



Service Delivery & Efficiency Task Force Meeting

Monday, January 4, 2016

5:30 pm until close of business

1002 E. Palm Ave, ABC Conference Room

Tampa, FL 33605

Call: 1 (872) 240-3212

Access Code: 839-051-181

Early Learning Coalition of Hillsborough County Mission Statement

The mission of the Early Learning Coalition of Hillsborough County is to promote school and life success for all young children and their families through quality school readiness services and supports.

MEETING AGENDA

I. CALL TO ORDER

A. Quorum Verification

A. Patel, Chair

B. Approval of Minutes for November 2, 2015 Task Force Meeting (p. 2)

II. OLD BUSINESS

III. ACTION ITEMS

IV. DISCUSSION

A. Transition Discussion with Superintendent of Schools (p. 4)

V. INFORMATION ITEMS

VI. PUBLIC COMMENT

Individuals wishing to address the Early Learning Coalition Board of Directors must complete a Public Comment Request Card and submit it to the official recorder prior to the noticed start time of the meeting. Said comments will be limited to three (3) minutes per individual on first come, first serve basis, and only at such time as is identified on the official meeting agenda for public comment.

VII. ADJOURNMENT

A. Patel, Chair

UPCOMING MEETINGS

Service Delivery and Efficiency Task Force – Monday, January 4, 2016 @ 5:30 pm

Board of Directors Meeting – Monday, February 8, 2016 @ 5:30 pm

Executive/Finance Committee Meeting – Monday, March 7, 2016 @ 4:00 pm

MEETING MINUTES

Meeting Name:	Service Delivery and Efficiency Task Force Meeting	Date:	November 2, 2015
Facilitator:	Bobbi Davis	Time:	5:30 pm
Location:	8413 Laurel Fair Circle, Suite 100, Tampa FL 33610		
Board Members Present:	Joe McElroy, Patricia Spencer, Brian McEwen, Donna Bevis, Marie Caracciola, Mary Hancock, and Dr. Rahul Mehra.		
ELCHC Staff:	Bobbi Davis, Nancy Metsker, and Katherine Javier.		
Other Attendees:	Marina Harkness and Cynthia Rodriguez.		

KEY POINTS		
No.	TOPIC	HIGHLIGHTS
I.	CALL TO ORDER Noting that all Task Force members were present, Bobbi Davis called the meeting to order at 4:20 pm.	
II.	DISCUSSION The Service Delivery and Efficiency Task Force held a discussion regarding the transition of School Readiness (SR), Voluntary Prekindergarten (VPK), and Child Care Resource and Referral (CCR&R) services from the School District of Hillsborough County to the Coalition to improve internal functions and maximize the funds available for direct services to children and families. The Task Force was informed of a meeting held on October 14, 2015 between Coalition representatives Board Chair Aakash Patel, Coalition Executive Director Dave McGerald, and Coalition Director of Organization Development Bobbi Davis and School District representatives Superintendent Jeff Eakins, Assistant Superintendent for Academic Support and Federal Programs Tracye Brown, Director Early Childhood and HOST Programs, Marie Caracciola, Supervisor Sandy Show, and Administrator Marina Harkness. This meeting resulted in verbal agreement that the Coalition staff would bring contracting services for School Readiness (SR) and Voluntary Pre-Kindergarten (VPK) in house beginning January 1, 2016 and the CCR&R and related functions in-house no later than July 1, 2016. It was noted that the Task Force agreed to continue future meetings to continue to examine other functions within the SR and VPK contracts noting that additional efficiencies and service delivery improvements could be realized. The Task Force recommended the development of a transition plan to include the following: <ol style="list-style-type: none"> 1. Timeline for the transitions 2. Outline of cost savings 3. Changes to contracts with the School District of Hillsborough County 4. Impact on staff members 5. Impact on quality child care and efficiency 6. Elimination of duplicative costs 7. Suggestions for allocation of cost savings (i.e. provider reimbursement) 8. Potential pitfalls of this process 	

KEY POINTS		
No.	TOPIC	HIGHLIGHTS
	9. Information from other Coalitions who have undergone this process	The Task Force resolved to make a recommendation to the Board of Directors on December 14, 2015 to authorize staff to transfer contract functions from the School District of Hillsborough County to the Coalition and begin developing short and long-term strategies, plans, and options for directing additional funds into direct services for children and providers.
III.	PUBLIC COMMENT	Comments were made regarding the use of the potential cost savings to increase provider reimbursements.
IV.	ADJOURNMENT	Citing no further business, Task Force Chair McEwen adjourned the meeting at 5:12 pm.

ACTION PLAN			
No.	Action Item(s)	Owner	Target Date
1.	Present a recommendation to the Board of Directors on December 14, 2015.	B. McEwen	12/14/15
2.	Develop a transition plan.	Service Delivery & Efficiency Task Force and Coalition Staff	TBD

Read and Approved by: _____

Lynne T. Hildreth, Secretary

DATE _____

The School District of Hillsborough County & the Early Learning Coalition of Hillsborough County:
A Continued and Strengthened Partnership

Focus:

- Increase number of children who arrive ready for school.
- Increase number of children who graduate.
- In short, work together to create a “Cradle to Career” pipeline in Hillsborough County

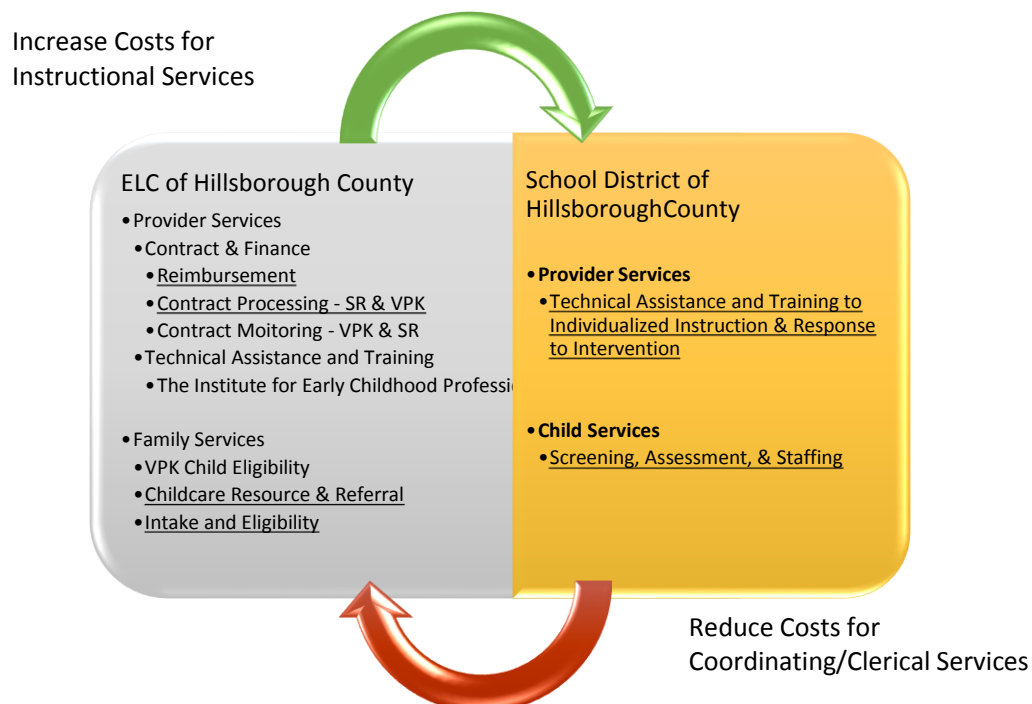
Issues:

- Contracts: 16% Accuracy Rate out of 744 contracts
- Complaints:
 - Timeliness of Response
 - Inconsistent Customer Service Levels
 - Accuracy of Information Given
 - Limited Appointment Options
 - Limited Assistance with Technology
- Current and Emerging Issues: May require a change to Staffing Model
 - Technologies
 - Waitlist Portal
 - Provider Portal & Brookes Enterprise
 - Northwest Regional Data Center
 - Apricot
 - Learning Management Systems
 - CCDF Regulations

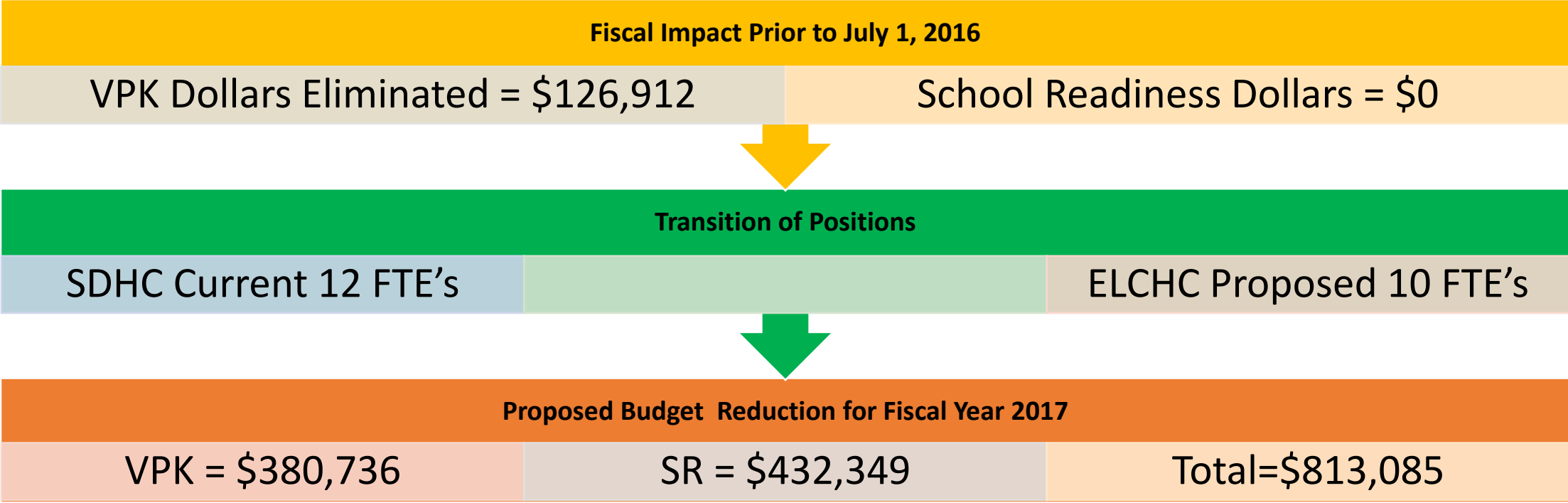
Purpose:

To collaborate on a phased in plan to transition coordinating services and provider reimbursement to the Early Learning Coalition of Hillsborough County while expanding Instructional Services with the School District of Hillsborough County to enhance child outcomes and through access to early intervention services and other supports. This allows both agencies to focus on mission essential services.

Phased in Recommendation:



Transition of Functions



Note:

Early Learning Coalition of Hillsborough County:

FY2016

Meeting with the Superintendent

SUMMARY

Taskforce Task

Motion was tabled

- Transition SR & VPK contracting , VPK enrollment services and Childcare Resource and Referral
 - Contracting SR & VPK, VPK enrollment services by March 1, 2016
 - Child Care Resource and Referral by July 1, 2016

Revisit context for Taskforce recommendation

- Exhibit A

Discussion

Why modify our current service delivery model?

Provider Services - Contracts

- Error Rate Concerns
 - Exhibit B
 - Exhibit C FY 15 Contracting Process
 - Exhibit D FY 16 Contracting Process
 - Exhibit E

Ultimately the Coalition is accountable to the Office of Early Learning for any of the subcontractors errors. Any findings result in disallowances, these could result in repayments.

Family Services - CCR&R, Waitlist Management

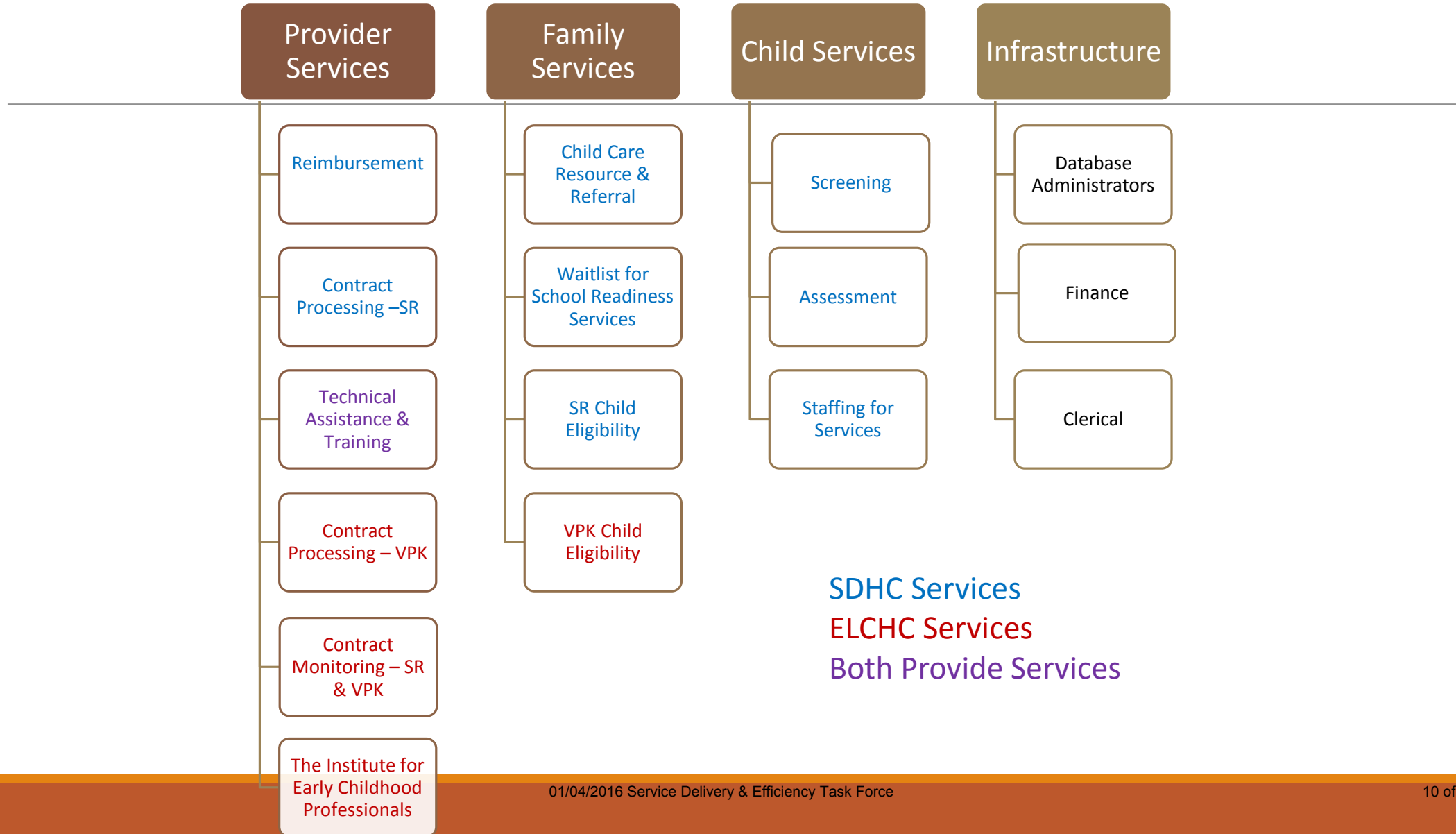
- Customer Service Complaints
 - Timeliness of Response
 - Inconsiderate to Improper Service Levels
 - Accuracy of Information Given
 - Limited Appointment Options
 - No Assistance with Technology
- Emerging Technologies that streamline services

Enhance the Coalitions Brand Awareness

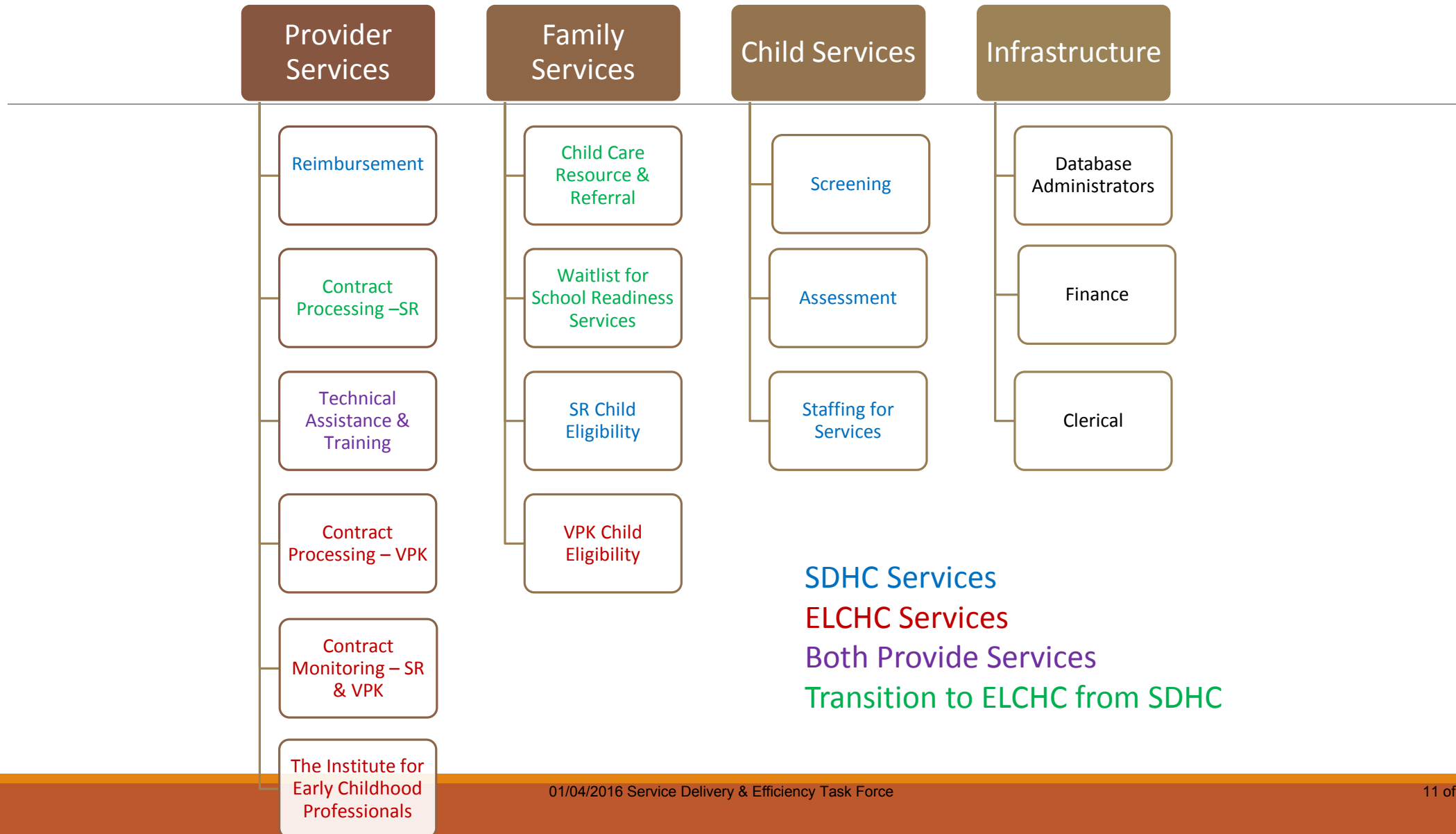
Expand comprehensive consumer education to **all** families about how to identify, choose, and enroll their children in high quality early care and education settings

The ELC of Hillsborough has the ability to adjust their service model to be more nimble in meeting the needs of the families which we serve

