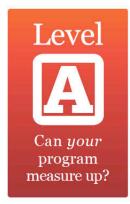
What is the ABC program?







The ABC Child Care Program helps eligible low-income families pay for child care so that they can work or go to school or training.

Families may choose care from a full range of public and private child care options – centers, schools, group homes, family homes, friends and relatives. The ABC Child Care Program also makes every effort to assist child care providers interested in improving the quality of care at their facility.

The ABC Program encourages parents to choose regulated child care. Child care providers voluntarily enrolled in ABC are reimbursed according to the quality of care provided. There are 3 levels of regulated care in the ABC system:

Level A – Exemplary programs measured against rigorous quality standards

Level B – Programs measured against quality standards beyond basic state regulations

Level C – Programs meeting basic licensing regulations (health and safety)

Within Levels A and B, highest performing providers are recognized by AA and BB designations and higher bonus awards. At each level, programs receive regular on-site reviews to measure performance on the program standards for that level.

For information on how to enroll in the South Carolina ABC Child Care Program or more information on program improvement, call 1-800-763-ABCD.









South Carolina Department of Social Services ABC CHILD CARE QUALITY IMPROVEMENT SYSTEM Enrollment Form

ABC LEVEL $m{B}$ on-site assessment $m{A}$ PPLICATION

The purpose of this form is to gather information to determine if prerequisites are met for an ABC Level B on-site assessment. To receive a Level B program assessment, a child care center must be able to meet the Level B mandatory standards which are beyond the state's licensing requirements.

This application must be completed in full, signed by the owner/sponsor or designee, and returned by mail to Elaine Justice Boyd, Department of Social Services, ABC Child Care Services, P.O. Box 1520, Columbia, SC 29202-1520 to be considered for a Level B assessment visit. Incomplete applications may be returned with the additional information needed highlighted.

<u>NOTE</u>: Through this application, child care programs must be able to demonstrate their ability to meet the criteria outlined in the ABC Level B Center-Based Standards. <u>Please be mindful that completion of</u> this application does not guarantee enrollment into the ABC Child Care Quality Improvement System.

Please provide the following:

CENTER INFORMATION

FEIN	() OR	Social Security		())
Provider/Agency Name:					-
Facility Name(if different from Pro	ovider Name):				-
Facility County Name:	Facility Phone #:	D	irector'sName:		
Alternate Contact Person/Name: _		Relationship:	Phone #:		
OwnerName:		OwnerNo	0		_
Facility Address:					
City:	Facility Number & Stre State:		Zip Code:		
Payment Address:			Fax #		
	(Number & Street, P.O.	. Box or Route #)			
City:State:	Zip Code:	Payment Pl	none #:		

Hours of Operation:					Days of Operation:	
	AM/	PM to		AM/P	$PM \longrightarrow M T$	W TH F SA SU
1) Provider Type (check only one) 2) Regulatory Requirement (check only one)			ement	3) Provider Category (check as many as applies)	4) Ownership Status: (check one from each of the 3 categories below)	
Center		License	2		Faith-based Sponsored/Licensed	Minority Owned
Accredited C	Center	Approv	⁄al		Private-for-profit	Non-Minority Owned
Group Child Home	Care	Registr	ation		Private-non-profit	
Family Child Home	l Care	Exemp	tion Letter		Publicly Sponsored	Sole Proprietor
Exemption		Militar	y		Head Start	Partnership
D 14					School District	Corporation
-	Information:				Less than 4 hours/day	Other
Number:		Capaci	ty:		Summer Camp	
If applicable, under 30 more	No. of infants	Data of	Expiration:			State Employee
		Date of	Expiration.			Non-State Employee
						Legislator
Care Types Pool O-2 Full	rovided: (Chec			2 FII		
0-2 Full 0-2 Half	3-5 F 3-5 H			2 Full 2 Half		
•	-		_		circle) YES / NO)
Staff Cov		ase indi	_ cate arran		ts for handling stachild care facility:	aff-child ratios when a caregiver is

Number of children and adults in each classroom. A classroom is defined as an identified group of children assigned to a caregiver or caregivers. Below, for each classroom/group, please indicate the ages of the children, the number of children, and the number of salaried adults in the classroom/group at all times.

Identify classroom/group by # or name below	Age range of children in the classroom/group	# of children in the classroom/group	# of Salaried Adults in the classroom/group

List of Staff- for Licensed and Approved Facilities

To be completed by Child Care Facility Owner, Director, or Designee

Name of Facility:	County:
Physical Address: (Street, City, State, Zip)	Date:

								D	ocumen	ts to send	
Name First and Last	Social Security Number	Date of Birth	Date of employment	Years in child care	Job Title with age group – i.e. LD or AS	Full time or Part Time	Valid High School Diploma	Degrees and/or Certificates	CCCCD Official Transcript	Current Pediatric CPR and First Aid	Current Signed Discipline Policy
1.											
2.											
3.											
4.											
5.											
6.											
7.											
8.											
9.											
10.											
11.											
12.											
13.											
14.											
15.											

^{**}NOTE: ALL STAFF MUST BE AT LEAST 18 YEARS OF AGE

Please make sure to submit copies of requested documents and ensure that the application is signed below.

(See Enrollment Visit Required Items Checklist)

PLEASE RETURN COMPLETED APPLICATION AND COPIES OF DOCUMENTS TO:

ABC Child Care Program
Attn: Elaine Justice Boyd
Department of Social Services
P. O. Box 1520
Columbia, South Carolina 29202-1520

Owner/Director/Designee: Please sign below to indicate that you have reviewed the information provided in this form and all documents that have been attached and that you attest to their accuracy.

Signature of Owner/Director/Designee:		
Title:	Date:	
Printed name of Owner/Director/Designee:		
Name and Title of Person Completing Form:		

Required Documentation for Enrollment in ABC Level B - Licensed Centers

To enroll in Level B of the ABC Child Care Quality Improvement System, we must verify that your program meets Part I of the Mandatory Standards. Please submit the following documents, with your application, so that we may verify compliance with these Level B Part I Mandatory Standards *prior to* scheduling an on-site review.

Submit a copy of your <u>REGULAR</u> license or registration from the SC Department of Social Services. Programs <u>cannot enroll</u> in the ABC Quality Improvement System with a provisional license.						
Complete the attached staff information chart and please include <u>COPIES</u> of the following documents for <u>ALL</u> staff:						
 Valid High School Diploma/GED (For the definition of a valid high school diploma see page 12 of the ABC Required Mandatory Standards Part I.) Certificates/Degrees of higher education for all Lead Teachers and Director (At a minimum, all lead teaching staff must have ECD 101and directors must have an Early Childhood Certificate. For additional information on meeting the Level B educational requirements, refer to the ABC Required Mandatory Standards Part I, Standard III; Staff Qualifications and Development, pp. 4-7.) Official Training Transcript from CCCCD (The Center for Child Care Career Development) Pediatric CPR and First Aid Certification Signed Discipline Policy (All staff are required to sign a discipline policy annually.) 						
Submit a copy of your program handbook and/or newsletter, if applicable.						
Submit a copy of the Discipline Policy given to parents in your program. (Parents are required to sign a discipline policy <u>annually</u> . Parents' signatures will be verified during your on-site review.)						
Submit a copy of your program's Nutrition Policy that is provided to all staff and parents in your program. (Evidence that staff and parents have been informed of this policy will be requested at your on-site review.)						
Submit a copy of your program's Physical Activity Policy that is provided to all staff and parents in your program. (Evidence that staff and parents have been informed of this policy will be requested at your on-site review.)						
Submit a copy of your current rates.						
Submit a completed and signed W-9 Form. (www.irs.gov/formspubs)						
Submit a copy of the IRS Form SS4 or letter 147-C, assigning your Federal ID number. (Please call 1.800.829.0115 or 1.800.829.4933 to request a copy of your IRS Form SS4 or letter 147-C, if you cannot locate your original document.)						
Submit a copy of your current menu (Include at least two weeks' worth of menus.)						



Provider Information

Center-Based Standards - ABC Child Care South Carolina's Quality Improvement System

Name of ProviderFEIN/SSN#						
Name of Facility (if diffe	erent)					
Address						
Mailing Address						
E-Mail Address		FAX #				
Phone#	Contact person/ow	ner				
0-2 Meets Part I Required St	andards I through V Yes No					
0-2 standards: Reviewer	Review date	Enrolled Yes No Score				
3-5 Meets Part I Required St	andards I through V Yes No					
3-5 standards: Reviewer	Review date	Enrolled Yes No Score				
6-12 Meets Part I Required S	Standards I through V Yes No					
6-12 standards: Reviewer	Review date	Enrolled Yes No Score				
Type of Visit Enrollment visit U	nannounced monitoring visit	<mark>Revisit</mark>				
Provider Category						
Private, non profit	Publicly Sponsored	Private, for profit				
Faith-based Sponsored/li	icensed <mark>Head Start Organi</mark>	zation School District				
<mark>Military Program</mark>	Other (define)					

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SC's Quality Improvement System

Introduction to ABC Child Care Program Standards

The following standards constitute the criteria for Level B child care and development services in the ABC Quality Improvement System. Level B providers are assessed based on their compliance to the standards for the age group(s) to be served. Providers may elect to enroll to serve 0-2 year olds, 3-5 year olds, and/or 6-12 year olds.

The standards for ABC Child Care exceed the state licensing and regulatory requirements for Child Care Centers in South Carolina. All providers classified as Level B enrolled in ABC Child Care must first meet regulatory requirements governing their operation according to statute and SC Department of Social Services child care licensing regulations and must maintain a history of compliance with those regulations.

The ABC Level B standards have been divided into progressive parts. Part I consists of Standards I-V which are required for all Level B enrolled providers. Compliance is based on documentation from the service provider as well as on-site observation and review by the South Carolina Department of Social Services (SCDSS) staff. To enroll at Level B, the potential provider must meet or be able to meet all Standards I-V prior to participating in an on-site observation of the remaining standards.

Upon determination of compliance to Part I. Standards I-V, an observation of the facility will be conducted with the potential service provider. On the date of the review, Part II, III and IV of the standards that are applicable for age groups to enroll or continue enrollment will be completed by the reviewer.

In order to become enrolled and continue enrollment at Level B, a provider must reach a minimum

10/1/12 - 1 Page 2 of 5

80% compliance level overall on Standards VI, VII, VIII, and IX for each age group served as measured by the SCDSS reviewer. To achieve Level B+, a provider must comply with Part I, Standards I-V and reach a minimum 90% compliance overall on Standards VI, VII, VIII, and IX for each age group served as measured by the SCDSS reviewer.

To determine compliance for Standard VI:

The reviewer will conduct an analysis of the potential provider's staff-child ratio and group size to determine compliance with ABC Child Care staff-child ratios and group size which are more stringent than regulatory requirements. All providers who elect to participate in the ABC Child Care Program must meet the staff-child ratios as defined by the South Carolina Child Care Regulations (Section 114-504: Supervision) as follows:

<u>Age</u>	Maximum Ratios	<u>Age</u>	Maximum Ratios
Birth – 1 year	1:5	4-5 years	1:17
1-2 years	1:6	5-6 years	1:20
2-3 years	1:8	6-12 years	1:23
3-4 years	1:12	•	

Groups meeting ABC ratios and group size will be awarded points for compliance. ABC staff-child ratios and group size are as follows:

<u>Age</u>	Maximum Ratios	Group Size	<u>Age</u>	Maximum Ratios	<u>GroupSize</u>
Under 2 years	1:5	10	5-6 years	1:15	30
2-3 years	1:7	14	6-9 years	1:18	36
3-4 years	1:11	22	9-12 years	1:20	40
4-5 vears	1:13	26	·		

The reviewer will observe in at least one classroom for each age for 30 minutes to one hour and provide assessments for the following standards:

• **Standard VII - Staff-Child Interactions** is based on the reviewer's observation of the caregivers in each room or group and measures staff members' availability and responsiveness to children, positive verbal interactions with children, opportunities for children to be responsible and have choices, and positive guidance techniques.

10/1/12 - 1 Page 3 of 5

- **Standard VIII Activities** is based on the reviewer's rating of the center's activities by room or group and measures the balance, choice and variety of activities within a planned daily schedule that allows for individual differences and is developmentally appropriate.
- Standard IX Physical Environment A. (Indoor Environment) is based on the reviewer's assessment of each room and measures the quantity, variety and durability of age-appropriate materials and their accessibility to children.
- **Standard IX Physical Environment, B. (Outdoor Environment)** is based on the reviewer's assessment of the center's outdoor playground area designated for children's use. The reviewer's assessment will measure the sufficiency, safety, and age-appropriateness of the outdoor playground area for the age group observed.

Each numbered item under Standards VII, VIII, and IX carries a weighted score if met. If the item is not met, it receives a score of o. The total possible points for a center will be calculated on the number of caregivers and number of rooms/groups observed for the applicable age group. The number of points the center receives will then be divided by the total possible points for the age group observed to determine the percent of compliance for the applicable age group. See Parts II, III and IV for specific scoring criteria of each age group.

The requirement of 80% compliance for each age group (o-2, 3-5, and 6-12) allows for an individual center to accommodate for program weakness in one area by possible strengths in another area. The assessment system provides an evaluation of the program by staff, room, and overall center compliance to the standards. The review report includes summaries of each room observed and each age group. Thus, a program failing to meet 80% compliance can target areas of noncompliance for upgrading.

The completed assessment of the program's performance on the standards is returned to the provider with notification of successful enrollment, continued enrollment, or notification of failure to meet enrollment standards. Provider business agreements are made for a period of three years.

10/1/12 - 1 Page 4 of 5

Non-correction of deficiencies or repeated deficiencies can result in provider termination from ABC Child Care or non-renewal of the business agreement.

10/1/12 - 1 Page 5 of 5



ABC CHILD CARE SC's QUALITY IMPROVEMENT SYSTEM REQUIRED PROGRAM STANDARDS CENTER-BASEDPART I

Standard I. Regulatory Requirements

The program maintains compliance to state regulations pertaining to licensure and history of compliance.

REGULATORY STATUS

A. ABC Level B programs shall be regulated as required by the appropriate state/federal licensing and regulatory laws

Evidence: Verification of regulatory status to include: current regular license/approval from SC DSS Child Care Regulatory Services for DSS licensed/approved centers; dated regulatory report from other regulatory bodies as applicable; dated proof of DSS exemption verification.

SCDSS License	SCDSS Approval	#	Date of Expiration
Licensed Capacity	_Infant/Toddler cap	acity 24/30 mon	nths
Department of Defense Certifica	te to Operate DS	SS Exemption V	Verification
MEETS/VALIDATED ON-SIT	E YES	NO	DATE
multiple deficiencies or a signific compliance with ratios, or health Evidence: Documented agency r months); multiple (3 or more diff	ant event posing sub and safety violations. eview of program's r ferent) deficiencies w	stantial threat to regulatory histor ithin a 12 month	ce. History of compliance is defined as having no frequent of the health or safety of the children that involve supervision by for evidence of frequent deficiencies (3 or more within a time frame; a one time substantial deficiency. For license compliance and for exempt facilities ABC compliance.
MEETS YES	NO	Date Veri	rified
COMMENTS:			
IF CORRECTIVE ACTION RE	QUIRED:		CORRECTED / / / / PARTIALLY CORRECTED / /

10/1/12 - 1 Page 1 of 15

Standard II. Administration

The program develops, maintains, and updates written administrative policies and procedures to ensure program efficiency and consistency.

DISCIPLINE POLICY

- A. ABC Level B programs acknowledge and understand that discipline is used as a teaching strategy, which supports each child's social-emotional development and well-being. The program shall have a written discipline policy that outlines the program's positive and age appropriate guidance strategies. The policy specifically disallows:
 - corporal punishment. 1.
 - 2. any strategy that hurts, shames, or belittles a child.
 - 3. any strategy that threatens, intimidates, or forces a child.
 - the use of food as a reward or punishment.
 - the use or withholding of physical activity as a punishment.

All staff members and parent(s)/guardian(s) of children enrolled in the center shall sign a statement that they have received, reviewed, and understand the discipline policy. These statements shall be maintained on-site and reviewed and re-signed/dated annually.

Evidence: Center's discipline policy and current st	tatements signed by parents and staff.
MEETS/VALIDATED ON-SITE (DATE) YES	NO
COMMENTS:	
IF CORRECTIVE ACTION REQUIRED:	CORRECTED / /
	PARTIALLY CORRECTED//

NUTRITION POLICY

- B. A healthy and balanced diet includes fruits, vegetables, and whole grains and limits foods that are high in sugar and/or fat. ABC Level B programs have a written policy that incorporates information about the components of a healthy and balanced diet as recommended by the U.S. Department of Agriculture (USDA) Child and Adult Care Food Program (CACFP). The policy shall reflect the following criteria:
 - All meals and/or snacks that are provided by the center shall be planned and served to meet the child's nutritional requirements as recommended by the USDA CACFP in proportion to the amount of time the child is in the center each day with no more than four hours between food services.
 - Sugar intake is limited by the following practices:
 - Juice is allowed only once per day in a serving size specified by USDA CACFP for the age group served. a)
 - Sugar sweetened beverages shall not be served. b)
 - Sweet food items are served no more than two times per week. c)
 - Foods and beverages high in fat are limited by the following practices:
 - High-fat meats are served no more than 2 times per week.
 - b) Only skim or 1% milk is served to children age 2 years and above.
 - c) Fried or pre-fried vegetables, including potatoes, are served no more than once a week.
 - Fruits, vegetables, and whole grains shall be served based on the meals/snacks provided, as follows: Programs serving breakfast, lunch, and snack or serving lunch and 2 snacks:
 - a) Fruit (not juice) is served at least 2 times per day.
 - A vegetable other than white potatoes is served at least once a day. b)
 - Whole grain foods are served at least once a day. c)

Programs serving lunch and snack:

Fruit (not juice) is served at least once a day.

10/1/12 - 1 Page 2 of 15

A vegetable other than white potatoes is served at leastWhole grain foods are served at least once a day.	st once a day.
Programs serving snack only: a) Fruit (not juice) is served at least 2 times per week.	
b) A vegetable other than white potatoes is served at least	
c) Whole grain foods are served at least 2 times per wee	·k.
Evidence: Review of the center's nutrition policy for alignment with a (breakfast, lunch, and snack). Criteria for less than full day of food servindicated above.	
MEETS/VALIDATED ON-SITE (DATE) YES	NO
COMMENTS:	
IF CORRECTIVE ACTION REQUIRED:	CORRECTED / /
	PARTIALLY CORRECTED / /
 and school age children totaling 90-120 minutes. Part day programs (4 to 6 hours) shall have two separmonths totaling 40-60 minutes; and two time periods totaling 60-90 minutes. 	on dressing their child in clothes and shoes that allow for the permitted for children age 2 years and under. Into and toddlers at all times. Into and toddlers at all times. Into the physically active indoors and outdoors at all children. Written policy should also notethat indoor activity is increased to assure the total amount of three separate time periods of outdoor play for children are separate time periods of outdoor play for preschool rate time periods of outdoor play for children 12 to 36 of outdoor play for preschool and school age children or play for children 12 to 36 months totaling at least 30 ge children totaling at least 30 minutes.
policy.	center must be informed of the physical activity
Evidence: Center's physical activity policy that meets ABC criteria and	d evidence that staff and parents have been informed.
MEETS/VALIDATED ON-SITE (DATE) YES	NO
COMMENTS:	

10/1/12 - 1 Page 3 of 15

CORRECTED

PARTIALLY CORRECTED

IF CORRECTIVE ACTION REQUIRED:

Standard III. Staff Qualifications and Development

The program ensures that caregiving is provided by adults who meet education, experience, and professional development requirements. (Note: Only staff 18 years and older can be counted for computation of staff-child ratio.)

DIRECTOR Formal Education & Experience Requirements

- A. Professionals who direct educational programs and supervise staff in early childhood centers shall be at least 21 years of age, and shall meet or exceed one of the following:
 - (1) a bachelor's degree in child development or early childhood education from a regionally accredited college or institution;

OR

(2) a bachelor's degree from a regionally accredited college or institution and at least six months verifiable experience as a caregiver in a licensed/approved child care facility;

OR

(3) an associate's degree in child development/early childhood education from a regionally accredited college with two years verifiable experience as a caregiver in a licensed/approved child care facility;

OR

(4) a diploma in child development/early childhood education from a regionally accredited college or institution with two years verifiable experience as a caregiver in a licensed/approved child care facility;

OR

(5) Certificate in child development/early childhood education from a regionally accredited college or institution with two years verifiable experience as a caregiver in a licensed/approved child care facility;

OR

(6) a Child Development Associate Credential with two years verifiable experience as a caregiver in a licensed/approved child care facility;

OR

(7) a valid high school diploma or General Educational Development Certificate (GED), with three years experience as a caregiver in a licensed/approved/registered child care facility and a plan to complete the Certificate in Child Development/Early Childhood Education (as in 5 above) or a DSS ABC approved credential/certificate/ diploma/degree within three years. One of the three years experience shall include supervision of other child care staff.

