby Promise children any fees or tuition (except for late pickup fees). At no cost to the families, Baby Promise Program Providers must provide items such as food (meals, diapers, wipes, formula, diaper cream, and sunscreen) to Baby Promise children while the child is physically present at the Baby Promise Program Providers facility.

Scheduling

Program Year

The Program Year for Baby Promise providers and families begins on September 1 and ends on August 31 each year. This is different than the fiscal year for Baby Promise which is July 1 to June 30 each year. The schedule of service delivery may vary within the program year, but the hours of direct service requirement shall be satisfied no later than August 31. Actual dates a child may receive care will vary and are dependent upon eligibility criteria, enrollment date, age, etc.

Program Calendar

CCR&R must collect and approve program calendars prior to the execution of the Early Learning and Care Program's subcontract, and each program year thereafter. Program calendars must include planned days of service, total direct service hours, holiday closures, vacation closures, and training days. Baby Promise Program Providers must clearly outline late fee policies in program calendar materials. Baby Promise Program Providers must submit to the CCR&R any changes to an accepted program calendar as soon as known to the program. Changes do not need to be submitted to DELC unless it affects required hours of service or changes that affect compliance with the Operations Manual requirements.

Hours of Direct Service

Baby Promise Program Providers must provide year-round, full-day services (except for planned days of in-service, holiday closures, vacation closures, training days, or any other planned closures) to support the needs of working families.

Full-day service means the Early Learning and Care Program must accommodate the needs of families by providing direct service hours that range between 8 to 10 hours per day. Baby Promise Program Providers must offer a minimum of 1800 hours of planned direct service during the Baby Promise program year. The CCR&R must approve planned hours of direct service prior to subcontracting with a program. See the

reporting section of this Manual for more information on the collection and reporting of direct service hours, and the family and eligibility section of this Manual for more information on enrollment and attendance.

Continuity of care is an element of high-quality care for infants and toddlers. The intent of the Baby Promise program is for families enrolled in a Baby Promise slot to remain with the same Program of Early Learning and Care and their primary Early Educator while they are eligible.

Direct service hours may include all instructional time, outdoor gross motor activities, developmentally appropriate mealtimes, and rest time. Family Conferences, in-service or training days, educator planning time, and transportation time are not to be included in the hours of direct services. Occasional field trips outside the normal service hours may be counted toward hours of direct service.

Reporting

Technology Requirements

The CCR&R must ensure that Baby Promise Program Providers have a suitable and secure computer with appropriate software, printer/scanner, Internet, and valid email address for administration of the program. Additionally, the CCR&R must obtain email addresses for all Early Educators caring for Baby Promise children for evaluation purposes.

Recordkeeping

The CCR&R will work with Baby Promise Program Providers to maintain child and financial records in a secure location to ensure confidentiality and prevent unauthorized access. Baby Promise Program Providers must maintain detailed financial records including, but not limited to, general ledgers, receipts, invoices, and all supporting documentation to track Baby Promise Program Providers' expenditures.

Notification of Address Change or Change in Ownership

The CCR&R shall require the Baby Promise Program Providers to notify them in writing of any change in their mailing address within five (5) days of the change. The Baby Promise Program Providers will notify the CCR&R of any proposed change in operating facility address, ownership, or classroom move at least ninety (90) days in advance of the proposed change. The Early Learning and Care Program will also notify the CCR&R of any change in location due to an emergency or disaster as soon as is practical.

The CCR&R shall provide written approval or denial of a Baby Promise Program Participant's change in location request. If the CCR&R denies the request, the Baby Promise subcontract and funding shall be terminated.

Monthly Reports

Following each month of care, CCR&Rs shall submit to DELC (no later than the 20th of the month) a report with elements related to enrollment, hours in care, and transition information for every Baby Promise child who leaves or ages out during the month. Report elements and methods of secure delivery will be communicated by DELC.

Data Collection

The CCR&R shall collect data on behalf of DELC for monitoring and evaluation purposes. As the CCR&R conducts initial site visits to Baby Promise Program Providers and providers to determine readiness they may collect photographic and video evidence of Baby Promise Program Providers. The intention of capturing this evidence will be to reflect on the before-and-after impacts of environmental enhancement funds, training, and technical assistance. DELC will provide an orientation to CCR&R staff for data collection and training on how data is collected.

Attendance Data

The CCR&R must review each Baby Promise Program Providers annual attendance data prior to subcontracting with a program following the first year of program participation. Baby Promise Program Providers are required to demonstrate that for the scheduled program calendar year, children in all Baby Promise slots attended an average minimum of 85% attendance of their regularly scheduled planned days on the scheduled program calendar.

Enrollment Reporting

Baby Promise Program Providers and providers must submit a monthly attendance report to the CCR&R. Baby Promise Program Providers must inform the CCR&R immediately in the event a child's family withdraws the child from the program.

The CCR&R must work with Baby Promise Program Providers to maintain full enrollment in each subcontracted slot. The CCR&R shall include the local Early Learning Hub if additional services, beyond what the CCR&R can provide in that instance, are needed to assist Baby Promise Program Providers in maintaining full enrollment in each subcontracted slot. The number of subcontracted slots for a program may be reduced if a program chooses not to fill open slots when there are waitlisted families available to fill open slots. If the CCR&R does not fill any vacancy within 30 days, an explanation and improvement plan must be submitted to DELC no later than 45 days after the date of vacancy

It is the role of the CCR&R staff to consult with Baby Promise Program Providers on the number of slots to subcontract for, taking into consideration the many factors that impact community need. CCR&R staff shall work with Baby Promise Program Providers

to carefully consider the impact on their business should a slot go unfilled.

Forms

CCR&R staff shall work with Baby Promise Programs who request to use Baby Promise standardized, branded forms or templates. CCR&R staff shall work with DELC to develop such materials when needed. CCR&R staff and Baby Promise programs may request language translation for Baby Promise templates or forms.

Attendance

Policy and Procedure

Baby Promise Program Providers and providers must implement strategies to promote attendance by providing information about the benefits of regular attendance, supporting families to promote the child's regular attendance, and maintaining contact with families when a child first has two or more unexplained absences.

Programs must maintain sign-in sheets or digital attendance records signed by authorized family representatives. Attendance records must be available upon request and meet all regulatory requirements, such as date, arrival times, and departure times for each child.

Within the first 60 days of enrollment in a Baby Promise slot and on an ongoing basis thereafter, Baby Promise Program Providers shall use individual child attendance data to identify families with patterns of unexcused absences that put them at risk of attending less than 85% of the families regularly planned days of care for the month.