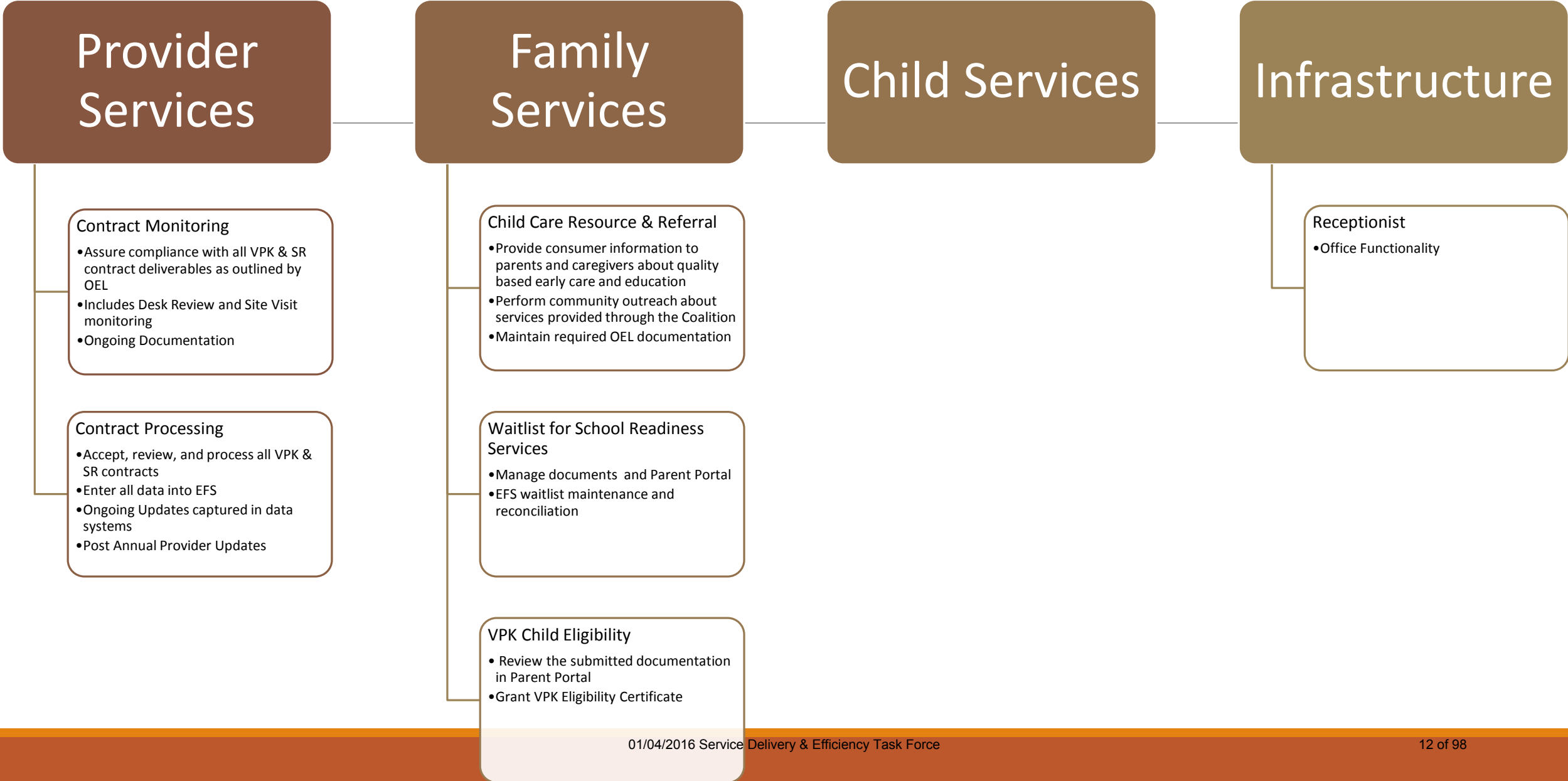
Current Service Model



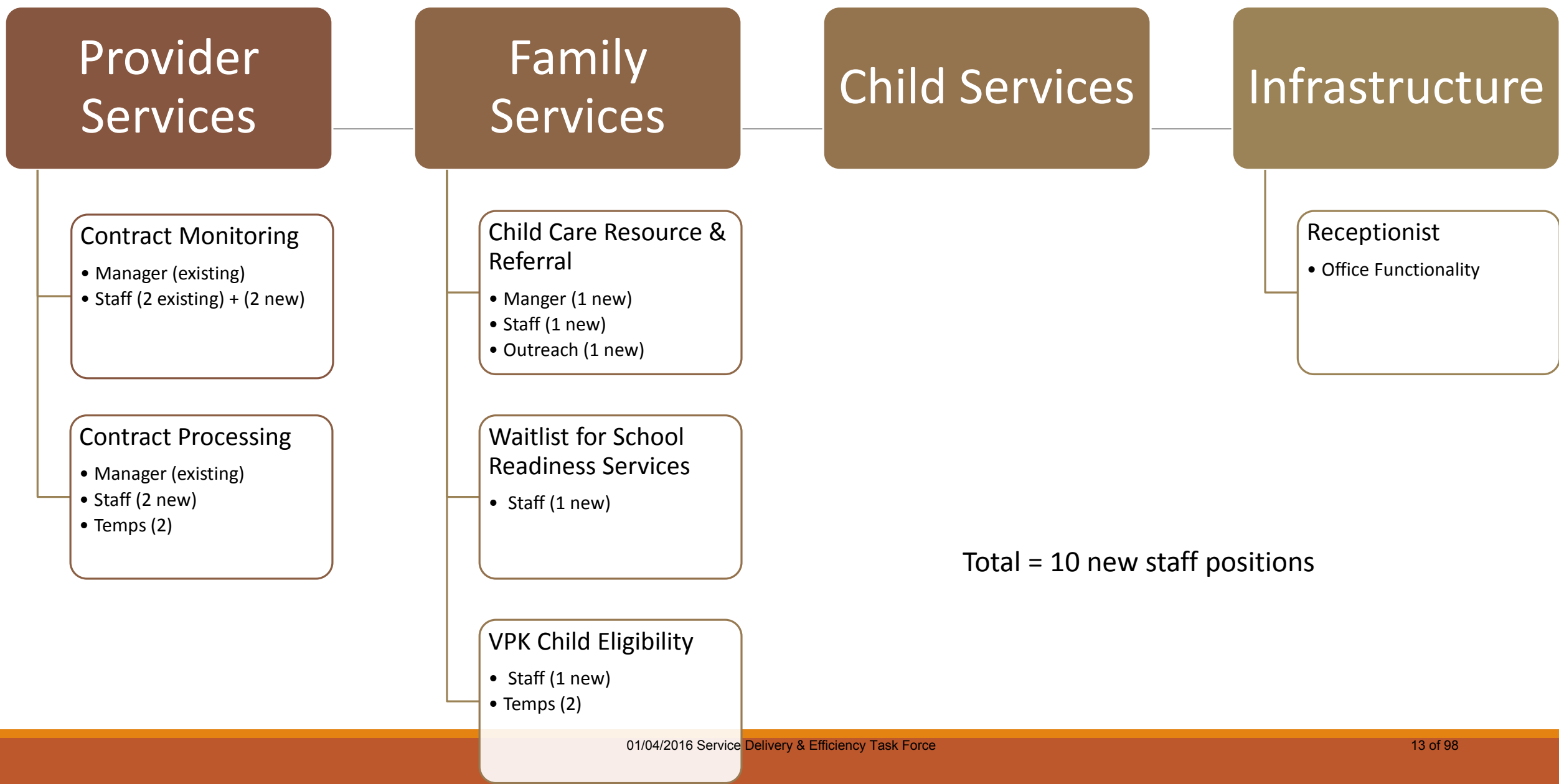
Proposed Service Model



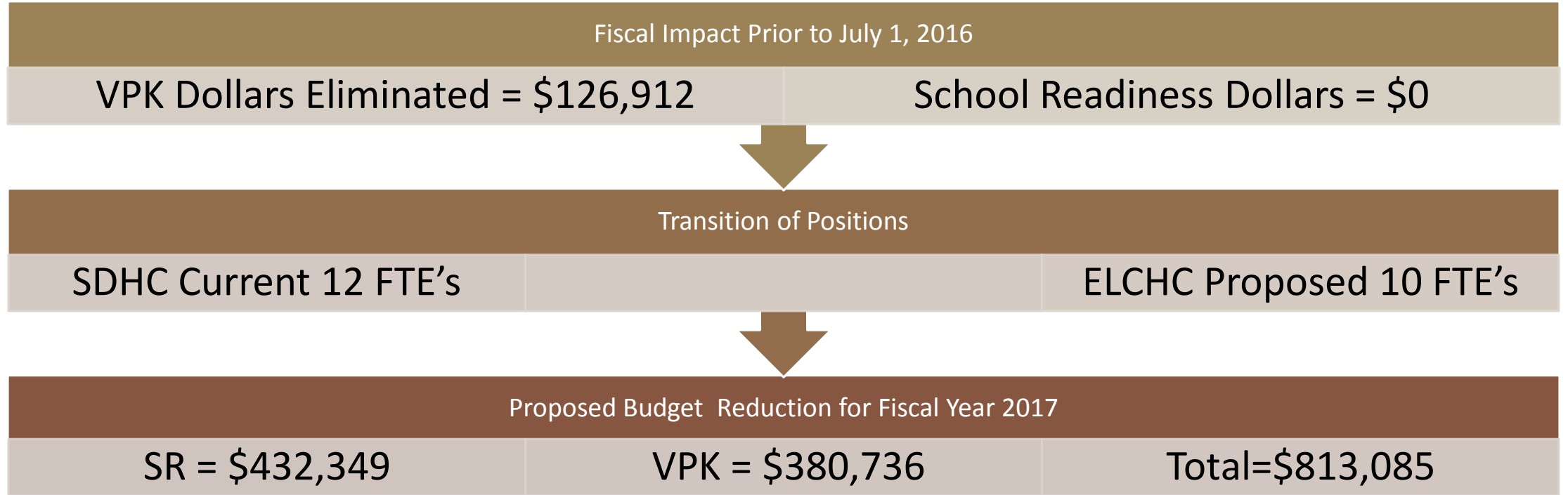
Specific Service Model Proposed Changes



Staffing Model

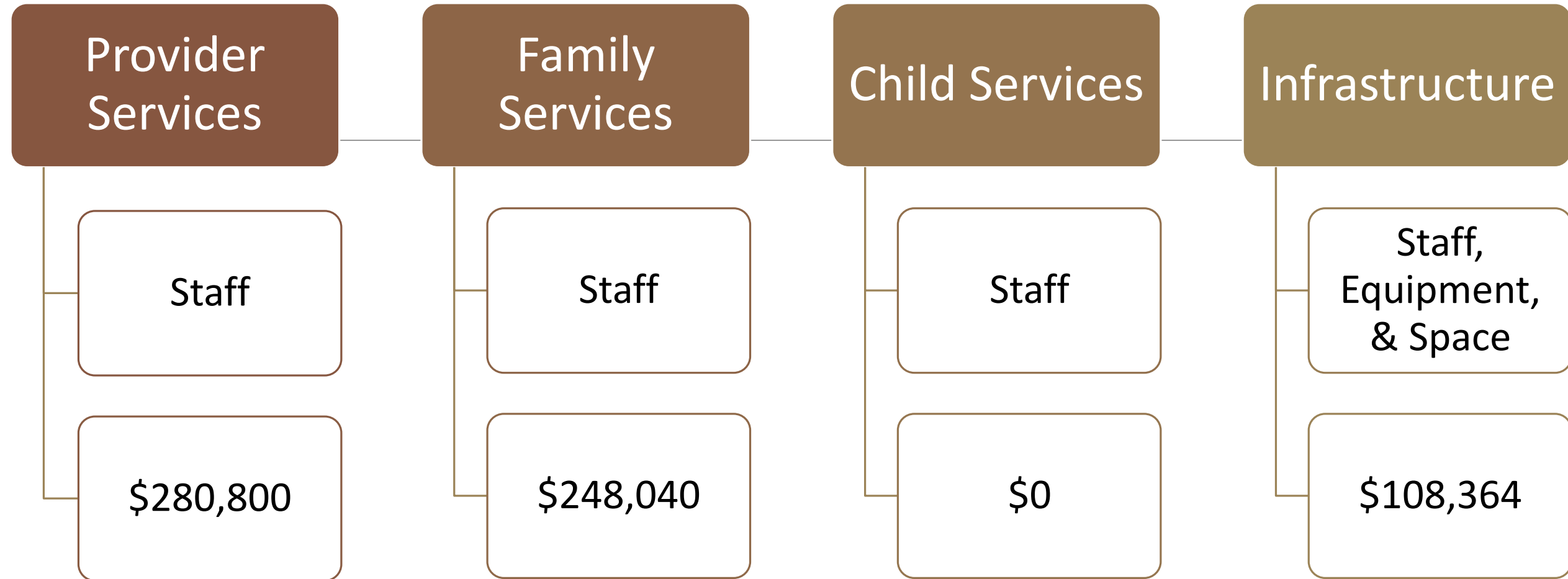


Transition of Functions



Note:

Proposed ELCHC Budget FY 2017= Total \$637,204



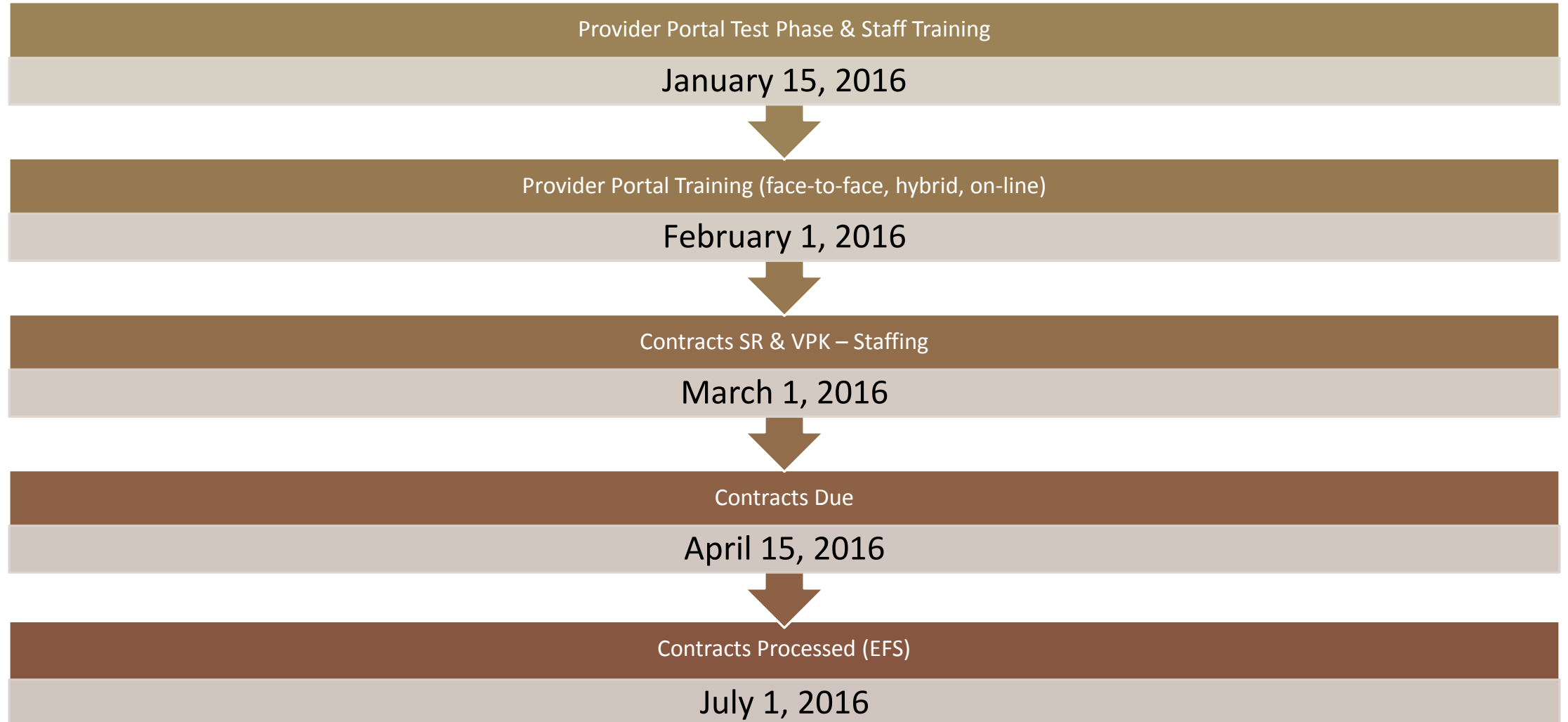
Notes: Cost for FY 2016= \$205,087 (Includes staff, equipment, & space)

This is an estimate that includes SR & VPK dollars

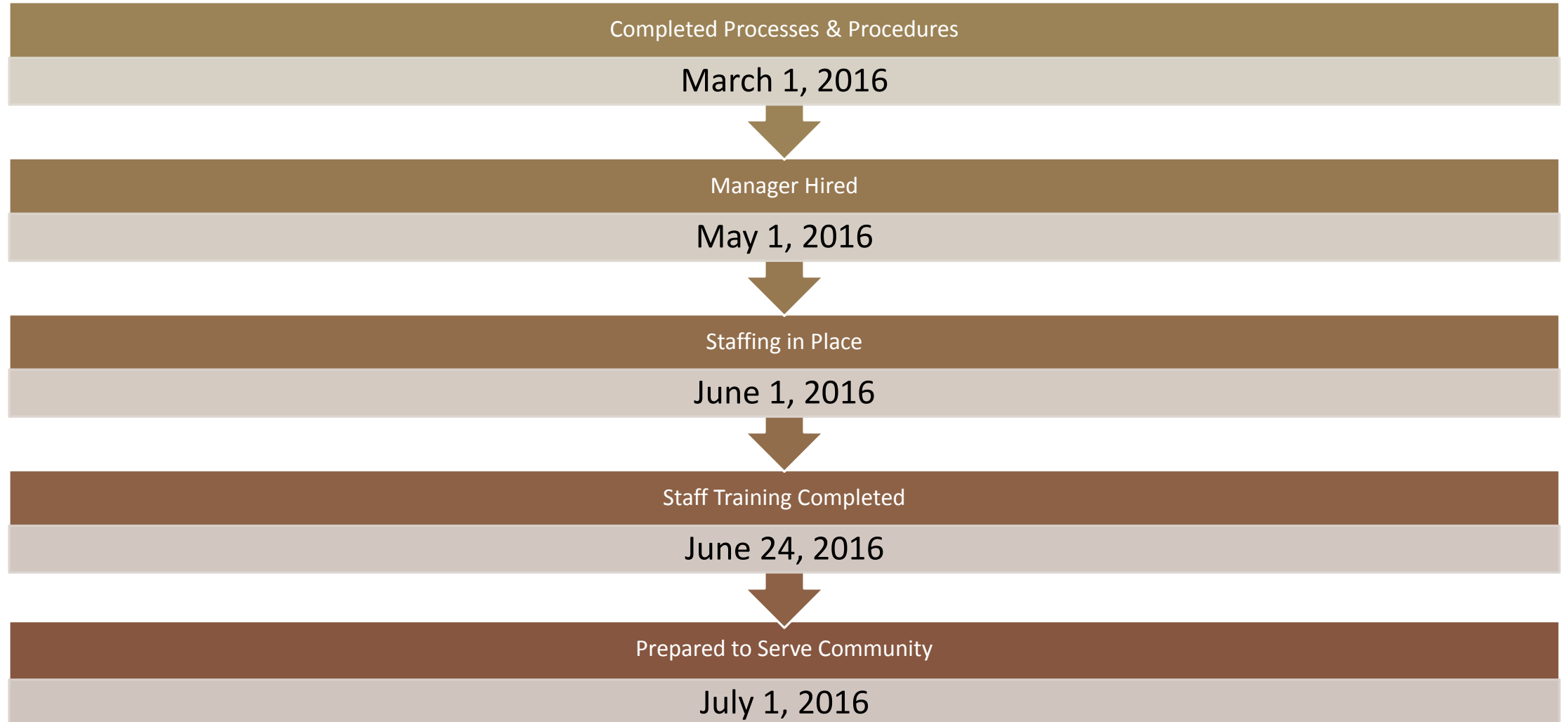
There is a net balance of \$175,881 by transition of services in house