Evidence: List name of staff, documentation of degree/certification and work experience.

	MEETS	YES	NO	N/A	(If enrolling for school-age only)
COMMENTS:					
IF CORRECTI	VE ACTION REQUIREI):		=	RRECTED// RTIALLY CORRECTED///

CENTER CO-DIRECTOR Formal Education & Experience Requirements

- B. Professionals who co-direct a program that operates more than 12 hours per day shall be at least 21 years of age, and shall meet or exceed one of the following:
 - (1) a bachelor's degree or advanced degree from a state-approved college or university in early childhood education, child development, child psychology or a related field that includes at least eighteen credit hours in child development and/or early childhood education;

OR

(2) a bachelor's degree from a state-approved college or institution in any subject area, six months experience working with children in a licensed, approved or registered child care facility;

OR

(3) an associate's degree from a state-approved college or university in early childhood education, child development, child psychology or a related field, that includes at least eighteen credit hours in child development and/or early childhood

10/1/12 - 1 Page 4 of 15

education with six months work experience in a licensed, approved or registered child care facility;

- (4) a diploma in child development/early childhood education from a state-approved institution or a child development associate credential (CDA), and one year work experience in a licensed, approved or registered child care facility;
- (5) a valid high school diploma or GED with 3 years experience in a licensed, approved or registered child care facility. One year shall include supervision of child care staff.

Evidence: List name of staff, documentation of degree/certification and work experience.

	MEETS	YES	N	Ю	N/A	(If enrolling for school-age only)
COMN	MENTS:					
IF CO	RRECTIVE ACTION F	REQUIRED:				ORRECTED//_ARTIALLY CORRECTED///
	OL AGE PERSON IN C Director – See Director		GRAM (on-s	site) Formal Ed	lucation	& Experience Requirement (If dual role, also
C.	Staff who are responsi		hild care pro	ograms and su	pervise (other staff shall be at least 21 years of age and
						ience related to the care and development of 101) within one year. (Applies to plans signed
	Evidence: List name of and training shall be of					n and work experience. Additional education ential requirement.
	MEETS	YES	NO	N/A	(If enr	olling for non school-age only)
COMN	MENTS:					
IF CO	RRECTIVE ACTION F	REQUIRED:			=	ORRECTED/ ARTIALLY CORRECTED / /

TEACHERS/CAREGIVERS Formal Education & Experience Requirements

- D. Teachers/Caregivers who lead or are in charge of groups of children through age 5 shall be at least 18 years of age and shall meet or exceed one of the following:
 - (1) A university, college, or technical college degree/diploma/certificate from a regionally accredited college or institution in Early Childhood Education/Development or the equivalent and 6 months experience as a caregiver in a licensed/approved child care facility;

OR

(2) A bachelor's degree from a regionally accredited college or institution and three (3) years of verifiable experience related to the care and development of children. At least 6 months of the experience shall be as a caregiver in a licensed/approved child care facility;

OR

- (3) A valid high school diploma/GED and at least 6 months experience as a caregiver in a licensed/approved child care facility and a SC Early Childhood Credential (ECD 101) or other DSS ABC approved credential;
- (4) A valid high school diploma or GED and at least six (6) months experience as a caregiver in a licensed/approved child

care facility with a plan for completing the SC Early Childhood Credential (ECD 101) within one year. (Applies to plans signed on or after 10/1/12.)

Teachers/caregivers in charge of children ages 6 and up shall be at least 18 years of age and shall meet or exceed the following:

A valid high school diploma or GED and 6 months experience as a caregiver in a licensed/approved child care facility.

Evidence: List name of staff to include age if under 21, documentation of degree/certification and work experience for each caregiving staff in charge of a group of children.

0-2 year olds	MEETS	YES	NO	N/A (Based on age group served)	
COMMENTS:					
IF CORRECTIVE A	CTION REQUIR	EED:		CORRECTED / / / PARTIALLY CORRECTED / / /	
3-5 year olds	MEETS	YES	NO	N/A (Based on age group served)	
COMMENTS:				,	
IF CORRECTIVE A	CTION REQUIR	RED:		CORRECTED /_/	
6-12 year olds	MEETS	YES	NO	N/A (Based on age group served)	
COMMENTS:					
IF CORRECTIVE A	CTION REQUIR	RED:		CORRECTED / / / PARTIALLY CORRECTED / / /	
ASSISTANT CAREO	<u>GIVERS</u>				
E. Caregivers who work as assistants to the person in charge of a group of children shall be at least 18 years of age, and shall have a valid high school diploma or GED and at least six (6) months experience as a caregiver in a licensed/approved child care facility. If a caregiver does not meet the experience requirements, the caregiver must be directly supervised for six months by a staff person with at least one-year experience as a caregiver in a licensed or approved child care facility. Within six months of being employed, a caregiver must have six clock hours of training in child growth and development and early childhood education or shall continue to be under the direct supervision of a teacher/caregiver who has at least one year of experience as a teacher/caregiver in a licensed or approved child care facility. Evidence: A listing by name of all staff to include age if under age 21.					
0-2 year olds	MEETS	YES	NO	N/A (Based on age group served)	

10/1/12 - 1 Page 6 of 15

COMMENTS:

3-5 year olds COMMENTS:	MEETS	YES	NO	N/A	(Based on age group served)		
6-12 year olds COMMENTS:	MEETS	YES	NO	N/A	(Based on age group served)		
IF CORRECTIVE A	ACTION REQUIF	RED:			CORRECTED/ PARTIALLY CORRECTED//		
F. ABC Level I Operator an to include a developmen children's m one hour mu All direct ca (excluding fi least 5 clock movement/p blood-borne Evidence: I training is not a plan for required	Operator and/or director shall have at least 20 clock hours of training (excluding first aid/CPR) during the calendar year to include at least 5 clock hours related to program administration and at least 5 clock hours in child growth and development, early childhood education and/or health and safety, 1 hour related to nutrition, and 1 hour related to children's movement/physical activity. The remaining hours may come from any identified topic areas; however, at least one hour must include blood-borne pathogen training as required by OSHA. All direct care staff except emergency person(s) and volunteer(s) shall participate in at least 15 clock hours of training (excluding first aid/CPR) during the calendar year to include at least 5 clock hours in child growth and development and at least 5 clock hours in curriculum activities for children, 1 hour related to nutrition, and 1 hour related to children's movement/physical activity. The remaining hours may come from any identified topic areas; however, hours must include blood-borne pathogen training as required by OSHA. Evidence: Documentation of official transcript from the Center for Child Care Career Development (CCCCD). If training is not documented during the current calendar year, and/or the previous calendar year, the provider shall present						
Director COMMENTS:	MEETS			NO			
IF CORRECTIVE A	IF CORRECTIVE ACTION REQUIRED: CORRECTED/ PARTIALLY CORRECTED/						
Caregivers COMMENTS:	MEETS	Y	ES I	NO			
IF CORRECTIVE A	ACTION REQUIF	RED:			CORRECTED / / / PARTIALLY CORRECTED / / /		

10/1/12 - 1 Page 7 of 15

Standard IV. Health, Safety, and Well-Being					
The program must ensure that the health, safety, and well-being of children and adults are protected and enhanced.					
PHYSICIAN STATEMENT AND TB TEST					
A. For DSS exempt facilities, each adult shall have: (1) a written statement from a physician or health resource assessing the health and ability of the staff person to work with children such as ability to move quickly, to assist and/or supervise young children, to lift children, equipment and supplies to hear and see at a distance for outdoor supervision or driving, etc. The health assessment shall be completed three months prior to employment or within the first month of employment and shall include health history, physical exam vision and hearing screening, and a review of immunization status. A new health assessment shall be obtained by the operator, director and staff at least every four years after the initial assessment; (2) written evidence from a physician or health resource attesting that each staff person is free from communicable tuberculosis at the time of employment and subsequently according to state statute.					
Evidence: Photocopy of physician/health resource statement.					
MEETS/VALIDATED ON-SITE (DATE) YES NO N/A DSS License/Approval COMMENTS:					
IF CORRECTIVE ACTION REQUIRED: CORRECTED /_/_ PARTIALLY CORRECTED /_/_/					
CPR/FIRST AID					
B. A staff member who has current certification in pediatric first aid and child/infant cardiopulmonary resuscitation (CPR is available on the premises at all times.					
Evidence: Documentation of current certification in pediatric first aid treatment and child/infant cardiopulmonary resuscitation (CPR) for identified staff and observation of center coverage by certified staff. Review staffing plan that reflects CPR/First Aid coverage at all times.					
MEETS/VALIDATED ON-SITE (DATE) YES NO					

IMMUNIZATIONS

IF CORRECTIVE ACTION REQUIRED:

COMMENTS:

C. Documentation of current children's immunizations (under 5 years) is required or proof that child meets either medical or religious exemption requirements.

CORRECTED

PARTIALLY CORRECTED

10/1/12 - 1 Page 8 of 15

Evidence: Documentation is the photocopy of the official current medical or religious exemption. Review sample of 5 immunization			
MEETS/VALIDATED ON-SITE (DATE) YES	NO		
COMMENTS:			_
IF CORRECTIVE ACTION REQUIRED:		RRECTED/ RTIALLY CORRECTI	
<u>ENVIRONMENT</u>			
D. The environment in which a child receives care is free of conditions the child.	which mi	ght adversely affect the	health and safety of
The Program:		YES	NO
1. Maintains clean and sanitary conditions indoors and outdoors.			
2. Is hazard free including space, materials and furnishings (no exc peeling or chipping paint, exposed wires, sharp objects; cleaning products/medicines properly stored).	essive		
3. Maintains compliance with the applicable Fire Codes. This is to i but is not limited to having accessible exits (for example – fire do not blocked nor improperly locked); having functional smoke de having functional fire extinguisher(s); and infants and toddlers becared for in approved classrooms.	ors are tector(s);		
4. Has a working landline telephone. (Cell phones are not included)			
5. Center is free of other conditions which might adversely affect th and safety of the child(ren).	e health		
Evidence: Reviewer's observation and/or interview with director.			
MEETS/VALIDATED ON-SITE (DATE) YES	NO		
COMMENTS:			
IF CORRECTIVE ACTION REQUIRED:		RRECTED/ RTIALLY CORRECTI	 E D /

MENU PLANNING and MEAL SERVICE

E. All meals and/or snacks that are provided by ABC Level B programs shall be planned and served to meet the child's nutritional requirements (see attached charts). ABC Level B programs consistently implement written policies for a healthy and balanced diet that includes fruits, vegetables, and whole grains, and limits sugar and foods high in fat as follows:

All meals and/or snacks that are provided by the center shall be planned and served to meet the child's nutritional

10/1/12 - 1 Page 9 of 15

	 Juice is allowed only once per day in a serving size specified by USDA CACFP for the age group serving. Sugar sweetened beverages shall not be served.
	c) Sweet food items are served no more than two times per week.
3.	Foods and beverages high in fat are limited by the following practices:
	a) High-fat meats are served no more than 2 times per week.
	b) Only skim or 1% milk is served to children age 2 years and above.
	c) Fried or pre-fried vegetables, including potatoes, are served no more than once a week.
<mark>4.</mark>	Fruits, vegetables, and whole grains shall be served based on the meals/snacks provided, as follows:
	Programs serving breakfast, lunch, and snack or serving lunch and 2 snacks:
	a) Fruit (not juice) is served at least 2 times per day.b) A vegetable other than white potatoes is served at least once a day.
	c) Whole grain foods are served at least once a day.
	Programs serving lunch and snack:
	a) Fruit (not juice) is served at least once a day.
	b) A vegetable other than white potatoes is served at least once a day.
	c) Whole grain foods are served at least once a day.
	Programs serving snack only:
	a) Fruit (not juice) is served at least 2 times per week.
	b) A vegetable other than white potatoes is served at least 2 times per week.
	c) Whole grain foods are served at least 2 times per week.
Revi base	ence: Review of center menus, including snacks, for current week and week preceding or following the current iewer documents observations of food items served during monitoring visit and notes compliance to listed conditions of food items served and review of center menus for at least two weeks. ETS/VALIDATED ON-SITE (DATE) YES NO N/A No food service provide
COM	MMENTS:

Standard V. Staff - Parent Interaction

The program respects, informs, and supports the family as the child's first teacher, understanding that each family has unique needs and strengths.

PARENT COMMUNICATION

Parents are informed about and welcomed as observers and contributors to the program.

A. Parents shall be informed regularly about the center's program.

Evidence: Provider proof of compliance; example: center policy, newsletter, bulletin board for parents, observation of parent-staff communication. This standard will be validated on-site on the day of monitoring for compliance to staff-

10/1/12 - 1 Page 10 of 15

	parent interaction based on reviewer observation.
	MEETS/VALIDATED ON-SITE (DATE) YES NO COMMENTS:
IF CO	RRECTIVE ACTION REQUIRED: CORRECTED// PARTIALLY CORRECTED///
INFAN	NT/TODDLER PARENT COMMUNICATION
B.	For programs serving infants and toddlers, caregivers share daily information with parents regarding feeding times, food eaten, bowel movements, and sleeping patterns.
	Evidence: Provider proof of compliance; example: checklist, note to parent, interview with caregiver and/or observation of parent-staff communication.
	MEETS/VALIDATED ON-SITE (DATE) YES NO
	N/A (PROGRAM DOES NOT SERVE INFANTS/TODDLERS) COMMENTS:
IF CO	RRECTIVE ACTION REQUIRED: CORRECTED /_/_ PARTIALLY CORRECTED/_/
PARE	NTAL ACCESS
C.	Parents shall have unlimited access to their children and to the providers caring for their children during the normal hours of program operation and whenever children are in the care of the providers.
	Evidence: Provider proof of compliance; example: center policy in handbook, window observation, observation of parents in center, interview with staff. This standard will be validated on-site on the day of monitoring for compliance to staff-parent interaction based on reviewer observation.
	MEETS/VALIDATED ON-SITE (DATE) YES NO
COMN	MENTS:
IF CO	RRECTIVE ACTION REQUIRED: CORRECTED/ PARTIALLY CORRECTED//

10/1/12 - 1 Page 11 of 15

DEFINITIONS

The following are the list of terms used in the Level B Required Standards

- **1. Assistant Teacher/Caregiver** The staff person who assists the person in charge of classroom operation.
- 2. Capacity The maximum number of children allowed to be present in the facility at one time.
- **3. Certificate in child development/early childhood education** Course of study offered at the SC technical colleges which consists of the following 27 credit hours:

ECD 101	Introduction to Early Childhood
ECD 102	Growth and Development I
ECD 105	Guidance and Classroom Management
ECD 107	Exceptional Children
ECD 131	Language Arts
ECD 132	Creative Experiences
ECD 133	Science and Math Concepts
ECD 135	Health, Safety and Nutrition
ECD 203	Growth and Development II

- 4. Co-Director The on-site staff person who is responsible for the daily operation of a child care center when the director is not present including, but not limited to, the supervision of staff and children. A co-director is required by child care licensing when the center operates more than 12 hours per day. Programs may informally refer to this person as an assistant director.
- **Corporal punishment** The use of physical force to the body as a discipline measure. Physical force of the body includes but is not limited to spanking, slapping, biting and shaking.
- **6. Deficiency** Non-compliance to a requirement.
- 7. **Director** The on-site staff person, who is responsible for the daily operation of a child care center, including but not limited to supervision of staff and children. The center director can only have responsibility for one center and may not hold another full-time job during the hours of center operation.
- **8. Director Credential 2** Course of study leading to Credential from the SC Center for Child Care Career Development offered at the SC technical colleges which consists of the following 9 credit hours:

ECD 105	Guidance and Classroom Managen
ECD 108	Family and Community Relations
ECD 109	Administration and Supervision

9. **Director Credential 3** – Course of study leading to Credential from the SC Center for Child Care Career Development offered at the SC technical colleges which consists of the following 9 credit hours:

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ECD 135 Health, Safety, and Nutrition
ECD 201 Principles of Ethics and Leadership
MGT 121 Small Business Management or MGT 120/MGT 101
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- **10. Director of School Age Programs** The on-site staff person, who is responsible for the daily operation of a program that operates outside of school hours, including but not limited to supervision of staff and children.
- 11. **High School Diploma** A prescribed secondary course of study that:
 - a. Includes subjects such as: Reading Skills, English, and Mathematics, American and World History, Biology, Social Science, and Physical Science, career-oriented electives like Auto Repair Technician, Personal Computer Specialist, and more traditional electives like chemistry, foreign language, and music.
 - b. Has a minimum compulsory attendance requirement
 - c. Is accepted by institutions of higher education
 - d. May include home school diplomas, as recognized by each state
 - e. Is recognized by the SC Department of Education or is accredited by one of the six regional accrediting bodies recognized by the U.S. Department of Education.
- 12. **History of Compliance** The center maintaining a history with no frequent or multiple deficiencies or a significant event posing substantial threat to the health or safety of the children that involve supervision, compliance with ratios, or health and safety violations.
- 13. Lead Teacher/Caregiver The staff person who is primarily responsible for the supervision and wellbeing of a group of children from birth through age 5. This person is also responsible for the management of the classroom and is present with the children during the majority of the day. If a center is open more than 12 hours per day there should be at least 2 lead teachers assigned to each class, to ensure lead teacher coverage throughout the operating day.
- 14. **Preschool Credential 2** Course of study leading to Credential from the SC Center for Child Care Career Development offered at the SC technical colleges which consists of the following 9 credit hours:

ECD 102 Child Development I
ECD 105 Guidance and Classroom Management
ECD 107 Exceptional Children

15.

School Age Child – A child who is between the ages of 5 and 12 and attending school.

16. School Age Credential – Course of study leading to Credential from the SC Center of Child Care Career Development offered at

10/1/12 - 1 Page 12 of 15

the SC technical colleges which consists of the following 3 credit hours:

SAC 101 Best Practices in School Age and Youth Care Skills

17. SC Early Childhood Credential – Course of study leading to Level 1 Credential from the SC Center for Child Care Career Development offered at the SC technical colleges which consists of the following 3 credit hours:

ECD 101 Introduction to Early Childhood

- 18. SC DSS Regulations for Private and Public Child Care Centers mandated standards that protect the health, safety and wellbeing of children receiving care in child care facilities. The full list can be accessed at: http://childcare.sc.gov/main/general/programs/licensing/regulations.aspx
- 19. Staff: Child Ratio The maximum number of children permitted per teacher/caregiver.
- **20. Staff Orientation** The process of training a new staff person regarding their position within a child care center.
- **Supervision** Adequate supervision requires staff awareness of and responsibility for each child. The staff and/or director must have ready access to children in order to intervene when needed, by being in the room or on the playground at all times when children are present. Direct supervision of infants, toddlers, and preschoolers means the children are within sight and hearing at all times. School-age children should be within sight or hearing at all times.

10/1/12 - 1 Page 13 of 15

The Child Care Food Program - Infant Meal Pattern

Age	Breakfast	Lunch/Supper	<u>Snack</u>
of Baby			
Birth throug h 3 months	4-6 fluid ounces formula ¹ or breast milk ²	4-6 fluid ounces formula ¹ or breast milk ²	4-6 fluid ounces formula¹ or breast milk ²
4 months throug h 7 months	4-8 fluid ounces formula ¹ or breast milk ^{2,3} ; 0-3 tablespoons of infant cereal ^{1,4}	4-8 fluid ounces formula ¹ or breast milk ^{2,3} 0-3 tablespoons infant cereal ^{1,4} ; and 0-3 tablespoons of fruit or vegetable or both ⁴	4-6 fluid ounces formula ¹ or breast milk ^{2,3}
8 months through 11 months	6-8 fluid ounces formula or breast milk 2,3; and 2-4 tablespoons of infant cereal; and 1-4 tablespoons of fruit or vegetable or both	6-8 fluid ounces formula ¹ or breast milk ^{2,3} ; 2-4 tablespoons of infant cereal ¹ [and/or] 1-4 tbsp. of meat, fish, poultry, egg yolk, or cooked dry beans or peas; or ½-2 ounces of cheese; or 1-4 ounces (volume) cottage cheese, or 1-4 ounces (weight) of cheese food or cheese spread; and 1-4 tablespoons of fruit or vegetable or both	2-4 fluid ounces formula ¹ or breast milk ^{2,3} or fruit juice; and 0-1/2 slice bread ^{4,6} or 0-2 crackers ^{4,6}

- 1. Infant formula and dry infant cereal must be iron-fortified.
- 2. Breast milk or formula, or portions of both, may be served; however, it is recommended that breast milk be served in place of formula from birth through 11 months.
- 3. For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry.
- 4. A serving of this component is required when the infant is developmentally ready to accept it.
- 5. Fruit juice must be full-strength.
- 6. A serving of this component must be made from whole-grain or enriched meal or flour.