If, after 60 days a family is experiencing multiple unexcused absences, and the Baby Promise Program Providers is unsuccessful in communicating with the family the Baby Promise Program Providers must inform their enrollment specialist at the CCR&R or Early Learning Hub and request assistance in meeting with the family and the appropriate CCR&R or Early Learning Hub staff member to create an attendance support plan.

For the provider and the CCR&R or Early Learning Hub, the meeting and creation of an attendance support plan provides an opportunity for continuing to build a positive relationship with the family and better understand the families' circumstance.

For the family, the meeting is an opportunity to share barriers with program, CCR&R or Early Learning Hub staff, and to assist in the identification of potential solutions. The mutual creation of an attendance support plan provides the family an opportunity to better understand the benefits for children when maintaining regular attendance in an Early Learning and Care Program.

The written support plan must include a record of past attendance, identification of barriers, notes on solutions, and an outline that assists the family in meeting attendance

goals for the next 60 days by including a calendar that describes the support plan for attendance.

The support plan must be submitted to the CCR&R and may be subject to additional reviews. If the respective family does not adhere to the attendance plan or does not decrease unexcused absences over the second 60-day period, the Baby Promise Program Providers must again inform the CCR&R or Early Learning Hub. The CCR&R or Early Learning Hub shall meet with the Baby Promise Program Participant and the family to determine appropriate next steps, which may include termination of the respective child's slot in the Baby Promise Program or the loss of a slot for the Baby Promise Program Participant.

Extended Absence

In the event a child needs to take an extended leave of absence (two weeks or more), Baby Promise Program Providers, in partnership with the family, must submit documentation to CCR&R supporting excused absence to maintain a child's slot in Baby Promise.

Attendance Exceptions

Children with an appointment or absence in relation to an Individual Family Service Plan (IFSP), Foster Care Visitation, medical need such as doctor or dentist appointment, or who are at home due to illness may have their expected attendance adjusted with an excused absence.

Families who must leave the Baby Promise Program for a specified period during Baby Promise hours for a regular appointment related to an Individual Family Service Plan (IFSP), Foster Care Visitation, or medical need may have their expected attendance adjusted with an excused absence.

The CCR&R and Baby Promise Program Providers shall keep in mind the lens of equity as discussed later in this Manual. For example, some families do not live or work in the traditional model. Life or work circumstances for some families may include:

- cultural seasons or traditions,
- extended family involvement with children,
- location of parent or guardian(s) home(s),
- nontraditional work,
- seasonal work,
- transportation availability,
- travel time,

Circumstances such as these, and others, may cause barriers for families when planning to meet the attendance requirements in this Manual. When a CCR&R or Early Learning Hub enrolls a family, whose circumstances require meeting the attendance requirements listed in this Manual with more flexibility, they must inform the Baby Promise Program Providers upon enrollment and proactively work together to best meet the needs of all parties.

Late Pickup

Parent/Guardian is responsible for late pickup fees per the Baby Program Providers late pick up fee policy. As noted in the Program Calendar section, Baby Promise Program Providers must have regular business hours posted clearly.

Monitoring of Baby Promise Program Providers

Monitoring and Onsite Visits

DELC reserves the right to perform onsite and/or virtual monitoring visits at least once per biennium. The CCR&R shall monitor Baby Promise Program Providers in the various component areas listed below. DELC monitoring visits shall include a review of CCR&R monitoring activities:

- Evaluation of Spark star recognition level, and if applicable, progress in a Spark Quality Improvement cycle.
- Evaluation of the Early Learning and Care Program's accommodation for children with special needs
- Monitoring and coaching documentation
- Regular site visit documents
- Review CCR&R's completion of professional development and training goals for Baby Promise Program Providers
- Review of CCR&R and Early Learning and Care Program's financial records, accounting procedures, and fiscal viability
- Review of child records
- Review of Early Learning and Care Program's:
 - Family engagement activities
 - Curriculum

- Screening and assessment processes
- Licensing records
- Continuous Growth and Development Plans or CQI Plans
- Review of enrollment and attendance records
- Score(s) and Summary Reports from observation tools such as the Classroom Assessment Scoring System (CLASS) and Environmental Rating Scales (ERS/ITERS-3 and/or FCCERS-3)

Notification, agendas, and process documents shall be provided to the CCR&R by DELC prior to the visit. The CCR&R shall conduct monthly site visits to the Baby Promise Program Providers when children are present to monitor program quality and compliance with Baby Promise statutes, rules, and operations through announced and unannounced visits. DELC or the CCR&R may conduct quality reviews of Baby Promise Program Providers at any time. The CCR&R is required to report any concerns to the appropriate agency.

Health and Safety

Good Standing Requirements

Requirements

At all times Baby Promise Program Providers must be in compliance with all applicable local, state and federal laws, rules and regulations to participate in Baby Promise.

For licensed programs, the CCR&R shall work with DELC on an ongoing basis to support Baby Promise Program Providers in maintaining good standing with the Child Care Licensing Division (CCLD) ([Licensed Childcare](#)).

Early Learning and Care Programs and providers who are license exempt and would like to be Baby Promise Program Providers must meet additional training and safety requirements to be approved to provide child care through ERDC, including completing the Regulated Subsidy Child Care Health and Safety Review Checklist. See this link for more information: [ERDC Providers](#)

The CCR&R shall work with the Baby Promise Program Providers and providers to maintain best practices and understand licensing. The CCR&R must review the DELC "Observed Serious Health and Safety Policy and Procedure" with the Program and shall provide a hard copy of the document to the Program.

The CCR&R and DELC reserve the right to, and may, review an Early Learning and Care Program's licensing record at any time. CCR&R will require all Baby Promise Program Providers to report any licensing or compliance violations within two (2) business days.

Baby Promise Program Providers/providers must ensure that health and safety requirements are met. The CCR&R may terminate subcontracts with Baby Promise Program Providers for failure to meet good standing requirements including but not limited to violating any of the health and safety requirements listed below:

- Adults required to be enrolled in the Central Background Registry are present in the program without current enrollment
- Children are in imminent danger
- Children are not supervised
- Extreme unsanitary conditions
- Inappropriate guidance and discipline
- Multiple or serious fire, health, or safety hazards
- Providing care without being licensed with the Child Care Licensing Division (CCLD) as required by rule; etc.
- Safe Sleep Violations
- There are more children than allowed

The CCR&R shall notify DELC outlining circumstances of their intent to terminate a subcontract with a program prior to official termination.

Programs are encouraged to utilize the Health and Safety Screener developed by Head Start prior to applying to become a Baby Promise site ([Head Start Health and Safety Screener](#)).