Exhibit F

ELCHC Contracts Timeline



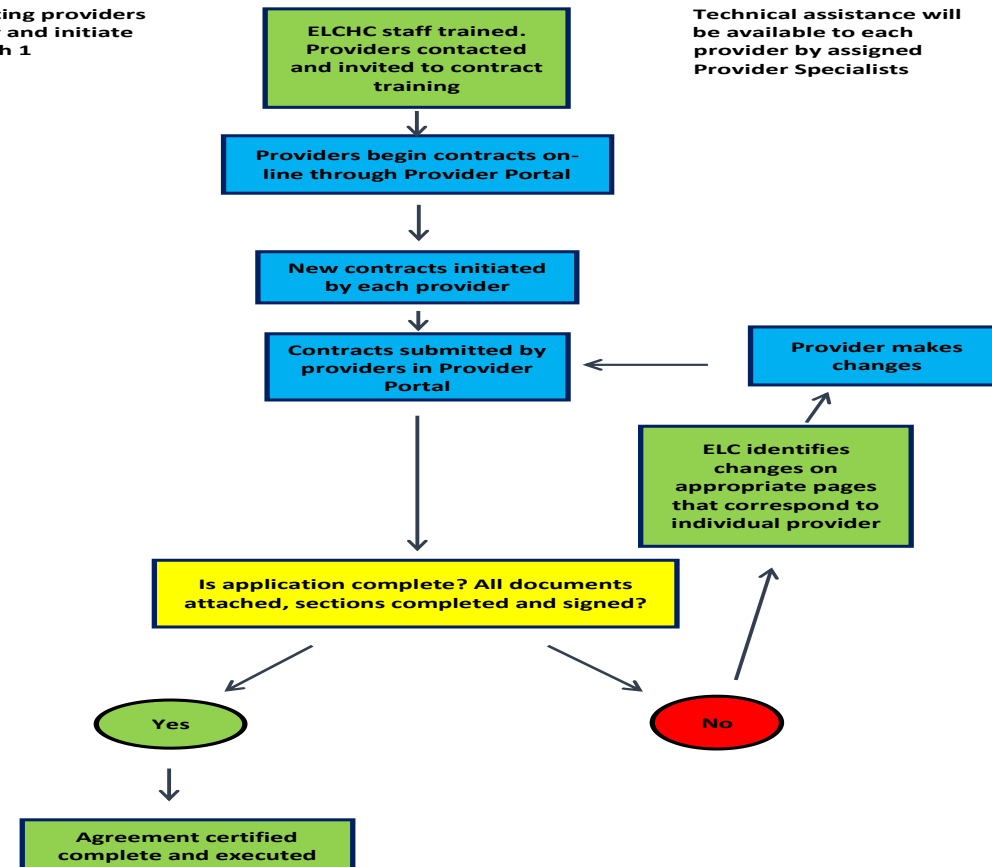
ELCHC CCR&R Timeline



Assurance of Services Exhibit G

STEPS & DECISION TREE FOR CONTRACTING Note: Contract template information entered by ELCH staff

Begin contacting providers
mid-February and initiate
process March 1



Technical assistance will
be available to each
provider by assigned
Provider Specialists

Questions & Discussions

ISSUE: FY 2015-16 Provider Contracts

BACKGROUND:

Each year a new contract must be executed with all School Readiness providers (354 center-based and 369 family child care homes). This year's contracts (FY 2015-16) were completed by staff from the School District as part of their contract with ELCHC. This re-contracting process has been the responsibility of the School District throughout our relationship. The new FY 2015-16 contract was lengthier than those in previous years and staff from ELCHC provided the School District with the necessary instructions to complete the task.

In a recent and continuing review of the center-based and family child care contracts, ELCHC staff has discovered that the vast majority of these have noticeable concerns.

The center-based programs issues are as follows:

- Of the total 354 contracts, 39 (11%) of them had no noticeable concerns; approximately nine (9) out of every 10 contracts have errors.
- 83 of the 354 (23%) did not have documentation regarding their official registration as a legal operating entity or have incorrect information.
- 162 of the 354 (45%) had the wrong rate listed for three year olds.
- 94 of the 354 (26%) had some other type of rate concern as well. These include wrong rates listed, Gold Seal listed for programs that are not Gold Seal, FCCH rate sheets used instead of Center rates, and providers approved rate being higher than their private pay rate.
- At least nine providers who either listed rates for ages they were not licensed to care for on their rates sheet or did not list a rate for a specific age group but had children of that age group enrolled.
- Exhibits not being completed correctly such as the wrong provider type being checked or insurance being marked in the wrong place, no signature authority giving the person who signed the contract authorization to do so, all age groups not having curriculum listed or unapproved curriculum being listed.

The family child care home review is nearing completion and these same issues are apparent. At the point this memo was written, the error rate is at least 85%.

The ELCHC staff and School District staff met on September 22, 2015 and agreed upon a timeframe for the issues to be resolved (see attached letter).

RECOMMENDATION:

Recognizing that our Coalition must be accountable to OEL as well as the children and families of Hillsborough County these issues highlight the need to look at opportunities to improve internal functions, utilize technology in seamless processes, and maximize the funds available for direct services to children and families. ELCHC staff will work with a Board Task force comprised to develop a plan to include (but not limited to) the following:

- Transfer contract functions to ELCHC;

- Examine opportunities to integrate and streamline processes; and
- Identify long-term cost saving strategies that will increase funds for high quality direct services and supports for children.

Service Delivery and Efficiency Task Force
November 2, 2015

Purpose (from 10-13-15 Board Meeting)

Recognizing that our Coalition must be accountable to OEL as well as the children and families of Hillsborough County these issues highlight the need to look at opportunities to improve internal functions, utilize technology in seamless processes, and maximize the funds available for direct services to children and families. ELCHC staff will work with a Board Task force to develop a plan to include (but not limited to) the following:

- Transfer contracting and Child Care Resource and Referral (CCR&R) functions to ELCHC;
- Examine opportunities to integrate and streamline processes; and
- Identify long-term cost saving strategies that will increase funds for high quality direct services and supports for children.

Background Information

ELCHC Mission: The mission of the Early Learning Coalition of Hillsborough County (ELCHC) is to promote school and life success for all young children and their families through quality school readiness services and supports.

Key Funding Sources

Florida Department of Education, Office of Early Learning (OEL)	
School Readiness (SR)	\$43,151,425
Voluntary Pre-Kindergarten (VPK)	\$28,798,839
Children's Board of Hillsborough County	
Quality Counts for Kids	\$ 1,834,107
School Readiness Match	\$ 1,723,239
Hillsborough County	\$ 478,000
United Way	\$ 107,900
Other Community Programs	\$ 38,000

Contracts for Services on behalf of ELCHC

Hillsborough County Public Schools	
School Readiness	\$39,677,520
VPK	\$28,330,442
Hillsborough County Child Care Licensing	\$ 1,058,904
Early Childhood Council (Inclusion services)	\$ 71,500
Early Childhood Council (subcontract under CBHC)*	\$ 218,727
Champions for Children (subcontract under CBHC)*	\$ 178,008
USF (subcontract under CBHC)*	\$ 340,995

* included as revision from original presentation

Hillsborough County Public Schools contract summary

In 1999, the Florida Legislature passed the School Readiness Act (s.411.01, F.S.), which consolidated an array of individual early childhood education programs into one integrated program. The Act created the Partnership for School Readiness to coordinate local services administered by single-county or multi-county School Readiness Coalitions, which were funded through a blend of state and federal funds. The School Readiness Act required Coalitions to provide “system support services, including a central agency, child care resource and referral, eligibility services, training of providers, and parent support and involvement. “ By 2010, the Act had been amended numerous times and no longer required coalitions to include a central agency in their service delivery model.

In 2002, voters passed a state constitutional amendment requiring access for all of Florida’s 4-year-olds that resulted in the Florida Voluntary Prekindergarten (VPK) Program. The program began operating across the State in 2005. During the 2004 session, the Legislature abolished the Partnership for School Readiness and directed the Agency for Workforce Innovation (AWI) to govern state-level policy and provide statewide coordination and administration of the School Readiness and VPK Programs. Effective 2011, statewide coordination and oversight of School Readiness and VPK programs was transferred to Florida’s Office of Early Learning (OEL).

Locally, the Early Learning Coalition of Hillsborough County (ELCHC) is responsible for the design, implementation and management of all required services established in 411.01 F.S, including but not limited to the following: child care resource and referral, intake and eligibility determination, provider payment processing, monitoring of provider compliance with programs standards and contractual obligations, and provider training and technical assistance for both the School Readiness and Voluntary Prekindergarten Programs. ELCHC is currently contracting the vast majority of these functions to Hillsborough County Public Schools. Prior to the existence of Coalitions, the Central Agency in each county (or counties) administered the School Readiness (often called Subsidized Child Care) funds. In Hillsborough County, the School District served as the Central Agency.

On October 14, 2015 in a meeting with Superintendent Jeff Eakins, it was agreed that ELCHC staff would assume the contracting functions for both SR and VPK beginning January 1, 2016 and ELCHC staff would assume the child care resource and referral functions beginning July 1, 2016. It is important to note that while school readiness funds generally serve moderate to low income families, both child care resource and referral (which includes comprehensive consumer education) and VPK is open to all families. ELCHC staff will amend the current School District contract to reflect this change.

Hillsborough County Child Care Licensing contract summary

On October 1, 2007, ELCHC initiated a contractual relationship with Hillsborough County Child Care Licensing for quality services (licensing monitoring and improvement). This was at a critical time in the County’s recent economic downturn and many services that benefitted the community were in danger of, or were actually cut back or even eliminated. In order to assure that the County had adequate funds for licensing inspection, the staff and Board leadership at

ELCHC initiated the first contract for \$221,362. This amount represented about 25% of the Child Care Licensing's budget. Over time ELC has grown its funding contribution to this budget and today, ELCHC funds nearly 80% of child care licensing, with the exception of some of the staff's use of County fleet vehicles.

Early Childhood Council (ECC) contract summary

The ECC provides Inclusion services (Care Options) for SR & VPK children in an agreement that began July 1, 2012. The contracted amount is \$71,500. These services compliment those provided by the School District.

ELCHC Current Status

Over the past 10 years, the Coalition has seen its School Readiness funds from the Office of Early Learning (OEL) decline, from a high of \$48M+ in 2005, to its current level of \$42,151,425 for FY 2015-2016. In addition, new requirements have been enacted that require Coalitions to dedicate a percentage of funding to enhance quality. The result has been fewer dollars that can be used to serve children. This trend is not likely to change dramatically in light of state and federal economic policies. Our options to increase the funds that ELCHC can invest in direct services to children, their families, and child care providers to maximize the funding we currently receive and to draw in new sources of revenue. In order to accomplish the latter (attract and receive new funds), experience from others tells us that investors/funders look an organization's branding and outcomes for their work. Generally, those successful organizations can demonstrate that their work is accomplished in a high quality, cost containment manner – once again that points to in-house expertise and efficiency.

It is no surprise that as we looked across the state at other Coalitions that many have taken or are taking a similar approach. The Coalitions are bringing services in house and consequently, through careful use of resources, realizing significant savings that can be re-invested into direct services for children and families. These same Coalitions are also attracting new funders and actively employing fund development techniques to add additional high quality services for children and families.

ELCHC's contracts that can be brought in house include the School District School Readiness/VPK and possibly Hillsborough County Child Care Licensing. While both contracts have been beneficial to the Coalition and community, the return on the investment for both contracts must increase. Additionally, while our work must meet (and hopefully exceed) expectations from our funders, the foundation of our work must directly link to our clients – children, their families, and child care providers. We need to reinforce a culture with our current staff and incoming staff that professionalism and superior customer service are essential elements of our work.

With respect to the School Readiness/VPK contract, cursory examination indicates savings can be realized by eliminating duplicative positions and accompanying expenses at the Administrative level; eliminating indirect cost charged; reductions and/or elimination of full-time positions and incorporating use of part-time positions and cross-trained staff; elimination of overtime and seasonal employment; utilization of low/no cost space; and enhanced use of available technology. Coalitions that have employed similar methodology have realized annual savings of \$1,000,000 or more. For every \$1,000,000 saved, our Coalition could serve at least 200 additional children for an entire year.

The Hillsborough County Child Care Licensing contract presents similar opportunities for improvement although on a smaller scale. An added benefit in this case would be the purposeful integration of quality standards coaching during mandatory visits to all licensed child care providers.

Next Steps

As already mentioned, the School District has agreed that ELCHC will assume the contracting and monitoring functions for School Readiness and VPK at the end of the calendar year and will then add the Child Care Resource and Referral functions beginning July 1, 2016. ELCHC staff is developing a detailed implementation plan and timeline for incorporating these agreed upon contracted components of the School Readiness/VPK contracts into internal operations. The Task Force would recommend approval for ELCHC staff to proceed to identify similar streamlining of processes and efficiencies through internal processes to the full board at the December 14, 2015 Board meeting. Interested Task Force members would be welcome to continue involvement in this process if schedules permit. This resulting plan would be shared with the Board for feedback and components would be implemented.

Summary of Error Rate Concerns

The ELCHC's contracted provider, the School District of Hillsborough County submitted all 2015-2016 contracts for School Readiness Providers to the Coalition by 6/30/2015.

ELCHC staff conducted a thorough audit of these contracts to ensure Office of Early Learning requirements were met. During the review, which took place between August and early October, it was discovered there were numerous discrepancies within the contracts and with required documentation. These discrepancies included approved rates that were inaccurate, lack of insurance, Gold Seal status errors, rates approved for care levels that did not match licenses, name discrepancies and contracts that had been changed by School District staff with correction fluid and red ink.

The initial review found:

Initial contract review- September- October 2015	Contracts were Correct	Contracts Returned for Errors	Total Reviewed
Centers	39	315	354
FCCH's	86	304	390
Totals	125	619	744

There were 619 contracts with errors. This is 16% accuracy rate. The staff of the ELCHC provided a detailed review of missing documentation and coding errors to the contracted agency, the School District of Hillsborough County. Contracts were remitted to the agency for necessary corrections.

As of December 18, 2015, not all contracts have been submitted to ELCHC with the required corrections. An established corrective action was issued by the ELCHC, to the school district with three due dates, none were met. Of the 744 contracts that were to be executed since July 1, 2015, 680 have been processed accurately.

COMPARISON OF SR CONTRACTING PROCESSES FOR FY-15 AND FY-16.

The following table identifies those requirements that were part of the FY-15 SR Contracting Process and the requirements of the current (FY-16) State SR Contracting process. It is worth noting the old process included an Application and an Agreement that was completed by the provider, the new process only includes the State Contract. In both cases you will see there is little difference in the data collected.

The reference numbers below can be found on the attached pages of the FY-15 and FY-16 required contracting documents.

Ref. #	Description of Contract Approval Process	Required in FY-15 SR Agreements	Required in FY-16 State SR Contracts
1.	Verify accuracy of legal name of contracting entity	YES	YES
2.	Verify SS# or EIN number is provided	YES	YES
3.	Enter term of contract	NO	YES
4.	Verify Liability Insurance requirements	YES	YES
5.	Verify Provider Type	YES	YES
6.	Verify Approved Curriculum	YES	YES
8.	Verify Holiday Schedule	NO	YES
9.	Verify Provider's Signature	YES	YES
10.	Verify Additional Signatory Documentation if authorized.	YES	YES
11.	Verify Provider Private Pay Rates	YES	YES
12.	Verify Gold Seal status & documentation if applicable	YES	YES
13.	Verify Certificate of License, Exemption/Accred.	YES	YES
14.	Verification of legal entity Information **	YES	YES
15.	Verify #11 doesn't exceed Board approved reimbursement rates	YES	YES
16.	Verify Provider Operational Hours	YES	YES
17.	Verify Approved Provider Reimbursement Rates	YES	YES
18.	Verify Licensing History	YES	NO
19.	Verify Character Development Program	YES but *	YES

* Process failed to require documentation

** The FY-15 SR agreements required providers to indicate their legal name, fictitious name, and Not-for-Profit status and affiliation. Currently, the contract requires a provider to download a copy of the Sunbiz registration page and submit it with their contract application. The purpose of this change was to insure that the owner or authorized signatory for the entity listed in Sunbiz was the same person executing the contract. So the work associated with this change would requires one to make sure the person who owns the company is the same person executing the contract OR they verify that whoever executes the contract is an authorized signatory. Utilizing the Sunbiz printout speeds up the process.

FY-15 School Readiness Required Documents



Hillsborough County School Readiness Program Provider Agreement 2014-2015

The Early Learning Coalition of Hillsborough County (Coalition) is authorized under Florida Statute s. 1002.252 to establish policies, procedures and standards for the delivery of the School Readiness Program. These requirements, established in accordance with 45 C.F.R. Parts 98 and 99, s.1002 Part VI F.S., Rule 6M-4 and 6M-9.300 F.A.C. apply to all centers, family child care homes and school age providers who receive School Readiness Program funds.

The Owner/Operator of #1. (Provider) agrees to follow the requirements established by the Early Learning Coalition of Hillsborough County for the delivery of the School Readiness Program.

1. The Provider will operate legally as a child care facility according to state and local law. The Provider must comply with the licensing requirements for child care programs as specified in the current Hillsborough County Ordinance Minimum Standards for Child Care Facilities or the Family Child Care Home. The Provider understands that the Coalition will not pay for care of children in unlicensed programs unless the Provider is exempt from licensure under s. 402.305 F.S.
2. The Provider will operate within capacity, age range, hours of operation, adult/child ratio and any other standards specified in the current Hillsborough County Ordinance Minimum Standards for Child Care Facilities or Family Child Care Home. The Provider will not receive payment for any School Readiness child when the Provider is not in compliance with requirements related to capacity, age range and hours of operations. Any classroom found to be in adult/child ratio noncompliance will not receive payment for any school readiness children enrolled in that classroom for the days that non-compliance occurs.
3. Provider must obtain a Child Care Certificate or Pre-Authorization Child Care Certificate prior to enrolling a School Readiness child. Acceptance without approved Child Care Certificate or confirmation of pre-authorization will result in non-reimbursement for child care. Provider may not limit total number of days/hours approved and noted on the Child Care Certificate to meet ratio/capacity requirements.
4. The Provider will promote positive relationships among all children and adults to encourage each child's sense of individual worth and to foster each child's ability to contribute as a responsible community member. At a minimum the provider shall:
 - a. Develop and implement a child discipline policy that demonstrates the use of positive, realistic and developmentally appropriate guidance/discipline techniques. The program is prohibited from using corporal punishment (i.e. spanking) or any humiliating or frightening discipline techniques or any techniques associated with food, rest, toileting or isolation.
 - b. Distribute a copy of the child discipline policy to 100% of the children's parents/guardians and staff.
5. The Provider will maintain a safe and healthy environment that provides appropriate and well-maintained indoor and outdoor space. At a minimum, the Provider agrees to meet the health and safety practices described in the current Hillsborough County Ordinance Minimum Standards for Child Care Facilities or Family Child Care Home to ensure a safe and healthful environment.
6. The Provider will promote children's healthy development and protect children and staff from illness and injury. At a minimum, the Provider will meet the practices described in the current Hillsborough County Ordinance Minimum Standards for Child Care Facilities or Family Child Care Home that support children's healthy development and that safeguard children and staff from injury and/or illness.
7. The Provider will implement a state-approved developmentally appropriate curriculum and character development program for all children ages birth to 5 years old. (This does not apply to school-age only programs.)
8. The Provider will screen all School Readiness children 6 months to kindergarten entry using the Ages and Stages Questionnaire 3 (ASQ) according to the procedures adopted by the Coalition.
9. The Provider will allow access to the Coalition or its contracted service providers to assess compliance with program standards.