10/1/12 - 1 Page 14 of 15

FOOD CHART Child Care Program

CHILD AND ADULT CARE FOOD PROGRAM For required serving amounts for infants up to age 1 year, refer to your handbooks or to program requirements.														
		AGE 1 and 2	AGE 3 through 5	AGE 6 through 12										
BREAKFAST	📤 Fluid Milk	1/2 cup	3/4 cup	1 cup										
	Juice or Fruit or Vegetable	1/4 cup	1/2 cup	1/2 cup										
	Bread or Bread Alternate	1/2 slice*	1/2 slice*	1 slice*										
SNACK	📤 Fluid Milk	1/2 cup	1/2 cup	1 cup										
(Supplement) Select 2 out of 4 components	Juice or Fruit or Vegetable	1/2 cup	1/2 cup	3/4 cup										
		1/2 ounce**	1/2 ounce**	1 ounce**										
	📳 Bread or Bread Alternate	1/2 slice*	1/2 slice*	1 slice*										
LUNCH/	📤 Fluid Milk	1/2 cup	3/4 cup	1 cup										
SUPPER		1 ounce	11/2 ounces	2 ounces										
	Cheese or	1 ounce	11/2 ounces	2 ounces										
	Egg or	1/2	3/4	1										
	Cooked Dry Beans and Peas or	1/4 cup	3/8 cup	1/2 cup										
	Peanut Butter or other Nut or Seed Butters or	2 tablespoons	3 tablespoons	4 tablespoons										
	Nuts and/or Seeds or	1/2 ounce***	3/4 ounce***	1 ounce***										
	Yogurt	4 ounces	6 ounces	8 ounces										
	Juice, Fruit and/or Vegetable (2 or more)	1/4 cup total	1/2 cup total	3/4 cup total										
	Bread or Bread Alternate	1/2 slice*	1/2 slice*	1 slice*										

- or an equivalent serving of an acceptable bread alternate such as combread, biscuits, rolls,muffins, etc., made of whole-grain or enriched meal or flour, or a serving of whole-grain or enriched cereal, or a serving of cooked enriched or whole-grain rice or macaroni or other pasta product.
- ** Yogurt may be used as a meat/meat alternate.
 You may serve 4 ounces (weight) or 1/2 cup
 (volume) of plain or sweetened and flavored yogurt
 to fulfill the equivalent of 1 ounce of the meat/meat
 alternate component. For younger children, 2 ounces
 (weight) or 1/4 cup (volume) may fulfill the
 equivalent of 1/2 ounce of the meat/meat alternate
 requirement.
- *** No more than 1 ounce of nuts and/or seeds may be served in any one meal.

CAUTION: Children under the age of 5 years are at the highest risk of choking. USDA recommends that nuts and/or seeds be served ground or finely chopped in a prepared food.

The Child and Adult Care Food Program is open to all eligible children regardless of race, color, national origin, sex, age, or disability. Any person who believes he or she has been discriminated against in any USDA-related activity should write immediately to:

USDA, Director
Office of Civil Rights
Room 326-W, Whitten Building
1400 Independence Avenue, SW
Washington, D.C. 20250-9410
or call (202) 720-5964 (voice and TDD).

SS Poster 3331 (JUL 03)



POINTS TO REMEMBER

- Keep menu records
- · Count meals served to enrolled children and to program adults
- Each child must be served the required amount of each food group at all meals
- · Use full-strength juice

10/1/12 - 1 Page 15 of 15



ABC CHILD CARE

0-2 YEAR OLD STANDARDS

CENTER - BASED

PART II

PROGRAM OBSERVATION

10/1/12 - 1 Page 1 of 15

ANALYSIS OF PROVIDER CAPABILITY TO MEET ABC LEVEL B CHILD CARE RATIOS/GROUP SIZE 0-2 YEAR OLDS

Center-based

STANDARD VI. STAFF-CHILD RATIO: The program is effectively administered with attention to the needs and desires of children, parents and staff.

A. Staffing patterns shall provide for adult supervision of children at all times and the availability of an additional adult to assume responsibility if one adult must respond to an emergency. Staff are with children, not distracted by other duties (such as cleaning or cooking). Every attempt shall be made to have continuity of adults who work with children. Staff-child ratios shall be maintained through provision of substitutes when regular staff members are absent.

ABC LEVEL B STAFF-CHILD RATIOS/GROUP SIZE EACH ROOM meeting these ratios and group sizes will get 2 ADDITIONAL POINTS ADDED TO THE SCORE.

BASIC MINIMAL RATIOS REQUIRED BY STATE CHILD CARE LICENSING

Ages	Maximum Ratios	Group Size	Ages	Ratios
Under 1	1:5	10	Under 1	1:5
1-2	1:5	10	1-2	1:6
2-3	1:7	14	2-3	1:8

Calculate staff-child ratio by group. To determine staff needed for mixed age groups, determine number of children by age; divide children in same age category by maximum ratios for that age; add results for each age to obtain number of staff needed. Fractions shall be rounded up at .1 and above not to exceed basic minimal ratios required by state licensing.

List all rooms Group ID	Staff assigned by name	# children	Age(s) of children	Calculated staff-child ratio (# of children divided by # of assigned staff)	MEETS State Child Care Licensing		State Child Care		MEE ABC Staff-Cl Group Size		# Staff needed to meet ABC ratios	Total Score Add State Licensing + ABC for total score per room
					Yes (0)	No (-2)	Yes (+2)	No (0)				
					If NO, -2 pts. per room. If yes, 0 points per room.		If NO, -2 pts. per room. If yes, 0 points per room.		If YES, +2 pt If no, 0 points	s. per room.	Actual Score Total	
									Possible Score: Total # rooms x 2	=		

Comments_			
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10/1/12 - 1 Page 2 of 15

ABC CHILD CARE 0-2 YEAR OLDS STANDARDS Center-Based Part II

STANDARD VII. STAFF-CHILD INTERACTIONS: Interactions between children and staff provide opportunities for children to develop an understanding of self and others and are characterized by warmth, personal respect, individuality, positive support, and responsiveness.

		Room I	ID:			Room	ID:			Room	ID:			Room I	D:		
A.	Staff shall frequently interact, be available and be responsive to children through	Caregiver	· ID:	Caregiver	ID:	Caregive	er ID:	Caregive	er ID:	Caregive	r ID:	Caregiver	ID:	Caregiver	ID:	Caregive	er ID:
	(1) active listening (2) giving feedback	Time of observation	on:	Time of observatio	n:	Time of observat		Time of observat		Time of observation	on:	Time of observation	on:	Time of observation	on:	Time of observati	
		Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Responds to children frequently by touching, holding, hugging, patting, rocking and keeping a child close to the adult's body.																
2.	Responds to children with positive expressions such as smiling.																
3.	Speaks often with children even when children are not asking for attention.																
4.	Answers with words when the child shows with his face, body movements, or uses sounds or words to let the caregiver know what he wants to say. Examples: Child smiles and the adult says "You like the little dog, don't you?" (or) Child is pulling on caregiver's hand and the adult says: "You want to go outside, don't you?" (or) child says: "Me." and the adult says: "Do you want to be held?"																
5.	Shows patience and is not annoyed/bothered when children try to be close to the adult or try to communicate in other ways. Examples: Pulling on an adult's skirt/pants, holding on to an adult's leg, giving wet kisses, or playing with the adult's hair/glasses.																
6.	Limits conversations with adults. No talking about children in																

10/1/12 - 1 Page 3 of 15

		Room	ID:			Room	ID:			Room	ID:			Room	ID:		
Α.	Staff shall frequently interact, be available and be responsive to children through	Caregive	r ID:	Caregiver	ID:	Caregiv	er ID:	Caregive	er ID:	Caregive	r ID:	Caregive	r ID:	Caregive	r ID:	Caregive	er ID:
	(1) active listening (2) giving feedback	Time of observation	on:	Time of observatio	n:	Time of observar		Time of observat		Time of observation	on:	Time of observation	on:	Time of observation	on:	Time of observati	
		Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
	front of them such as: "Brian is the best looking child in the room." "Mandy is spoiled."																
7.	Looks directly into children's eyes when talking with them.																
8.	Gives appropriate feedback. For infants: When children cry, grunt, squeal, make letter sounds (goo, da, ma) or use word/sounds, the adult repeats the sounds or words, encouraging them to use more sounds/words. The adult uses sentences to try to say what the child is thinking/trying to say. Examples: "Did that hurt your finger? Do you want me to pick you up?" For toddlers and twos: repeats what the child says, asks for additional information, gives relevant comments to children's questions/comments.																
9.	Listens while a child tries to communicate, i.e. does not walk away or try to do something else (like wiping tables).																
10.	Does not interrupt or talk about something else when a child is speaking.																
	SCORING: Total points per caregiver																
Total p	points per room (total caregiver points)	a.				b.				c.				d.			
	Total program points for VII A. $(a+b+c+d)$															Sub-tota	1
	otal possible points for VII A: Cotal number of caregivers x 10)																

10/1/12 - 1 Page 4 of 15

		I				1											
		Room	ID:			Roon	m ID:			Roon	n ID:			Room	ID:		
В.	Staff shall initiate conversation with individual children in a positive and inquisitive manner to model language and stimulate language and thinking skills. Staff use:	Careg	iver	Careg ID:	giver	Care ID:	egiver	Careg ID:	giver	Cares	giver	Care; ID:	giver	Caregi ID:	iver	Caregi	ver ID:
	(1) questions (2) information sharing (3) positive feedback	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Talks individually with children as they play to let them hear the words for what they are doing. "Tabathia is patting the bunny." "Sam is pulling himself up on the chair." "I see Susan smiling at me."																
2.	Asks children individually to talk about what they are doing (share experiences). Until children can say what they are doing, the adult tells him what he is doing. Examples: The adult says to a child who doesn't talk, "You are holding the blanket." (or) John says "Walk." and the adult says, "I see you walking." (or) To a two year old the adult says, "Tell me about your car."																
3.	Asks children individually to talk about their ideas about activities or things that happen. Until children are able to talk about their ideas, the adult says what she thinks the child's idea is. If the adult guessed the wrong thing, she keeps asking until the child lets her know it is right. Examples: A child squeals with delight and the adult says, "You found the rattle!" (or) "Up." says the child and the adult says, "You want to get up on the chair?" (or) "Where are you taking the bear?" to a two year old.																
4.	Asks children individually to talk about how they feel. Until children can say how they feel, the adult tells him how she thinks he feels. If the adult guessed the wrong thing, she keeps asking until the child lets her know she's right. Examples: A child cries when the adult stops rocking him. The adult begins rocking again and says, "You didn't like me to stop rocking, did you?" (or) A toddler hugs a stuffed dog and says, "Doggie." and the adult says, "You love your doggie, don't you?" (or) A child has fallen and comes to the adult crying. The adult holds the child close and says, "It hurts doesn't it? Let me help you."																
5.	As feelings are discussed the adult offers comfort as needed by rocking a child, holding/cuddling a child, singing a soft song, hugging a child, or rubbing a child's back.																
6.	As children begin to use sentences, the adult asks children individually open-ended questions that begin with Why? What? Where? When? or How? and encourages a child to think. Example: "Where is the truck going?" "What do you need to get for the kitty?"																
7.	Talks to children, sharing information about the things around them and things that																

10/1/12 - 1 Page 5 of 15

					Room ID:				Roon	n ID:			Room	ID:			
В.	Staff shall initiate conversation with individual children in a positive and inquisitive manner to model language and stimulate language and thinking skills. Staff use:	Caregi ID:	ver	Careg ID:	iver	Careg	iver	Careg	iver	Careg	giver	Careg	giver	Caregi ID:	iver	Caregi	iver ID:
	(1) questions (2) information sharing (3) positive feedback	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
	are happening. "See the yellow flower. It is a daffodil. Smell the daffodil. Touch the daffodil."																
8.	Talks in a calm, gentle manner (no screaming or yelling).																
9.	D. Listens respectfully to the child even though the child's thinking is faulty.																
	SCORING: Total points per caregiver																
Total p	oints per room (total caregiver points)	a.				b.				c.				d.			
-	Total program points for VII B. $(a + b + c + d)$															Sub-to	tal
T-4-1	ossible maints for VII D.																

Total possible points for VII B: (Total number of caregivers x 9)

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10/1/12 - 1 Page 6 of 15

C.		Room	ID:			Rooi	n ID:			Roon	n ID:			Room	ID:		
	techniques of guidance. Staff (1) provide opportunities for children to be responsible	Careg ID:	iver	Careg	giver	Care ID:	giver	Careg	giver	Careg	giver	Careg	giver	Careg	iver	Caregi	ver ID:
	(2) provide choices (3) avoid comparison or criticism	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Opportunities are provided for children to be responsible by doing things for themselves such as sitting up alone, crawling, walking, drinking from a cup, feeding oneself (first with fingers and then with utensils), taking out toys, toileting, washing hands and other self help skills.																
2.	Uses positive guidance techniques.																
	Clarification: To receive credit, one positive strategy must be observed. If one instance of negative discipline (as defined in Standard II.A.) is observed, credit is not received.																
•	Examples: Redirection: One child takes a toy from another. The adult gently takes the child to another part of the room and gives him another toy. Then she goes back to the child who had the toy to see if that child is OK. Anticipation/elimination of potential problems: Example: If a child is in the biting stage, he is closely watched when near other children. The adult stays close to act quickly to prevent most biting. Child is provided many appropriate things on which to chew. Example: When young children cluster together, there are likely to be disputes over toys, so the adults will watch for clustering and gently move each child to other areas of the room and provide toys for each child to use. Children are given choices as a guidance technique. Examples: A toddler throws a block. The teacher says, "Blocks are for building. Bean bags are for throwing. Would you like to build with blocks or would you like to throw bean bags in a bucket?"																
	Examples of negative discipline: Confinement to a crib, swing, bouncy seat, exersaucer, etc. or the use of time out; use of threats such as "Do you want me to call your daddy?" or "I'll put the toys away if you can't share them."																
3.	No's are limited. Children are told what to do rather than what not to do. Examples: Children are told to walk, instead of "No, don't run." and "Feet stay on the floor", instead of "No Climbing."																
4.	Children are not expected to share, so duplicates of toys are provided.																
5.	Children are encouraged/allowed to bring their "loveys" (a blanket, special bear, pacifier) and keep them as long as they need. The adult treats these items as																

10/1/12 - 1 Page 7 of 15

C	C. Staff shall foster independence, encourage decision-making and use of positive	Room	ID:			Roon	n ID:			Room	ı ID:			Room	ID:		
C.	techniques of guidance. Staff (1) provide opportunities for children to be responsible	Caregi	ver	Caregi	iver	Cares	giver	Careg	iver	Careg	giver	Cares	giver	Caregi ID:	ver	Caregiv	ver ID:
	(2) provide choices (3) avoid comparison or criticism	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
	important and does not make fun of or try to humiliate a child into giving these up.																
6.	Adult handles children carefully when picking up, putting down, holding, and carrying children. Under no circumstances should children be shaken, jerked around, or handled roughly in any way.																
7.	Staff responds immediately to a crying child. The adult recognizes that a child's cry is a call for help and that the child is unable to handle the situation by himself. The adult does not say "Stop crying." "Don't cry." "It's nothing to cry about." or "Only babies cry." Instead she finds out what the child wants/needs and helps the child handle his problem.																
8.	Staff encourages children to treat each other with kindness and respect.																
9.	Children are provided varieties of materials from which to choose. Children are allowed to choose materials with which to work and play for as long as they wish.																
10.	Children's mistakes are expected and handled as normal, daily happenings. Examples: "Your spilled the milk, I'll clean it up. Would you like to help?"																
11.	Staff encourages children and tells them when or how they have behaved appropriately, "You helped me pick up the toys, thank you."																
12.	Children's mistakes are handled individually and privately as possible. Staff does not compare children ("Why can't you be good like John?") or criticizes children ("You are so messy, you always spill.")																
SCORI Total po	NG: bints per caregiver																
Total po	Total points per room					b.				c.				d.			
Total p	tal program points for VII C. $(a+b+c+d)$															Sub-tot	al

Total possible points for VII C: (Total number of caregivers x 12)

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.()	'IVI	VII.	/IN	

10/1/12 - 1 Page 8 of 15

STANDARD VIII. ACTIVITIES: Materials provided encourage children to be actively involved, to experience a variety of developmentally appropriate activities and materials, and to pursue their interests.

							 1		
d	Staff provide a variety of developmentally appropriate materials and activities which address the individual differences of children and provide materials selected to emphasize concrete learning within a predictable daily schedule which provides a balance of activities.	Room ID:		Room ID:		Room ID:		Room ID:	
		Y	N	Y	N	Y	N	Y	N
1.	Each child must be allowed to reach and use materials in a least restrictive, safe environment at all times. Clarification: Credit cannot be received if any child is confined in a piece of equipment such as, a high chair (if not being fed), swing, bouncy seat, crib (if awake), exersaucer, and/or feeding table, for any amount of time. If swing, bouncy seat, or exersaucer are present, assume that they are used.								
2.	Clarification: All materials observed during the observation must be concrete and meaningful to the children for the room to receive credit. Credit is not received if one or more of the following is observed (note in comments section which – a, b, and/or c are observed). a) No preprinted worksheets or coloring sheets are used. If any of these are used or you see evidence of use, credit cannot be received. b) Television, videos, DVD's and computers are not meaningful materials and would count as separate non-concrete materials. If a TV is in the room, but not on, assume it is used and do not give credit. c) Materials designed for older or younger age groups are not meaningful. Credit is not received if materials are not concrete and meaningful. Example: Some examples are: For non-walkers; rattles, non-breakable mirrors, cuddly toys, teething toys. For children who are walking: push toys, stacking toys, soft blocks, and sturdy picture books.								
3.	Caregivers provide opportunities for discovery and learning by allowing children to freely choose materials and actively explore the room. Clarification: Must see materials being used to receive credit. Children are allowed to choose and use materials as they are able. Credit can't be given if any child is confined in a piece of equipment such as, a swing, bouncy seat, crib (if awake), and/or exersaucer, for any amount of time. If a high chair or feeding table is used for any purpose other than feeding, credit cannot be received. If any of these are used, you see evidence of use, or if swing, bouncy seat, or exersaucer are present, credit cannot be received.								
4.	Daily routines (sleeping, eating, dressing, diapering, and toileting) are used as pleasant, natural learning times. Examples: When a child is getting ready to sleep the adult rubs his back, sings a soft song, cuddles him while rocking, or reads him a story. Diapering is a time to play games, sing songs or use verses, and to just enjoy talking/playing with the baby. Infants are held/talked to while bottle feeding.								
5.	Daily routines (sleeping, eating, dressing, diapering, and toileting) are done individually, based on need. Examples: Each child is fed when he/she is hungry and not made to wait for others. (For older toddlers and twos this can be done with supplementary snacks.) Toileting: children are allowed to use the restroom as the need occurs. Children do not all toilet as a group.								
6.	Caregivers and children routinely wash hands with soap and water at appropriate times. Caregivers use the								

10/1/12 - 1 Page 9 of 15

A.	Staff provide a variety of developmentally appropriate materials and activities which address the individual	Room	ID:	Room ID:		Room ID	:	Room ID:	
	differences of children and provide materials selected to emphasize concrete learning within a predictable daily schedule which provides a balance of activities.	Y	N	Y	N	Y	N	Y	N
	routine as a learning opportunity to model appropriate hand-washing and to teach self-help skills as children are able. Clarification: Caregivers and children routinely wash hands (or have hands washed) with soap and water before preparing/eating a meal or snack, after toileting/diapering and after contacting bodily fluids or contaminated items as part of the daily routine.								
7.	Adults help children learn language by using words to talk about things in the room/outdoors, to talk about things that happen, to use words/sentences to talk about what a child is doing/feeling.								
8.	Adults help children learn language by reading simple stories daily, talking about pictures in books on display, saying rhymes and verses and singing songs.								
9.	Adults help children learn to use language by repeating sounds and words that children say, letting children know they like to hear them speak (usually nonverbal with a smile), encouraging children to speak more often, ("I like to hear you talk.") repeating the words children say in complete sentences.								
10.	Each child has an opportunity to play in many positions. Examples are: on a carpet/rug, on the floor, standing at a table/easel, sitting on a cushion/bean bag, sitting on the lap of an adult.								
11.	Daily schedule for children under two years: The schedule varies for each child. The adult responds to children's individual needs and interests using teachable moments as they occur. For two year old children: The daily schedule has time for independent and peer play and active and quiet play. There are flexible feeding and resting schedules based on individual needs. Activities are provided for individual children and small groups. There are no total group activities for this age group.								