Staff-Child Ratios

Licensed Baby Promise Program Providers must comply with the staff-child ratios for their license type. License exempt Baby Promise Program Providers must comply with the ratios described in "Rules for Certified Child Care Centers Table 3A", See the following link for more information: [Rules for Certified Child Care Centers](#). Regarding ratios, Early Head Start/Head Start programs must comply with the Head Start Performance Standards.

Feeding and Eating Practices

Nutritional Services

The CCR&Rs shall ensure that Baby Promise Program Providers meet the nutritional needs of the eligible children through participation or adherence to USDA CACFP ([USDA CACFP](#)) guidelines, or the utilization of recommended practices within [Caring for our Children: National Health and Safety Performance Standards Guidelines for Early Learning and Care Program \(4th edition\)](#).

Programs are not required to participate in the USDA CACFP program. Specifically, Baby Promise Program Providers' practices must align with the standards listed above and applicable state licensing standards on safe preparation and storage of snacks and meals, feeding of infants, choking hazards, serving size, self-feeding practices, dietary needs, and allergies. The Program's written care plan, submitted in accordance with the Program's licensing requirements, shall also align with the above standards.

Program practices shall be in the family handbook, and a menu of meals and snacks shall be posted and provided to families regularly. Families who provide a signed medical (MD signed) or religious statement of need for children's dietary restrictions must be honored. Families who provide a signed medical statement specifying a specific formula brand for their children must be honored.

Baby Promise Program Providers are expected to work with families on food preferences including culturally preferred preferences and to approach collaboration with families with a friendly, empathetic effect, and a desire to honor the families concerns. Providers are encouraged to reach out to the CCR&R for assistance when finding a resolution is needed.

The CCR&R shall provide guidance to programs that need support, communicating a process to families who may have allergies, family food preferences, and the creation of written care plans and forms.

Relational Dining

Also known as family-style or communal dining. The CCR&Rs must ensure that Baby Promise Program Providers adopt relational dining practices. This practice involves Early Educators sitting with children during meals in small groups, with children serving themselves (when possible) while sharing pleasant conversations. During these shared experiences, Early Educators shall be modeling appropriate and healthy eating habits, providing supportive guidance on serving sizes, and attuning to hunger and satiation cues.

CCR&Rs are encouraged to guide and support Baby Promise programs' cultural preferences for planning meal times and determining food cost for children. More guidance can be found at [Family Style Meal Service in the Child and Adult Care Food Program](#).

Breast Feeding Policies

The CCR&Rs must ensure that Baby Promise Program Providers have written policies that support and encourage breast-feeding and outline the process for storing breastmilk. and include an appropriate environment that facilitates breast-feeding if the parent chooses to do so onsite. Policies shall be available to families within the family handbook provided by the Baby Promise Program Providers.

Curriculum

Curriculum

Annually, CCR&R must verify that Baby Promise Program Providers use a curriculum and approach to teaching during the entire program year. The curriculum chosen must meet the requirements of the top tiers of Spark. For information on curriculum options within the Spark program, visit the Spark website ([Spark](#)).

Regardless of the curriculum or approach to teaching used, Baby Promise Program Providers must: (a) post a formal daily schedule of indoor and outdoor activities and routines, with opportunity for child-initiated and teacher-directed activities; (b) post activity plans; and (c) make a written curriculum statement available for staff and families.

Religion

Baby Promise Program Providers must not advance any religion during the instructional hours designated as Baby Promise Program. Any religious symbols located in or around the classroom do not need to be removed; however, they may not be incorporated or used in the selected curriculum, meals, music, art, story time, or teaching program. Note: religious materials may not be purchased with Baby Promise funds.

Screen Time

Television/telephones/movies/social media/projected video or internet content. The CCR&R must ensure that all Baby Promise Program Providers prohibit the use of all screen time for all children regardless of age. Children learn more effectively and efficiently when interacting with individuals and engaging with their physical and social surroundings. Screen time reduces the quality and quantity of these interactions and therefore is not allowable. Screens may not be used for music, movement, rest time, or any other planned or unplanned activity with children. All staff in the presence of children are expected to refrain from using screens unless the program requires the use of a device for attendance, meals, or other "real time" administration related directly to children in care. Photo documentation for portfolios and sharing with parents is permitted.

Field Trips

Field trips shall be developmentally engaging and appropriate. They must be free and available to all children participating in the Baby Promise Program. Baby Promise funds may be used to provide field trips or other appropriate instructional activities for the children. Field trips must be related to the curriculum and shall include a lesson plan demonstrating this connection. Programs are encouraged to share field trip lesson plans

with Infant Toddler Specialists and Quality Improvement Specialists during regular meetings.

High-Quality and Baby Promise

High-quality

Observable practices in an Early Learning and Care Program wishing to participate in Baby Promise. Providing high-quality care is foundational to what it means to be a Baby Promise Program Provider and DELC expects Baby Promise Program Providers and their staff to demonstrate an inquisitive nature and thoughtful reflection when engaging in the development and continued implementation of high-quality care and education. All program staff in Baby Promise Program Providers that subcontract with a CCR&R for Baby Promise slots must engage in continuous, focused growth and development (an element of high-quality) over time as they engage with CCR&Rs and DELC in the cycles of assessing, planning, and goal setting for themselves and the children they serve.

1. "High-quality" is a complex term, with multiple meanings including, but not limited to, the following examples: Raise Up Oregon: A Statewide Early Childhood System Plan ([Raise Up Oregon](#)) uses these terms to define high-quality:
 - o culturally responsive,
 - o developmentally appropriate.
 - o inclusive,
2. Developmentally Appropriate Practice (DAP), a term often used in the early learning profession is defined by the National Association for the Education of Young Children ([NAEYC](#)) as:
 - o Building on each child's strengths—and taking care to not harm any aspect of each child's physical, cognitive, social, or emotional well-being—educators design and implement learning environments to help all children achieve their full potential across all domains of development and across all content areas.
 - o Developmentally appropriate practice recognizes and supports everyone as a valued member of the learning community. As a result, to be developmentally appropriate, practices must also be culturally, linguistically, and ability appropriate for each child. [NAEYC DAP](#)
 - o Methods that promote each child's optimal development and learning through a strengths-based, play-based approach to joyful, engaged learning. Educators implement developmentally appropriate practice by recognizing the multiple assets all young children bring to the early learning program as unique individuals and as members of families and communities.