10. The Provider will comply with the personnel training and credentialing requirements established in s. 402.305. Additionally, the provider must provide instruction and activities to enhance age-appropriate progress of each child in attaining the child development standards adopted in Florida Statute 1002.82 (2)(j). The provider must also provide basic health and safety of its premises and facilities as identified in s.402.305, s.402.3131, or 402.313. Public schools must comply with s.402.3025 or s.1003.22. A license exempt provider shall annually complete the health and safety checklist and post it prominently on its premises in plain sight of visitors and parents, and submit it to the local coalition.
11. The Provider will comply with all statutory and administrative requirements for the protection of children, specifically reporting suspected child abuse or neglect or other reportable event under Chapter 39.201 F.S. by calling the ABUSE Hotline at 1-800-962-2873 via the Child Abuse Registry.
12. The Provider will report any unusual incidents to the Coalition and the Hillsborough County Public Schools, School Readiness Program within 24 hours of the incident. An unusual incident is defined as any serious event involving the health and safety of children and/or any event that is likely to place the Provider or the Coalition at risk or cause negative public reaction. Examples of unusual incidents include, but are not limited to: accusations of abuse or neglect against the Provider or Provider's staff; serious accidents involving children or staff while at the Provider's facility; a child leaving the premises without staff knowledge; or any other events that may result in negative publicity for the Provider or Coalition.
13. The Provider will submit Enrollment/Attendance Certification form(s) by the 3rd of the month for School Readiness children served during the previous month to the Coalition's contractor. The original Monthly Sign In and Out Sheet for each child must be retained by the provider for a period of five (5) years. Failure to retain these records will result in a disallowance and will require the provider to return payments received for missing records. Parent and provider signatures shall be affixed to the bottom of the page only at the end of the month to verify the accuracy of the child's attendance. It is against the law to submit false information in order to obtain reimbursement for child care.
14. The Provider understands that reimbursement for services is forfeited if Enrollment/Attendance Certification forms are not submitted within forty-five (45) days after the end of the month the services are performed.
15. The Provider understands that the Enrollment/Attendance Certification forms for a final month of service must be received by the Coalition's contractor no later than twenty-five (25) days after services are rendered or Provider's right to reimbursement is forfeited. The Coalition's contractor may not honor any request submitted after the aforesaid time periods.
16. The Provider understands that the Coalition will not reimburse the Provider at a rate that exceeds the rate paid by private-pay clients.
17. The Provider understands that School Readiness funding only allows for reimbursement for children under the age of 13 unless approved for services for the special needs teen category.
18. The Provider will review the reimbursement information provided by the Coalition's contractor each month. The Provider agrees to report any discrepancy, overpayment, or underpayment in writing within forty-five (45) days from the date the reimbursement was received. ANY underpayments reported after forty-five (45) days may not be honored.
19. The Provider must return any overpayments. The amount of the overpayment will be deducted by the Coalition's contractor from the reimbursement following the discovery of the overpayment. Should no further reimbursements be due to Provider, the funds must be returned to the Coalition's contractor within ten (10) business days following notification.
20. The Provider understands that Hillsborough County Public Schools, School Readiness Program must be notified in writing ten (10) days or more before any change of location, ownership or provider-initiated closure. Failure to provide this information will result in forfeiture of reimbursement for the month the change occurred, and provider may lose School Readiness status and funding. Provider will be allowed to reapply during the next scheduled open application period. Parents of children in care must also be given a 10-day notice.
21. The Provider must abide by provisions of the Rilya Wilson Act (Florida Statutes, 39.604) and School Readiness OEL Rule (6M-4.500, 2.d.). The Provider must immediately contact Eckerd at **(813) 225-1105, ext. 1270** and/or email: Lbabooram@EckerdCBC-C13.org, AND e-mail the Coalition at tmatos@elchc.org to report absences of children in the Protective Services Program. Any unexcused absence must be reported by the end of the business day following the unexcused absence, or report seven (7) consecutive excused absences by the end of the seventh consecutive absence. Children enrolled under protective services are identified on the Child Care Certificate as Funding BG1. The provider understands that School Readiness services cannot be terminated for children covered by the Rilya Wilson Act without the consent of Eckerd.

22. The Provider will submit a Child Care Resource and Referral update to the Hillsborough County Public Schools, School Readiness Program. This information is used to inform parents/guardians about services the Provider offers. The annual update is mandated by the Office of Early Learning, and failure to submit the update by the required deadline date will result in loss of eligibility to participate in the School Readiness Program for the following year.
23. The Provider will maintain all classroom rosters, financial, enrollment and attendance records for children served in the School Readiness Program for five (5) years or until any audits are completed by local, state and/or federal officials. The Provider will not destroy any documents involved in an audit that relate to the School Readiness Program until authorized by the Coalition.
24. The Provider understands that the Coalition, its subcontractors, and the Office of Early Learning have the right to examine any documents and records that contain information about the Provider's School Readiness Program services.
25. The Provider understands that the Coalition and/or the Office of Early Learning may conduct or arrange for monitoring of the Provider's program. These monitoring procedures may include, but not be limited to, on-site visits by the Coalition staff, contracted consultants, staff from the Coalition's contracted agencies including but not limited to the School District and Hillsborough County Child Care Licensing. The Provider's refusal to cooperate with any monitoring procedures will result in the suspension of payments for children receiving financial assistance through the School Readiness Program.
26. The Provider will take corrective action to correct identified deficiencies, or make improvements identified during any monitoring activities. The Coalition may suspend payments for School Readiness children enrolled with the Provider if the Provider fails to comply with a corrective action plan.
27. The Provider understands that children eligible for the School Readiness Program will not be referred to the Provider's program if there are concerns about repeated instances of noncompliance with the Hillsborough County Child Care Licensing Program and/or other regulatory agencies.
28. The Provider understands that the program's eligibility to receive School Readiness funds is based on compliance with health and safety regulations. The provider will not be eligible to receive payments from the Coalition for twelve (12) months following receipt of a second Class I Licensing violation within any 12 month period. This includes any Class I violations received prior to the execution of this contract. Similarly, if the provider should receive two Class II and one Class I violation, or three Class II violations of a similar nature on multiple occasions within a 12 month period they will be ineligible to receive any school readiness payments. Violations prior to the execution of this contract are included.
29. Program providers must maintain general liability insurance coverage that provides a minimum of \$100,000 of coverage per occurrence and a minimum of \$300,000 general aggregate coverage including coverage for transportation of children if school readiness program children are transported by the provider. The Provider must add the Coalition as a named certificate holder AND as an additional insured. The policy must remain in force for the entire period of the provider contract. The Provider is also required to obtain and maintain any required workmen's compensation insurance, reemployment assistance or unemployment compensation coverage.
30. If a school readiness program provider fails or refuses to comply with this part or any contractual obligation of the statewide provider contract under s. 1002.82(2)(m), the coalition may revoke the provider's eligibility to deliver the school readiness program or receive state or federal funds under this chapter for a period of five (5) years.
31. The Provider understands that the Coalition reserves the right to notify parents/guardians of School Readiness children served in the Provider's program if the Provider does not comply with the following:
 - a. The requirements of the School Readiness Provider Agreement;
 - b. Any policies, procedures and/or program standards adopted by the Coalition for the delivery of the School Readiness Program;
 - c. Any actions taken by the Hillsborough County Child Care Licensing Program or other regulatory agency; and
 - d. The Provider's failure to take corrective action to resolve significant deficiencies.
32. The Provider understands that falsifying records to obtain School Readiness Program funds is a criminal offense. Any suspected fraudulent activity will be referred to the Florida Division of Financial Services for investigation. The Early Learning Coalition is authorized by the State of Florida to suspend or terminate a provider when it has reasonable cause to believe that the provider has committed fraud. S. 1002.91(4)

33. The Provider asserts that neither the Provider, nor any partners or employees active in the management of the child care facility, has been charged with and convicted of a public entity crime within the past 36 months.
34. The Provider is fully liable for the actions of its agents, employees, partners, contractors and subcontractors and shall indemnify, defend and hold harmless the Coalition, the Office of Early Learning and their officers, agents, employees, contractors and subcontractors from suits, actions, damages and costs of every name and description, including reasonable attorneys' fees, arising from or relating to personal injury and damage to real or personal tangible property to the extent caused by the Provider, its agents, employees, partners, contractors or subcontractors. If the Provider is a county government, public school or school district, this paragraph is limited to the extent required by section 768.28, Florida Statutes.
35. The Provider understands that the Coalition has the right to terminate the Agreement, and thereby rescind Provider's School Readiness status and funding, at any time for Cause. "Cause" is defined as the failure to comply with the terms of the Agreement or policies, laws, rules or regulations referenced therein, or the violation of any laws, rules or regulations regarding School Readiness promulgated by the State of Florida.
36. **Pending Rule Making:** The Office of Early Learning (OEL) has issued a public notice of proposed administrative rule that would mandate the use, by all early learning coalitions, of a standard statewide form that must be used when contracting with School Readiness Program providers. To the extent that any such OEL rule becomes final or OEL takes any other action which results in a mandate upon early learning coalitions to use a statewide form when contracting with School Readiness Program providers, the Coalition shall have the right to terminate this Agreement upon 30 days written notice to the Provider. This Agreement and the obligations hereunder shall be terminated as of the day set forth in the notice from the Coalition to the Provider.

#1

Name of Owner (Print) Title

#9

Signature of Owner Date

Street Address

City, State, Zip

Dave McGerald
Early Learning Coalition of Hillsborough County

CEO
Title

Signature

Date



School Readiness Provider Application 2014-2015

Providers wishing to offer the School Readiness Program for 2014-2015 must complete and return this application. The information in this application serves to:

- Determine your program's eligibility to offer the School Readiness Program
- Update the Child Care Resource and Referral information to assist families looking for School Readiness, VPK, and/or child care services

In order to offer the School Readiness Program, participating centers, family child care homes and school-age only programs are required to:

- Operate according to state and local law and must comply with the licensing requirements for the type of facility operated as specified in Hillsborough County *Ordinance 03-25 Minimum Standards for Child Care Facilities* or other applicable regulatory requirements. Licence-exempt programs are required at a minimum to meet health, safety and training requirements specified in *Ordinance 03-25 Minimum Standards for Child Care Facilities*;
- Implement a developmentally appropriate curriculum for children birth to five years old that meets the Florida School Readiness Program Standards. Centers with school age programs shall offer developmentally appropriate social, recreational, and educational opportunities;
- ^{#19} Implement a character development curriculum to enhance the pro-social development of children birth to five years of age and school age;
- Conduct developmentally screening of children birth to five using the Ages & Stages Questionnaire (ASQ)

In order to determine your program's eligibility to offer the School Readiness program, you must submit the following:

- ☐ Original and one (1) copy of the completed application packet

- ☐ Original and one (1) copy of the Hillsborough County School Readiness Provider Agreement
- # 4.** ☐ Proof of Liability Insurance
- # 13.** ☐ ATTACHMENT A – Copy of your child care license
- # 14.** ☐ ATTACHMENT B – Copy of your accreditation certificate (if applicable)
- # 6** ☐ ATTACHMENT C – Copy of the cover of the teacher’s manual or guide for the curriculum used for each age group served (birth to 5 only)
- # 11.** ☐ ATTACHMENT D – Copy of provider’s rate sheet or brochure containing rates for none School Readiness Children
- # 2.** ☐ ATTACHMENT E – Copy of the programs Federal Employer identification (EIN) number or a copy of the owner’s Social Security Card
- ☐ ATTACHMENT F – ***License Exempt Programs only*** - Copy of Hillsborough County Child Care Licensing health and safety inspections
- ☐ ATTACHMENT G – ***License Exempt Programs only*** – Copy of discipline policy



**School Readiness Provider Application
2014-2015**

Facility name: _____
Nombre del Establecimiento _____ (as it appears on child care license)
(como aparece en la licencia)

As the authorized representative of the facility named above, I hereby certify that all information in this application is true and correct to the best of my knowledge.

Como representante autorizado del establecimiento mencionado anteriormente, certifico que toda la información en esta solicitud es verdadera y correcta según mi conocimiento.

Owner/Director Signature
Firma dueño o director

Date
Fecha

Print Name
Nombre en letra de molde

Title
Titulo

Mail or deliver completed application to:
Enviar por correo o entregar la solicitud completa a:

**Holly M. Behrend
School Readiness Program
5701 East Hillsborough Avenue, Suite 2301
Tampa, FL 33610**

SECTION 1

Name of Person filling out form: Date form was completed:	Do you wish to have your program referred to families seeking child care listings from the ELC: <input type="checkbox"/> YES <input type="checkbox"/> NO	Coalition/Agency Name: ELCHC-SDHC Address: 5701 East Hillsborough Ave, City: Tampa Florida Zip: 33610 Phone: 813-744-8941 Fax: 813-664-8399 Coalition Website: WWW.elchc.org				
Business Name: (as on License or Exemption)	# 1					
Doing-Business-As Name:						
Provider Type (check one): # 5.	<input type="checkbox"/> Center	<input type="checkbox"/> FCCH	<input type="checkbox"/> Large FCCH	<input type="checkbox"/> School-age Only	<input type="checkbox"/> Private School	<input type="checkbox"/> Public School
Legal Status (check one):	<input type="checkbox"/> Licensed		<input type="checkbox"/> Registered		<input type="checkbox"/> Exempt	
Exemption Type (check one):	<input type="checkbox"/> Religious Exempt		<input type="checkbox"/> Camp	<input type="checkbox"/> Non Public School	<input type="checkbox"/> Public School	<input type="checkbox"/> School Age
Affiliation – Not For Profit	<input type="checkbox"/> Yes	<input type="checkbox"/> No				

DCF/Local Licensing ID:	Expiration Date:	Master School ID (MSID): (Public and Private Schools only)		
Location Address:				
City:	County:		Zip Code:	
Mailing Address: <input type="checkbox"/> Same as above				
City:	County:		Zip Code:	
Telephone:	Alternate Telephone:	Fax:	Email:	
Owner Name:		Federal ID No/SSN: # 2.		
Director Name:				

Family Child Care Home Only:

Do you want your house number and street name to appear on referral lists to families? ☐ Yes ☐ No

1. ACCREDITATION - Are you accredited by an accrediting agency? (Check all that apply) A COPY OF YOUR CERTIFICATE IS REQUIRED IN ORDER FOR ACCREDITATION TO BE LISTED. #12.

Accrediting Agency	Effective Date	End Date		Accrediting Agency	Effective Date	End Date
<input type="checkbox"/> CHRISTIAN SCH INTERNATL			<input type="checkbox"/>	MIRACLE FAITH CENTER		
<input type="checkbox"/> CHRISTIAN TCHR & SCH			<input type="checkbox"/>	MONTESSORI SCHOOL ACCRED		
<input type="checkbox"/> CHRISTIAN TCHR & SCH NATL			<input type="checkbox"/>	NATL ACCRED COMMISSION		
<input type="checkbox"/> ASSOC INDEPNDT PRESCHOOLS			<input type="checkbox"/>	NATL EARLY CHILD PROGRAMS		
<input type="checkbox"/> APPLE			<input type="checkbox"/>	NAEYC		
<input type="checkbox"/> CHURCH AVENUE ACADEMY			<input type="checkbox"/>	NEW BEGINNINGS CHRISTIAN		
<input type="checkbox"/> CHURCH OF GOD ASSOCIATION			<input type="checkbox"/>	NATL CHRISTIAN EDU		
<input type="checkbox"/> COUNCIL ON ACCREDITATION			<input type="checkbox"/>	NICENE SCHOOLS INTERNATL		
<input type="checkbox"/> CHRISTIAN SCHOOLS OF FL			<input type="checkbox"/>	COUNCIL PRIVATE SCHOOL		
<input type="checkbox"/> EARLY CHILD CHRISTIAN EDU			<input type="checkbox"/>	NARROW DOOR PENTECOSTAL		
<input type="checkbox"/> CHRISTIAN COLLEGES/ SCH			<input type="checkbox"/>	NATL EARLY CHILDHOOD PROG		
<input type="checkbox"/> FL CATHOLIC CONFERENCE			<input type="checkbox"/>	NATL ASSOC FCCH		
<input type="checkbox"/> CHRISTIAN PRIVATE SCH			<input type="checkbox"/>	NATL LUTHERAN SCHOOL		
<input type="checkbox"/> FL KINDERGARTEN COUNCIL			<input type="checkbox"/>	SCH AGE CARE ALLIANCE		
<input type="checkbox"/> LEAGUE CHRISTIAN SCH			<input type="checkbox"/>	PAPA GOOSE NETWORK		
<input type="checkbox"/> GREEN APPLE CHRISTIAN			<input type="checkbox"/>	SONSHINE CHRISTIAN SCHLS		
<input type="checkbox"/> GOLD SEAL ACCREDITATION			<input type="checkbox"/>	SOUTHERN COLLEGES/ SCH		
<input type="checkbox"/> LIGHT THE WORLD CHRISTIAN			<input type="checkbox"/>	UNITED METHODIST PRESCH		

2. CURRICULUM - Which of the following curricula does your program use? (Check all that apply) #6.

<input type="checkbox"/> A-BEKA	<input type="checkbox"/> GALILEO	<input type="checkbox"/> PINNACLE
<input type="checkbox"/> ACTIVE LEARNING	<input type="checkbox"/> HOUGHTON MIFFLIN	<input type="checkbox"/> REGGIO EMILIA APPROACH
<input type="checkbox"/> BANK STREET	<input type="checkbox"/> HIGH REACH	<input type="checkbox"/> READY SET LEAP
<input type="checkbox"/> BEYOND CNTRS CIRCLE TIME	<input type="checkbox"/> HIGH SCOPE	<input type="checkbox"/> SAXON EARLY LEARNING
<input type="checkbox"/> BEYOND CRIBS & RATTLES	<input type="checkbox"/> INVESTIGATOR CLUB	<input type="checkbox"/> SCHOLASTIC EARLY CHILD
<input type="checkbox"/> BREAKTHROUGH TO LITERACY	<input type="checkbox"/> LITERACY EXPRESS	<input type="checkbox"/> SELF PUBLISHED
<input type="checkbox"/> DAILY	<input type="checkbox"/> LINKS TO LITERACY	<input type="checkbox"/> SRA NUMBER WORLDS
<input type="checkbox"/> CURIOSITY CORNER	<input type="checkbox"/> LITTLE TREASURES	<input type="checkbox"/> WALDORF
<input type="checkbox"/> CREATIVE CURRICULUM	<input type="checkbox"/> BEGIN WITH LETTER PEOPLE	<input type="checkbox"/> WEE LEARN
<input type="checkbox"/> DLM CHILDHOOD EXPRESS	<input type="checkbox"/> MOTHER GOOSE TIME	
<input type="checkbox"/> DOORS TO DISCOVERY	<input type="checkbox"/> MONTESSORI	
<input type="checkbox"/> FUNSHINE EXPRESS	<input type="checkbox"/> OPENING WORLD OF LEARNING	

Please note: Not all of the curricula listed above are approved for use in the School Readiness Program.