10/1/12 - 1 Page 10 of 15

12.	All children must have daily active outdoor play, weather permitting Clarification: 0-12 months – must occur at least once a day; 12-36 months – must occur 2 to 3 separate							
	occasions totaling 60-90 minutes. "Weather permitting" means no falling precipitation, thunder, lightning,		i		1 '		<i>l</i> '	
	or inclement weather. Inclement weather is defined by the American Academy of Pediatrics, American				1 '		l '	
	Public Health Association, and National Resource Center for Health and Safety in Child Care and Early		i		1 '		<i>l</i> '	
	Education (2010) as a wind chill factor at or below 15 degrees Fahrenheit or at or above a heat index of 90		i	'	1 '		<i>l</i> '	
	degrees Fahrenheit.		i	'	1 '		<i>l</i> '	
	Due to the health effects of ground-level ozone, the SC Department of Health and Environmental Control		i	'	1 '		<i>l</i> '	
	provides the service of forecasting ozone concentrations to warn the public of unhealthy air and to		i	'	1 '		<i>l</i> '	
	encourage people to avoid exposure to unhealthy air. If outdoor play is decreased due to weather, indoor		i		1 '		<i>l</i> '	
	active play is increased so the total amount of active play remains the same.				1 '	1	<i>l</i> '	
	The daily schedule is reviewed and children are observed outdoors. The schedule states what caregivers				1 '	1	<i>l</i> '	
	plan to do if there is inclement weather. Caregivers have a plan for 60-90 minutes of indoor active play on their posted schedules in case of rain or inclement weather using indoor materials that promote physical		i	'	1 '		<i>l</i> '	
	activity and an identified space to use. This would be observed on a day that meets the weather criteria				1 '	1	<i>l</i> '	
	above.		i	<u> </u>	1 '		<i>l</i> '	
13.	Caregivers provide opportunities for children to enhance motor development both indoors and outdoors.	 		 '	$\vdash \vdash \vdash$		igwedge	
13.	Clarification: Children are encouraged to be physically active indoors and outdoors at appropriate times.				1 '	1	<i>l</i> '	
	Monitor may interview caregiver if not observed.		i	'	1 '		<i>l</i> '	
				<u>'</u>	1 '		l '	
		1						
SCOR			i	'	1 '		<i>l</i> '	
Total p	oints per room			<u> </u>	 '		<u> </u>	
Total p	rogram points for VIII A:							Sub-total
(a+b+								
`	,							
	ossible points for VIII A:							
(total n	umber of rooms x 13)							

10/1/12 - 1 Page 11 of 15

STANDARD IX. PHYSICAL ENVIRONMENT: The indoor and outdoor physical environment fosters optimal growth and development through opportunities for exploration and learning.

A. Materials and Equipment – Indoor

High-quality infant and toddler programs support children's development by intentionally arranging and organizing spaces for play and learning. Children are drawn into play activities with toys, materials and others more readily when the environment conveys a positive message. Inviting rooms that are welcoming help children and families transition from home to group care settings by encouraging exploration and instilling a sense of belonging.

Age-appropriate materials & equipment (indoor) of sufficient quantity, variety and durability shall be readily accessible to children and arranged to promote independent use by children.

Material Category	# of accessible items
Cozy/Book	
Manipulatives	
Music	
Dramatic Play	
Blocks	
Arts	
Sensory/Science	
Indoor Activity	

		Room	ID	Room	ID	Room	ID	Room	ID
		Y	N	Y	N	Y	N	Y	N
1.	Room has sufficient, age appropriate materials so that all children can be actively involved. Clarification: Only age-appropriate, fully intact, and properly functioning materials that are in children's reach and accessible are able to be counted. Enough materials should be available for several children to be engaged in a similar activity, thus reducing competition. To receive credit, a minimum of two materials per child must be accessible and no evidence of excessive competition or children not being engaged.								
	Examples of appropriate materials for 0-2 year olds are: rattles, rubber or soft blocks, soft balls for poking and grasping, nesting/stacking toys, cloth and picture books, peg board and large pegs, xylophone, doll clothes and furnishings, dolls, ring stack sets, large tops, pounding board, simple puzzles, large crayons and paper, busy boards, squeak toys, cuddly toys, play telephone, pop-it-beads, materials to promote physical activity such as push and pull toys, rocking boat, toddler slide, and wheel toys.								
2.	Children are provided a variety of materials from which to choose. Clarification: If credit is not received for sufficient number of materials, credit cannot be given. Classroom contains at least 2 different kinds of materials from at least 4 of the 8 designated								

10/1/12 - 1 Page 12 of 15

	material types. (Material Categories listed above.)							
3.	Materials are safe, in good repair with no missing parts, sharp edges, or rust.							
4.	Materials are arranged so children can get materials by themselves without adult assistance. Children work by themselves with materials or in small groups.							
5.	The room is divided into spaces for routines and both active and quiet play that are appropriate for ages of the children enrolled. Clarification: The room arrangement addresses children's needs for sleeping, diapering/toileting, active play, quiet play, and a private soft, cozy area.							
	Example: (1) Sleeping; separate area for cribs (2) Diapering/toileting area (3) Active play; open area with no equipment or obstacles (crawling space, wheel toys, push and pull toys, toddler slide or rocking boat) (4) Quiet play (puzzles, nesting/stacking toys, books). (5) Private, soft, cozy area.							
6.	Diapering/potty area is located away from bottle/formula/food preparation and serving area. Diapering is adjacent to hot and cold running water. The cover of the changing table is disposed of after each change of a soiled diaper.							
7.	All infant equipment meets the minimum safety requirements developed by the U.S.Consumer Product Safety Commission.							
	SCORING:			b.		c.	d.	
Total points per room Total program points for IX A. $(a+b+c+d)$		a.						Sub-total
Total p	number of rooms x 7)							

10/1/12 - 1 Page 13 of 15

STANDARD IX. PHYSICAL ENVIRONMENT - Outdoor

B. Materials and equipment - Outdoor play area	Room	ID	Room	ID	Room	ID	Room	ID
High-quality infant and toddler program support children's development by intentionally planning, equipping, and maintaining safe, age appropriate outdoor spaces for young children to grow and develop. Emerging motor abilities and skills are supported when outdoor spaces and equipment allow children to move freely and have appropriate levels of challenge.	Y	N	Y	N	Y	N	Y	N
1. Age appropriate outdoor equipment is used. (Manufacturer's label may note age appropriateness).								
 Materials are in good repair with no sharp edges, rust or other hazards. The outdoor play area is clean, safe, and free of hazards such as garbage, glass, cans, overgrowth, broken structures, loose nails, tree limbs and junked equipment/cars. 								
There is a variety of age-appropriate outdoor portable play materials/equipment on the playground sufficient for all children to be actively involved in vigorous play activities. Clarification: Credit cannot be received if children just wander around with nothing to do because there is not sufficient equipment for all children. If children are not observed outdoors, interview staff to determine what additional materials are used outside and how vigorous activity is encouraged by staff.								
Example: Materials/equipment may include portable equipment such as soft balls, obstacle cones, push and pull toys, and wheeled toys as well as in-ground equipment if it is used in vigorous activity.								
5. Areas are designated for the safe outdoor play of infants, toddlers and twos. Mats or blankets are carried out to provide space for non-walkers to sit or crawl. Clarification: Infants, toddlers and twos have safe outdoor play areas designated for their exclusive use. Non-mobile infants can play on mats or blankets taken outside and placed on the ground so that they have freedom of movement. Buggies can only be used for transporting children between indoors and outdoors.								
6. The outdoor play area is designed to encourage movement without confinement or restriction.								
SCORING: Total points per room			b.		c.		d.	
Total program points for IX B. $(a+b+c+d)$							•	Sub-total
Total possible points for IX B. (Total number of rooms x 6)								

10/1/12 - 1 Page 14 of 15

ABC CHILD CARE LEVEL B SCORING SUMMARY 0-2 YEAR OLD STANDARDS

Facility NameFEIN#			
Part I: 0 - 2 year old Standards		MEETS	
		YES	NO
Standard I. Regulatory Requirements			
Standard II. Administration			
Standard III. Staff Qualifications and Development			
Standard IV. Health, Safety, and Well-Being			
Standard V. Staff-Parent Interaction			
		<u>-</u>	
Part II: 80% overall compliance required (0-2 year olds)	ACTUAL POINTS		SSIBLE DINTS
Standard VI. Staff-Child Ratios			
VI.A.			
Standard VII. Staff-Child Interactions			
VII.A.			
VII.B.			
VII.C.			
Standard VIII. Activities			
VIII.A.			
Standard IX. Physical Environment			
IX.A.			
IX.B.			
TOTAL			
PERCENT COMPLIANCE: Actual points divided by possible points =			
Provider meets Level B standards for 0-2 year olds YES NO			
If no, state reason why provider does not meet Level B Standards.			

10/1/12 - 1 Page 15 of 15



ABC CHILD CARE
3-5 YEAR OLD STANDARDS
CENTER - BASED
PART III
PROGRAM OBSERVATION

10/1/12 - 1 Page 1 of 14

ANALYSIS OF PROVIDER CAPABILITY TO MEET ABC LEVEL B CHILD CARE RATIOS/GROUP SIZE 3-5 YEAR OLDS

Center-based

STANDARD VI. STAFF-CHILD RATIO: The program is effectively administered with attention to the needs and desires of children, parents and staff.

A. Staffing patterns shall provide for adult supervision of children at all times and the availability of an additional adult to assume responsibility if one adult must respond to an emergency. Staff are with children, not distracted by other duties (such as cleaning or cooking). Every attempt shall be made to have continuity of adults who work with children. Staff-child ratios shall be maintained through provision of substitutes when regular staff members are absent.

ABC LEVEL B STAFF-CHILD RATIOS/GROUP SIZE EACH ROOM meeting these ratios and group sizes will get 2 ADDITIONAL POINTS ADDED TO THE SCORE.

BASIC MINIMAL RATIOS REQUIRED BY STATE CHILD CARE LICENSING

Ages	Maximum Ratios Gro	ıp Size	Ages	Ratios
3-4	1:11	22	3-4	1:12
4-5	1:13	26	4-5	1:17
5	1:15	30	5-6	1:20

Calculate staff-child ratio by group. To determine staff needed for mixed age groups, determine number of children by age; divide children in same age category by maximum ratios for that age; add results for each age to obtain number of staff needed. Fractions shall be rounded up at .1 and above not to exceed basic minimal ratios required by state licensing.

List all rooms Group ID	Staff assigned by name	# children	Age(s) of children	Calculated staff-child ratio (# of children divided by # of assigned staff)	Mi State Child Ca Licensing			MEETS ABC Staff-Child Ratios/ Group Size		ABC Staff-Child Ratios/		ABC Staff-Child Ratios/		ABC Staff-Child Ratios/		Total Score Add State Licensing + ABC for total score per room
					Yes (0)	No (-2)	Yes (+2)	No (0)								
In the state of th					If NO, -2 pts. per room. If yes 0 points per room.		If YES, +2 pts. per room. If no, 0 points per rom.		Actual Score Total							
									Possible Score: Total # rooms x 2	=						

Comments			

10/1/12 - 1 Page 2 of 14

ABC CHILD CARE 3-5 YEAR OLD STANDARDS

Center-based Part III

STANDARD VII. STAFF-CHILD INTERACTIONS: Interactions between children and staff provide opportunities for children to develop an understanding of self and others and are characterized by warmth, personal respect, individuality, positive support, and responsiveness.

		Room ID) :			Room ID) :			Room ID);			Room ID:				
A.	Staff shall frequently interact, be available and be responsive to	Caregive	Caregiver ID:		Caregiver ID:		Caregiver ID:		Caregiver ID:		Caregiver ID:		r ID:	Caregiver ID:		Caregiver ID:		
	children through (1) active listening (2) giving feedback	Time of observati			Time of observation:		Time of observation:		Time of observation:		Time of observation:		on:	Time of observation:		Time of observati	ion:	
		Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	
1.	Speaks unsolicited to a child.																	
2.	Responds verbally to child's comments/questions.																	
3.	Acknowledges a child's comment/request.																	
4.	Shows patience and lack of annoyance with child's questions.																	
5.	Converses mostly with children/limited conversation with adults.																	
6.	Maintains eye contact while talking with children.																	
7.	Gives appropriate feedback. Example: repeat what child says, ask for additional information, give relevant comments to children's questions/comments.																	

10/1/12 - 1 Page 3 of 14

		Room II) :			Room II	D:			Room ID) ;			Room II):		
A.	Staff shall frequently interact, be available and be responsive to	Caregive	er ID:	Caregive	r ID:	Caregive	er ID:	Caregive	r ID:	Caregive	r ID:	Caregive	er ID:	Caregive	er ID:	Caregive	r ID:
	children through (1) active listening (2) giving feedback	Time of observat	ion:	Time of observation	on:	Time of observat		Time of observati	on:	Time of observati	ion:	Time of observat		Time of observat	ion:	Time of observat	
		Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
8.	Attends while child is speaking to adult, i.e. does not walk away or try to do something else (like wiping tables).																
9.	Actively listens to child's verbalizations (does not interrupt or cut off child's verbalizations).																
	RING points per caregiver																
Total point	points per room (total caregiver s)	a.				b.				c.				d.			
	program points for VII A. $(c + c + d)$																Sub- total
	possible points for VII A: l number of caregiver x 9)																

COMMENTS:

10/1/12 - 1 Page 4 of 14

		Room	ID:			Room	ı ID:			Room	ID:			Room	ID:		
В.	Staff shall initiate conversations with individual children in a positive and inquisitive manner to stimulate language and thinking skills. Staff use:	Caregi	ver ID:	Careg	iver	Careg	giver	Caregi ID:	iver	Careg	iver	Careg ID:	iver	Caregi	ver ID:	Caregiv	/er ID:
	(1) questions (2) information sharing (3) positive feedback	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Asks children individually to talk about activities they are doing (share experiences). Examples: "Was it hard to do?" or "What are you cooking?"																
2.	Asks children individually to share their ideas/feelings about activities/happenings. Examples: (ideas) "What will you make/build?" (feelings) "How do you feel about that?"																
3.	Asks children individually open-ended questions that begin with "why? what? where? and how?" and encourage a child to think. Example: "What do you think about what Tonya did to her brother?"																
4.	Asks children individually open-ended questions that require more than just "yes" or "no". Example: "What do you think would happen if?"																
5.	Limits use of questions that have predetermined answers such as "what color is this?". Substitutes instead one that requires critical thinking. Example: "Can you find other things in the room that are red?"																
6.	Engages in information sharing conversations. Example: "This is a lop-ear rabbit. He likes to eat carrots. Watch while I feed him the carrot."																
7.	Responds in calm manner (no screaming or yelling).																
8.	Listens to a child's explanation/comments even though the child's thinking is faulty. Listens respectfully to child.																
Scorin	g:																

10/1/12 - 1 Page 5 of 14

		Room	ID:	-	-	Room	ı ID:	-		Room	ID:	-		Room	ID:	-	
В.	Staff shall initiate conversations with individual children in a positive and inquisitive manner to stimulate language and thinking skills. Staff use: (1) questions (2) information sharing (3) positive		ver ID:	Careg	iver	Careg	iver	Caregi ID:	iver	Careg ID:	iver	Careg	giver	Caregi	ver ID:	Caregi	ver ID:
	(1) questions (2) information sharing (3) positive feedback		N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
Total	points per caregiver																
Total	points per room (total caregiver points)	a.				b.				c.				d.			
	program points for VII B. + c + d)																Sub- total
	possible points for VII B. Il number of caregivers x 8)																

COMMENTS:			
_			

10/1/12 - 1 Page 6 of 14

C.	Staff shall foster independence, encourage	Room II	D:			Room	ID:			Room	ı ID:			Room	ID:		
	decision-making and use of positive techniques of guidance. Staff: (1) provide opportunities for children to be	Caregiv	er ID:	Caregi ID:	iver	Careg	iver	Caregi ID:	iver	Careg	giver	Careg	iver	Caregi	ver ID:	Caregi	/er ID:
	responsible (2) provide choices (3) avoid comparison or criticism	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Provides opportunities for children to be responsible. Examples: picking up toys, wiping spills, personal grooming (toileting, washing hands), obtaining and caring for materials, and other self-help skills.																
2.	Provides children varieties of activities from which to choose: Lets children choose the interest/activity area in which they want to work and also choose the activity in the interest area. This means that staff will not tell children where to go, what to do, or how long to work in an area.																
3.	Staff encourages children to treat each other with kindness and respect; no evidence of ridicule or making fun of others.																
4.	Children's mistakes are handled as routine matters. Example: "You spilled the milk, I'll help you clean it up.																
5.	Room and materials are ready when children arrive.																
6.	Children are told and prepared for what happens next. Example: "After lunch we will take a nap."																
7.	When children do something wrong, the adult shows/helps do it right.																
8.	Staff talks about the behavior she wants to correct instead of judging the child. Examples: "It's O.K.,																

10/1/12 - 1 Page 7 of 14

C.	Staff shall foster independence, encourage	Room II	D:			Room	ID:			Room	ID:			Room I	D:		
	decision-making and use of positive techniques of guidance. Staff:	Caregiv	er ID:	Caregi ID:	iver	Careg	iver	Caregi ID:	iver	Careg	iver	Careg	iver	Caregiv	er ID:	Caregiv	er ID:
	(1) provide opportunities for children to be responsible(2) provide choices (3) avoid comparison or criticism	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
	we all spill. Use the rag to wipe up the spill." Do not judge: "O.K., Clumsy Sam, wipe up the spill."																
9.	Children are told what to do not just what not to do. Instead of "Don't run" say "John, walk in the class, run outside."																
10.	Staff has a few, fair, simple appropriate classroom rules (no more than 5) and states them clearly to children. Examples are: 1) Walk in the room/run outside. 2) Use your hands to help your friends. 3) Use indoor voices in the classroom.																
11.	Staff practices/models classroom rules (actions speak louder than words). Examples: When staff asks children to use indoor voices, she models using indoor voice (quiet, low pitched).																
12.	Staff encourages children and tells them when they have behaved appropriately. Examples: "You put the puzzle back on the shelf, thank you." (<u>Don't say</u> : "That was nice").																
13.	Children's mistakes are handled individually and privately as possible. Staff does not compare children. ("Why can't you be good like John?") or criticizes children ("You are so messy, why can't you be neat?")																
14.	Uses positive guidance techniques. Clarification: To receive credit, one positive strategy must be observed. If one instance of negative discipline (as defined in Standard II.A.) is observed, credit is not received. Examples:																

10/1/12 - 1 Page 8 of 14

C. Staff shall foster independence, encourage	Room I	D:			Room	ID:			Room	ı ID:			Room	D:		
decision-making and use of positive techniques of guidance. Staff:	Caregiv	er ID:	Caregi ID:	iver	Careg	iver	Caregi ID:	iver	Careg	giver	Careg	iver	Caregiv	ver ID:	Caregiv	ver ID:
(1) provide opportunities for children to be responsible(2) provide choices (3) avoid comparison or criticism	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
- Redirection - Anticipation/elimination of potential problems - Children are given choices Example of negative discipline: - Use of threats																
Scoring: Total points per caregiver																
Total points per room (total caregiver points)	a.				b.				c.				d.			
Total program points for VII. C. $(a + b + c + d)$																Sub- total
Total possible points for VII C: (Total number of caregivers x 14)																

COMMENTS:			
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10/1/12 - 1 Page 9 of 14

STANDARD VIII. ACTIVITIES: The activities encourage children to be actively involved in the learning process, to experience a variety of developmentally appropriate activities and materials, and to pursue their interests in the context of life in the community and world.

A.	Staff shall plan and carry out a variety of developmentally appropriate activities which address the individual differences of children and provide materials selected to emphasize	Roo	om ID:	Room	ID:	Room I	ID:	Room II	D:
	concrete learning within a planned daily schedule which provides a balance of activities.	Y	N	Y	N	Y	N	Y	N
1.	Each child is provided opportunities to learn through actively using materials (touching, holding, handling, and trying different ways to use the materials).								
2.	Caregiver provides concrete activities that are meaningful to children. Some examples are: sand, water, blocks and puzzles. Clarification: All materials observed during the observation must be concrete and meaningful to the children for the room to receive credit. a) No preprinted worksheets or coloring sheets are used as a caregiver directed activity. b) Materials designed for older or younger age groups are not meaningful. Credit is not received if materials are not concrete and meaningful.								
3.	Each child is provided daily opportunities to select materials/companions and manage play independently.								
4.	Children are not required to sit at tables for long periods of time. (Not over 15 to 20 minutes.)								
5.	Each child has an opportunity to work in many positions. Examples are: on a carpet/rug, on the floor, on a platform, standing at a table/easel, sitting at a table or on a cushion, sitting on the lap of a teacher who's reading to them.								
6.	Each child is allowed choices of activities in which to participate and areas of interest in which they work.								
7.	Each child has on-going opportunities to talk with adults and other children to share ideas, share classroom and personal experiences and to gain experience through use of language.								
8.	Materials are used which allow children to use them in many different ways. Examples: playdough can be used to make snakes, used with cookie cutters, used to make "pretend" cake, used to make bracelets or many other uses.								
9.	Group times are relatively short, include experiences children enjoy doing together, and focus on topics of current interest. Clarification: Teacher planned physical activities lasting 5-10 minutes occur at least 2 times per day. These can be planned during total group activities and may include music/movement activities. If group time not observed, caregiver interview and lesson plan can be reviewed for planned activities.								
10.	Caregivers and children routinely wash hands with soap and water at appropriate times. Clarification: Caregivers and children should wash hands with soap and water before preparing/eating a meal or snack, toileting and after contacting bodily fluids or contaminated items.								