3. High-quality early care and education also includes appropriate ratios and group sizes, prepared and qualified educators, family engagement, warm and responsive environments, and individualized instruction. High-quality is not only what is safe for children, but also what is best for children in the many contexts in which we encounter them.

What is the understanding of high-quality within the CCR&R? In which of the many components of high-quality listed above does the CCR&R see itself reflected in the programs it serves? CCR&R staff who work with programs? Philosophy as an agency? As staff read through this Manual, note where this term is used and consider how the agency may plan to support Baby Promise Program Providers components, staff, and families.

Clearly, there are many aspects to the definition of high-quality. The CCR&R must support the growth and development of high-quality within Baby Promise Program Providers. If a program's practices are not aligned with high-quality the CCR&R must take steps to assist in the growth and development of the program utilizing the processes outlined in this Manual.

The CCR&R may, with consultation from DELC, place a program on a corrective action plan for failure to adhere to and provide high-quality care. The program must comply with the requirements of the corrective action plan. Ultimately, the CCR&R and DELC will determine if the program is meeting the many elements of high-quality and adhering to the corrective action plan.

Responsive Caregiving

Baby Promise Program Providers shall use responsive caregiving practices. Early Educators shall at all times be actively anticipating, and be responsive to, the cues and needs of each child. Early Educators shall interact in a sensitive, caring, and dependable manner.

The CCR&R must support responsive caregiving practices within the Early Learning and Care Program through professional development and in all areas including:

- Continuing to develop all program staff who work directly with children to promote children's ability to identify and express their emotions by modeling empathy and assisting children in showing empathy towards their peers.
- Continuing to develop all program staff with the understanding of developmentally appropriate practice and the process of "plan/do/assess" cycle around the tenets of DAP.

- Continuing to develop the skill of narrating what is happening to children during routines and activities (for all program staff who work directly with children).
- Recognizing and responding appropriately to children's individualized cues.
- Using daily routines and interactions to form a basis for learning.
- Using joint attention (sharing a common focus) with children during normally occurring routines and activities to demonstrate being responsive to the child's interests.

Continuity of Care and Primary Caregiving

The practices listed above are essential to support young children in forming secure attachments and must be used consistently in classroom settings for children enrolled in Baby Promise. Continuity of care means that children and their caregiver(s) remain together for more than one year, often for the first three years of the child's life. Primary caregivers must be identified as the primary Early Educator for groups of children (when more than one adult is present).

Primary Early Educators shall be responsible for each child's daily routines (e.g., feeding, diapering) for whom they provide relationship-based care. In onsite visits with Baby Promise Program Providers, the CCR&R shall use principles and practices within ZERO TO THREE's Critical Competencies for Infant Toddler Caregivers to promote continuity of care through the provision of technical assistance, coaching, and training with Baby Promise Program Providers and their staff.

Growth and Development of Baby Promise Providers

Oregon Recognition and Improvement System

The CCR&R must support Baby Promise Program Providers in attaining a top tier level (currently four or five stars) in [Spark](#), (Oregon's Quality Recognition, and Improvement System). Baby Promise Program Providers must attain a top tier level in Spark to be eligible for Baby Promise slots.

Baby Promise Program Providers will qualify for Spark supports and incentives unless they are also Head Start or Early Head Start Programs.

Please note that Spark is currently being revised. The revision and its implications for programs participating in Baby Promise will continuously be reviewed. In the future, as the revisions to Spark become available, expectations of Baby Promise will be adjusted accordingly.

Continuous Growth and Development Plans

For the purposes of this Manual, the term "Continuous Growth and Development Plan (CGDP)" will be used in place of the term "Continuous Quality and Improvement Plan" (CQI).

For all Baby Promise Program Providers, program staff must develop a Continuous Growth and Development Plan with assigned CCR&R staff. Plans shall include [SMARTIE Goals](#) that support the staff member(s) in developing and implementing high-quality practices. Interim steps, including dates when milestones will be reached, must be included in the plan. These plans must be reviewed and revised bi-annually (twice per program year). Each Baby Promise Program Providers shall provide the CCR&R with the dates of their growth and development cycle. These dates (two per year) must be included in the subcontract for each participating program.

To guide and support Baby Promise Program Providers, the CCR&R must assist in the development of continuous growth and development plans with each program. **Note:** *CGD plans are not Professional Development Plans (PDP). Professional Development plans are plans for individual staff members discussed under Personnel and Training Requirements later in this Manual.*

Continuous Growth and Development plans may be integrated into a Focused Child Care Network or Spark submission for renewal or rating adjustment. Programs are encouraged to collaborate with CCR&R staff to determine a course of action that best meets their goals for the growth and development of their program.

Regular, continuous Growth and Development plans are an element of high-quality. Utilizing program data and information from families, these plans provide direction for program level growth and development including the notation of goal attainment and identification and time line for new goals.

DELC expects Baby Promise Program Providers and their staff to demonstrate an inquisitive nature and thoughtful reflection when completing Growth and Development plans and engage in the cycles of planning, teaching, and assessing for themselves and the children they serve. CCR&R staff must assist Baby Promise Program Providers as they complete such plans.

The CCR&R may, with consultation from DELC, place a program on a corrective action plan for failure to write and adhere to Growth and Development plans. The program must comply with the requirements of the corrective action plan. Ultimately, the CCR&R and DELC will determine if the program meets the many elements of high quality and adheres to the corrective action plan.

Equity and Baby Promise

Equity – Practices in Baby Promise Programs.

The Department of Early Learning and Care fosters coordinated culturally appropriate, and family-centered services that recognize and respect the strengths and needs of all children, families, and early learning care professionals.

Further, we (DELC) are committed to dismantling the systems of oppressions that harm and create disparities for communities who are historically and institutionally excluded. We are adopting anti-racist principles, expanding access to services, and ensuring community representation and shared power in agency efforts. We are fostering a culturally responsive environment in which all individuals can experience a sense of belonging as they access programs, services, and resources.

Please review DELC's mission, vision, and values as you reflect on the Baby Promise Program. See the [Equity Commitment](#) for more information.

Assisting Oregon's young children and families to learn and thrive, and supporting equity to help address the needs of **all** children and families are part of DELC's mission, vision, and values.

Research indicates that regular attendance in high-quality Early Learning and Care programs has positive impacts for children's attendance later in their academic career. Also, research indicates that intentional time spent with family provides the foundation for healthy attachments and social development for children as they grow and develop.

Understanding the diverse impacts on families by complex systems such as K-12 education, subsidy programs and emergency response (such as COVID or wild fire) is an element of providing high-quality, equitable, care and education to children and families.