3. CAPACITY/ VACANCY:

What is your total licensed capacity? (Number of children you are licensed to care for) _____

What is your actual capacity? (Most number of children you choose to care for) _____

What is your current total vacancy? _____

4. ENVIRONMENT - Describe your program's setting. (Check all that apply)

<input type="checkbox"/>	ALLERGIES	<input type="checkbox"/>	GREEN CERTIFIED	<input type="checkbox"/>	VIETNAMESE		(LIST OTHERS BELOW)
<input type="checkbox"/>	CHINESE	<input type="checkbox"/>	HEBREW	<input type="checkbox"/>	VIDEO MONITORING	<input type="checkbox"/>	
<input type="checkbox"/>	CAT	<input type="checkbox"/>	ITALIAN	<input type="checkbox"/>	WHEELCHAIR ACCESSIBLE	<input type="checkbox"/>	
<input type="checkbox"/>	CREOLE	<input type="checkbox"/>	SMOKE FREE	<input type="checkbox"/>	WEB CAM ON SITE	<input type="checkbox"/>	
<input type="checkbox"/>	DOG	<input type="checkbox"/>	NO TV		(LIST OTHERS BELOW)	<input type="checkbox"/>	
<input type="checkbox"/>	ENGLISH	<input type="checkbox"/>	PETS	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	FRENCH	<input type="checkbox"/>	POOL ON SITE	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	FILIPINO	<input type="checkbox"/>	PORTUGUESE	<input type="checkbox"/>			
<input type="checkbox"/>	FINANCIAL ASSISTANCE	<input type="checkbox"/>	RUSSIAN	<input type="checkbox"/>			
<input type="checkbox"/>	FENCED YARD	<input type="checkbox"/>	SPANISH	<input type="checkbox"/>			
<input type="checkbox"/>	GERMAN	<input type="checkbox"/>	SIGN LANGUAGE	<input type="checkbox"/>			
<input type="checkbox"/>	GREEK	<input type="checkbox"/>	SPA	<input type="checkbox"/>			

5. ADDITIONAL FEES - Please list all additional fees that your program charges.

Description	Amount	How often is this fee charged? (See Frequency Options Below)	Is this fee per child or family? (C/F)
ANNUAL	\$		
APPLICATION	\$		
INSURANCE	\$		
LATE PICK-UP	\$		
LATE PAYMENT	\$		
MEMBER ORGANIZATION	\$		
MEALS/SNACKS	\$		
OVERTIME/EARLY DROP OFF	\$		
RETURNED CHECK	\$		
REGISTRATION	\$		
SUPPLIES/MATERIALS	\$		
OTHER (LIST BELOW)			
	\$		
	\$		

Frequency Options: Every 10 minutes; Half Hour; Hourly; Per Minute; Every 5 minutes; Yearly; Every 15 minutes; Monthly; One Time; Weekly; Daily.

6. MEALS - What meals does your program provide? (Check all that apply)

<input type="checkbox"/>	MORNING SNACK	<input type="checkbox"/>	PROVIDES FORMULA	<input type="checkbox"/>	AFTERNOON SNACK
<input type="checkbox"/>	BREAKFAST	<input type="checkbox"/>	GLUTEN FREE	<input type="checkbox"/>	PEANUT-FREE ENVIRONMENT
<input type="checkbox"/>	USDA FOOD PROGRAM	<input type="checkbox"/>	LUNCH	<input type="checkbox"/>	SPECIAL DIET REQUEST
<input type="checkbox"/>	DINNER	<input type="checkbox"/>	PARENT SUPPLIES FORMULA	<input type="checkbox"/>	VEGETARIAN

7. PROGRAM PARTICIPATION - Is your program/facility a...? (Check all that apply)

<input type="checkbox"/>	CHILD CARE CENTER	<input type="checkbox"/>	NANNY/AU-PAIR	<input type="checkbox"/>	SICK CHILD CARE
<input type="checkbox"/>	EARLY HEAD START	<input type="checkbox"/>	PLAYGROUP	<input type="checkbox"/>	SUMMER CAMP
<input type="checkbox"/>	FAMILY CHILD CARE HOME	<input type="checkbox"/>	PRIVATE SCHOOL	<input type="checkbox"/>	TEEN PARENT
<input type="checkbox"/>	HEAD START	<input type="checkbox"/>	PUBLIC SCHOOL	<input type="checkbox"/>	VPK SCHOOL YEAR
<input type="checkbox"/>	LARGE FCCH	<input type="checkbox"/>	QUALITY RATING SYSTEM	<input type="checkbox"/>	VPK SUMMER
<input type="checkbox"/>	MIGRANT HEAD START	<input type="checkbox"/>	SCHOOL AGE PROGRAM		
<input type="checkbox"/>	MILITARY	<input type="checkbox"/>	SCHOOL READINESS PROVIDER		

8. RATES: In the table below enter the advertised rates (private pay rates) your program charges. Do not include voucher/subsidy rates, sliding scale rates, employee discounts or any other discounted rates. Only complete the rate type for each age group that you offer. (Please attach rate sheet, if applicable)

#11,

Enter Rate by Age Group	Infant	1 year old	2 year old	3 year old	4 year old	5 year old	Elem School Age	Mid School Age
Check frequency for each option below								
FULL TIME								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/>								
FULL TIME VPK WRAP								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/>								
PART TIME								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/>								
PART TIME VPK WRAP								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Annually <input type="checkbox"/>								
SCHOOL AGE BEFORE SCHOOL								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> School-year <input type="checkbox"/>								
SCHOOL AGE AFTER SCHOOL								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> School-year <input type="checkbox"/>								
SCHOOL AGE – BOTH BEFORE & AFTER SCHOOL								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> School-year <input type="checkbox"/>								
SUMMER CAMP								
Weekly <input type="checkbox"/> Monthly <input type="checkbox"/>								

9. SCHEDULE - What days of the week does your program operate? (Check all that apply)

16

Sunday <input type="checkbox"/>	Monday <input type="checkbox"/>	Tuesday <input type="checkbox"/>	Wednesday <input type="checkbox"/>	Thursday <input type="checkbox"/>	Friday <input type="checkbox"/>	Saturday <input type="checkbox"/>
What are your hours of operation? #16		Open Time: ____ <input type="checkbox"/> AM <input type="checkbox"/> PM		Close Time: ____ <input type="checkbox"/> AM <input type="checkbox"/> PM		
What are the ages you serve? #13		From (minimum age): ____ Sample: 2 months to 6 years		To (maximum age): ____ Years		

10. ENHANCED SCHEDULE - Does your program provide the following schedule? (Check all that apply)

<input type="checkbox"/>	24-HOUR CARE	<input type="checkbox"/>	EVENING CARE	<input type="checkbox"/>	RESPIRE CARE
<input type="checkbox"/>	AFTER SCHOOL	<input type="checkbox"/>	FULL TIME	<input type="checkbox"/>	SUMMER ONLY
<input type="checkbox"/>	BEFORE SCHOOL	<input type="checkbox"/>	FULL YEAR	<input type="checkbox"/>	SCHOOL SYST WEATHER DAYS
<input type="checkbox"/>	DROP IN CARE	<input type="checkbox"/>	OVERNIGHT	<input type="checkbox"/>	SCHOOL YEAR
<input type="checkbox"/>	EMERGENCY/TEMPORARY CARE	<input type="checkbox"/>	PART TIME	<input type="checkbox"/>	WEEKEND

11. ENHANCED SERVICES - What other services does your program offer? (Check all that apply)

<input type="checkbox"/>	COMPUTERS	<input type="checkbox"/>	KINDERGARTEN CLASS	<input type="checkbox"/>	TRAINING/EXP DEV DELAY
<input type="checkbox"/>	ART/CRAFTS	<input type="checkbox"/>	MUSIC LESSONS	<input type="checkbox"/>	ENVIRON ACCOMMODATIONS
<input type="checkbox"/>	DANCE	<input type="checkbox"/>	ON-SITE SCREENINGS	<input type="checkbox"/>	THERAPEUTIC SERVICES
<input type="checkbox"/>	FAMILY INVOLVEMENT	<input type="checkbox"/>	OUTDOOR SPORTS		OTHER (LIST BELOW)
<input type="checkbox"/>	FIELD TRIPS	<input type="checkbox"/>	SWIM LESSONS	<input type="checkbox"/>	
<input type="checkbox"/>	GYMNASTICS	<input type="checkbox"/>	TRAINING/EXP AUTISM	<input type="checkbox"/>	
<input type="checkbox"/>	HOMEWORK/TUTOR	<input type="checkbox"/>	TRAINING/EXP BEHAV CHAL	<input type="checkbox"/>	

12a. Total number of staff that work directly with children in care: _____.

12b. STAFFING - Enter below the number of staff that works directly with children in care that have any of the following:

Number	Training/ Education Type	Number	Training/ Education Type
	FCCH 30 HOUR TRAINING		HIGH SCHOOL EDUCATION/GED
	40 HR INTRO CHILD CARE		MA DEGREE EARLY CHILDHOOD
	AA/AS NONCHILD RELATED		MA NONCHILD RELATED
	AA/AS EARLY CHILDHOOD		MEDICAL STAFF ONSITE
	DIRECTOR CREDENTIAL ADV		NAFCC FCCH OBSERV TRN
	DIRECTOR CREDENTIAL BEGIN		NATL EARLY CHILDHOOD CERT
	BA/BS NONCHILD RELATED		NO HIGH SCHOOL/GED
	BA DEGREE EARLY CHILDHOOD		SPEC NEEDS TRAINING
	CPR WITHIN TWO YEARS		VPK DIRECTOR CREDENTIAL
	DOCTORATE		
	EARLY LITERACY		
	1 ST AID WITHIN TWO YEARS		
	FCCPC/ECPC/CCAC/CDAE		

13. SUBSIDIES – List any provider sponsored financial assistance you offer to help families with limited financial means.

<input type="checkbox"/>	MEDICAID PROVIDER	<input type="checkbox"/>	NEGOTIATED RATE	<input type="checkbox"/>	SLIDING SCALE FEE
<input type="checkbox"/>	MILITARY AID	<input type="checkbox"/>	PARENT COOP	<input type="checkbox"/>	UNITED WAY
<input type="checkbox"/>	MULTI CHILD DISCOUNT	<input type="checkbox"/>	PROVIDER SCHOLARSHIP		

14. TRANSPORTATION - Do you or does your school provide or are located near transportation? (Check all that apply)

<input type="checkbox"/>	SCHOOL BUS	<input type="checkbox"/>	TRANSPORT TO CHILD HOME
<input type="checkbox"/>	TRANSPORT FROM CHILD HOME	<input type="checkbox"/>	TRANSPORTATION
<input type="checkbox"/>	NEAR PUBLIC TRANSPORT	<input type="checkbox"/>	WALKING DIST TO SCHOOL

Transportation Provided From the Below Schools to the Child Care Site	Transportation Provided from the Child Care Site to the Below Schools	Child Care Site Within Walking Distance from the Below Schools

Comments/Questions:

Thank you for your cooperation in gathering this important information. You should contact the Early Learning Coalition of Hillsborough County anytime you make changes to your program so that we may provide families with accurate information. We are available to answer any questions you may have by calling 813-722-8941.

--- PLEASE ATTACH COPY OF CURRENT LICENSE/REGISTRATION/EXEMPTION AND SUBMIT WITH THIS FORM. ---

Office Use Only:

☐ EFS Updated

Date: _____

By: _____

SECTION 2 – LICENSING

(SECCIÓN 3 – LICENCIA)

#18.

Within the last 12 months, have you received any Class I or Class II violations from the Hillsborough County Child Care Licensing Program?

☐ Yes (Si) ☐ No (No)

If yes, please attach a copy of the inspection report(s).

SECTION 3 - AUTHORIZED SIGNATURE

(SECCIÓN 7 – PERSONAS AUTORIZADAS A FIRMAR)

#10.

List the name of the person(s) authorized to sign School Readiness documents. *The name of the person signing this application and the School Readiness Provider Agreement must appear below as well as any other person authorized to sign documents for the facility.*

Name _____	Title _____	Phone _____
Nombre _____	Título _____	Número Telefónico _____

Name _____	Title _____	Phone _____
Nombre _____	Título _____	Número Telefónico _____

SECTION 4 – ATTACHMENTS

☐ Original and one (1) copy of the Hillsborough County School Readiness Provider Agreement

#4 ☐ Proof of Liability Insurance (include transportation coverage if applicable)

#13 ☐ ATTACHMENT A – Copy of your child care license

#13 ☐ ATTACHMENT B – Copy of your accreditation certificate (if applicable)

#6 ☐ ATTACHMENT C – Copy of the cover of the teacher's manual or guide for the curriculum used for each age group served (birth to 5 only)

- #1** ☐ ATTACHMENT D – Copy of provider’s rate sheet or brochure containing rates for none School Readiness Children
- #2** ☐ ATTACHMENT E – Copy of the programs Federal Employer identification (EIN) number or a copy of the owner’s Social Security Card
- ☐ ATTACHMENT F – ***License Exempt Programs only*** - Copy of Hillsborough County Child Care Licensing health and safety inspections
- ☐ ATTACHMENT G – ***License Exempt Programs only*** – Copy of discipline policy

FY-16 School Readiness Required Documents



STATE OF FLORIDA
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT
FORM OEL-SR 20

I. PARTIES AND TERMS OF CONTRACT

1. **Parties.** This Contract is made and entered into this # 1. day of _____, 20_____, by and between the Early Learning Coalition of _____ (herein referred to as "COALITION"), and _____ (herein referred to as "PROVIDER"), with its principal offices located at _____.
- a. **Multiple Public School Locations.** If PROVIDER is a school district executing a single Contract on behalf of multiple public school School Readiness (SR) program providers, a list of their names and their physical addresses are included in Exhibit 1: Provider Location List. Thereafter, PROVIDER shall include each location listed in Exhibit 1.
- b. **Multiple Private Locations.** If PROVIDER is executing a single Contract on behalf of multiple private SR provider sites within COALITION's service area, a list of their names and their physical addresses are included in Exhibit 1: Provider Location List. Thereafter, PROVIDER shall include each location listed in Exhibit 1.
- c. **Employer Identification Number.** Insert PROVIDER's EIN here: # 2.
If PROVIDER does not have an EIN, PROVIDER must insert PROVIDER's Social Security Number (SSN) here _____. PROVIDER's EIN or SSN is requested in accordance with sections (ss.) 119.071(5)(a)2. and 119.092, F.S., for use in the records and data systems of the Office of Early Learning and COALITION. Submission of PROVIDER's EIN or SSN is mandatory. PROVIDER's EIN or SSN will be used for processing payments to PROVIDER as an SR provider, for reporting those payments for federal tax purposes, and for routine identification. If PROVIDER completes Exhibit 1 listing multiple locations with multiple EIN numbers, this paragraph may be left blank.
2. **Purpose.** This Contract is designed to inform PROVIDER of the requirements of participation in the SR Program. Payment is not conveyed to PROVIDER through this Contract. PROVIDER must agree to comply with the terms and conditions of this Contract in order to be eligible to participate in the SR program. This contract is to engage an eligible provider to provide SR services to eligible SR children.
3. **Term.** This Contract begins on #3. of the fiscal year (20_____) or on the date on which the Contract is signed by the last party required to sign the Contract, whichever occurs last, and the Contract ends on (COALITION select one) ☐ June 30th of the fiscal year 20_____ or ☐ the last day of the month twelve (12) months after the effective date of the contract as indicated herein.
4. **Payment Limitations.** PROVIDER will not receive nor be entitled to payment for SR program services performed before this Contract is fully executed by both parties or after expiration of the Contract.

5. **Applicable Law.** PROVIDER and COALITION agree that the following, including any revision made after the execution of this Contract, are the provisions governing the SR program and that PROVIDER and COALITION will be bound by the same:
- 42 U.S.C. §9858, et seq.;
 - 45 C.F.R. §98;
 - 45 C.F.R. §99;
 - Chapter 1002, Florida Statutes;
 - Chapter 6M-4, Florida Administrative Code; and
 - Chapter 6M-9, Florida Administrative Code.
6. **Not Transferrable.** This Contract is not transferrable or assignable to another entity, corporation, or owner without the prior written approval of the COALITION. A change in corporate ownership shall be deemed a transfer. Failure to obtain the prior written approval of COALITION shall be considered an immediate and serious danger to the health, safety, or welfare of children, which is grounds for emergency termination of this Contract as described in paragraph 58. This Contract binds the successors, assigns, and legal representatives of PROVIDER and of any legal entity that succeeds to the obligations of the State of Florida, Office of Early Learning, and COALITION.

II. PROVIDER ELIGIBILITY

7. General Eligibility

#5.

- a. **Provider Type.** To be eligible to deliver the school readiness program, PROVIDER must be one of the provider types identified in section (s.) 1002.88(1)(a), F.S., listed below. Check the box to indicate PROVIDER's type:
- ☐ A child care facility licensed under s. 402.305, F.S. (Form OEL-SR 20L is hereby incorporated by reference and must be completed as an authorized attachment to this Contract.)
- ☐ A family day care home licensed or registered under s. 402.313, F.S. (Form OEL-SR 20L is hereby incorporated by reference and must be completed as an authorized attachment to this Contract.)
- ☐ A large family child care home licensed under s. 402.3131, F.S. (Form OEL-SR 20L is hereby incorporated by reference and must be completed as an authorized attachment to this Contract.)
- ☐ A public school or nonpublic school exempt from licensure under s. 402.3025, F.S. (Form OEL-SR 20LE is hereby incorporated by reference and must be completed as an authorized attachment to this Contract.)
- ☐ A faith-based child care provider exempt from licensure under s. 402.316, F.S. (Form OEL-SR 20LE is hereby incorporated by reference and must be completed as an authorized attachment to this Contract.)
- ☐ A before-school or after-school program described in s. 402.305(1)(c), F.S.

☐ For a licensed before-school or after-school program described in s. 402.305(1)(c), F.S., Form OEL-SR 20L must be completed as an authorized attachment to this Contract.

☐ For a license exempt or programs that are not required to be licensed as described in Rule 65C-22.008, F.A.C., before-school or after-school program described in s. 402.305(1)(c), F.S., Form OEL-SR 20LE must be completed as an authorized attachment to this Contract.

☐ An informal child care provider to the extent authorized in the state's Child Care and Development Fund Plan as approved by the United States Department of Health and Human Services pursuant to 45 C.F.R. s. 98.18. (Form OEL-SR 20FFN is hereby incorporated by reference and must be completed as an authorized attachment to this Contract.)

- b. **Eligibility Pursuant to s. 1002.91(5), F.S.** PROVIDER represents that PROVIDER, or an owner, officer, or board director thereof, has not been convicted of, found guilty of, or pled guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S., within the last five (5) years and is not acting as the beneficial owner for someone who has been convicted of, found guilty of, or pled guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S., within the last five (5) years.
- c. **Eligibility Pursuant to s. 1002.91(7), F.S.** PROVIDER represents that PROVIDER is not on the United States Department of Agriculture National Disqualified List nor does PROVIDER share an officer or board director with a provider that is on the United States Department of Agriculture National Disqualified List.

III. PROVIDER RESPONSIBILITIES AND SCOPE OF WORK

8. **Child Enrollment.** PROVIDER agrees to enroll children for the SR Program only with written authorization from COALITION which will be provided in the form of a child care certificate. PROVIDER also understands that it will not be reimbursed for services provided to a child beyond the service begin and end date identified by COALITION on the child care certificate, or if the child's eligibility is terminated prior to the end date. As described in s. 1002.87(2), F.S., PROVIDER also agrees to serve children enrolled into its SR program according to the services and location established by COALITION on the child care certificate indicating authorized hours of care. In the event that PROVIDER has multiple locations, PROVIDER shall notify and obtain approval in writing from COALITION prior to changing the location where the child shall be served.
9. **Child Care.** PROVIDER agrees to provide child care to enrolled children at the care level designated by the child care certificate received from the COALITION. Pursuant to 45 C.F.R s. 98.2, child care is defined as the care given to an eligible child by an eligible child care provider. PROVIDER will comply with all applicable state and federal laws, regulations and other standards and requirements in providing child care services under this agreement.
10. **Instruction and Activities.** In accordance with s. 1002.88(1)(b), F.S., PROVIDER agrees to offer instruction and activities to enhance the age-appropriate progress of each child in attaining the child development standards established by the *Florida Early Learning and Developmental Standards: Birth to Five*, Form OEL-SR 30, adopted by the Office of Early Learning in Rule

6M-4.700, F.A.C. PROVIDER agrees to include activities to foster brain development in infants and toddlers; provide an environment that is rich in language and appropriate and child-friendly music and filled with objects of various colors, shapes, textures, and sizes to stimulate visual, tactile, auditory, and linguistic senses; and include at least thirty (30) minutes of reading to children each day.