10/1/12 - 1 Page 10 of 14

A.	Staff shall plan and carry out a variety of developmentally appropriate activities which address the individual differences of children and provide materials selected to emphasize	Roo	m ID:	Room I	D:	Room I	D:	Room II	D:
	concrete learning within a planned daily schedule which provides a balance of activities.	Y	N	Y	N	Y	N	Y	N
11.	Morning and afternoon schedules allow a large block of time, 45 minutes to 2 hours, for individual and small group activities conducted in interest/activity areas. Children are read to daily in small groups.								
12.	Children have opportunities to learn about nutrition one time a week or more. Clarification: Nutrition education may be provided during large groups, small groups, in centers or during lunch or snack. If not observed, caregiver interview can be used or written plan/schedule can be reviewed.								
caregivactive	All children must have daily active outdoor play. Clarification: For children 3-5 years, must occur 2 to 3 separate occasions totaling 90-120 minutes. "Weather permitting" means no falling precipitation, thunder, lightning, or inclement weather. Inclement weather is defined by the American Academy of Pediatrics, American Public Health Association, and National Resource Center for Health and Safety in Child Care and Early Education (2010) as a wind chill factor at or below 15 degrees Fahrenheit or at or above a heat index of 90 degrees Fahrenheit. Due to the health effects of ground-level ozone, the SC Department of Health and Environmental Control provides the service of forecasting ozone concentrations to warn the public of unhealthy air and to encourage people to avoid exposure to unhealthy air. If outdoor play is decreased due to weather, indoor active play is increased so the total amount of active play remains the same. The daily schedule is reviewed and children are observed outdoors. The schedule states what plan to do if there is inclement weather. Caregivers have a plan for 90-120 minutes of indoor play on their posted schedules in case of rain or inclement weather using indoor materials that promote physical activity and an identified space to use. This would be observed on a day that meets the weather criteria above.								
14.	Caregivers provide opportunities for children to enhance motor development both indoors and outdoors. Clarification: Children are encouraged to be physically active indoors and outdoors at appropriate times. Monitor may interview caregiver if not observed.								
15.	Teacher planned physical activities lasting 5-10 minutes occur at least 2 times per day. Clarification: These can be planned during total group activities and may include music/movement activities. If group time not observed, caregiver interview and lesson plan can be reviewed for planned activities.								
SCOR	ING: Total points per room	a.		b.		c.		d.	
	rogram points for VIII A. $(a + b + c + d)$					Į.			Sub- total
	ossible points for VIII A: (Total number of rooms x 15)								

10/1/12 - 1 Page 11 of 14

STANDARD IX. PHYSICAL ENVIRONMENT: The indoor and outdoor physical environment fosters optimal growth and development through opportunities for exploration and learning.

Check interest/activity areas observed below and indicate number of different materials in each area.

Clarification: Only age-appropriate, fully intact, and properly functioning materials that are in children's reach and accessible can be counted. Enough materials should be available for several children to be engaged in a similar activity, thus reducing competition.

A. Indoor Physical Environment Calculation

Interest/Activity Areas	# of different accessible materials
House/Creative Dramatics	
Blocks	
Art	
Puzzles/Manipulatives	
Books/Library	
Music	
Science	
Indoor Physical Activity	
Others (please list)	

A.	Age-appropriate materials & equipment (indoor) of sufficient quantity, variety and	Room	ID:	Room	ID:	Room	ID:	Room	ID:
	durability shall be readily accessible to children and arranged to promote independent use by children.	Y	N	Y	N	Y	N	Y	N
1.	Room has 5 interest/activity areas with a minimum of 5 different accessible materials per interest/activity area. Credit is not received if there is evidence of excessive competition or children not being engaged.								
2.	Age appropriate equipment is used. (Manufacturer's label may note age appropriateness).								
3.	Materials are intact and in good repair with no missing parts, sharp edges, or rust.								
4.	Materials are arranged so children can get materials by themselves without adult assistance.								
5. 6.	Children work independently with equipment/materials by themselves or in small groups. Children are provided play materials that promote physical activity indoors (e.g. scarves,								_

10/1/12 - 1 Page 12 of 14

bean bags, ribbons, music/movement CD's, musical instruments) at appropriate times. Clarification: Play materials must be sufficient for all children to use. Materials for vigorous play may be available in centers or a storage area. If not observed, interview caregiver and see materials to be used in case of inclement weather.				
SCORING: Total points per room				
Total program points for IX A. (Total number of rooms x 6)				Sub-total

STANDARD IX. PHYSICAL ENVIRONMENT - Outdoor

B. Ma	aterials and equipment - Outdoor	Room	ID	Room	ID	Room	ID	Room	ID
		Y	N	Y	N	Y	N	Y	N
1.	Age appropriate outdoor equipment is used. (Manufacturer's label may note age appropriateness).								
2.	Materials are in good repair with no sharp edges, rust or other hazards.								
3.	The outdoor play area is clean, safe, and free of hazards such as garbage, glass, cans, overgrowth, broken structures, loose nails, tree limbs and junked equipment/cars.								
4.	There is a variety of age-appropriate outdoor portable play materials/equipment on the playground sufficient for all children to be actively involved in vigorous play activities. Children do not just wander around with nothing to do. This can be accomplished by supplementing outdoor portable play materials/equipment with inground playground equipment (or) leading and involving children in games (or) a combination of portable play materials and any of the others. Clarification: If children are not observed outdoors, interview staff to determine what materials are used outside and how vigorous activity is encouraged by staff.								
SCOR Total r	ZING: points per room								
	program points for IX B. (Total number of rooms x 4)								Sub-total

COMMENTS:			
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10/1/12 - 1 Page 13 of 14

ABC LEVEL B CHILD CARE SCORING SUMMARY 3-5 YEAR OLD STANDARDS

FEIN#

Facility Name:

IX.A.

IX.B.

TOTAL

Part I: 3 - 5 year old Standards		MEETS	
		YES	NO
Standard I. Regulatory Requirements			
Standard II. Administration			
Standard III. Staff Qualifications and Development			
Standard IV. Health, Safety, and Well-Being			
Standard V. Staff-Parent Interaction			
Part II: 80% overall compliance required (3-5 year olds)	ACTUAL POINTS		SSIBLE DINTS
Standard VI. Staff-Child Ratios			
VI.A.			
Standard VII. Staff-Child Interactions			
VII.A.			
VII.B.			
VII.C.			
Standard VIII. Activities			
VIII.A.			
Standard IX. Physical Environment			

PERCENT COMPLIANCE: Actual points divided by possible points =

Provider meets Level B standards for 3-5 year olds

YES

NO

If no, state reason why provider does not meet Level B standards

10/1/12 - 1 Page 14 of 14



ABC CHILD CARE

6-12 YEAR OLD STANDARDS

CENTER - BASED

PART IV

PROGRAM OBSERVATION

10/1/12 - 1 Page 1 of 15

ANALYSIS OF PROVIDER CAPABILITY TO MEET ABC LEVEL B RATIOS/GROUP SIZE 6-12 YEAR OLDS

Center-based

STANDARD VI. STAFF-CHILD RATIO: The program is effectively administered with attention to the needs and desires of children, parents and staff.

A.	Staffing patterns shall provide for adult supervision of children at all times and the availability of an additional adult to assume responsibility if one adult must respond to an
	emergency. Staff are with children, not distracted by other duties (such as cleaning or cooking). Every attempt shall be made to have continuity of adults who work with
	children. Staff-child ratios shall be maintained through provision of substitutes when regular staff members are absent.

ABC LEVEL B STAFF-CHILD RATIOS/GROUP SIZE EACH ROOM meeting these ratios and group sizes will get 2 ADDITIONAL POINTS ADDED TO THE SCORE.

BASIC MINIMAL RATIOS REQUIRED BY STATE CHILD CARE LICENSING

Ages	Maximum Ratios	Group Size	Ages	Ratios
6-9	1:18	36	6-12	1:23
9-12	1:20	40		

Calculate staff-child ratio by group. To determine staff needed for mixed age groups, determine number of children by age; divide children in same age category by maximum ratios for that age; add results for each age to obtain number of staff needed. Fractions shall be rounded up at .1 and above not to exceed basic minimal ratios required by state licensing.

List all rooms Group ID	Staff assigned by name	# children	Age(s) of children	Calculated staff-child ratio (# of children divided by # of assigned staff)			MEE ABC Staff-Ch Group Size		# Staff needed to meet ABC ratios	Total Score Add State Licensing + ABC for total score per room						
					Yes (0)	No (-2)	Yes (+2)	Yes (+2) No (0)								
					If NO, -2 pts. per room. If yes, 0 points per room.		If YES, +2 pt If no, 0 points	s. per room. per room.	Actual Score Total							
															Possible Score: Total # rooms x 2	=

10/1/12 - 1 Page 2 of 15

ABC CHILD CARE 6-12 YEAR OLD STANDARDS Center-Based

Center-Based Part II

STANDARD VII. STAFF-CHILD INTERACTIONS: Interactions between children and staff provide opportunities for children to develop an understanding of self and others and are characterized by warmth, personal respect, individuality, positive support, and responsiveness.

		Room II) :			Room II):			Room II) :			Room II) :		
A.	Staff shall frequently interact, be available and be	Caregive	er ID:	Caregive	er ID:	Caregive	er ID:	Caregive	r ID:	Caregive	er ID:	Caregive	er ID:	Caregive	er ID:	Caregive	r ID:
	responsive to children through (1) active listening (2) giving	Time of observat		Time of observation:		Time of observation:		Time of observation:		Time of observation:		Time of observation:		Time of observation:		Time of observati	ion:
	feedback		N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Speaks unsolicited to a child.																
2.	Responds verbally to child's comments/questions.																
3.	Acknowledges a child's comment/request.																
4.	Shows patience rather than annoyance with child's questions.																
5.	Talks mostly with children/limited conversation with other staff.																
6.	Maintains eye contact while talking with children.																
7.	Gives appropriate feedback. Example: repeats what child says, asks for additional information, gives relevant comments to children's questions/comments.																

10/1/12 - 1 Page 3 of 15

		Room II	D:			Room II	D:			Room II	D:			Room ID:			
A.	Staff shall frequently interact, be available and be	Caregive	er ID:	Caregiv	Caregiver ID:		Caregiver ID:		er ID:	Caregive	er ID:	Caregive	er ID:	Caregive	er ID:	Caregive	er ID:
	responsive to children through (1) active listening (2) giving	Time of observat		Time of observation:		Time of observation:		Time of observation:		Time of observation:		Time of observat		Time of observat		Time of observat	
feedback		Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
8.	Attends while child is speaking to adult, i.e. does not walk away or try to do something else (like wiping tables).																
9.	Actively listens when a child talks (does not interrupt or cut off child's conversations).																
	RING: points per caregiver																
Total points	points per room (total caregiver	a.				b.				c.							
	program points for VII A. $c + c + d$)																Sub- total
	Total possible points for VII A: Total number of caregivers x 9)																

COMMENTS:		
	-	-

10/1/12 - 1 Page 4 of 15

B.	Staff shall begin conversations with individual	Room	ID:			Roon	ı ID:			Room	ı ID:			Room ID:			
	children in a positive and curious manner to stimulate critical thinking and meaningful conversations. Staff shall encourage	Caregi	ver ID:	Careg ID:	Caregiver ID:		Caregiver ID:		Caregiver ID:		giver	Caregiver ID:		er Caregiver ID:		Caregi	ver ID:
	conversations. Staff shaff encourage conversations between children, actively promoting the development of friendships. Staff use: (1) questions (2) information sharing (3) positive feedback	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Asks children individually to talk about activities they are doing (share experiences) to adults and other children. Examples: "Was it hard to do?" or "What are you cooking?" "Tell Tom how you made that."																
2.	Asks children individually to share their ideas/feelings about activities/happenings to adults and children. Examples: (ideas) "What will you make/build?" (feelings) "How do you feel about that?"																
3.	Asks children individually open-ended questions that require more than just "yes" or "no". Example: "What do you think would happen if?"																
4.	Responds in a calm manner (no screaming or yelling).																
5.	Listens to a child's explanation/comments and helps extend his thinking by additional questions. Listens respectfully to each child.																
	RING: points per caregiver																
Total	points per room (total caregiver points)	a.				b.				c.				d.			Г
	program points for VII B. $c + c + d$)																Sub- total
	Total possible points for VII B: (Total number of caregivers x 5)																

10/1/12 - 1 Page 5 of 15

C.	Staff shall help children be independent,	Room I	D:			Roon	ı ID:			Roon	n ID:			Room ID:			
	making decisions and shall use positive techniques of guidance which encourage children to take responsibility for their own	Caregiv	Caregiver ID:		Caregiver ID:		Caregiver ID:		Caregiver ID:		giver	Caregiver ID:		Caregiver ID:		Caregiv	/er ID:
	actions/behavior and to understand the need to develop pro-social behaviors. Staff shall provide children choice of activities, and provide an environment free of comparison or criticism.	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
1.	Provides opportunities for children to practice and display their abilities with independent living skills such as housekeeping chores, caring for animals/materials, personal grooming.																
2.	Children are encouraged/ supported to make decisions for themselves. Staff are available in time of need.																
3.	Opportunities are provided for children to become involved in meaningful activities of their own choosing by offering a variety of age-appropriate activities.																
4.	Staff encourages children to treat each other with kindness and respect and to learn appropriate ways to handle rejection, teasing and other actions which may cause hurt feelings.																
5.	When children accidentally damage equipment, have spills, or break things, adult handles privately as routine matters Example: "Mix some water in the glue. It's easy to forget to put the lid on.																
6.	Children have a dependable yet flexible routine.																
7.	When mistakes are made, children are assisted in looking for alternative ways to solve their mistakes or problems.																
8.	Staff has a few, fair, positive, simple, appropriate classroom rules which are posted. Children are																

10/1/12 - 1 Page 6 of 15

C.	Staff shall help children be independent,	Room I	D:			Room	ID:			Room	ı ID:			Room	ID:		
	making decisions and shall use positive techniques of guidance which encourage	Caregiv	er ID:	Careg	iver	Careg	iver	Careg	iver	Careg	giver	Careg	giver	Caregi	ver ID:	Caregi	ver ID:
	children to take responsibility for their own actions/behavior and to understand the need to develop pro-social behaviors. Staff shall provide children choice of activities, and provide an environment free of comparison or criticism.	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
	encouraged and involved in discussing the rules. Staff practices/models classroom rules (actions speak louder than words).																
9.	Uses positive guidance techniques. Clarification: To receive credit, one positive strategy must be observed. If one instance of negative discipline (as defined in Standard II.A.) is observed, credit is not received.																
10.	Staff responds equitably to all children without comparison ("Why can't you be good like John?") or criticism ("You are so messy. Why can't you be neat?") or harsh treatment.																
11.	Staff helps children develop negotiating skills in solving disputes using words to work out problems.																
12.	Staff uses opportunities during activities to actively teach children how to cooperate with each other.																
13.	Staff steps in quickly when children's responses become physical and discusses inappropriateness of such responses.																
14.	Staff helps children deal with feelings (anger, sadness, frustration) by comforting, identifying feelings and helping children use words to solve their problems.																

10/1/12 - 1 Page 7 of 15

C.	Staff shall help children be independent,	Room l	D:			Room ID:			Room ID:				Room	ID:			
	making decisions and shall use positive techniques of guidance which encourage children to take responsibility for their own	Caregiv	Caregiver ID:		Caregiver ID:		Caregiver ID:		Caregiver ID:		Caregiver ID:		giver	Caregiver ID:		Caregiver ID:	
	actions/behavior and to understand the need to develop pro-social behaviors. Staff shall provide children choice of activities, and provide an environment free of comparison or criticism.	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N	Y	N
15.	Staff knows where children are and what they are doing at all times, but children may be allowed to pursue activities outside of staff's direct sight.																
	RING: points per caregiver																
Total	points per room (total caregiver points)	a.				b.				c.				d.			
	program points for VII C. $c + c + d$)																Sub- total
(a + t																	

COMMENTS:			
			_

10/1/12 - 1 Page 8 of 15

STANDARD VIII. ACTIVITIES: Staff encourage children to be actively involved in activities provided, to experience a variety of developmentally appropriate activities and materials, and to use their leisure time to have fun and experience success.

A.	Staff plan and provide a wide variety of self-directed activities that allow	Room	ID:	Room	ID:	Room	ID:	Room	ID:
	children to develop a sense of competence in controlling their environment and leisure time.	Area	# of materials						
1.	Children are encouraged to be physically active indoors and outdoors at appropriate times through a variety of large muscle activities and vigorous exercise, i.e. running, jumping, throwing, and catching that allow children to move around and "let off steam". Examples: tumbling, dodge ball. If not observed, caregiver interview and lesson plan can be reviewed for planned activities.								
2.	Children are provided time to be alone, to rest, reflect and read.								
3.	Children are provided a place, time and adult guidance/support/assistance to complete homework.								
4.	Each child is provided opportunities to experience success through actively using materials (touching, holding, handling, and experimenting with different ways to use the materials).								
5.	Each child is allowed choices of activities in which to participate and areas of interest in which to work. Each child is provided daily opportunities to select materials/companions and manage play independently, i.e. may participate in group games or may choose to work or play alone.								
6.	Children are not required to sit at tables but have an opportunity to work in many positions. Examples are: on a carpet/rug, on the floor, or sitting at a table or on a cushion, sofa, bean bag, stage, pillows, etc.								
7.	Each child has on-going opportunities to talk with adults and other children to share ideas, share classroom and personal experiences and to develop friendships, etc.								
8.	Caregivers and children routinely wash hands with soap and water at appropriate times. Clarification: Caregivers and children should wash hands with soap and water before preparing/eating a meal or snack, after toileting and after contacting bodily fluids or contaminated items as part of the daily routine.								

10/1/12 - 1 Page 9 of 15

9.					
play is	Due to the health effects of ground-level ozone, the SC Department of Health and Environmental Control provides the service of forecasting ozone concentrations to warn the public of unhealthy air and to encourage people to avoid exposure to unhealthy air. If outdoor play is decreased due to weather, indoor active				
10.	There is a balance of total group, small group and individual time.				
11. in	Teacher planned physical activities lasting 5-10 minutes occur at least twice a day full day schedule, (or once in a part day or half-day program). If not observed, caregiver interview and lesson plan can be reviewed for planned activities.				
12.	Staff conducts smooth and unregimented transitions between activities. School-age children help plan and participate in the change of activity, have time to adjust to change from school to center.				
13.	Staff provides many ways to express creativity: cooking, paint, clay, crafts, etc. Encourage dancing, creative dramatics, singing, playing instruments.				
14.	Activities emphasize cooperation; games and activities do not require excessive competition.				
15.	Program includes opportunities to learn about nutrition 1 time per week or more. Clarification: Nutrition education may be provided during large groups, small groups, in centers or during lunch or snack. If not observed, caregiver interview be used or written plan/schedule can be reviewed.				

10/1/12 - 1 Page 10 of 15

SCORING: Total points per room			
			Sub-total
Total program points for IX A. $(a + b + c + d)$			<u> </u>
Total possible points for IX A: (Total number of rooms x 15)			

COMMENTS:			
_			_

10/1/12 - 1 Page 11 of 15

STANDARD IX. PHYSICAL ENVIRONMENT: The indoor and outdoor physical environment fosters optimal growth, development and personal interest through opportunities for exploration, pleasure, enrichment, and development of friendships.

A. Age-appropriate materials & equipment (indoor) of sufficient quantity, variety and durability shall be readily accessible to children and arranged to promote independent use by children.

Check interest/activity areas below and count materials.

Clarification: Only age-appropriate, fully intact and properly functioning materials that are in children's reach and accessible can be counted. Enough materials should be available for several children to be engaged in a similar activity, thus reducing competition.