Systems are often created to serve many people; thus, sometimes unintentional consequences result for some people attempting to access or use a system. A negative experience with a system sometimes results in trauma that may impact a person's response in other settings with system requirements. Some people perceive a system as punitive, rather than supportive, while for others a system provides a positive structure.

A variety of circumstances may cause barriers for families and Baby Promise Program Providers when planning to meet the requirements in this Manual. When a CCR&R or Early Learning Hub enrolls a family or subcontracts with an Early Learning and Care Program whose circumstances require meeting requirements listed in this Manual with more flexibility, they must carefully consider the relationship between the circumstance and issues of equity.

DELC expects the CCR&R to demonstrate an inquisitive nature and thoughtful reflection when a barrier is presented and work with all parties impacted to determine best outcomes while

keeping a focus on the lens of equity.

While it is the responsibility of the CCR&R to thoroughly read, understand, and comply with the expectations outlined in this Manual, DELC is available to answer any questions or concerns the CCR&R may have and to pro-actively support efforts to provide high-quality, equitable, infant-toddler care. DELC is excited about the opportunity to work with local communities to encourage growth and development in Early Learning and Care Programs and increase access to relationship based high-quality infant-toddler care.

Family Engagement

Participation

The CCR&R shall assist Baby Promise Program Providers to make opportunities available for families to participate in their child's educational experience and provide opportunities for engagement throughout the year. Baby Promise Program Providers shall communicate regularly with families, offer opportunities to participate in their child's classroom/program, provide suggestions for home and community-based engagement and link families to community resources. Baby Promise Program Providers shall provide effective strategies for family input in all aspects of the program. Baby Promise Program Providers shall be responsive to the cultural and linguistic backgrounds of children and families served.

Family Orientations

The CCR&R must ensure that Baby Promise Program Providers provide an orientation to incoming families for Baby Promise services. CCR&R staff may attend.

Family Handbook

The CCR&R shall ensure that the Baby Promise Program Providers have a family handbook that includes the program's administrative policies, family leadership opportunities, medical policies as addressed in DELC child care licensing, and Baby Promise Program Year calendar. The handbook must be provided to families prior to or on the first day of their child's attendance in the program.

Daily Communication

Baby Promise Program Providers have a unique responsibility to the families of infants and toddlers to provide daily communication around caregiving routines such as feeding, sleeping, and diapering/toileting. The CCR&R shall assist Baby Promise Program Providers to create processes for daily communication. There shall be a verbal and written component associated with this ongoing connection with families and an opportunity for families to share reciprocally as it relates to the rapidly changing needs of their children each day.

Family Conferences

The CCR&R must verify that Baby Promise Program Providers offer, at minimum, three family conferences within the program year. Conferences shall be documented and are necessary to enhance the knowledge and understanding of both Early Educators and families. This is an opportunity for mutual discussion of the child's interests, preferences, assessments, and progress.

Leadership Opportunity

The CCR&Rs shall work with Baby Promise Program Providers to ensure that they inform families and staff of opportunities to participate in leadership roles for the program, or at a regional and state level in the early learning field.

Parent/Guardian Information

Parent/Guardian Responsibilities

The CCR&R shall ensure that all Baby Promise Program Providers provide parents/guardians with the DELC Parent Information document which includes following:

- Meet reporting requirements for ERDC and maintain eligibility per OARS.
- Parent Responsibilities: The parent/guardian is responsible for communicating with program staff regarding attendance, maintaining contact with families when a child first has two or more unexplained absences, and participating in an attendance plan when required.
- The parent/guardian is responsible for providing true and accurate information to their childcare program, CCR&R, and/or the Department of Early Learning and Care.
- The parent/guardian is responsible for reporting changes in their circumstances to the position responsible for eligibility for the Baby Promise Program locally within ten calendar days of becoming aware of the change. Some changes, while not required to be reported, will result in an increased benefit for the family by reporting them.
- The parent/guardian is responsible for supplying all requested forms, information, and verification needed to determine eligibility for program and amount of benefits.
- The parent/guardian must cooperate in taking any actions necessary to establish eligibility. The parent must cooperate with any DELC and/or Office of Inspector General (OIG) fraud investigation by completing any required forms, responding to scheduled interview appointments, and by making requested records or information available. Parents/guardians who do not cooperate may be determined to be ineligible until they cooperate.
- The parent/guardian must permit the childcare program, the CCR&R or DELC to verify all information/statements on the application and during the interview.

Note: Changes that may impact Baby Promise eligibility should be reported within ten (10) calendar days via phone, fax, e-mail, mail, or in person to CCR&R and DHS. Some changes may affect Baby Promise eligibility status.

- The parent is responsible for paying childcare fees to the Early Learning and Care Program, if applicable, for additional children in household needing care who are not participating in the Baby Promise Program.
- The parent is responsible for reporting to the CCR&R within twelve (12) calendar days if their child is no longer enrolled in childcare or moves out of the home.

Baby Promise services may be terminated if the parent does not comply with Baby Promise program policies. Any violations of responsibility may result in suspension, reduction, or termination of grant services. Please note that Baby Promise is a quality support in addition to ERDC subsidy; any change to Baby Promise participation will not impact a family's ERDC eligibility for their 12-month certification period.

Screening and Assessment

Developmental Screening

The CCR&R must ensure that Baby Promise Program Providers are using the Ages & Stages Questionnaire (ASQ-3) ([ASQ](#)) and Ages & Stages Questionnaire: Social-Emotional (ASQ: SE-2) within the first 45 days of a child's enrollment in Baby Promise and ongoing as prescribed by Ages and Stages ([Ages and Stages](#)).

The purpose of this tool is to ensure that children are assessed regularly for potential developmental needs that may require additional services and referrals.

The ASQ screenings must be conducted in partnership with families to screen for developmental delays and disabilities during the entire time the child is enrolled. Baby Promise Program Providers will ensure that child-screening procedures utilize appropriate practices for young children and will seek additional training; the tool must be completed together with the family, shared with the family upon completion, and not completed solely by education staff.

Other screening tools may be appropriate as alternatives to the ASQ-3 or ASQ:SE-2 and may be proposed to the CCR&R for approval to assess a child's individualized needs. The ASQ screenings must be conducted in partnership with families to screen for developmental delays and disabilities during the entire time the child is enrolled. Baby Promise Program Providers will ensure that child-screening procedures utilize appropriate practices for young children and will seek additional training, if necessary to complete ASQ screenings.

Baby Promise Program Providers leaders shall work closely with the Infant/Toddler Specialist, Coach or Quality Specialist and teaching staff to perform initial screenings for Baby Promise

children and to assist the program staff to communicate with families using the information from the screening.