11. **General Health and Safety.** Provider agrees to provide a healthy and safe environment for children in care pursuant to s. 402.305(5), (6), and (7), F.S., as applicable, and as verified pursuant to s. 402.311, F.S. Health and Safety requirements are specifically addressed in each provider type attachment.

12. **Smoke Free Environment.** In accordance with Part C of Public Law 107-110 (No Child Left Behind), the "Pro-Children Act of 2001," no child care facility shall permit smoking within any indoor facility (or portion of such facility) operated by PROVIDER, to provide routine child care or early childhood development services to children. This does not apply to any portion of such facility that is used for a private residence. Individuals in violation are subject to a \$1,000 fine, administrative compliance or both.

13. **Curriculum.** In accordance with s. 1002.88(1)(f), F.S., PROVIDER agrees to use the following state-approved curriculum or curricula in the provision of the SR Program:

#6.

edition or date:

If PROVIDER is using different curricula at different PROVIDER sites listed in Exhibit 1, PROVIDER must complete the column in Exhibit 1 indicating the name of the curriculum or curricula being used at each site. If PROVIDER is offering school age programs exclusively, PROVIDER may insert "Not Applicable" in the space provided.

14. **Character Development Program.** In accordance with s. 1002.88(1)(g), F.S., PROVIDER agrees to implement the following character development program to develop basic values:

NA FOR FY-16

edition or date:

If PROVIDER is using a different program at different PROVIDER sites listed in Exhibit 1, PROVIDER must complete the column in Exhibit 1 indicating the name of the character development program being used at each site. If PROVIDER is offering school age programs exclusively, PROVIDER may insert "Not Applicable" in the space provided.

15. **Developmental Screenings.** PROVIDER acknowledges that Coalition Select One is responsible for conducting developmental screenings for each child aged six weeks to kindergarten eligibility in accordance with Rule 6M-4.720, F.A.C. In accordance with s. 1002.88(1)(h), F.S., PROVIDER must collaborate with COALITION to complete initial screening for each child, aged six weeks to kindergarten eligibility, within forty-five (45) days after the child's first or subsequent enrollment, to identify a child who may need individualized supports. PROVIDER acknowledges that COALITION is responsible for initiating individualized services, including but not limited to providing referrals, based on child screening results. PROVIDER and COALITION acknowledge that pursuant to s. 1002.84(5), F.S., screening shall not be a requirement of entry into the school readiness program and shall be only given with parental consent.

Subsequent Screenings. PROVIDER acknowledges that Coalition Select One is responsible for subsequent screenings. Subsequent screening will be conducted at a minimum, annually in

the month of the child's birthday or at time of redetermination in accordance with Rule 6M-4.720, F.A.C.

16. **Prohibited Forms of Discipline.** In accordance with s. 1002.88(1)(i), F.S., PROVIDER agrees to implement minimum standards for child discipline practices that are age-appropriate and consistent with the requirements in s. 402.305(12), F.S. Such standards must provide that children not be subjected to discipline that is severe, humiliating or frightening. The discipline must not be associated with food, rest or toileting. Spanking or any other form of physical punishment is prohibited. Children may not be denied active play as a consequence of misbehavior.
17. **Child Immunizations and Health Screenings.** In accordance with s. 1002.88(1)(j), F.S., within thirty (30) calendar days of enrolling a child, PROVIDER agrees to obtain and retain information from the parent regarding the child's age-appropriate immunizations, physical development and other health requirements as indicated on the Student Health Examination form DH 3040 and Florida Certification of Immunization form Part A-1, B, or C DH 680 or the Religious Exemption from Immunization form DH 681.
18. **Program Operation.** In accordance with s. 1002.88(1)(k), F.S., if PROVIDER offers before-school or after-school programs, PROVIDER agrees those programs shall meet or exceed the requirements of s. 402.305(5), (6), and (7), F.S. In accordance with s. 1002.88(1)(q), F.S., and as identified in Exhibit 3, PROVIDER agrees to operate on a full-time and part-time basis and provide extended-day and extended-year services to the maximum extent possible without compromising the quality of the program to meet the needs of parents who work.
19. **Workers' Compensation and Unemployment Compensation.** In accordance with s. 1002.88(1)(n), F.S., PROVIDER agrees to obtain and maintain any required workers' compensation insurance under Chapter 440, F.S., and any required reemployment assistance or unemployment compensation coverage under Chapter 443, F.S. PROVIDER agrees to provide the COALITION with evidence of worker's compensation insurance coverage.
20. **Sign-In/Sign-Out Process.** PROVIDER agrees to maintain daily attendance documentation, including a documented "sign-in/sign-out" process approved by COALITION and implemented by PROVIDER, and which accurately documents attendance and absences. PROVIDER agrees to retain the attendance documentation in accordance with COALITION's records retention requirement established in accordance with s. 1002.84(10), F.S.
21. **Child Absences.** In accordance with s. 1002.87(8), F.S., PROVIDER agrees to notify COALITION in writing if a child enrolled is absent for five (5) consecutive days with no contact from the parent by the close of the fifth (5th) day. In accordance with ss. 1002.81(5) and 1002.87(7), F.S., if the need for care cannot be re-established, then the COALITION will notify the PROVIDER and the parent that school readiness funding will be discontinued. The end of eligibility for funded child care services will be fourteen (14) days from the fifth (5th) day that the child was not in attendance with no contact from the parent.
22. **Rilya Wilson Act and At-Risk Children.** In accordance with s. 1002.87(9), F.S., PROVIDER agrees to abide by the provisions of the "Rilya Wilson Act" (s. 39.604, F.S.) for each at-risk child under the age of school entry who is enrolled in the school readiness program.

23. **Parental Choice.** PROVIDER agrees that the parent has the right to choose the provider of child care services for his/her children. In the event the parent chooses to change to a different SR PROVIDER, it is within the parent's rights to do so, except as limited by s. 1002.84(8), F.S., as described in paragraph 46.c.
24. **Parental Access.** PROVIDER agrees to afford authorized parents unlimited access to their children in SR programs, during normal hours of provider operation and whenever the children are in the care of the provider. Access may be subject to appropriate safety procedures.
25. **Statewide Information System.** PROVIDER agrees to utilize the statewide information system as referenced in s. 1002.82(2)(n), F.S., as available, to submit information and updates regarding the SR program.
26. **Child Care Resource and Referral.** PROVIDER agrees to participate in the annual update process coordinated by each Child Care Resource and Referral agency as described in Rule 6M-9.300(5) and (6), F.A.C.
27. **Direct Deposit.** PROVIDER agrees to provide information necessary to facilitate direct deposit in order to receive SR reimbursement for services rendered. PROVIDER agrees to provide alternative reimbursement arrangements if PROVIDER chooses to opt out of Direct Deposit.
28. **Deliverables**

Deliverable	Tasks and Activities	Due Date	Payment
1. One month of child care services	Child enrollment activities per the requirements in section III	Monthly	Per the level of service: established by the child care certificate provided to the PROVIDER by the COALITION; at the rates specified in Exhibit 3: Provider Reimbursement Rates; and documented through an approved monthly attendance report
	Instruction and activities per the requirements in section III		
	Health and safety activities per the requirements in section III		
	Use of curriculum per the requirements in section III		
	Character development activities per the requirements in section III		
2. Monthly attendance report	Monthly attendance report submitted by the PROVIDER to the COALITION per the requirements in section VII	Monthly by the day indicated in section VII	N/A
3. Proof of Developmental Screening	If applicable:		N/A
Applies to providers responsible for	Developmental screenings for each child aged six weeks to	Within 45 days after the child's	

Deliverable	Tasks and Activities	Due Date	Payment
developmental screening as indicated in section III	kindergarten eligibility per the requirements in section III.	first or subsequent enrollment	
Proof of Developmental Screening (continued)	Subsequent screenings conducted annually in month of child's birthday.	Annually	
	PROVIDER shall submit the child's screening results to the COALITION	Within thirty (30) calendar days of completion of screening	
	Enter the data into an electronic system	Within sixty (60) calendar days after screening	
	PROVIDER shall provide in writing the screening results for each child to the child's parent.		

IV. COALITION RESPONSIBILITIES

29. **Training and Technical Assistance.** COALITION will notify PROVIDER of the availability of training, technical assistance, and other targeted assistance in support of the provision of quality SR services.
30. **Developmental and Subsequent Screenings.** Applicable if PROVIDER is responsible for Developmental Screenings and Subsequent Screenings as indicated in paragraph 15. COALITION shall give notification to PROVIDER a minimum of thirty (30) calendar days prior to the date the child must be screened. COALITION will have staff persons available to explain screening results if required by a parent.
31. **Child Eligibility.** COALITION has ultimate responsibility for determining the eligibility of children enrolling in the SR program. COALITION will issue forms that make up a child care certificate (also known as a payment certificate), as described in s. 1002.82(6)(b) and (c), F.S., to the parent of each eligible child who enrolls in the SR program.
32. **Limitations on Authority.** COALITION may not impose any requirement on PROVIDER that exceeds the authority provided under Chapter 1002, F.S., or rules adopted pursuant to Chapter 1002, F.S.; or require PROVIDER to administer a preassessment or postassessment.
33. **Monitoring.** COALITION will monitor PROVIDER for compliance with this Contract and the provisions governing the SR program listed in paragraph 5., in accordance with s. 1002.85(2)(h), F.S. PROVIDER will be monitored in accordance with the COALITION monitoring plan, or in response to a parental complaint.

V. ACCESS

34. **Physical Access.** PROVIDER agrees to allow the Office of Early Learning and COALITION staff or sub-contractors immediate access to the facilities and spaces used to offer the SR Program during normal business hours, except as otherwise restricted by government facilities.
35. **Records Access.** PROVIDER agrees to allow COALITION staff or sub-contractors and the Office of Early Learning to inspect and copy records pertaining to the SR Program during normal business hours and upon request by COALITION or the Office of Early Learning. Records that are stored off-site shall be provided within seventy-two (72) hours.

VI. MAINTENANCE OF RECORDS, DATA, AND CONFIDENTIALITY

36. **Record Confidentiality.** PROVIDER agrees to protect the confidentiality of child and family information. PROVIDER agrees to have all staff complete confidentiality agreements and have processes in place to protect the privacy of child and family information. Confidentiality agreements will be maintained by the PROVIDER and provided to the COALITION upon request. Information associated with the SR Program shall only be made available in accordance with the restrictions of s. 1002.97, F.S. For the purposes of records of children enrolled in the SR Program, this Contract is considered an interagency agreement for the purpose of implementing the SR Program as described in s. 1002.97(3)(g), F.S. Accordingly, to the extent that PROVIDER receives school readiness records in order to carry out its official functions, PROVIDER must maintain and protect the data as required in s. 1002.97, F.S., and as explained below. Individuals and organizations eligible to receive records include PROVIDER, the parent, COALITION, Office of Early Learning, and other entities identified in s. 1002.97, F.S.
37. **Record Maintenance.** PROVIDER agrees to maintain records, including sign in and sign out documentation, enrollment and attendance certification, documentation to support excused absences and proof of parent co-payments for children funded by the SR program. The records must be maintained for audit purposes for a period of five (5) years from the date of the last reimbursement request for that fiscal year or until the resolution of any audit findings or any litigation related to this Contract, whichever occurs last. PROVIDER may maintain records in an electronic medium and if the PROVIDER does so, then the PROVIDER shall back up records on a regular basis to safeguard against loss.
38. **Record Transfer on Termination.** In the event that PROVIDER permanently ceases to offer the SR program before the conclusion of the retention period for SR records as described in paragraph 37, whether as a result of unilateral or mutual termination of PROVIDER's eligibility to offer the SR program or as a result of PROVIDER ceasing to do business, PROVIDER shall transfer all SR records required to be maintained under paragraph 37. to COALITION no later than the close of business on the day PROVIDER ceases to offer the SR program.

VII. COMPENSATION and FUNDING

39. **Method of Payment.** PROVIDER reimbursement for eligible children will be based on the child care certificate (also known as a payment certificate) issued by COALITION and presented by a parent, and through the use of the procedures outlined herein.
40. **Reimbursement Rates Established.** PROVIDER agrees to provide documentation of its published private child care rates included in Exhibit 3. PROVIDER agrees to accept the

approved PROVIDER reimbursement rate which is the lesser of the COALITION maximum reimbursement rate established by COALITION and approved by Office of Early Learning, identified in Exhibit 3. PROVIDER is paid based on budget availability, at the approved PROVIDER reimbursement rate less any parent co-payments assessed by COALITION as reflected on the child care certificate.

41. **Gold Seal Rate.** PROVIDER agrees to provide documentation of its Gold Seal Quality Designation. Gold Seal providers shall receive the Gold Seal rate identified in Exhibit 3 for all care levels which have received a Gold Seal Quality Designation.
42. **Special Needs Rate.** PROVIDER will receive a special needs rate identified in Exhibit 3 when providing services to a child with an identified special need. A special need child is defined as a child who has been determined eligible as a child with a disability in accordance with Chapter 6A-6, F.A.C., and is participating in a program for children with disabilities provided by the school district or a child who has an individualized educational plan (IEP) or family support plan (FSP).
43. **Rate Changes and Limitations.** PROVIDER agrees to report any changes in its published child care rates or its Gold Seal status, if applicable. PROVIDER acknowledges that COALITION is prohibited from making payments, inclusive of Gold Seal or special needs rate differentials, which would cumulatively exceed PROVIDER's private payment rate. In the event that any information submitted by PROVIDER in Exhibit 3 changes, PROVIDER must notify COALITION in writing of the change no later than close of business on the day of the change. COALITION may amend PROVIDER's reimbursement rate based on the information submitted by PROVIDER or any of the factors identified in this paragraph. COALITION must notify PROVIDER, in writing, of any change in reimbursement rate at least thirty (30) calendar days before the change is implemented.
44. **Rates and Fees for Parents.** PROVIDER acknowledges that it is prohibited from charging parents receiving SR services a higher rate than that charged to private pay parents. In addition to the parent co-payment assessed by COALITION, PROVIDER must provide the parent with a list of any fees it charges and, if applicable, written notice of the difference between the private pay rate and SR reimbursement, prior to the parent enrolling his/her child in PROVIDER's SR program. PROVIDER is prohibited from charging any fees other than the parent co-payment or those fees provided to the parent on the fee list described above.
45. **Military Subsidies.** PROVIDER agrees that it will notify COALITION if it receives military subsidy payments through or from the Child Care Aware of America[®] (formally NACCRRRA) or any legal successor organizations, on behalf of any child enrolled in PROVIDER's SR program. PROVIDER understands that its SR reimbursement rate may be changed as a result of receipt of such military subsidy payments. If PROVIDER fails to report receipt of such military subsidy payments, PROVIDER will be subject to fraud investigation for violation of the requirements of the SR program.
46. **Co-payment.** As required by s. 1002.84(8), F.S., and Rule 6M-4.401, F.A.C., PROVIDER shall collect the assessed parent co-payment in accordance with Rule 6M-4.400, F.A.C., from the parent.
 - a. **Co-payment Amount.** The amount of the co-payment which must be collected for each child is included on his or her child care certificate. In the event that an assessed parent co-

payment is changed by COALITION, COALITION will send the PROVIDER written notice of the change. Only co-payment changes from the COALITION are valid.

- b. Co-payment Assessment and Collection.** Assessed parent co-payments are automatically deducted from PROVIDER's monthly reimbursement. PROVIDER is required to collect parent co-payments.
 - c. Co-payment Documentation.** PROVIDER must give the parent a receipt for each co-payment made by the parent and retain receipt records for all child care co-payments. Upon request, PROVIDER shall provide a current accounting and copy of co-payment receipt records to the COALITION. COALITION will use this documentation to ensure parents who transfer their children to another child care provider have met their co-payment obligations before receiving additional school readiness services.
- 47. Holiday Schedule.** PROVIDER agrees to follow the holiday schedule approved by COALITION for PROVIDER's program, which includes Coalition Select One days per year as set forth in Exhibit 4: Holiday Schedule and understands that these are the only holidays for which PROVIDER will receive reimbursement. Pursuant to Rule 6M-4.500, F.A.C., reimbursement may be made for up to twelve (12) recognized holidays per year.
 - 48. Attendance Documentation Submission.** PROVIDER agrees to submit monthly attendance reports for payment. PROVIDER agrees to submit all required attendance records to COALITION on or before the third (3rd) business day of each month. If the due date falls on a holiday, PROVIDER agrees to submit all required attendance records to COALITION on the preceding business day. Records submitted late will be processed and paid in the next open payment cycle.
 - 49. Reimbursement Summary Review.** PROVIDER agrees to review the reimbursement summary provided with the monthly reimbursement statement. PROVIDER agrees to report to COALITION any discrepancy, overpayment, or underpayment within sixty (60) calendar days of transmission of the reimbursement summary.
 - 50. Emergency Temporary Closure.** PROVIDER agrees all requests for compensation for temporary closures beyond PROVIDER's control will be handled in accordance with Rule 6M-4.501, F.A.C.
 - 51. Disallowed Costs.** Any disallowed expenditure may be deducted from any future reimbursement. PROVIDER agrees to return to COALITION any funds received as a result of error or overpayment or disallowed cost. If PROVIDER ceases to offer the SR Program before the payment is fully recovered, PROVIDER agrees to return the funds it was overpaid. If PROVIDER fails to return the funds it was overpaid, PROVIDER shall be subject to collection efforts and/or funds may be obtained from other early learning programs. PROVIDER shall have an opportunity to substantiate or appeal the decision of a questioned or disallowed cost. Any unresolved questioned costs may become disallowed costs.
 - 52. Head Start Agencies.** If PROVIDER is a Head Start Agency, PROVIDER understands that, in accordance with federal law, PROVIDER's Head Start programs must be "in addition to, and not in substitution for, comparable services previously provided without Federal assistance." (42 U.S.C., s. 9835(c))

53. **Title 20 Schools.** If PROVIDER receives federal funds under Title 20, United States Code, ss. 6311-6322, PROVIDER understands that, in accordance with federal law, PROVIDER may use “Federal funds to supplement, [but] not [to] supplant non-Federal funds.” (20 U.S.C., s. 6314(a)(3)(B))

VIII. FINANCIAL CONSEQUENCES

54. As a result of PROVIDER’s failure to provide the minimum level of services required by this Contract, COALITION shall temporarily withhold reimbursement, disallow all or part of services not in compliance with the terms of this contract or terminate the contract.

IX. NONDISCRIMINATION

55. **Discrimination Prohibited.** PROVIDER agrees not to discriminate against children, families and staff on the basis of race, national origin, ethnic background, sex, religious affiliation, or disability. PROVIDER will comply with the terms of 45 C.F.R. §98.47 regarding non-discrimination against staff persons on the basis of religion.

X. NONCOMPLIANCE, PROBATION AND TERMINATION

56. Noncompliance Determination.

- a. **Corrective Action Notice.** If COALITION determines PROVIDER has failed to comply with the provisions governing the SR program as described in paragraph 5. or the requirements of this Contract, and COALITION concludes that corrective action will resolve the failure to comply, COALITION must notify PROVIDER in writing. (“Corrective action” means implementation of specific action(s) designed to correct the failure to meet a specific requirement.) The notice must identify the specific requirement(s) which PROVIDER failed to meet and describe how PROVIDER failed to meet each requirement. In addition, the notice must provide a detailed description of any required corrective action and set a deadline for completion of the corrective action. Finally, the notice must state that PROVIDER may request a review of the determination as described in paragraph 64. Upon determining that the PROVIDER has satisfactorily completed the corrective action, the COALITION shall notify the PROVIDER in writing.
- b. **Probation.** If COALITION concludes that PROVIDER has received a corrective action notice for the same violation two or more times or have had multiple corrective action plans within the contract year or if the corrective action plan is not completed within the prescribed timelines, PROVIDER shall be placed on probation for a period up to six (6) months. Probation may include one or more of the following conditions: training or staff development, monitoring or technical assistance by COALITION or submission of documentation related to the violation. COALITION must notify PROVIDER in writing of the terms and duration of the probation, including required timelines. The terms of the probation must correlate to the basis of the corrective action.