Interest/Activity Areas/Categories	# of different accessible items
Active indoor area (e.g. tumbling, balls, balance beam)	
Building & miniature materials for imaginative play (e.g. legos, unit blocks, tinker toys)	
Dramatic Play and Home Living, role playing with a variety of career awareness materials (e.g. teacher,	
journalist, restaurant worker, police officer, doctor.)	
Arts, Crafts, and Creative construction (e.g. paints, chalk, markers, pom poms, beadwork, pipe stems, cloth,	
cardboard tubes, woodworking, modeling clay)	
Quiet Center (e.g. loft, quiet pillow corner, large boxes)	
Literature (e.g. books, flannel board stories, writing centers, listening activities, audio-visual resources)	
Puzzles (e.g. variety of puzzles, problem solving situations)	
Table games (e.g. chess, checkers, monopoly and cards)	
Science, math, social studies and exploration (e.g. experiments, math & science games, plants, animals,	
computers, gardening)	
Homework area with current resource materials available. (e.g. paper, pens, dictionary, thesaurus, clipboards,	
textbooks)	
Homelike area (e.g. adult-sized upholstered furniture, tables, lamps)	
Music and Movement (e.g. CD player, CD's, scarves, ribbons, streamers, rhythm instruments)	
Others (please list)	

10/1/12 - 1 Page 12 of 15

		Room	ID:	Room	ID:	Room	ID:	Room	ID:
		Y	N	Y	N	Y	N	Y	N
1.	School age children have at least 5 interest/activity areas with a minimum of 5								
of	different materials per interest/activity area set up to encourage children's freedom choice and opportunities to use materials in activities with adults' assuming roles of resource persons.								
	If there is evidence of excessive competition or children not being engaged credit will not be received.								
2.	Age appropriate equipment is used.								
3.	Materials are intact and in good repair with no missing parts, sharp edges, or rust.								
4.	Materials are arranged so children can get materials by themselves without adult assistance.								
5.	Children work independently with equipment/materials by themselves or in small groups.								
6.	Children's storage with private compartments or space is provided.								
7.	Children are provided play materials that promote physical activity indoors (e.g. balls, music/movement CD's) at appropriate times. Clarification: Play materials must be sufficient for all children to use. Materials for vigorous play may be available in centers or a storage area. If not observed, interview caregiver and see materials to be used in case of inclement weather.								
SCOI	RING: Total points per room								
Total	program points for IX A. $(a + b + c + d)$								Sub-total

10/1/12 - 1 Page 13 of 15

STANDARD IX. PHYSICAL ENVIRONMENT - The indoor and outdoor physical environment fosters optimal growth, development and personal interest through opportunities for exploration, pleasure, enrichment, and development of friendships.

B. M	aterials and equipment - Outdoor	Room	ID	Room	ID	Room	ID	Room	<mark>ID</mark>
	1 1	Y	N	Y	N	Y	N	Y	N
1.	Age appropriate outdoor equipment is used.								
2.	Materials are in good repair with no sharp edges, rust or other hazards.								
3.	The outdoor play area is clean, safe, and free of hazards such as garbage, glass, cans, overgrowth, broken structures, loose nails, tree limbs and junked equipment/cars.								
4.	There is a variety of age-appropriate outdoor portable play materials/equipment on the playground sufficient for all children to be actively involved in vigorous play activities. Children do not just wander around with nothing to do. This can be accomplished by supplementing outdoor portable play materials/equipment with playground equipment (or) planning/leading and involving children in games (or) a combination of portable play materials and any of the others.								
	RING: program points for IX B.	a.		b.		c.		d.	
	possible points for IX B. (Total number of rooms/areas x 4)								Sub-total

10/1/12 - 1 Page 14 of 15

ABC LEVEL B CHILD CARE SCORING SUMMARY 6-12 YEAR OLD STANDARDS

Facility Name	_FEIN#			
Part I: 6 - 12 year old Standards		_	MEETS	
			YES	NO
Standard I. Regulatory Requirements				
Standard II. Administration				
Standard III. Staff Qualifications and Development				
Standard IV. Health, Safety, and Well-Being				
Standard V. Staff-Parent Interaction				
		<u> </u>		
Part II: 80% overall compliance required (6-12 year olds)		ACTUAL POINTS		SIBLE INTS
Standard VI. Staff-Child Ratios				
VI.A.				
Standard VII. Staff-Child Interactions				
VII.A.				
VII.B.				
VII.C.				
Standard VIII. Activities				
VIII.A.				
Standard IX. Physical Environment				
IX.A.				
IX.B.				
TOTAL				
PERCENT COMPLIANCE: Actual points divided by possible	points =			

If no, state reason why provider does not meet Level B standards. _____

YES

NO

10/1/12 - 1 Page 15 of 15

Provider meets Level B standards for 6-12 year olds



Level A

Level **B**

abcqualitycare.org

	TABLE OF CONTENTS	PAGE NUMBER
I.	Provider Selection	6
II.	Maximum Care Allowed	7
III.	Client Fee	8
IV.	Client Transfer	8
V.	Discontinuing Services to Clients	9
VI.	Records	10
	- Attendance Records	10
	- Grant Receipts	10
	- Service Voucher Logs	10
	- Staff Records	10
	- Client/Child Records	11
VII.	Amendment of Provider's Enrollment	12
	- Provider Rate Increases/Decreases	12
	- Adding/Deleting an Age Group	13
	- Change in Facility's Regulatory Status	13
	- Change in Name of Child Care Facility	13
	- Program Moves Location	14
	 Change in Director of Child Care Facility 	14
	- Change in Provider Mailing/Payment Address	14
	- Change in Telephone Number	14
VIII.	History of Compliance	15
IX.	Voluntary Termination by Provider	16
X.	Adverse Actions Against Provider by DSS	16
	- Termination of Provider Enrollment by ABC	16
	 Exceptions to Termination of Provider Enrollment 	22
XI.	Reclassification	23
XII.	Expiration of 3 Year Agreement	24
XIII.	Inactive Status	24
XIV.	Eligibility Criteria for Subsequent	25
	Enrollment Periods	
XV.	Waiting Periods for Enrollment	26
XVI.	Enrollment Exceptions	28
XVII.	Grants	28
XVIII.	Appeals Process	29
XIX.	Glossary of Terms	29

INTRODUCTION

These procedures were developed as a policy guide for the operating practices for the payment, documentation and reporting system for the ABC Child Care Program, hereafter referred to as the ABC Program. Upon notification to providers, the S. C. Department of Social Services, at its sole discretion, may amend these procedures. Once notified in writing, the provider shall be responsible for compliance to the amended procedure for the purpose defined.

THE PROVIDER MUST REVIEW THESE PROCEDURES TO INSURE AN UNDERSTANDING OF POLICY AND WHAT IS REQUIRED. ANY QUESTIONS REGARDING THESE PROCEDURES CAN BE REFERRED TO ABC PROGRAM MONITORING.

GENERAL INFORMATION

- Providers are independent business owners. Any provider who applies and becomes enrolled in the ABC Program at Level A, or B is doing so voluntarily. In applying, providers choose the Level best suited for them. ABC enrollment is not a guarantee for any program and providers should not view participation in the ABC Program as a primary means of support.
- Any provider who voluntarily enrolls at Levels A or B agrees to meet and maintain the required enrollment prerequisites for the level enrolled, which include meeting additional program standards above regulatory requirements, and to meet and maintain documentation relating to attendance and ABC Payment. Provider payment rates for any enrolled ABC clients in the ABC Program are based on the Level of participation and the provider type. Providers who participate at Level A and B are paid the rate they charge to all others, up to the highest ABC maximum rates, because they agree to meet additional standards.
- Providers voluntarily sign a 3 year enrollment agreement which expires 3 years from the date signed by the provider. Agreements are not automatically renewed. The ending date of the enrollment/agreement is not appealable. Providers wishing to continue to serve ABC children must meet the reenrollment criteria.
- Enrollment Agreements are only good for the address listed in the Agreement. Agreements are not transferrable to new owners, or new locations.
- The ABC Program does not refer clients to providers. Clients voluntarily choose the provider that best meets their needs.
- A copy of these Business Procedures, the ABC Child Care Standards, and other important information can be found by visiting abcqualitycare.org.

REVIEW AT A GLANCE WHO TO CALL AND WHEN

If any of the following occurs or is about to occur, the <u>provider must</u> report this information to the ABC Child Care Program by telephone or by writing to the appropriate person/office listed below. The provider must not send any information with their SVL.



THESE MUST BE REPORTED TO ABC PROGRAM MONITORING			
	The facility is being investigated by DSS (Child Protective Services/OHAN) The facility is notified by DSS/Child Care Licensing that their License/Registration is being revoked or the application for renewal is being denied.		
	Change in facility address or payment address [must submit new W-9]		
	Change in phone number		
	Change in FEIN or Social Security Number [must submit new W-9 and IRS letter if FEIN #]		
	Change in Director [must submit proof of educational requirements]		
	Change in Rates [must submit rate change form and current rate schedule]		
	Plans to sell facility/change of ownership/entering management agreement Closing of facility permanently		
	If provider needs to add or delete an age group		
	Change in Regulatory Status [must submit copy of new License or Registration]		
	Change in name of child care facility [must submit new W-9 and IRS letter]		
	NAEYC Accredited facility loses accreditation (Level A only)		
ABC PROGRAM MONITORING			
Your	ABC Monitor: Phone:		

@DSS.SC.GOV

E-Mail:

There are two offices of ABC Program Monitoring.

Each office is responsible for providers in certain counties. Locate the county your facility is in. The address for the ABC Program Monitoring Office is listed below the counties for which they are responsible. Throughout the Business Procedures where it refers the provider to contact ABC Program Monitoring, this is the office you would contact:

Aiken	
Allendale	
Bamberg	
Beaufort	
Berkeley	
Calhoun	
Charleston	
Clarendon	
Colleton	
Darlington	
Dillon	
Dorchester	
Florence	
Dorchester	
Florence	
Georgetown	
Hampton	
Horry	
Jasper	
Lexington	
Marion	
Marlboro	
Newberry	
Orangeburg	
Richland	
Sumter	
Williamsburg	
ABC Program Monitoring	
S. C. Department of Social Services	
3150 Harden Street Ext.	
Columbia, SC 29203	
Phone: (803) 898-2772	
Fax: (803) 898-4510	

Abbeville
Anderson
Cherokee
Chester
Chesterfield
Edgefield
Fairfield
Greenwood
Greenville
Kershaw
Lancaster
Laurens
McCormick
Oconee
Pickens
Saluda
Spartanburg
Union
York

Greenville Technical College ABC Child Care P. O. Box 5616, Station B Greenville, SC 29606-5616

Phone: (864) 250-8468 Fax: (864) 250-8044

REPORT THESE ITEMS TO THE ABC CHILD CARE CONTROL CENTER:

When a child has missed ten consecutive days
Inquiries regarding payment if payment not received after 10-14 working
days from the date of SVL receipt by the ABC Child Care Program
If provider is going to discontinue services to a client
If provider will be temporarily closed for a week or longer
If clients fail to attend the program after authorization is given

ABC CHILD CARE CONTROL CENTER

ABC Control Center Phone: (800) 262-4416 ATTN: Provider Team Fax: (800) 310-5417

S. C. Department of Social Services

P. O. Box 100160

Columbia, South Carolina 29202-3160

I. PROVIDER SELECTION BY CLIENT

The ABC Program advocates parental choice and clients are responsible for selecting the provider of their choice. The following are steps to be taken when a client selects your facility:

By a client already authorized for services:

A new client or a client already receiving services at another provider may want to transfer to your facility. When a client chooses you to care for their child(ren), you should:

- a. Refer to VIII. Client Transfer, for more detailed information
- b. See at least one acceptable i.d. of the client to ensure proper identification
- c. Complete along with the client, the blue client connection card OR the client connection fax form and send to the ABC Control Center in order to connect the client to your program and initiate the payment process for that client (See page 6 for mailing/fax information). The provider may receive the blue Connection Card or Fax Form from the ABC Control Center or from the parent to obtain authorization to begin services to the client. This must be done in time to receive approval before serving the client. DO NOT SERVE THE CLIENT BEFORE RECEIVING WRITTEN APPROVAL FROM THE ABC PROGRAM! IF YOU DO, THE ABC PROGRAM WILL NOT BE RESPONSIBLE FOR PAYMENT.

IMPORTANT NOTES: The provider cannot accept/serve a child for a care type [age group] for which they have not been enrolled. A provider may be enrolled for full-time care type, but not half-time, etc. If providers are unsure as to the care types for which they are enrolled, they should refer to their enrollment information mailed to them or call ABC Program Monitoring. Care types may be added at the provider's request and upon determination by ABC Program Monitoring that the facility meets requirements.

- d. Upon receipt of the connection postcard or fax, the ABC Control Center will verify that the client is eligible to receive services, and that the provider is enrolled to serve the care type requested. The ABC Control Center will then authorize the provider to serve the client (if the client has complied with transfer procedures) and make the necessary "connection" in the system with an established start date.
- e. The ABC Control Center will send the provider an "Authorization/Connection Letter" confirming the connection. The letter will include information such as the authorization date, provider billing rate, client fee, care type authorized and number of weeks of care. THIS IS THE PROVIDER'S AUTHORIZATION LETTER. THE PROVIDER MUST NOT SERVE THE CLIENT BEFORE RECEIVING THE AUTHORIZATION LETTER WITH THE APPROVED DATE.



<u>SPECIAL NOTE:</u> If clients fail to attend the child care program for ten consecutive days after authorization is given, you must notify the ABC Control Center on the 11th day. You must not bill the ABC Program if the child doesn't return on the 11th day.

IMPORTANT NOTE: Providers who are not licensed by DSS cannot serve Foster children and CPS (Child Protective Service) children. If you are a licensed provider whose license has expired, and are trying to serve a Foster or CPS child, you must contact ABC Program Monitoring.

II. MAXIMUM CARE ALLOWED

Clients can receive up to a maximum of 52 weeks of care during any one-year period of eligibility. This may be full-time care, part-time or a combination of the two.

Note: Less than half-time care may be in conjunction with full or half-time care and may be used alone. It cannot be used to pay the same child care provider.

III. CLIENT FEE

The client fee is based on family size and income, and is determined by the ABC Program. The provider is responsible for the collection of client fees from the parent in advance of service delivery and documenting that those fees are paid in a timely manner. The ABC Program assumes no responsibility for collection or payment of client fees.

Foster parents and clients participating in the Family Independence Program do not pay client fees. However, they are responsible for the difference between the provider's rate and the maximum rate paid by the ABC Program, if the provider's rate exceeds the maximum amount.

- 1) The client fee is to be collected weekly in advance of service delivery.

 **Providers should not let clients get behind on their weekly fees. [Refer
 to the Special Note under Client Transfer IV.]
- 2) The provider may discontinue services to the client when client fees are not paid.
- 3) The provider must seek authorization from the ABC Control Center before discontinuing services to a client for failure to pay the client fee [Refer to V.].
- 4) The amount of the client fee and any second child discount are deducted from the ABC payment to the provider.

IV. CLIENT TRANSFER

Clients may transfer from one provider to another.

- 1) Clients must notify the ABC Control Center either by telephone or in writing and receive approval <u>prior</u> to the transfer.
- 2) Clients may be required to adhere to the provider's <u>established</u> policy for notification of transfer.
- 3) The effective date of the transfer will be the 1st Monday following the 7th working day after the ABC Control Center receives the phone call or written notice from the client requesting the transfer.

To determine the effective date of transfer:

The day the ABC Control Center receives the phone call or written notice is considered day one of the notice. Then begin counting seven working days from that date. In counting the 7 days, do not include state observed Holidays or weekends, as they are not considered working days. Whatever date the 7th working day falls on, the transfer date will be the next Monday after that.

EXCEPTION: If notification is received on a Thursday, then Friday is counted as day one. If notice is received any other day of the week (Monday,

Tuesday, Wednesday or Friday), that same day is always counted as day one.

EXAMPLE: Request is made on Wednesday. Counting seven [7] working days beginning with Wednesday, the 7th working day would fall on Thursday of the next week. The transfer date would be the next Monday following this Thursday.

- 4) Notice can be waived under unusual circumstances if sought by the client. The ABC Control Center will notify providers if waivers are approved.
- The previous provider will not be paid after the start date is established for the new provider. THE ABC PROGRAM WILL NOT PAY TWO PROVIDERS FOR THE SAME WEEK.
- The previous provider will be notified by telephone of the client's last authorized day of service. A "Transfer Letter" will also be sent.

 **SPECIAL NOTE: Clients with unpaid fees at the time of the transfer will still be allowed to transfer. It is the responsibility of the provider to ensure client fees are paid timely.

V. DISCONTINUING SERVICES TO ABC CLIENTS

1) When the Provider Discontinues Services To The Client

Providers have a right to stop serving a client or child if either is disruptive to the program or does not comply with the provider's established policies. Providers must notify clients and the ABC Control Center by calling the provider line at [800-262-4416] before discontinuing services to the client.

- The reason for discontinuing services must be included, i.e. failure to pay fees, parent does not pick child up on time, or child displays disruptive behavior, etc.
- The ending date will be the last day of the service week (always a Sunday), in which the provider asked the client to leave.
- Clients should be notified by the provider [preferably in writing] a minimum of three working days in advance of the effective date
- Clients should be allowed to finish any week in which the provider has billed ABC for the client. Failure to allow the child to finish out a week may result in an early release, which would require the provider to forfeit any notice.

2) When ABC Terminates Client's Eligibility

The ABC Control Center may terminate a client's or child's eligibility. Once a decision has been reached to terminate eligibility, the provider will receive written notification from the ABC Control Center.

- If termination is initiated by the SSS or the ABC Control Center, the provider and client will be notified by mail that the client's services are being terminated and all payments for services rendered after the termination date will become the client's responsibility.
- The provider will be mailed a **Denial/Termination Letter** that reflects the effective date of termination and the reason for the termination. A minimum of 10 calendar days advance notice will be given from the date the determination to end services is made, unless extenuating circumstances exist, and a waiver is given to the client.

April 1, 2011 Page 9 of 34

VI. RECORDS

The following records are required to be kept on-site and will be reviewed during regular monitoring visits. Providers should establish good record keeping methods and maintain all documentation in an orderly fashion. If the Director or Primary Operator is not on-site during the monitoring visit, a designated person shall have access to the records. Records shall be maintained until reviewed or a minimum of 3 years, whichever is longest.

1) Attendance

- Daily attendance records must be maintained for each child served through the ABC Program.
- Attendance may be documented in several different ways by recording days of attendance and days of absences on a roll book or log sheet to include the USDA Log Sheet, or sign-in/sign-out sheets or computer logs, etc. IMPORTANT NOTE: If provider uses sign-in/sign-out sheets, and the parents fail to sign-in and also sign-out, the DSS Auditors may recoup funds.
- Records must match the absences reported on the SVL submitted for the period. <u>PROVIDERS MUST ACCURATELY REPORT ALL</u> <u>ABSENCES to include actual date of the absence(s) and reason</u> code.
- Providers who do not maintain daily attendance or accurate records may be required to repay funds if the provider cannot provide documentation that child attended the program.

2) Receipts for Grant Purchases

• Providers must maintain receipts on-site for items purchased under any grant received for a period of three (3) years for audit purposes.

3) Service Voucher Log [SVL]:

- Providers must maintain copies of the SVL <u>on-site</u> for a period of three
 (3) years for audit purposes. Providers must xerox the SVL and keep a copy on-site.
- Providers must review the SVL against the Provider's Remittance Advice.

4) **Staff Records:**

An individual file must be kept <u>on-site</u> for each staff employed. Information should include, but not be limited to, the following:

- Name and Job Title of Staff, i.e. Director, Lead Teacher, or Assistant Teacher
- Copy of High School Diploma/GED Certificate (see below)*
- Copies of any degrees/certificates/diplomas or college transcript (see below)**
- Documentation of child care experience, i.e. resume, completed job application, letters of reference, etc.

- Copy of ABC educational plan, if applicable
- Documentation of training received, i.e. certificates
- Progress toward meeting educational requirement such as quarterly transcripts
- Documentation of CPR/First Aid Certification, if applicable
- Physician Health Statement
- TB Test results or applicable statement
- Discipline Policy signed and dated yearly.

*High School Diploma: The ABC Child Care Program accepts high school diplomas which meet the following criteria

A prescribed secondary course of study that:

- a. Includes subjects such as: Reading Skills, English, and Mathematics, American and World History, Biology, Social Science, and Physical Science, Career-oriented electives like Auto Repair Technician, Personal Computer Specialist, and more... Traditional electives like Chemistry, foreign language, and Music
- b. Has minimum compulsory attendance requirements
- c. Is accepted by institutions of higher education
- d. May include home school diplomas, as recognized by each individual state
- e. Is recognized by the SC Department of Education or is accredited by one of the six regional accrediting bodies recognized by the US Department of Education.

Non-traditional high school degrees will be reviewed by ABC for compliance to the above criteria.

See http://www.ed.gov/students/prep/college/diplomamills/index.html)

**College Degree:

All college degrees must be accredited by one of the six regional accrediting bodies recognized by the US Department of Education in order to be accepted by ABC.

Directors are responsible for ensuring that staff hired have verifiable high school diplomas and college degrees.