The CCR&R must provide follow-up support to ensure that the program is engaging in regularly planned cycles of developmental screening tools with the children enrolled to increase their understanding and ease of use with the tools with each cycle. The CCR&R shall develop feedback processes with programs to guide the growth and development of both CCR&R staff and Program staff in the use of developmental screenings.

Referral for Evaluation

The CCR&R shall work with Baby Promise Program Providers to ensure they have policies and procedures to refer children for additional specialized assessment. If warranted through screening and additional relevant information, the Early Learning and Care Program, with the parent's consent, shall refer children to Early Intervention/Early Childhood Special Education (EI/ECSE) as soon as possible. It is critical that the Early Educator, as a primary and trusted relationship with the family, continues to support families through the formal evaluation process and ongoing to develop supports and strategies to best address each child's developmental needs.

CCR&R staff shall provide support by connecting the family and provider to the appropriate professional for assessment or screening. They may also assist with follow up information, communications, and support.

Learning and Developmental Assessments for Children

The CCR&R must ensure that children in the Baby Promise Program are assessed for developmental progress at regular intervals three times per year in the following areas: social/emotional, cognitive, physical (gross and fine motor) development, and communication.

Baby Promise Program Providers are encouraged to complete developmental assessments for all children enrolled in care in addition to children in Baby Promise slots. This type of assessment for young children involves Early Educators documenting specific skills gained by each child using anecdotal observations, portfolio artifacts and curriculum assessment tools to develop goals for each child and individualize and augment curriculum planning.

Early Educators may maintain and update a portfolio for each child in the Baby Promise Program and share the findings from these assessments regularly with families. Any formal assessment instruments used shall be valid, reliable, culturally responsive, competent, developmentally appropriate, and individually administered by trained personnel. Baby Promise Program Providers must submit developmental assessments to the CCR&R or DELC upon request.

Programs that have developed their own assessments shall complete a worksheet demonstrating how their assessment aligns with either Oregon's Early Learning and

Kindergarten guidelines ([Guidelines](#)) or Head Start Early Learning Outcomes ([Outcomes](#)). Baby Promise Program Providers shall submit any developmental assessments to the CCR&R upon request. See the quality supports section of this Manual for more information on assessment tools.

Learning and developmental assessments provide foundational information to Early Educators and families. These assessments provide direction for planning for individual children's growth and development and for program level growth and development. Assessments are a key element to the teaching cycle.

DELIC expects Baby Promise Program Providers and their staff to demonstrate an inquisitive nature and thoughtful reflection when completing assessments for children and utilizing assessment information as they engage in the cycles of assessing, planning, and goal setting for themselves and the children they serve. CCR&R staff must assist Early Educators as they implement learning and development assessments and use the results for continuous growth and development.

The CCR&R shall provide follow up support to ensure the program is engaging in regular learning and developmental assessments for children enrolled and increasing their understanding and ease of use with the tools. The CCR&R shall develop feedback processes with programs to guide the growth and development of both CCR&R staff and Program staff in the use of growth and development assessments for children.

Supports for CCR&Rs and Baby Promise Providers

Resources

To support the development and implementation of best practices in Early Learning and Care, the CCR&R and the Baby Promise Program Providers and providers shall use these rules and resources to provide high-quality care:

- Business Administration Scales (BAS) – For Family Child Care (Publisher: Kaplan)
- [Caring for our Children: National Health and Safety Performance Standards Guidelines for Early Care and Education Programs \(4th edition\)](#)
- Central Coordination Resource Website ([Central Coordination](#))
- Classroom Assessment Scoring System ([CLASS INFANT TODDLER](#)) Infant/Toddler Environmental Rating Scale Revised Edition ([ITERS R](#))
- Classroom Assessment Scoring System ([CLASS](#))
- Family Child Care Environment Rating Scale ([FCCERS-R](#))

- [Head Start Program Performance Standards](#)
- Inclusive Partners – ([Inclusive Partners](#)) is a statewide program that works to empower Oregon's childcare providers to create environments that encourage full participation for all children. Regardless of provider type or funding stream, Inclusive Partners provides technical assistance, consultation, and support so all children can play, learn, and grow together.
- [NAEYC Code of Ethical Conduct](#)
- [NAEYC Early Learning Program Accreditation Standards and Assessment Items](#)
- National Center for Pyramid Model Innovations ([The Pyramid Model](#))
- Oregon's Child Care Licensing Division (CCLD) Rules ([CCLD](#))
- Oregon's Early Learning and Kindergarten Guidelines ([Early Learning and Kindergarten Guidelines](#))
- Program Administration Scales (PAS) – For Center Child Care (Publisher: Kaplan)
- Spark, Oregon's Quality Recognition and Improvement System ([Spark](#))
- The Department of Early Learning and Care ([DELIC](#))
- Universal Design for Learning ([Universal Design ECLKC](#))
- ZERO TO THREE Critical Competencies for Infant Toddler Educators ([Zero to Three](#))

Zero to Three Certified Trainer: *Critical Competencies*

The CCR&R shall ensure that the Infant and Toddler Specialist participates in all five ZERO TO THREE: *Critical Competencies for Infant-Toddler Educators* training sessions. The Infant and Toddler Specialist shall complete the requirements outlined by [ZERO TO THREE](#) to obtain certification within one year of attending the training. The content of this training is intended to be used with FCCN participants as well as offered within the local community to enhance the quality of infant and toddler care.

Baby Promise Program staff (directors/assistant directors) and providers (teachers/Early Educators/assistants/aides) who work directly with Infants and Toddlers must take the Zero to Three Critical Competencies for Infant Toddler Educators within the staff members initial 18 months of employment or within the first 18 months of the Program's sub contractual agreement with the CCR&R. Program Providers must work with the CCR&R to determine which staff may be trained. The CCR&R may request exceptions from DELC when reasonable.

Growth and Development

Baby Promise Program Providers are expected to lead their own growth and development using the list of resources offered above. The CCR&R must work closely with the Baby

Promise Program Providers and providers to help them benefit from all the Technical Assistance associated with the above tools and resources, identifying the resources that best meet the program's needs.

Onsite Support

The CCR&R shall provide monthly site visits to each Early Learning and Care Program and provider while children are present (the visit shall be outside of rest time). These visits shall include coaching, observations, and pedagogical mentoring that supports the continuous development of effective practices in the program. Onsite visits may be announced or unannounced. The CCR&R is required to report any serious health and safety concerns to the appropriate agency within 30 days of the visit, unless earlier if required by law.