57. Termination for Cause.

- a. Basis of Termination for Cause.** PROVIDER agrees that COALITION has the right to terminate this Contract for cause at any time. The following are grounds for termination for cause: (a) Action, or lack of action, which threatens the health, safety or welfare of children; (b) The material failure to comply with the terms of this Contract, including, but not limited to, failure to implement corrective action or comply with the terms of probation as described in paragraph 56 above; (c) The refusal to accept any notice described under this Contract which COALITION is required to send to PROVIDER; or (d) Reasonable or probable cause for COALITION to suspect that fraud has been committed by PROVIDER as described in paragraph 63.
- b. Notice of Termination for Cause.** In order to terminate PROVIDER for cause, COALITION must send a written notice of termination for cause to PROVIDER. Such notice must be sent, with proof of delivery, at least five (5) business days before termination. The notice must state the date of, and the specific basis for, termination. Finally, the notice must state that PROVIDER may request a review of the determination as described in paragraph 64. Notwithstanding PROVIDER's refusal of delivery of the notice, this Contract shall be terminated on the date identified in the notice. COALITION shall document any refusal of delivery.

58. Emergency Termination. COALITION must immediately terminate this Contract on an emergency basis upon notification by the Department of Children and Families (DCF) or local licensing agency that actions or inactions of a PROVIDER pose an immediate and serious danger to the health, safety, or welfare of children. COALITION will terminate this Contract on an emergency basis by sending PROVIDER written notice of emergency termination at least twenty-four (24) hours prior to termination. The written notice must specifically state the basis of COALITION's determination. Finally, the notice must state that PROVIDER may request a review of the determination as described in paragraph 64.

59. Revocation of Eligibility. In accordance with s. 1002.88(2), F.S., if PROVIDER's Contract is terminated under paragraph 56., 57., or 58., COALITION may revoke PROVIDER's eligibility to deliver the school readiness program for a period of five (5) years. In determining whether to revoke PROVIDER'S eligibility, the COALITION shall consider the following factors: the severity of the PROVIDER'S actions leading to the termination of the contract, the health, safety and welfare of children enrolled at the PROVIDER, the financial impact of the PROVIDER'S actions, the impact that the revocation would have upon the local community, consistency with COALITION'S actions against other PROVIDERS for similar violations of the Contract or program requirements, the length of time that PROVIDER provided services under contract with the COALITION, and whether the PROVIDER had previously violated there terms of this Contract and prior contracts with the COALITION. COALITION shall provide notice of its intent to revoke PROVIDER'S eligibility at the same time that it provides written notice of intent to terminate the contract to PROVIDER.

60. Termination of Contract by Provider. PROVIDER and COALITION may agree to terminate this Contract by mutual consent or PROVIDER may unilaterally terminate this Contract at will. Written notice of termination must be given and alternative arrangements for uninterrupted services shall be made at least thirty (30) calendar days before the termination date for children

served under this Contract. If sufficient notice of termination is not provided, COALITION may refuse to issue the final reimbursement payment to PROVIDER.

61. **Legislative Appropriation.** Any obligation for payment under this Contract is contingent upon an appropriation by the Florida Legislature. If funds required to finance this Contract are unavailable, COALITION shall terminate this Contract after providing written notice, with proof of delivery, at least twenty-four (24) hours before termination of this Contract. In the event of termination of this Contract under this paragraph, PROVIDER shall be paid for the documented SR hours completed prior to termination of this Contract.
62. **Eligible Child Care Provider.** In order to receive state or federal funds under this Contract, PROVIDER must be an eligible child care provider as defined under 45 C.F.R. §98.2. Failure to maintain status as an eligible child care provider shall be considered an immediate and serious danger to the health, safety, or welfare of children, which is grounds for emergency termination of this Contract as described in paragraph 58. PROVIDER certifies that each location at which PROVIDER offers the SR program is an eligible child care provider. PROVIDER agrees to notify COALITION immediately if it ceases to be an eligible child care provider.
63. **Fraud.**
 - a. **Anti-Fraud Plan.** PROVIDER agrees to comply with the anti-fraud plan established by COALITION in accordance with s. 1002.91, F.S.
 - b. **Payment Certificate Fraud Investigation.** In accordance with s. 1002.82(6)(d), F.S., if it is determined that PROVIDER has given any cash or other consideration to the beneficiary in return for receiving a payment certificate, COALITION or its fiscal agent shall refer the matter to the Department of Financial Services pursuant to s. 414.411, F.S., for investigation.
 - c. **Suspension for Suspected Fraud.** In accordance with s. 1002.91(4), F.S., COALITION may suspend or terminate PROVIDER from participation in the school readiness program when it has reasonable cause to believe that PROVIDER has committed fraud. PROVIDER may request a review of COALITION's determination to suspend PROVIDER as described in paragraph 64. If suspended, PROVIDER shall remain suspended until the completion of any investigation by the Office of Early Learning, the Department of Financial Services, or any other state or federal agency, and any subsequent prosecution or other legal proceeding.
 - d. **Termination for Fraud.** In accordance with s. 1002.91(5), F.S., if PROVIDER, or an owner, officer, or board director thereof, is convicted of, found guilty of, or pleads guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S., or is acting as the beneficial owner for someone who has been convicted of, found guilty of, or pleads guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S., the COALITION shall refrain from contracting with, or using the services of, PROVIDER for a period of five (5) years. In addition, COALITION shall refrain from contracting with, or using the services of, any provider that shares an officer or board director with a provider that is convicted of, found guilty of, or pleads guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S. for a period of five (5) years.
 - e. **Termination for National Disqualification.** In accordance with s. 1002.91(7), F.S., if PROVIDER is placed on the United States Department of Agriculture National Disqualified

List, COALITION must terminate this Contract for cause. In addition, if PROVIDER shares an officer or board director with a provider that is on the United States Department of Agriculture National Disqualified List, COALITION must terminate this Contract for cause.

64. **Due Process Procedures.** PROVIDER may request a review of determinations made by COALITION under this Contract. Reviews will be conducted in accordance with Exhibit 5: Due Process Procedures. While a request for a review is being examined, PROVIDER is not required to implement corrective action. In accordance with s. 1002.82(2)(m), F.S., PROVIDER may not offer any School Readiness services while a request for a review regarding termination of PROVIDER's School Readiness Contract is being examined.
65. **Severability of Provider Location.** If PROVIDER has executed this Contract on behalf of multiple locations and one or more of the locations is terminated pursuant to Section X of this Contract, then in lieu of re-executing a new contract for the remaining locations, COALITION may modify Exhibit 1 to indicate which location(s) previously part of this Contract has been removed by striking through the location(s), initialing and dating in the "official use only" column. COALITION shall provide a copy of the revised Exhibit 1 showing any stricken locations to the PROVIDER. This Contract shall remain in full force and effect as to all other locations on Exhibit 1 which have not been stricken.
66. **Litigation and Venue.** In the event that PROVIDER believes that this Contract has been inappropriately terminated, or in the event of a breach of this Contract, any available remedies may be pursued in a court of competent jurisdiction. COALITION and PROVIDER agree that any litigation related to this Contract which is brought by COALITION or PROVIDER will be brought in a county within COALITION's geographical service area.

XI. NOTIFICATION

67. **Information Change Notification.** PROVIDER agrees to report any changes in contact or program information within fourteen (14) calendar days or temporary emergency closings of the SR program within two (2) calendar days. Permanent business closings or changes in business location or ownership must be reported at least thirty (30) calendar days prior to changes. PROVIDER agrees to provide program and business information annually for inclusion in the Child Care Resource and Referral Network and is responsible for ensuring that COALITION has up-to-date business and contact (including emergency contact) information.
68. **Unusual Incident Notification.** PROVIDER agrees to report unusual incidents to COALITION by no later than the close of business on the next business day of the unusual incident and to submit a written report to COALITION within three (3) business days from the date of the incident. For licensed providers, sending a copy of the incident report submitted for DCF to COALITION shall constitute compliance with this paragraph. An unusual incident is any significant event involving the health and safety of children under PROVIDER's care. Examples of unusual incidents include: accusations of abuse or neglect against PROVIDER or PROVIDER's staff; the injury of a child which requires professional medical attention at PROVIDER's site or written notification from the child's parent that the child received professional medical attention; and when PROVIDER receives notice of litigation where PROVIDER is named party or defendant and which relates to the PROVIDERs operation at any location at which SR services are being provided.
69. **Notification of Disqualification or Public Assistance Fraud.**

- a. PROVIDER shall notify COALITION within five (5) calendar days if the PROVIDER is placed on the United States Department of Agriculture National Disqualified List, or if PROVIDER shares an officer or board director with a provider that is on the United States Department of Agriculture National Disqualified List.
- b. PROVIDER shall notify COALITION within five (5) calendar days if PROVIDER, or an owner, officer, or board director thereof, is convicted of, found guilty of, or pleads guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S., or is acting as the beneficial owner for someone who has been convicted of, found guilty of, or pleads guilty or nolo contendere to, regardless of adjudication, public assistance fraud pursuant to s. 414.39, F.S.

70. Contact Persons.

- a. **Coalition Contact.** The representative for COALITION for the purposes of this Contract is _____ who can be contacted at _____ or by email at _____.
- b. **Provider Contact.** The representative for PROVIDER for the purposes of this Contract is _____ who can be contacted at _____ or by email at _____.
- c. **Contact Change.** In the event that either party designates different representatives after execution of this Contract, notice of the name and contact information of the new representative will be rendered in writing to the other party within ten (10) calendar days of change.

XII. INDEMNIFICATION

71. PROVIDER shall be fully liable for and indemnify, defend and hold harmless COALITION, the Office of Early Learning and all of their officers, directors, agents, contractors, subcontractors and employees from and against any and all third-party claims, suits, actions, damages, judgments and costs that arise whether in law or in equity, from any of the PROVIDER's agents, subcontractors or employees' acts, actions, neglect or omission during the performance or operations under this Contract or any subsequent modification thereof. This includes attorney's fees and costs. This indemnification holds whether liability is direct or indirect and whether damage is to any person or real or personal tangible or intangible property. **If PROVIDER is a state agency, public school or school district, this paragraph is limited to the extent required by s. 768.28, F.S.**

XIII. SEVERABILITY

72. If any provision of this Contract is held to be unenforceable by a court of competent jurisdiction, the remaining terms and conditions remain in full force and effect.

XIV. NO AMENDMENTS

73. No attachments, amendments, or supplements to this Contract are authorized or permitted, except those specifically incorporated by reference in this form, including Exhibit 1: Provider Location List; Exhibit 2: Required Documentation; Exhibit 3: Provider Reimbursement Rates;

Exhibit 4: Holiday Schedule; Exhibit 5: Due Process Procedures; and Form OEL-SR 20L, Form OEL-SR 20LE, or Form OEL-SR 20FFN, as described in paragraph 7.

(Remainder of this page intentionally left blank.)

XIV. EXECUTION OF CONTRACT

In accordance with s. 1002.88(1)(p), F.S., PROVIDER has caused this Contract to be executed as of the date set forth in Paragraph 1. By signing below, PROVIDER hereby certifies that PROVIDER has read and understood this Contract. PROVIDER certifies that all information provided is true and correct and agrees that noncompliance with the requirements of the School Readiness program including, but not limited to the requirements of this Contract, and all Exhibits and authorized attachments, shall result in corrective action, withholding of funds, or termination of this Contract at the discretion of COALITION, in accordance with Section X.

Warranty of Authority. Each person signing this contract warrants that he or she is duly authorized to do so and to bind the respective party to the contract.

 #9

**Signature of President/Vice President/
Secretary/Officer/Owner/Principal/or Other
Authorized Representative**
☐ By Electronic Signature

Print Name

Title

Date

 # 10

**Provider's Additional Signatory (If required by
the Provider)**
☐ By Electronic Signature

Print Name

Title

Date

COALITION has caused this Contract to be executed as of the date set forth in paragraph 1.

Signature of Authorized Coalition Representative
☐ By Electronic Signature

Print Name

Title

Date

Exhibit 1: Provider Location List

Provider Name: _____

If PROVIDER is executing this Contract on behalf of one physical location, mark this Exhibit “Not Applicable” in the box below.

☐ Not Applicable.

If PROVIDER is a school district executing a single Contract on behalf of multiple public school School Readiness (SR) program providers, enter each name and physical location in the table below. If PROVIDER is executing a single Contract on behalf of multiple private SR sites within COALITION’s service area, enter each name and physical location in the table below. If PROVIDER is using a different curriculum or curricula at various sites, enter the name of the curriculum or curricula used at each site. Identify the character development Program used at each site, if character development is included in the curriculum or curricula indicate as “included.”

Note: PROVIDER may use multiple Exhibit 1 to list all locations that are included under this contract.

If COALITION determines a physical location to be ineligible to offer the SR program, COALITION will strike through the name and location in the table below and initial and date in the column titled “Official Use Only” and send a copy of this Exhibit to PROVIDER.

Location Number (DCF/FEIN Number)	Location Name	Physical Address	Curriculum (Date/Edition)	Official Use Only
			Character Development (Date/Edition)	
1.			#6 #19	
2.				
3.				
4.				
5.				
6.				
7.				

Exhibit 2: Required Documentation

Provider Name: _____

PROVIDER must mark the appropriate box in each section or subsection below. In addition, if PROVIDER is executing this Contract on behalf of multiple public schools or private provider sites, PROVIDER must mark the documentation with the corresponding Location Number from Exhibit 1.

1. Private Child Care Rates **#11**

- ☐ PROVIDER has provided a copy of its private child care rate information to COALITION with this Contract.

2. Gold Seal Rates **#12**

- ☐ PROVIDER has provided a copy of documentation related to its Gold Seal status, if applicable, to COALITION with this Contract.
- ☐ PROVIDER does not possess a Gold Seal Quality Care Designation.

3. Documentation of Eligible Child Care Provider **#13**

Private SR Providers

- ☐ PROVIDER has provided a copy of its Certificate of Licensure which includes a DCF identification number.
- ☐ PROVIDER has provided a copy of its Letter of Confirmation which includes a DCF exemption number.
- ☐ PROVIDER has provided a copy of its certificate of accreditation.
- ☐ PROVIDER certifies that it is not regulated by DCF and therefore does not require documentation from DCF.
- ☐ PROVIDER has provided evidence of liability insurance.

Public School, Private School, and Charter School SR Providers

- ☐ PROVIDER is a public school and has provided a copy of documentation showing its school district and public school number.
- ☐ PROVIDER is a private school and has provided a copy of its Certificate of Licensure which includes a DCF identification number or a Letter of Confirmation which includes a DCF exemption number.
- ☐ PROVIDER is a charter school and has provided a copy of its charter which includes preschool aged children as a service population and documentation showing its school district and school number.
- ☐ PROVIDER has provided evidence of liability insurance.

4. Specialized Program Type

- ☐ PROVIDER offers the Head Start program.
- ☐ PROVIDER does not offer the Head Start program.

5. ☐ IRS W-9 Form (Request for Taxpayer Identification Number). **#2.**

6. ☐ Documentation of signature authority. **#10**

7. ☐ Current Sunbiz print-out identifying the office, director or authorized person(s). **#14.**

Exhibit 3: Provider Reimbursement Rates

Provider Name: _____

Provider Operational Hours: _____ **#16**

PROVIDER must mark the appropriate box below indicating the appropriate provider type. In addition, PROVIDER must mark whether or not it has a Gold Seal Quality Care Designation. Finally, PROVIDER must complete the table below marked "To be completed by PROVIDER." COALITION will complete the remainder of the Exhibit.

Does PROVIDER have a Gold Seal Designation? ☐ Yes ☐ No

#11.

PROVIDER's Private Pay Rates (To be Completed by PROVIDER)

CARE LEVEL	(INF) <12 MTH	(TOD) 12<24 MTH	(2YR) 24<36 MTH	(PR3) 36<48 MTH	(PR4) 48<60 MTH	(PR5) 60<72 MTH	(SCH) In School	(SPCR) Special Needs
Full-Time Daily Rates								
Part-Time Daily Rates								
Before or After School Rates	N/A	N/A	N/A	N/A				

#15

COALITION Maximum Reimbursement Rates (To be Completed by COALITION)

CARE LEVEL	(INF) <12 MTH	(TOD) 12<24 MTH	(2YR) 24<36 MTH	(PR3) 36<48 MTH	(PR4) 48<60 MTH	(PR5) 60<72 MTH	(SCH) In School	(SPCR) Special Needs
Full-Time Daily Rates								
Full-Time Gold Seal Daily Rates								
Part-Time Daily Rates								
Part-Time Gold Seal Daily Rates								
Before or After School Rates	N/A	N/A	N/A	N/A				
Full-Time VPK Wrap Rate	N/A	N/A	N/A	N/A		N/A	N/A	N/A
Part-Time VPK Wrap Rate	N/A	N/A	N/A	N/A		N/A	N/A	N/A

#17 Approved PROVIDER Reimbursement Rate*
(To be Completed by COALITION)

CARE LEVEL	(INF) <12 MTH	(TOD) 12<24 MTH	(2YR) 24<36 MTH	(PR3) 36<48 MTH	(PR4) 48<60 MTH	(PR5) 60<72 MTH	(SCH) In School	(SPCR) Special Needs
Full-Time Daily Rates								
Part-Time Daily Rates								
Before or After School Rates	N/A	N/A	N/A	N/A				
Full-Time VPK Wrap Rate	N/A	N/A	N/A	N/A		N/A	N/A	N/A
Part-Time VPK Wrap Rate	N/A	N/A	N/A	N/A		N/A	N/A	N/A

**Note: Rate PROVIDER will be paid shall not exceed PROVIDER's Private Pay Rates for each category.*

Effective Date of Rates Established in This Exhibit _____

Exhibit 4: Holiday Schedule

Provider Name: _____

#8

Holiday	Date Observed

If the holiday falls on a Saturday, the holiday is observed on the Friday preceding the holiday. If the holiday falls on a Sunday, the holiday is observed on the Monday following the holiday.

Exhibit 5: Due Process Procedures

Provider Name: _____

1. **Purpose of Exhibit.** Early Learning Coalitions are responsible for the local implementation of early learning programs funded with state and federal funds, such as the School Readiness Program and Voluntary Prekindergarten Education Program. Providers of such early learning programs may request a review of determinations made by an Early Learning Coalition in accordance with the due process procedures described below.
2. **Request for Review Hearing.** If a provider disputes any action taken by the Coalition pursuant to the terms of the Statewide School Readiness Provider Contract, the provider may request a review hearing in writing by sending it to the contact person listed in the Coalition's action. A review hearing is a "meeting" for the purposes of the Sunshine Law which is subject to public notice. During a review hearing, the provider will have a reasonable opportunity to address Coalition staff-persons or sub-contractor staff regarding the Coalition's action and to present supporting evidence before a Review Hearing Committee. Provider may have an attorney present at the review hearing to represent or advise the provider.
 - a. **Content of Request for Review Hearing.** The request for review hearing must state: the name and contact information of an individual authorized to provide information and binding responses on behalf of provider; the specific action by the Coalition that the provider disputes, the specific reasons for the provider's belief; and whether the provider will be represented by an attorney or another individual during the review hearing.
 - b. **Request Time.** The provider's request for a review hearing must be submitted in writing to the Coalition within five (5) business days of receipt of notice of the determination which the provider believes to be incorrect.
 - c. **Supporting Documentation.** The provider must send copies of any written documentation supporting the claims of the provider. Examples of relevant documentation may include, but are not limited to, attendance documentation, notarized attestations from parents, documentation from licensing or accrediting bodies, documents demonstrating dates of information submission, and a proposed corrective action plan.
3. **Implementation of Review.** If the Coalition receives a request for review hearing from the provider, the Coalition must address the request by taking the following steps.
 - a. **Assignment of Review Hearing Committee.** Within three (3) business days of receipt of a request for review hearing, the Coalition must assign a Review Hearing Committee to complete the review. The Review Hearing Committee must be composed of at least three but no more than five members of the Coalition Board. The Chair of the ELC shall appoint the Review Hearing Committee and shall name the chair of the committee. Three of the members must be a mandatory member as set forth in section 1002.83(4) with at least one provider representative member.
 - b. **Response to Request for Review Hearing.** Within five (5) business days of receipt of the request for review hearing, the Coalition must respond to the provider in writing,

return receipt requested. The notice must include at least three (3) proposed dates and times for the review hearing which must be within forty-five (45) days of the date of receipt of the request for review hearing. The notice must also state that the review hearing may be conducted in person at a location designated by the Coalition or via any method of telecommunications, as long as the public is given reasonable access to observe and, when appropriate, participate. Finally, the notice must state whether or not all of the Coalition staff persons or sub-contractor staff whom the provider wishes to have present during the hearing will be made available. If any individual whom the provider requested to have present is not available, the Coalition must make available an individual who is qualified to address the subjects the provider wished the individual to address.