5) Client/Child Records:

An individual file should be kept on-site for each child enrolled through the ABC Program. Information should include, but not be limited to, the following:

 Parent name, child's complete name [especially if last name is different than parent, Social Security # of parent. It is helpful to cross-reference each child's file with other children from the same family, especially when the last names are different

- ABC Authorization/Connection Letter describes the client's name and name of the child, amount of billing, start and stop dates, client fee amount (if applicable), and type of care
- Copies of immunization records for children under age five (5)
- Discipline Policy signed and dated by the parent yearly
- Any correspondence from the ABC Program related to the client.

VII. AMENDMENT OF PROVIDER'S ENROLLMENT

A provider's enrollment can be amended at any time after enrollment in the ABC Program. An amendment can be initiated by the provider and/or ABC Program Monitoring.



PLEASE DO NOT SEND ANY CHANGES WITH YOUR SVL.

The provider must notify ABC Program Monitoring if any changes or amendments need to be made to their enrollment.

Amendments may occur for, but are not limited to, the following reasons:

1) Changing Provider Rates

a. Rate Increases

Providers who increase their child care rates may request a rate increase.

- The provider must call ABC Program Monitoring and request a Rate Change Form be sent to them.
- The form is signed and dated by the provider, and returned with the required documentation to ABC Program Monitoring. The form will be completed by ABC Program Monitoring.
- Required documentation: The provider <u>must include</u> a copy of their published/written child care rates [i.e. written fee policy, parent handbook with rates included] along with any correspondence given to parents notifying them of the rate increase. The rate increase will not be processed without this information. <u>Providers who do not currently have a written fee policy [outlining what rates they charge] are strongly encouraged to develop one</u>
- Providers will receive written notification of the outcome of their request for a rate increase. They should contact ABC Program Monitoring if they have not received anything within a month of submitting the request. It is the provider's responsibility to make sure their rate increase has been received and processed by Program Monitoring. Rate increases cannot be made retroactive.
- Once approved, the rate increase will not immediately take effect for those clients currently being served by the provider. The payment rate will remain the same until the client's eligibility period is renewed. If the client continues to select the provider, then the new payment rate will be effective for the client with the date of their new eligibility period.

- **EXCEPTION:** Foster care children are the only clients immediately connected at the new rate.
- Any new clients selecting the provider on or after the date of the rate increase will be paid at the new rate.
- If the provider charges more than the maximum allowed by the ABC Program, then only the maximum will be paid. The provider may require the client to pay the difference between their rate and the maximum paid by the ABC Program.

b. Rate Decreases

Providers who decrease their rates <u>must</u> notify ABC Program Monitoring and request a Rate Change Form be sent to them.

 The same procedures as outlined in Rate Increases will be followed with the exception that all rate decreases will be effective immediately without regard to the client's eligibility status.

2) Adding or Deleting Additional Age Group:

- a. Providers can request to add another age group(s) not previously enrolled by contacting ABC Program Monitoring. Providers must be currently providing child care services for the age group.
 - Providers must meet regulatory requirements for age group(s) served
 - An on-site visit is required for child care centers to add age groups, but is not required for family/group child care homes.
- b. Providers can request to add half-time or full-time for an age group already enrolled.
- c. Providers should request to delete an age group if they are no longer serving an age group or do not want to be enrolled for that age group.

3) <u>Change in Facility's Regulatory Status:</u>

- a. The provider must notify ABC Program Monitoring if one of the following occurs:
 - If provider changes from Family to Group
 - If provider changes from Family or Group to a Center
 - If provider changes from a Group to a Family
 - If provider changes from Center to a Family or Group.
- b. The provider must forward a copy of the appropriate regulatory document (license/registration) to ABC Program Monitoring to support the change.
- c. The provider must notify ABC Program Monitoring within one (1) working day if DSS/Child Care Licensing revokes their registration or license or the application for renewal is denied by the DSS/Child Care Licensing.
- d. The Provider must notify ABC Program Monitoring in writing within one (1) working day if they are under investigation by the DSS/Child Care Licensing/OHAN, or another local, state or federal agency.

4) Change in Name of Child Care Facility:

If the provider changes the name of the child care facility they must:

- Notify ABC Program Monitoring in writing
- Submit a signed W-9 Tax form which can be requested from ABC Program Monitoring
- Submit a new IRS Form SS-4 or 147-C Letter.

5) **Program Moves Location:**

If the provider moves to another facility, the following must occur:

- The provider must notify ABC Program Monitoring as soon as possible, but no later than 15 days prior to the move.
- The provider must only serve the children at the facility enrolled. When a provider moves, the License/Registration becomes invalid and the provider must obtain a new License/Registration for the new location and submit to ABC Program Monitoring prior to the move.
- If the regulatory requirements are met, the facility demonstrates a history of compliance with regulatory requirements, there is no turnover of the director, and at least 75% of the caregiver staff remains with the facility, the provider's enrollment will be amended and the provider will be allowed to serve the children at the new facility.
- If the facility is issued a provisional license at the new location, the program will be reclassified to a Level C until a regular license is issued. When the provider is issued their regular license, they may apply to enroll at Level B (without the six month wait) or above if all prerequisites for ABC enrollment are met.
- If the facility does not meet regulatory requirements at the new facility, termination will be initiated. If the process results in termination, the termination should be effective the 1st Monday after 10 working days (excluding weekends and state holidays) after notification that the appeals process has ended.

6) <u>Change in Director of Child Care Facility:</u>

If there is a change in the Director of the child care facility they must:

- Notify ABC Program Monitoring in writing or by phone
- Submit documentation [i.e. degree, CDA, diploma, etc.] that director meets the qualifications outlined in the ABC Child Care Standards
- If needed, submit signed educational plan indicating director will obtain approved credential, certificate, diploma, or degree within three years. An educational plan can be obtained from ABC Program Monitoring.
- Submit a copy of the new DSS License/Registration with the new Director's name.

7) Change in Mailing/Payment Address or Phone Numbers:

If there is a change in the facility address where services are provided [other than the provider has moved], such as a change because of 911 or payment address, or phone number:

- Notify ABC Program Monitoring in writing or by telephone
- Submit a signed W-9 Tax form which can be requested from ABC Program Monitoring.

8) <u>Change in Telephone Number:</u>

If there is a change in the facility phone number where services are being delivered:

Notify ABC Program Monitoring in writing or by phone. The provider must maintain a working LAN telephone at all times, at the facility where services are being delivered. Non-published numbers are not allowed, nor is a cell-phone allowed as the main phone.

VIII. HISTORY OF COMPLIANCE TO REGULATORY REQUIREMENTS

Formerly called *License in Good Standing*)

Please refer to the Level A and B mandatory standards, "Standard I. Regulatory Requirements". This is where providers are required to meet History of Compliance.

The child care facility is required to have and maintain a History of Compliance with regulatory requirements in order for the facility to enroll and maintain enrollment as a Level A or B facility in the ABC Program.

History of Compliance is defined as having:

- (1) No frequent or multiple deficiencies or a significant event posing substantial threat to the health or safety of the children that involve supervision, compliance with ratios, or health and safety violations.
- (2) At least one caregiver with a Cardiopulmonary Resuscitation (CPR) certification and pediatric first aid certification who is on-site at all times when the children are in care.
 - <u>Frequent</u> is defined as having 3 or more violations that pose a substantial threat to children's health and safety within a six month period of time.
 - <u>Multiple</u> is defined as having 3 or more different violations that pose a substantial threat to children's health and safety within a six month period of time.
 - Any <u>significant event</u> which poses substantial threat is defined as, but not limited to: any environment, situation, or occurrence that poses a substantial threat to the health and safety of children.
 - <u>Substantial threat</u> to the health and safety of children is any action, condition, or event that results in children being placed in impending danger or harm.

Conditions that could pose a <u>substantial threat</u> can include, but are not limited to:

- children left alone in the facility;
- sewer backed up in facility;
- no water in the facility;
- no heat or air conditioning in facility in extreme weather conditions;
- fire alarm disconnected:
- lack of supervision resulting in a child leaving the facility unnoticed;
- lack of supervision resulting in child left at another location such as restaurant, zoo, etc;
- children removed due to abuse or neglect by Licensing, OHAN, or Child Protective Services staff:
- smoking in the facility by staff;
- exceeding the facility capacity or staff child care ratios defined by Child Care Licensing
- Cardiopulmonary Resuscitation Certification (CPR) and Pediatric First Aid Certification(FA) facility cannot have more than 3 violations where they fail to meet CPR/First Aid coverage within a 12 month period of time.

If any supervision offense results in harm to a child (i.e., child injured), the termination process will be initiated with that offense.

IX. VOLUNTARY TERMINATION FROM ABC BY PROVIDER

Level A and B providers should notify ABC Program Monitoring directly if they want to voluntarily terminate their enrollment; however, if providers contact the ABC Control Center, ABC Program Monitoring will verify the provider's intent through a phone contact with the provider. Providers who have received a grant must, however, stay in the program for the period required by the grant, or the grand funds may be recouped.

Voluntary termination of a provider's enrollment agreement is not appealable. If the provider requests to voluntarily end their enrollment agreement, and then later requests to rescind the termination of their agreement, the ABC Program is under no obligation to do so, particularly if the provider's file has been closed in the ABC Voucher System. The provider may however reapply for any Level.

X. ADVERSE ACTIONS BY DSS

1) TERMINATION OF PROVIDER'S ENROLLMENT BY THE ABC PROGRAM

The ABC Program will initiate termination of an ABC Child Care provider's enrollment agreement during any 3-year enrollment period if the provider fails to comply with the requirements of the ABC Program and criteria to maintain enrollment at the Level enrolled. Providers at Level A and B are paid the rate they charge others up to higher maximum rates because they agreed to meet additional standards and criteria. **EXCEPTION:** See Reclassification.

If enrollment is terminated for cause, the provider cannot reapply at any level for six months following the date the appeals process has ended.

If the process results in termination of enrollment, the termination should be effective the first Monday following 10 working days (excluding weekends and state holidays) after notification that the appeals process has ended.

A child care facility's enrollment will be terminated for, but not limited to, the following reasons:

1. **Failure to Maintain Regulatory Requirements:** If a provider fails to maintain their regulatory status or if the provider's regulatory status is revoked, denied, or suspended, or an injunction is issued to close the facility, termination of the provider's enrollment will be initiated.

If a provider is under appeal with Child Care Licensing and the health and/or safety of the children are jeopardized, the Child Care Services Director can make the decision to remove all ABC children from the facility during the appeals process. Examples of situations that could jeopardize children's health and/or safety are: sewer backed up in the facility; no water in the facility; over heated facility due to no air conditioning; child seriously injured or death of a child due to lack of supervision or negligence by staff; lack of supervision resulting in a child leaving the facility unnoticed; children removed due to abuse or neglect; over ratios by more than 25%; etc

2. Failure to Maintain History of Compliance:

History of Compliance is defined as having:

- 1) No frequent (3 or more within 6 months) deficiencies posing substantial threat to the health or safety of the children that involve supervision, compliance with ratios, or health and safety violations.
 - a) Maintaining Staff-Child Ratios Requirements Providers shall at all times maintain staff:child ratios. When it has been determined a provider has failed to meet the required staff-child ratios 3 or more times during any 6-month period, the termination of enrollment process will be initiated.
 - b) Maintaining Supervision Requirements Providers shall at all times maintain supervision requirements. When it has been determined that a provider has failed to meet supervision of children requirements 3 or more times during any 6-month period, the termination of enrollment process will be initiated.
 - c) Maintaining Regulatory Capacity Providers shall at all times maintain the facility's regulatory capacity. When it has been determined a provider has exceeded the regulatory capacity at a

- facility 3 or more times during any 6-month period, the termination of enrollment process will be initiated.
- d) Maintaining Health and Safety Regulations Providers shall at all times maintain health and safety regulations. When it has been determined that the provider has received multiple violations which affect the health and safety of children, the termination of enrollment process will be initiated.
- e) **Smoking in the Facility** When it has been determined that a provider has received multiple violations which affect the health and safety of children, the termination of enrollment process will be initiated.
- 2) No multiple (3 or more within 6 months) deficiencies posing substantial threat to the health or safety of the children that involve supervision, compliance with ratios, or health and safety violations.
 - a) Maintaining A Combination of Ratios, Supervision, Regulatory Capacity, or Health and Safety When it has been determined a provider has failed to meet a combination of ratios, supervision, regulatory capacity requirements or health and safety (#a, b, c, and d above) during any on-site visit, or individually for 3 or more times during any six month period (i.e., 1st violation ratios, 2nd violation supervision, 3rd violation ratios), the termination of enrollment process will be initiated.
- 3) At least one caregiver with cardiopulmonary resuscitation (CPR) certification and pediatric first aid certification who is on-site at all times when children are in care.
 - a) Meeting CPR/First Aid Certification Providers shall at all times have one caregiver with CPR and FA on-site. When it has been determined that a provider has failed to meet the CPR/First Aid Certification coverage at a facility 3 or more times during any 6month period, the termination of enrollment process will be initiated.
- 4) Maintaining History of Compliance in which <u>no</u> significant event occurs that poses a substantial threat to the health or safety of the children that involve supervision, compliance with ratios, or health and safety violations.
- 3. Failure to Maintain Required Program Assessment Scores:

Level A Providers:

The minimum score required for enrollment is an average score of 4.5 on the Environment Rating Scales (ITERS-R, ECERS-R, and/or SACERS)

April 1, 2011 Page 18 of 34

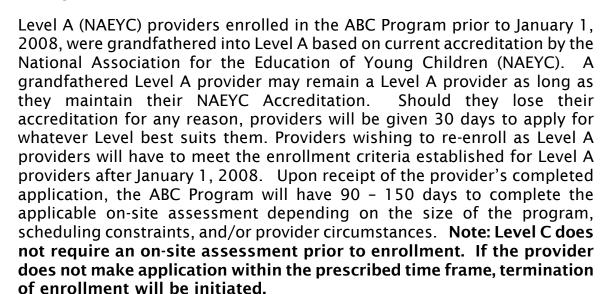
appropriate for each age group of children in randomly selected classrooms. Additionally, each classroom observed must earn a minimum score of 4.0 on the Interaction Subscale.

Level B Providers:

The minimum score required for enrollment and to maintain enrollment is:

1) <u>Center-based</u> = 80% for each age group 2) <u>Family/Group</u> = 80% overall.

- If a center-based facility scores less than 65% in all age groups or a Family/Group facility scores less than 65% overall during an on-site ABC Level B Child Care Standards assessment, the termination process shall be initiated with that review.
- If a center-based facility is enrolled for more than 1 age group and any age group scores <u>less than</u> 65%, de-enrollment of the age group(s) scoring less than 65% shall be initiated with that review.
- If a center-based facility is enrolled for more than 1 age group and any age group scores at least 65%, but less than the 80% required, then 2 more assessments will be conducted for that age group. If after 3 assessments the score is still below 80% the de-enrollment process of the age group(s) not meeting the 80% requirement shall be initiated upon the third visit.
- 4. Failure to Maintain NAEYC (National Association For The Education of Young Children) Accreditation (Level A only):



5. **Use of Corporal Punishment:** The ABC program defines corporal punishment as the use of physical force to the body as a discipline measure. Physical force to the body includes but is not limited to spanking, slapping, biting, and shaking. (1) If the owner/operator of the facility administers

corporal punishment, termination of facility will occur on the 1st offense. 2) If staff in a child care center uses corporal punishment, and the corporal punishment was not condoned by the owner/operator, the provider should be given an opportunity to take appropriate corrective action. If appropriate action is taken, termination will not occur (3) If further instances of corporal punishment are used at the facility within any 12-month period, termination of enrollment will occur.

When termination is warranted as a result of corporal punishment, the termination process shall be initiated immediately.

- 6. The Office of Out of Home Abuse and Neglect (OHAN) Finding(s): If a staff's name at an ABC facility is entered into the Central Registry, and the perpetrator is not barred from the facility, the termination of enrollment will be initiated immediately. For Family/Group facilities, termination will be initiated immediately. The Child Care Services Director can make a decision to remove all ABC children from the facility during the appeals process.
- 7. **Failure to Submit Required Corrective Action:** If a provider does not correct the deficiencies/violations within the timeframe allowed (including any extension of time allowed for correction), the termination of enrollment process shall be initiated.

NOTE: In the event the ABC Program terminates a provider's enrollment during the 3 year enrollment period, and the Appeals Office upholds the provider, any outstanding corrective action not affected by the appeal must be submitted.

- 8. **Facility Moves:** If the facility moves to another location, and the provider has not obtained a regulatory document for the new location, termination of enrollment will be initiated.
- 9. **Failure to Provide Child Care Services at Enrolled Address:** Providers must notify ABC in advance of days the facility will be temporarily closed or if the facility is moving or permanently closing.

When an unannounced on-site visit is conducted at an ABC facility during the hours the facility should be in operation, and services cannot be verified on the day of the visit, the ABC Program will provide written notice by certified mail to the provider to notify the provider that if services cannot be verified during the next unannounced on-site visit, the termination of enrollment process will be initiated.

If a 2nd visit is conducted and services cannot be verified (i.e. looks abandoned, no one comes to the door, no furniture inside, wood over windows, grass overgrown, etc.), the termination of enrollment process shall be initiated. Funds will be recouped for the period of time when services could not be verified.

10. **Providing Services at a Location Other Than the Enrolled Address OR other than the site the child is connected to:** Per the Provider Agreement, providers are authorized only to serve children at the site which is enrolled and has been approved by the ABC Program. When children are served at a location that has not been approved by the ABC Program, this potentially places children in harm. For example, the other location may not be a licensed facility where health and safety codes are met. Additionally, ABC is paying for a higher quality of care at the enrolled location and thus cannot quarantee the quality of care at locations other than the enrolled site.

Children must be served at the location for which they have been connected. If the provider has two or more locations enrolled, they may not switch or transport children between locations without notifying the ABC Control Center for authorization. Children will appear on the SVL for the location in which they have been connected. When it is verified that children are being served at a location other than the enrolled address, the termination of enrollment process will be initiated.

- 11. Failure to Respond to Attempts by ABC Staff to Reach the Provider: If the provider has ABC children connected, and there are 3 documented attempts within a period of 15 days (excluding weekends and holidays) by the ABC Program to reach the provider, by phone, letter, e-mail, and/or onsite visit and there is no response by the provider, the termination of enrollment process shall be initiated. Funds shall be recouped for the period of time when services could not be verified.
- 12. **Failure to Operate During Stated Hours of Operation**: If a provider has 3 documented incidents of non-compliance with the stated hours of operation during any 12-month period, the termination of enrollment process may be initiated.
- 13. Failure to Maintain LAN (Local Area Network) Phone Service: Providers are required to have LAN phone services where ABC children are served. Cell phones are not permitted as the primary/sole phone service. When it becomes known to the ABC Program that a provider does not have LAN phone services at a facility where ABC child care services are provided, the provider should be given 30 days to secure LAN phone services. If the provider does not secure LAN phone services within the 30 days; or if it is documented that the provider did not have LAN phone services 2 times within any 12-month period, the termination of enrollment process may be initiated.
- 14. **Misuse of ABC Grant Funds:** If a provider uses ABC grant funds on purchases other than its approved use and the provider does not reimburse the ABC Program within the timeframe given for reimbursement (including any extension of time approved), the termination of enrollment process may be initiated. Funds will be recouped.

- 15. **Fraud:** If a provider intentionally makes a false statement or misrepresentation regarding a material fact or fails to disclose a material fact that results in obtaining, attempting to obtain, or continuing to receive ABC funds which the provider would not otherwise qualify to receive, the termination of enrollment process shall be initiated. Funds will be recouped for the period of time when the provider did not qualify for the funds.
- 16. Owner, Director, and/or Operator Guilty of Fraud in A State-Funded or Federally-funded Program: If an owner/operator is found guilty of committing fraud in another state-funded or federally funded-program, the termination of enrollment process shall be initiated. If a director is guilty of committing fraud in another state-funded or federally-funded program and the director is retained in the capacity as director of the facility, the termination of enrollment process will be initiated.
- 17. **Failure to Maintain ABC Documentation Requirements:** If a provider is cited 3 times for the same record keeping violations during any 12-month period, the termination of enrollment process may be initiated. The violations can be noted by the ABC Program Staff, the DSS Audit Staff or Child Care Licensing.
- 18. **Verbal or Physical Abuse of ABC Staff:** If a provider curses or yells at any ABC Program staff, the provider will be sent a certified letter after the 1st offense. The letter will describe the incident and inform the provider that another such incident will result in termination being initiated. If the provider threatens, or physically assaults any ABC Program staff during the course of conducting ABC business, termination of enrollment will be initiated.
- 19. **Refusal to Allow ABC Representatives Access to the Facility**: If a provider refuses to allow an ABC staff on the premises or in the building of an enrolled child care facility, and the ABC staff is on official ABC business during operating hours of the facility and the provider is open for business, the provider will be sent a certified letter after the 1st offense, describing the incident and notifying the provider that as a result of the incident any available bonus for the review period is forfeited, and if ABC staff are denied access during any future visits, the termination of enrollment process will be initiated. If a 2nd incident occurs, the termination of enrollment process shall be initiated immediately.