Infant/Toddler Focused Child Care Networks (FCCN) and Communities of Practice (CoP)

All Early Learning and Care Program and provider administrators (directors) and teaching staff must participate in an Infant and Toddler Focused Childcare Network. Community of Practice (CoP) groups may also be utilized at a frequency determined by the CCR&R for program staff. CoP groups may include program directors, owners, and/or teaching staff.

All program staff in a Baby Promise Program shall participate in an FCCN or CoP facilitated by CCR&R staff. Participation shall be determined in collaboration with the CCR&R to meet best the needs of the region and Baby Promise Program Providers. FCCN/CoP activities will be scheduled to support the Baby Promise Program Providers in:

- Decreasing Early Educator isolation and
- Increasing Early Educator knowledge and skills:
- Increasing opportunities for the Baby Promise Program Providers to seek continuous development of effective practices:
- Increasing the potential for Early Educators to stay in the field.
- Supporting Early Educators to feel engaged and energized:

Shared Services

The CCR&R must develop a Shared Services Plan in partnership with their local community. The CCR&R must submit a Shared Services Plan in accordance with the current grant agreement (and any amendments thereto) on a yearly basis using the DELC provided Shared Services form. Baby Promise participating programs shall be offered services that address at least one of the following:

- Increase automation and technological resources that increase the effectiveness of Baby Promise Program Providers.
- Increase business acumen.

- Increase pedagogical leadership and capacity.
- Reduce Early Learning and Care Program administrative burden through centralized support and expertise.

Glossary of Terms

“ADA” refers to the Americans with Disabilities Act, which provides the basis for including children with disabilities in typical child development settings.

“Adult-child ratio” or “Staff-child ratio” is the number of children for whom each child care staff member (or family child care provider) is responsible for supervising.

“Aide or Assistant Teacher” is the person responsible for assisting the Lead Teacher in planning and implementing program curriculum and activities.

“Assessment” The ongoing process that includes observation and provides information about development over time. Systematic, ongoing child assessment provides information about children’s development and learning. The process of gathering information, reviewing the information, and then using the information to plan educational activities that are at a level the child can understand.

“Baby Promise” refers to a publicly funded infant-toddler program in Oregon. Baby Promise is a publicly funded program that offers free, high-quality care and education for infants and toddlers from low-income families in Oregon.

“Central Background Registry” or “CBR” means CCLD’s registry of individuals who have been approved to be associated with a childcare facility in Oregon pursuant to ORS 329A.030 and OAR 414-061-0000 through 414-061-0120.

“Child Care and Development Fund (CCDF)” Federal funds that:

- improve the quality and safety of childcare and.
- provide financial assistance to low income working families to help pay for childcare.
- support increasing the supply and availability of childcare for all families.

The grant to CCR&Rs to carry out the purposes of the Baby Promise Program is funded through the CCDF, as referenced in the following sections of the [state plan](#).

- Coordination with relevant systems
- Ensure Access to High-quality Childcare for Low-Income Children
- Ensure Program Integrity and Accountability
- Promote Family Engagement through outreach and Consumer Education

- Recruit and Retain a Qualified and Effective Workforce
- Support Continued Quality Improvement

“CCDF State Plan” Plan designed as a snapshot into current and planned efforts, initiatives and implementation plans for Oregon to meet Federal CCDF Requirements.

“Child Care Licensing Division” “CCLD” means the Child Care Licensing Division in the Department of Early Learning and Care.

“Child Care Provider” or “Provider” or “Early Learning and Care Program” or “Baby Promise Program Participant” means a person or entity that provides care, supervision, and guidance on a regular basis of child, unaccompanied by a parent, guardian, or custodian, during a part of the 24 hours of the day.

“Child Care Resource & Referral (CCR&R)” Local and statewide services including

1. Guidance and referrals for families seeking childcare through referrals to 211 info.
2. Recruiting, training, and supporting Early Educators to remain in the profession and provide high-quality childcare programs.
3. The collection of information about the local supply of childcare; and 4) community collaboration with Early Learning System partners.

“CCR&R” refers to the entity described above, that has contracted with the Department of Early Learning and Care to administer the Baby Promise Program and to provide subcontracts to eligible Baby Promise Program Providers.

“CLASS™” refers to the Classroom Assessment Scoring System. It is a validated and commonly used assessment that measures the effectiveness of adult/child interactions as well as peer-to-peer interactions. The assessment is used to determine the effectiveness of the emotional and instructional support provided by adults and of the classroom’s organization and is also used to predict children’s school readiness outcomes.

“Continuity of Care” Means that children and their caregiver remain together for more than one year, often for the first three years of the child’s life.

“Continuum of Care” Multiple types of childcare available to children, including but not limited to, legally license-exempt, license-exempt serving children and families receiving subsidies, family, and center-based licensed care.

“Community of Practice” (CoP) The term Community of Practice was first introduced by Jean Lave and Etienne Wenger (1991). A community of practice (CoP) is a group of people (generally peers) who share a concern or passion for something they do. Participants learn how to improve their practice as they interact regularly over time. The goal of each CoP is for participants to connect, share experiences and gain expertise from each other; it is not a time for training, policy/process clarification or general updates. A CoP may include time for

focused dialogue, reflections on a shared learning experience, reflective protocols, and sharing of a problem of practice for peer insights and guidance. To support relationships and conversations, Communities of Practice should not be recorded.

“Continuous Quality Improvement” or CQI or Continuous Growth and Development A framework to guide intentional quality improvement in systems and individual organizations. For Early Learning Programs, CQI practices are intended to create a culture in which Early Learning Program directors and staff regularly assess and make improvements to services for children and families. The collaboration of Early Learning Program leaders and staff is expected to build their capacity to identify areas of quality improvement and develop solutions that work for their unique settings and Early Learning Program cultures.

“Contract” or “Subcontract” refers to an individual Baby Promise Program subcontract between the CCR&R and an identified Early Learning and Care Program participating in Baby Promise, or contract between DELC and the CCR&R

“DELC” refers to the agency of the Department of Early Learning and Care. For more information, see [DELC](#).

“DHS” The State of Oregon, Department of Human Services.

“Early Educator” is any person, regardless of licensing title, who provides direct care to children in the Baby Promise Program.

“Early Learning and Care Program” programs caring for infants and toddlers that are any of the following: legally license exempt within school districts, registered family childcare, certified family childcare or certified center programs. Programs also include but are not limited to Relief Nurseries, Early Head Start, Teen Parent Programs and Preschool Promise. **“Early Learning Hub (Hub)”** An entity designated under ORS 417.827 and under contract with the Agency to coordinate, fund and monitor certain programs and early learning services in a specific region within the State.

“Early Learning System” Network of services that support early care and education in Oregon.

“Early Learning (Childcare) Workforce” The Early Education Professionals working with, or on behalf of, young children (infants, toddlers, preschoolers, and school age children in centers, homes, and schools) and their families with a primary mission of supporting children’s development and learning.

“Eligibility” The decision as to whether an individual qualifies, under financial and nonfinancial requirements, to receive program benefits.

“Employment Related Day Care (ERDC)” means Employment Related Day Care benefits which a childcare provider may be approved to receive pursuant to OAR 461-165-0180.

“Enrollment” The process of putting someone onto an official list as ready to attend.

“**Family and Child Eligibility**” Children must be members of families whose income, at time of enrollment meets eligibility guidelines for ERDC. Children shall be at least six weeks of age, but have not reached their third birthdate, at the time of enrollment.

“**Focused Child Care Network (FCCN)**” A Focused Child Care Network is a cohort of childcare practitioners who meet frequently with a Quality Improvement Specialist to discuss best practices, access, and share resources, receive training, and encourage progress as they work toward increasing the quality of their programs. The Focused Child Care Networks use Spark, as the framework to support continuous quality improvement.

“**Furthest from Opportunity**” Historically underserved or underrepresented populations defined as:

- African American
- Asian and Pacific Islander
- Children experiencing homelessness and engagement with the foster care system
- Children of Incarcerated Parents/Parental Figures
- Children with Developmental Delays and Disabilities
- Emergent bilingual children
- Geographically Isolated
- Immigrants and Refugees
- Latinx
- Migrant families, and/or families working in agricultural sector
- Tribal nations and communities

“**Infant Toddler Specialist**” is A Quality Improvement Specialist with expertise and content knowledge for providing support to programs serving infants and toddlers. The Infant Toddler Specialist will lead Focused Child Care Networks specifically working with Early Educators to develop their continuous quality improvement processes, provide professional development, coaching, working with Early Educators to develop their continuous quality improvement processes, and provide professional development, coaching, and other supports to facilitate high-quality care amongst the Early Educators engaged in an FCCN.

“**IDEA**” refers to the Individuals with Disabilities Education Act. This law governs how states and public agencies provide early intervention, special education, and related services to children with disabilities.

“**IFSP**” is an individualized family service plan. An IFSP is a quasi-contractual agreement

developed for children with disabilities to help, guide, orchestrate, and document specially designed instruction for each student based on his or her unique academic, social, and behavioral needs.

“Lead Teacher” is the person responsible for guiding, implementing, and directing the learning experience of children in the Baby Promise classroom. The Lead Teacher plans, prepares, and implements the daily activities (indoor/outdoor) as they relate to the curriculum and maintains the classroom environment.

“Mixed delivery” This model recognizes that high-quality learning experiences can take place in a wide variety of settings, and families should be able to choose the setting that works best for them and their children. Families will have a wide range of choices of providers in the mixed delivery model. Providers could be, but are not limited to, a childcare provider, Early Head Start programs, Relief Nurseries, Teen Parent Programs, public schools, Preschool Promise programs, education service districts, or community-based organizations.

“National Association for the Education of Young Children” (NAEYC) A professional membership organization that works to promote high-quality early learning for all young children, birth through age 8, by connecting early childhood practice policy, and research.

“Primary Caregiving” This model provides for Early Educators to have primary daily responsibility for the same small group of infants or toddlers. This system creates strong bonds between an educator and child and provides families with a trusted care partnership.

“Professional Development” A continuum of learning and support activities designed to prepare individuals for work with and on behalf of young children and their families. Professional Development encompasses education, training, and Technical Assistance.

“Professional Development Plan” A professional development plan documents the goals, required skill and competency development, and objectives a staff member will need to accomplish to support continuous improvement and career development.

“Parent” means the natural parent, adoptive parent, parent surrogate, legal guardian, or any other adult granted educational decision-making rights by the natural or adoptive parent or a court of competent jurisdiction.

“Residency Requirement” Children participating in the Baby Promise Program must be Oregon residents and residing within Baby Promise pilot counties. Families will continue to be eligible for ERDC benefits for the full 12-month certification even if they move out of the Baby Promise counties.

“Screening” The evaluation or investigation of something as part of a methodical survey, to assess suitability for a particular role or purpose. To provide a snapshot of whether the child's development is on track.

“Shared Services” A concept that focuses on building a strong backbone of support in

partnership with Early Learning and Care Programs that enables them to build and sustain strong organizations. The support to Early Learning and Care Programs transforms their business practices and automation of billing, accounting, collection of fees, budgeting, and business acumen. This allows the Early Learning and Care Program. to be mission-focused and to deliver high-quality early care and education to improve child outcomes for young children.

“Spark” or “Spark Quality Rating and Improvement System” means the system established through ORS 329A.261 which establishes a set of progressively higher standards used to evaluate the quality of an early learning and development program and to support program improvement.

“Subcontracted Slots” Slots in an Early Learning and Care Program that participates in the Baby Promise Program through a subcontract with the local CCR&R. These Baby Promise slots are for families that are eligible for the ERDC program.

Subcontracted slot payments are paid based on the terms of a subcontract negotiated with each Early Learning and Care Program providing Baby Promise services and are not based upon attendance of the children in the slots.

Family copays will be waived for families participating in the Baby Promise Pilot program and the family receives 12-month continuous protected eligibility for full-time care while in these designated programs. The parent/guardian must be employed for a minimum of 25 hours per week and work hours must match the Early Learning and Care and Program/Providers' business hours.

“Supplant” means to take the place of something that currently exists, e.g., a pre-existing, publicly funded program.

“Supplement” means to add to or augment something that currently exists, e.g., a pre-existing publicly funded program.

“Relationship-based Professional Development” Professional Development that includes a culturally and linguistically responsive coach, mentor, advisor and/or navigator, who establishes supportive relationships and works closely with Early Educators in achieving their educational goals and maintaining work/life/school balance.

“Technical Assistance” (TA) Targeted and individualized support by a professional(s) with specific knowledge and skills to develop or strengthen processes, application, or implementation of services for/by the TA recipients. TA may be delivered by an individual or a team, to one individual or a group. TA may be provided face-to-face, via distance methods, or a hybrid of the two. Typical forms of TA include coaching, mentoring, consultation, and Professional Development.

“Zero to Three” (ZtT) A membership-based organization that provides training and

resources for professionals focused on child development for infants and toddlers.