2) EXCEPTIONS TO TERMINATION OF PROVIDER ENROLLMENT

The following terminations are not appealable. In the following situations, even though ABC Program Monitoring considers this a closing of the provider's file, the ABC Child Care Voucher System will terminate the provider's enrollment in the ABC Voucher System based on closure, and send the provider a termination letter. The following are reasons a provider would be terminated:

- A. Provider has no current ABC children and has closed the program or vacated the facility and did not notify the ABC Program. Example: monitor conducts unannounced visit and finds facility abandoned. Program will attempt to reach provider by phone. If unsuccessful, then a letter will be mailed notifying the provider that they must contact Program Monitoring within five working days of receipt of the letter or the file will be closed. If no response received, then file will be closed. Should the provider reopen at another location and wish to apply for enrollment, they must wait six months before they can reapply.
- B. Provider has no current ABC children connected and the ABC Program cannot reach anyone either at the facility (on-site) or by phone during the normal hours of operation. Program Monitoring will send a letter notifying the provider they must contact Program Monitoring within five working days of receipt of the letter or their file will be closed. If there is no response by the provider, the file will be closed and the provider must wait six months before they can reapply.
- C. <u>Facility Ownership Changes</u>. A provider must immediately notify the ABC Program of any changes in ownership of the facility. A change in ownership invalidates the enrollment agreement as it is not transferrable. It also invalidates the DSS License or Registration. The provider's file will be placed in a closed status. The new owner may apply for enrollment at any level desired by completing the application process and meeting the enrollment requirements.

The provider must notify ABC Program Monitoring at least 30 days prior to the sale. VERY IMPORTANT NOTE: It is extremely crucial to notify ABC Program Monitoring of the sale of the facility so that payment under the provider's TAX ID number can be stopped. If the provider fails to do this and the new owner continues to receive the SVLs and submits them. payment will continue to be made under the original provider's TAX ID, and thus they are responsible for payment of taxes due. When the new owner keeps the same facility name, it is easy for them to deposit the checks. In order to correct this to ensure that the provider selling the facility doesn't have to pay taxes on this money, the ABC Program must recoup funds from the provider selling the facility (even though they may have never received the funds) and then reissue a check to the new owner under their TAX ID number. The ABC Program cannot be held responsible when providers fail to notify the ABC Program of the sale. Providers should NOT send this notification in with their last SVL, but must call or write ABC Program Monitoring directly.

XI. RECLASSIFICATION OF PROVIDER'S ENROLLMENT STATUS IN THE ABC PROGRAM

Reclassification is the process whereby providers are moved from a higher quality level to a lower one within the ABC Voucher System.

Reclassification may be initiated by the ABC Program during the provider's 3-year

enrollment agreement or the provider can request this in writing at any time. When reclassification occurs, providers remain in the ABC Program and can accept vouchers; however, the payment rate is adjusted upon the change of Levels. The provider will be required to complete new enrollment paperwork. **Reclassification is not appealable.**

Providers are not eligible for reclassification if they fail to meet the History of Compliance.

The following are the reasons that a provider may be reclassified:

- Provider at Level A or B moves the facility and the new location does not have a regular license (only provisional) required for enrollment of new location
- b. Provider scores are below the required scores (but above 65%) for the Level enrolled after 3 consecutive visits
- c. Provider cannot meet the mandatory standards, i.e. education, training hours due to valid reasons such as health reasons, personal circumstances (spouse or family member ill or dying)
- d. Level A providers with NAEYC Accreditation who lost or did not renew their accreditation.

XII. EXPIRATION OF THE 3 YEAR ENROLLMENT AGREEMENT

Enrollment periods/agreements are effective for a period of 3 years from the date signed by the provider. The provider's ABC enrollment expires on the expiration date of the agreement. The end of the enrollment period is not appealable.

All providers will be notified in writing 90 days prior to the expiration date of their agreement and provided an application to re-apply for a subsequent enrollment period at the same Level.

If the provider meets the eligibility criteria for enrollment the provider will be offered the opportunity to voluntarily sign another 3 year enrollment period/agreement.

If the provider does not meet the eligibility criteria for the Level which they applied, they will be given 30 days to apply for another Level.

XIII. INACTIVE STATUS

When providers do not have children enrolled, ABC Program Monitoring cannot conduct observations and therefore the provider is unable to meet Level B standards. Providers who have not had any children (private-pay and ABC) for at least one year will be placed in an "inactive status". Providers who are inactive must maintain all other requirements not related to the observation standards. Providers will be contacted annually to provide verification of meeting these criteria.

An inactive provider will appear on the ABC provider list, however; they will not be allowed to serve ABC children until the office of program monitoring approves the connection. Following approval notification, a program monitor will conduct an unannounced review of the facility to determine the appropriate level. Inactive providers are not eligible for any available bonus or grant opportunities.

Providers may remain inactive for the duration of their enrollment agreement. An inactive provider would be ineligible to enroll in ABC as they would be unable to meet the observation criteria. Inactive status is not appealable.

XIV. **ELIGIBILITY CRITERIA** SUBSEQUENT FOR YEAR **ENROLLMENT AGREEMENT**

ABC Program Monitoring staff will notify providers in writing at least 90 days prior to the expiration date of the existing agreement. Providers will be sent an application to complete and return if they are interested in applying for another 3year enrollment period. The application must be returned 60 days before the end of the existing agreement.

To be eligible for another enrollment period, the provider must have maintained a History of compliance with regulatory requirements, and also have consistently demonstrated the following eligibility criteria during the current 3 year enrollment period:



Level A (NAEYC) Providers enrolled before January 1, 2008:

- Must have a current regular license or approval
- Must have maintained accreditation by National Association for the Education of Young Children (NAEYC) without a break in accreditation. (Failure to maintain NAEYC accreditation requires the provider to meet the criteria for Level A providers who enrolled January 1, 2008 and after or enroll at another Level.)
- Must have adhered to the ABC Level A mandatory standards which are inherent in the NAEYC Standards.

Level A (ERS) Providers enrolled January 1, 2008 and after:

- Must have a current regular license or approval.
- Must meet the ABC Level A mandatory standards.
- Must meet the overall average score of 4.5 (on a 7 point scale) or higher, with a 4.0 minimum score on the interaction subscale for each age group assessed with the Environment Rating Scale (ERS) on an on-site review conducted by an ABC monitor during the current enrollment period.

Level B Providers:

Re-enrollment eligibility is based on a summative review of the provider's April 1, 2011 Page 25 of 34

performance during the previous 3 year enrollment period. Factors used to determine re-enrollment eligibility include, but are not limited to repeated non-compliance with the following:

- Must have met 80% or higher compliance score during each on-site assessment within the 3 year period.
- Must have met the ABC Level B mandatory standards and submitted corrective action within the required time frame, if applicable.
- Must have had no repeated violations with the same ABC Mandatory Requirements in which corrective action had to be submitted each time, (i.e. never has training hours, Corporal Punishment Statements, CPR/FA, etc.).
- Must have complied with the time frames for meeting educational requirements.

Providers Who Do Not Meet Eligibility Criteria

Providers who demonstrated repeated non-compliance with any of the above criteria during the 3 year enrollment period will be staffed internally to determine re-enrollment eligibility:

- Level A (NAEYC) providers who do not meet the eligibility criteria will be given the reason(s) and 30 days to apply for enrollment at either Levels A, B, or C. The end of agreement date is not appealable. If the provider wishes to re-enroll as a Level A provider, they must meet the criteria established for Level A (ERS) after January 1, 2008.
- <u>Level A (ERS) providers</u> who do not meet the eligibility criteria will be given the reason(s) and 30 days to apply for enrollment at either Levels B or C. The end of agreement date is not appealable. If the provider chooses to apply for the same Level, they must wait six months and complete a self-study.
- <u>Level B providers</u> who do not meet the eligibility criteria will be given the reason(s) and 30 days to apply for enrollment at Level C. The end of agreement date is not appealable. To reapply for enrollment at Level B, providers must wait 6 months and document they have received technical assistance from a Certified Technical Assistance Provider (TAP). TAP's are certified through the Center for Child Care Career Development (CCCCD). Failure to provide this documentation renders the provider ineligible to reapply at Level B.

If the providers does not make an application for another Level within the specified time frame, then the ABC Program will assume that the provider is no longer interested in participating and the file will be closed as the Agreement period has ended. It is the provider's responsibility to insure that their application has been received. If ABC children are connected, then the provider will be contacted and given the last date payment will be made on behalf of the clients.

XV. WAITING PERIODS FOR ENROLLMENT

1. Waiting Period When ABC Terminates Provider's Enrollment

- When the ABC Program terminates a provider's enrollment during the 3 year enrollment period, and the provider does not request an appeal, they must wait 6 months after the effective date of the termination before applying for enrollment at any level.
- In the case where the provider requests an appeal and the Appeals Office does not uphold the provider in the appeal, the provider must wait 6 months after the date the final appeals decision is issued before applying for enrollment at any level.
- If the provider requests to appeal any decision, and then withdraws the request, the six months would begin upon notification that the appeal process has ended.

SEE ENROLLMENT EXCEPTIONS

2. Waiting Period for Provider Who Voluntarily Terminates Enrollment

• Providers who voluntarily terminate enrollment may re-apply at any time for any Level.

3. Waiting Period When Provider is Not Eligible for Subsequent Enrollment Agreement -

Level A providers:

- Level A (NAEYC) providers enrolled prior to January 1, 2008, who are not eligible for a subsequent 3 year enrollment agreement have 30 days to apply for any Level. If the provider wishes to reapply as a Level A provider, they must meet the requirements established for Level A (ERS) providers after January 1, 2008.
- Level A (ERS) providers enrolled after January 1, 2008, who are not eligible for a subsequent 3 year enrollment agreement will have 30 days to apply for Level B or Level C. However, should they wish to reapply for Level A again, they must wait 6 months and complete a self-study.

Level B providers:

Level B providers who are not eligible for a subsequent 3 year enrollment agreement will have 30 days to apply for enrollment at Level C. If the provider wishes to reapply as a Level B, they must wait 6 months and receive technical assistance from a Certified Technical Assistance Provider (TAP). TAP's are certified through the Center For Child Care Career Development (CCCCD). Failure to provide this documentation will render the provider ineligible to re-enroll at Level B.

4. Exemption of Waiting Period

If extenuating circumstances exist, the Director of Child Care Services may grant an exemption of the 6 month wait for applying for enrollment, if recommended by Program Monitoring or the Control Center, as applicable. No exemption will be granted for providers who are terminated for failure to maintain History of Compliance with regulatory requirements.

- Providers whose file is inactive are exempt from the 6 month wait.
- 5. **Ineligiblity to Participate in Publicly Funded Programs** Any institution or it's principals who are ineligible for any other publicly funded program due to the above criteria are prohibited from participating in the ABC program at any level. However, this prohibition does not apply if the institution or principal has been fully reinstated in, or determined eligible for, that program, including the payment of any debts owed.

XVI. ENROLLMENT EXCEPTIONS

The following are reasons a provider is ineligible to re-enroll in the ABC Child Care Program.

- 1. **Death of a Child** When a negative action by a provider results in the death of a child at a facility.
- 2. **Fraud** Providers found guilty in court of committing.
- 3. **Falsified Documents** Providers who falsify or misrepresent official or legal documents (i.e., birth certificates, degrees, transcripts, etc.), or other ABC program documents (SVL, attendance records) and submit to the ABC Program or to Child Care Licensing.
- 4. Administrative or Judicial Determination of Abuse and/or Neglect Owners of facilities or owners with staff who abuse or neglect children and whose name has been entered into the Central Registry cannot be reenrolled as long as the perpetrator continues to be employed and/or present at the facility.

NOTE: Upon receiving a provider's application for enrollment in the ABC Program at any Level, if it is known by the ABC Program that the provider purchased the facility from a provider whose enrollment was terminated due to Numbers 1 through 4 above, then the new owner shall submit legal documentation verifying the change of ownership and provide a notarized statement that the previous owner has no financial or personal interest or association with the child care facility.

XVII. GRANTS

Providers who receive a grant(s) must stay in the program for the period required in the grant agreement.

If the provider does not comply by staying in the program for the required amount of time, recoupment of grant funds will be initiated, if possible by withholding the

provider's last payment.

If a recoupment has been initiated against the provider perhaps because of an audit, overpayment, or if the provider owes money to the Government due to an IRS lien, and funds are being recouped from the provider through their payments, then the provider will not be eligible for any grants offered at that time due to the fact that the Voucher System will automatically take the grant money in payment towards the recoupment or lien. **This is not appealable.**

Failure to use grants funds properly may result in the initiation of an audit by the ABC Child Care Program.

XVIII. APPEALS PROCESS

CLIENTS:

No new ABC clients will be allowed to connect to an ABC facility during an appeal by the provider with the DSS ABC Program or Child Care Licensing. However, providers may continue serving current children connected through the end of their current eligibility period unless the health and/or safety of the children are jeopardized. The Child Care Services Director can make a decision to remove all ABC children from the facility during the appeals process, if it is determined that the health and/or safety of the children is being jeopardized.

PROVIDERS:

The provider is given an opportunity to request a fair hearing in compliance with the Civil rights Act of 1964. The provider may appeal any decision that results in any adverse actions such as termination, de-enrollment, or reclassification. The following is not appealable: 1) the natural ending of the 3-year provider enrollment period based on the expiration date, 2) provider closure, inactive status and 3) failing the assessment scores during an enrollment visit.

Provider appeal hearings are held by the agency that makes the decision that the provider is appealing. A fair hearing must be requested in writing, and must be made within 30 days from the date of the negative action. The request may be made by the provider or a person acting on his/her behalf, such as a legal representative, relative, or friend. Staff must not impede, limit, or interfere in any way with the client's right to request a fair hearing. If the client or provider wishes to appeal the decision, he/she must notify SCDSS in writing, postmarked within 30 days of receiving a service denial notice or termination letter. The notice of intent to appeal should be directed to:

South Carolina Department of Social Services Individual and Provider Rights P.O. Box 1520 Columbia, South Carolina 29202-1520

If notice of intent to appeal is not submitted to SCDSS within the 30 day period, the right to challenge the denial or termination will be lost and the decision will

become final.

NOTE: Providers who receive a grant must remain enrolled in the ABC Program for the period required by the grant. Failure to remain enrolled for the required period for any reason may result in recoupment of the grant funds.

XIX. GLOSSARY OF TERMS

Definitions of key terms are presented to ensure clarity and understanding. These definitions express the administering agency's intent and meaning for the terms identified.

ABC Child Care Control Center: (ABC Control Center)

The authorized child care voucher system management center that is available to provide assistance to clients and providers, and to handle child care applications, funding and connecting.

- Providers call: <u>1-800-262-4416</u> for notification requirements and/or questions concerning ABC Program procedures.
- Parents call: <u>1-800-476-0199</u> for any questions.

ABC Child Care Program (ABC Program):

The South Carolina statewide child care assistance program funded by Child Care and Development Fund (CCDF), Social Services Block Grant (SSBG) and state match.

ABC Child Care Program Monitoring (ABC Program Monitoring):

The entity that enrolls, monitors, and provides technical assistance to providers enrolled in the ABC Program at Levels A or B, and makes all changes to a provider's file. There are two offices of ABC Program Monitoring.

Absenteeism:

When the child is **not** present (absent all day) at the provider's facility during the service unit (week) either due to illness, vacation, or court ordered non-custodial visitation or for other known or unknown reasons.

Activity Fees

Activity fees are considered other fees charged by the provider to parents such as transportation fees, or special activity fees, etc. These fees are the responsibility of the parent.

Authorized Service Period:

The specific time frame that child care services are authorized for a client and a specific provider.

Billing Rate:

The provider's weekly service rate minus any applicable client fee, and any discount for a second child.

Care Type:

The age groups 0-2 years, 3-5 years, 6-12, and 13-18 years in which the provider has enrolled with the ABC Program. Providers cannot offer services to ABC clients or receive payment for service in a care type in which they have not been enrolled.

Center-based Care:

Facility licensed by DSS to serve 13 or more children.

Child:

The recipient of child care services.

Child Name:

The first name of the child.

Child Number:

This is the client's Social Security number plus the two digit code 01, 02, etc. assigned to the child. It identifies the child for the purpose of payment and system activities. **Providers should never change the assigned child number.**

Client:

An individual who has met the eligibility criteria and is funded for child care.

Client Fee:

That portion of the provider's weekly service rate (cost) which is based on the client's family size and income, and paid by the client directly to the provider. The fee amount is established by SCDSS on the basis of family size and gross family income. That portion of the child care cost, which is paid by the client directly to the child care provider.

Client Number:

The client's Social Security number. This number identifies all client activity in the system.

Client Termination of Eligibility:

Action taken when the client is no longer eligible for services. Once notified that the client's eligibility is terminated, the provider is not eligible for payment for services.

Connected:

A start and stop date (linked to a specific provider) within the ABC Voucher System.

Denial:

When an applicant is denied child care assistance due to inability to meet eligibility criteria or failure to comply with application requirements.

Eligibility Period:

The amount of time authorized for the individual child to receive child care services.

End Date:

The last date of service authorization.

Facility Cost:

The cost a provider charges all parents for a week of child care. Note: Parents are responsible for the difference between the facility cost and the amount paid by the ABC Program, plus any applicable client fee.

Family Child Care Home:

Home registered or licensed by DSS to serve no more than 6 children.

Family Independence Act of 1995:

An Act passed by the South Carolina General Assembly to require the DSS to emphasize employment and training with only a minor welfare component. The Act specifies action required by DSS to implement "Welfare Reform". It also specifies requirements for applicants and recipients in order to receive financial assistance.

Family Independence: (FI)

Child care assistance provided to current FI stipend clients to encourage participation in approved employment, education, or training activities. These requirements are met through the Family Independence Program in South Carolina in an effort to emphasize parental responsibility and self-sufficiency.

Family Independence Stipend:

A monthly payment made to a family who meets the required eligibility standards; previously referred to as Welfare or AFDC.

Foster Care:

Children who are in the custody of DSS and placed out of their home by and/or under the supervision of DSS.

Full-Time Care:

Thirty or more hours of child care service provided during one week.

Funded:

Any child for whom dollars have been allocated in their name.

Group Child Care Home:

Home licensed by DSS to serve no more than 12 children.

Half-Time Care:

Less than thirty (30) hours, but more than fifteen (15) hours of child care service provided during one week.

Less Than half-time Care:

Less than 15 hours of child care service provided during a week. No registration fee is allowed for this care type. This care type only applies to Welfare Reform participants receiving subsidized child care.

Level A:

Exemplary programs measured against rigorous quality standards.

Level B:

Programs measured against quality standards beyond basic state regulations.

Level C:

Programs meeting basic licensing regulations (health & safety)

Less than Half-Time Care:

Less than fifteen (15) hours of child care service provided during a week. No registration fee is allowed for this care-type. This care-type applies only to Welfare Reform participants receiving subsidized child care and must be used in conjunction with full and half-time care.

Maximum Rate:

Maximum weekly rates established by SCDSS on the basis of a market rate survey of urban and rural counties, type of facility, and care types.

Payable Adjustment:

The process of paying the provider for additional monies due them.

Provider Identification Number:

The Federal Employer Identification Number [FEIN] or Social Security number of the provider. This number identifies the provider for purposes of payment, tracking and reporting.

Receivable Adjustment:

The process of collecting monies that were paid to the provider that were not due them

Registration Fee:

A fee providers charge to clients participating in a child care program. Registration fees are set amounts established by the provider to cover costs not included in the weekly. This fee may also not exceed the fee charged to private-paying clients in the child care program. A Provider is not eligible for a registration fee for clients receiving less than half-time care. The ABC Program will pay registration fee to providers up to an established program maximum. The provider may require the client to pay the fee if the client has used up their allocation for registration fees.

Remittance Advice:

A document included with the provider's check. There are three different

types:

- 1) Paid Remittance Advice: indicates what clients and weeks were paid;
- 2) <u>Rejected Remittance Advice:</u> indicates which clients and weeks were not paid and the reason;
- 3) <u>Adjusted Remittance Advice:</u> indicates if funds were deducted from the provider's check, the amount, and the reason.

Service Codes:

Those codes assigned to identify the type of payment being made to the provider, i.e. CS for client services, GR for grant request, and RF for registration fees.

Service Cost:

The provider rate as reflected in the ABC Voucher System.

Service Unit:

One week of child care [Monday - Sunday]. A service unit may be for half-time, full-time, or less than half-time child care.

Service Voucher Log [SVL]:

A pre-printed payment request form used to process payments to providers for eligible clients.

South Carolina Department of Social Services [SCDSS]:

The administering state agency for the ABC Program and the agency responsible for administering the Welfare Reform, Family Independence Program.

Start Date:

The date services are authorized to begin by DSS or the ABC Program/Control Center staff.

Stop Date:

The last date of service authorization.

Week:

Monday through Sunday.