- c. Date and Location Selection.** Within five (5) business days of receipt of the response to a request for review hearing, the provider must inform the Coalition of the date and time which it selects for the review hearing and whether the provider will attend the meeting in person or via a method of telecommunication. Within five (5) business days of receipt of the response to a request for review hearing, if the provider is unable to attend any of the proposed dates and times for the review hearing, the provider must submit written notice which states the specific reasons that provider is unable to attend and must contact the Coalition to select a mutually agreed upon date for the review hearing. If the provider does not inform the Coalition of the date and time within the required time period, then the process is considered complete and the request is denied.
- d. Conducting the Review Hearing.** The Review Hearing Committee shall assess the claim(s) the provider made in its request for review by examining all information and documentation submitted by the provider. The provider must be given a reasonable opportunity to question Coalition staff-persons or sub-contractor staff regarding the determinations of the Coalition and to present evidence before the Review Hearing Committee. The Coalition will also be provided a reasonable opportunity to submit evidence to rebut any claims made by the provider.
- e. Notice of Review Hearing Conclusion.** Following completion of the presentation by the provider and the Coalition, the Review Hearing Committee will vote regarding each of the provider's claims. The Review Hearing Committee must also appoint a Review Hearing Committee member or a Coalition staff person to prepare a written notice of the review hearing conclusion. (If the notice is developed by a Coalition staff person, the notice must be reviewed by the Review Hearing Committee in a subsequent public meeting and approved before being sent to the provider.) The written notice must state the outcome of the Review Hearing Committee's vote regarding each of the provider's claims. In addition, the notice must specifically state the reasons supporting the Review Hearing Committee's conclusions. Finally, if the majority of the Review Hearing Committee determines:

 - i.** That no part of the determination made by the Coalition was correct, the notice must state provider is not required to take further action.
 - ii.** That any part of the determination made by the Coalition is correct, the notice must identify the portion(s) determined to be correct. As applicable, the notice must also state:

- A.** If corrective action is necessary, that the provider must take corrective action in regard to the part(s) which the Review Hearing Committee determines to be correct; and the revised deadlines for completion of the corrective action(s);
- B.** If the provider's School Readiness Contract or eligibility to offer the School Readiness Program will be terminated, the date of termination.

The decision of the Review Hearing Committee is final.



**STATE OF FLORIDA
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT
LICENSED PROVIDER RESPONSIBILITIES
FORM OEL-SR 20L**

I. PARTIES AND PROVIDER TYPE

#5

1. **Parties.** This document is executed as an attachment to the Contract made and entered into the _____ day of _____, 20_____, by and between the Early Learning Coalition of _____ (herein referred to as "COALITION"), and _____ (herein referred to as "PROVIDER").
2. **Provider Type.** To be eligible to deliver the school readiness program, PROVIDER must be one of the provider types identified in section (s.) 1002.88(1)(a), Florida Statutes (F.S.). This form is designed for use by licensed providers. PROVIDER must check the box to indicate PROVIDER's type:

☐ A child care facility licensed under s. 402.305, F.S.

☐ A family day care home licensed or registered under s. 402.313, F.S.

☐ A large family child care home licensed under s. 402.3131, F.S.

☐ A before-school or after-school program described in s. 402.305(1)(c), F.S., which has elected to be licensed.

II. LICENSED PROVIDER RESPONSIBILITIES

1. **Health and Safety.**
 - a. In accordance with s. 1002.88(1)(c), F.S., PROVIDER agrees to offer basic health and safety of its premises and facilities and compliance with requirements for age-appropriate immunizations of children enrolled in the school readiness program. PROVIDER's compliance with ss. 402.305, 402.3131, or 402.313, F.S., satisfies this requirement.
 - b. In accordance with s. 1002.88(1)(e), F.S., PROVIDER agrees to offer a healthy and safe environment pursuant to s. 402.305(5), (6), and (7), F.S., as applicable, and as verified pursuant to s. 402.311, F.S.
2. **Staff to Children Ratio.** In accordance with s. 1002.88(1)(d), F.S., PROVIDER agrees to maintain the required staff to child ratio in accordance with ss. 402.305(4), 402.302(8), or 402.302(11), F.S., as verified pursuant to s. 402.311, F.S.
3. **Insurance.** #4
 - a. **General liability insurance.** In accordance with s. 1002.88(1)(l), F.S., PROVIDER agrees to maintain general liability insurance and provide the coalition with written evidence of general liability insurance coverage, including coverage for transportation of children if school readiness program children are transported by the PROVIDER. PROVIDER must obtain and retain an insurance policy that provides a minimum of \$100,000 of coverage per occurrence and a minimum of \$300,000 general aggregate coverage. PROVIDER must add

the coalition as a named certificateholder and as an additional insured. PROVIDER must provide COALITION with a minimum of ten (10) calendar days' advance written notice of cancellation of or changes to coverage. The general liability insurance required by this paragraph must remain in full force and effect for the entire period of this Contract. If the general liability insurance coverage required by this paragraph lapses, COALITION shall immediately terminate this Contract.

- b. Limitations on indemnification.** In accordance with s. 1002.88(1)(o), F.S., if PROVIDER is a state agency or a subdivision thereof, as defined in s. 768.28(2), F.S., PROVIDER agrees to notify the coalition of any additional liability coverage maintained by the provider in addition to that otherwise established under s. 768.28, F.S. PROVIDER shall indemnify COALITION to the extent permitted by s. 768.28, F.S.
- 4. Substitute Instructors.** In accordance with s. 1002.83(14), F.S., COALITION may request a list of all individuals currently eligible to act as a substitute teacher from a school district. PROVIDER may employ individuals listed as substitute instructors for the purpose of offering the school readiness program, the Voluntary Prekindergarten Education Program, and all other legally operating child care programs.

Exhibit 2: Required Documentation

Provider Name: _____

PROVIDER must mark the appropriate box in each section or subsection below. In addition, if PROVIDER is executing this Contract on behalf of multiple public schools or private provider sites, PROVIDER must mark the documentation with the corresponding Location Number from Exhibit 1.

1. Private Child Care Rates

- ☐ PROVIDER has provided a copy of its private child care rate information to COALITION with this Contract.

2. Gold Seal Rates

- ☐ PROVIDER has provided a copy of documentation related to its Gold Seal status, if applicable, to COALITION with this Contract.
- ☐ PROVIDER does not possess a Gold Seal Quality Care Designation.

3. Documentation of Eligible Child Care Provider

Private SR Providers

- ☐ PROVIDER has provided a copy of its Certificate of Licensure which includes a DCF identification number.
- ☐ PROVIDER has provided a copy of its Letter of Confirmation which includes a DCF exemption number.
- ☐ PROVIDER has provided a copy of its certificate of accreditation.
- ☐ PROVIDER certifies that it is not regulated by DCF and therefore does not require documentation from DCF.
- ☐ PROVIDER has provided evidence of liability insurance.

Public School, Private School, and Charter School SR Providers

- ☐ PROVIDER is a public school and has provided a copy of documentation showing its school district and public school number.
- ☐ PROVIDER is a private school and has provided a copy of its Certificate of Licensure which includes a DCF identification number or a Letter of Confirmation which includes a DCF exemption number.
- ☐ PROVIDER is a charter school and has provided a copy of its charter which includes preschool aged children as a service population and documentation showing its school district and school number.
- ☐ PROVIDER has provided evidence of liability insurance.

4. Specialized Program Type

- ☐ PROVIDER offers the Head Start program.
- ☐ PROVIDER does not offer the Head Start program.

5. ☐ IRS W-9 Form (Request for Taxpayer Identification Number).

6. ☐ Documentation of signature authority.

7. ☐ **Current Sunbiz print-out identifying the office, director or authorized person(s).**

Proposed Changes to ELCHC Budget

FTE's	Exhibit F Description	Expected Start Date	Fiscal Year 2016			Fiscal Year 2017		
			Prorated Expenditures SR	Prorated Expenditures VPK	Prorated Expenditures Total	Expenditures SR	Expenditures VPK	Expenditures Total
Provider Services								
2	Provider contract monitoring	3/1/15	\$20,218	\$13,478	\$33,696	\$60,653	\$40,435	\$101,088
2	Provider contract processing	3/1/15	\$20,218	\$13,478	\$33,696	\$60,653	\$40,435	\$101,088
	Data Entry/Prov Updates							
2	Spec.(Temps)	3/1/15	\$15,725	\$10,483	\$26,208			\$78,624
6			\$56,160	\$37,440	\$93,600	\$121,306	\$80,870	\$280,800
Family Services								
1	CCR&R Manager	5/1/15	\$8,424	-	\$8,424	\$50,544		\$50,544
1	CCR&R Specialist	5/1/15	\$8,424	-	\$8,424	\$50,544		\$50,544
1	CCR&R--Outreach	5/1/15	\$7,020	-	\$7,020	\$42,120		\$42,120
1	Waitlist Mgmt	5/1/15	\$21,060	-	\$21,060	\$42,120		\$42,120
1	VPK Family specialist	3/1/15	-	\$13,104	\$13,104		\$39,312	\$39,312
	Data entry/enrollment (2 Temp							
1	positions, for 6 mos)	3/1/15	-	\$7,800	\$7,800		\$23,400	\$23,400
6			\$44,928	\$20,904	\$65,832	\$185,328	\$62,712	\$248,040
Infrastructure								
1	Receptionist	3/1/15	\$6,739	\$4,493	\$11,232	\$20,218	\$13,478	\$33,696
	O/H Costs*		\$9,100	\$6,067	\$15,167	\$10,140	\$6,760	\$16,900
	Add'l Office Lease	3/1/15	\$11,554	\$7,702	\$19,256	\$34,661	\$23,107	\$57,768
1			\$27,393	\$18,262	\$45,655	\$65,018	\$43,346	\$108,364
Total Budgetary Increase--ELCHC			\$128,481	\$76,606	\$205,087	\$371,652	\$186,928	\$637,204

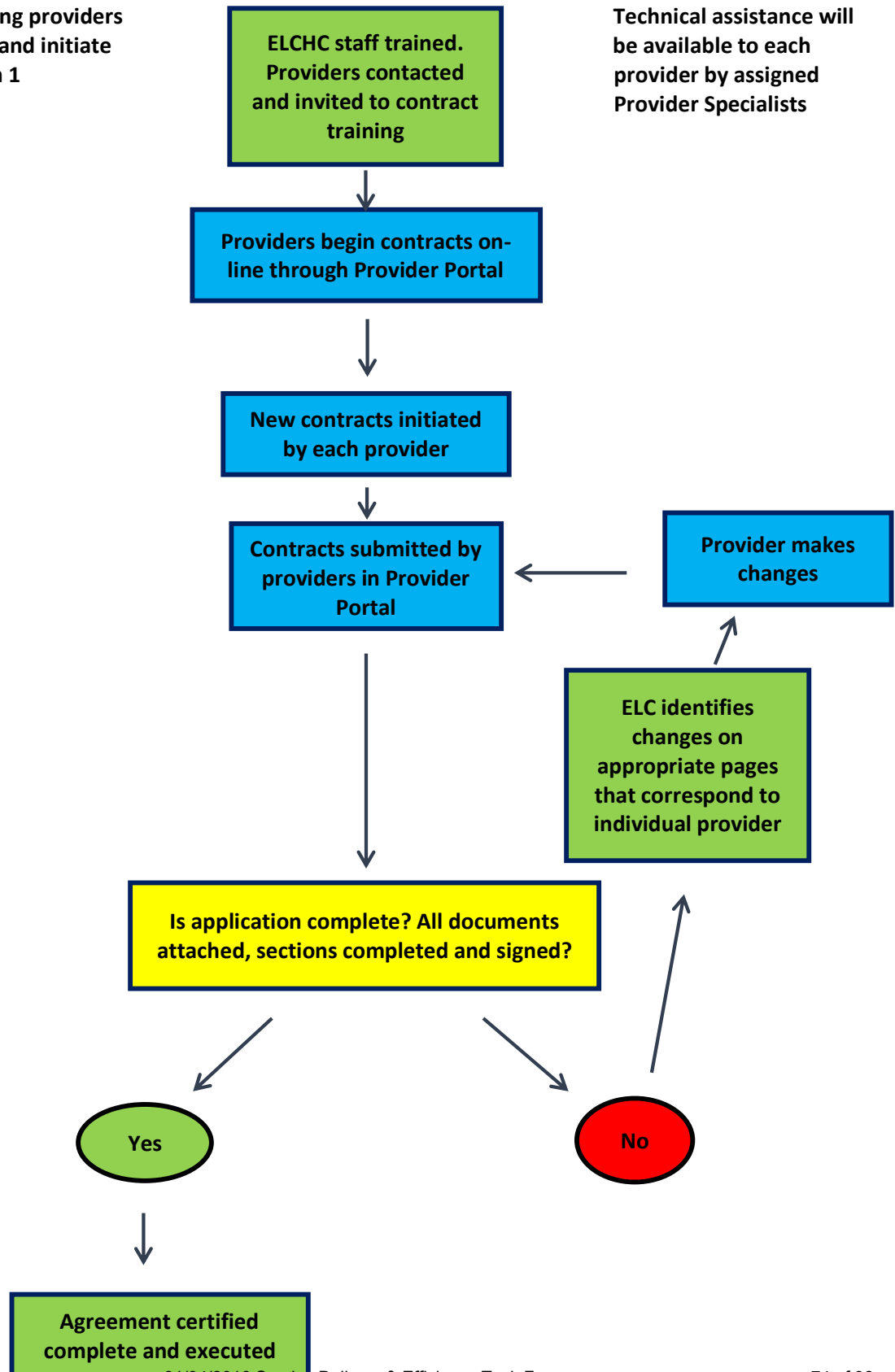
*Includes costs for one time equipment purchases in 2016, such as computers, desks, etc...

STEPS & DECISION TREE FOR CONTRACTING

Note: Contract template information entered by ELCH staff

Begin contacting providers
mid-February and initiate
process March 1

Technical assistance will
be available to each
provider by assigned
Provider Specialists



The attached manuals and procedures have been developed by ELCHC in preparation of working with providers completing contacts and/or documents on-line with the Provider Portal.

DEPARTMENT: Provider Services	SUBJECT: Procedure for review and Certification of the School Readiness Provider Contract submitted through the Provider Portal
EFFECTIVE: March 1, 2016	AUTHORIZATION APPROVAL: CEO or designee

PURPOSE: Procedure for the review and certification of the statewide School Readiness Provider Contracts submitted through the Provider Portal.

SCOPE: Review and Certification of the OEL-SR20, OEL-SR20L, OEL-SR20LE and OEL-SR20FFN Statewide School Readiness Provider Contract.

PROCESS:

Specialists will review Provider Contracts in the **Submitted** mode daily. Using the following process:

Step One:

- Open the following websites for verification of supporting documentation:
 - Hillsborough County Childcare Licensing:
<http://www.hillsboroughcounty.org/index.aspx?nid=953>
 - Sunbiz <http://sunbiz.org/search.html>
- Log in to the Provider Portal.
- Click Agreements Tab and select a provider and the Agreement Type for an application review, the status of the application must be in **Submitted Mode**.
- Click **Reviewing** button to move application from submitted to “Reviewing”
- Click on Agreement Type» SR Dashboard» School Readiness for the current fiscal year.

Step Two:

- Click on Form to be reviewed (OEL-SR20, OEL-SR20L, etc.)
- Open the following documents for verification:
 - License Certificate
 - Completed W-9
- On page 1, paragraph 1 – date must be entered.
- Verify Family Child Care Home or Business Name (as it appears on License) along with any DBA listings. Verify names listed on license against the information found at <http://sunbiz.org/search.html>
- Verify Address
- **Paragraph c.** - Verify Fed. ID No/SSN*: Corporations are required to have a FEIN Number and FCCH and non-incorporated facilities are required to provide SSN Number. The FEIN Number must be verified on Sunbiz.org or the IRS letter.

Step Three:

- Page 2 & 3, Paragraph 7.a. Verify that the provider type based on license certificate, letter from Florida Department of Health, or public school using documents in the *License or Exemption* portal folder. For public school and charter school sites verify information on <http://doeweb-prd.doe.state.fl.us/EDS/MasterSchoolID/>

Step Four:

- Page 4 **Curriculum and Character Development Program:**
- Verify that the curriculum name and edition or date listed by the provider in this section is a State approved School Readiness curriculum using the OEL Approved School Readiness Curricula list.
- Sites that indicated they only served school age children on page 2 or 3 can enter “not applicable” in this section.
- Verify that a Character Development Program and edition or date is entered in this section. The Character Development program listed may be the same as the curriculum since some approved curricula include a character development component.

Step Five:

- Page 10 – **Holiday Schedule**
- Verify using the number of holidays listed by provider on page 22 of the School Readiness Contract and Page 21 of the CSC Scholarship contract the number of holidays selected by the provider. The number listed on page 10 should up to 10 and can be selected for the provider.

Step Six:

- Page 15 – **Contact Persons**
- Verify that the provider entered a legible name, phone number and valid email address in the **Provider Contact** section.

Step Seven:

- Page 17 – **Execution of Contract**
- Verify that name listed in the Signature and print name sections are of a corporate officer (if applicable) using the Sunbiz corporate print out information.
- If provider is a sole proprietor the owner’s name should be listed here as it is on the Hillsborough County Child Care license certificate.
- Verify that the provider has checked the Electronic Signature box, entered their title and date.

Step Eight:

- Page 18 – **Provider Location List**
- This page should have the provider’s name listed and the not applicable box checked.

Step Nine:

- Page 19 – **Required Documentation**
- #1 – provider should check the box – Verify that provider has uploaded a copy of their private child care rates into the *Provider Public Rate Sheet* folder in the Document Library.
- #2 – provider should check the box that corresponds with their Gold Seal status. If provider indicates that they have a Gold Seal Certificate, verify that the Gold Seal Certificate is in the *Accreditation and-or Gold Seal* folder of the Document Library and is not expired.
- #3 – **Private Providers**
 - 1 & 2: Provider should check the box that corresponds with their licensing status. If provider indicated they are licensed or licensed exempt verify that there is an active license or exemption letter in the *License or Exemption* folder of the Document Library.
 - 3: Provider should check the box regarding the certificate of accreditation if they hold an accreditation, verify that the accreditation certificate is in the *Accreditation and-or Gold Seal* Folder of the Document Library and is not expired.

- 5: Provider should check the box that indicates they have provided evidence of Liability Insurance, verify that the certificate of insurance is in the *Insurance -Liability* folder in the Document Library, that it is actively covering the term of the contract, and that it lists the Early Learning Coalition as additionally insured.
- *Transportation Insurance* – Providers should supply evidence of Transportation insurance if they are transporting children and Workers' Compensation insurance if they have 4 or more employees.
- *Workers' Compensation coverage*- should be verified at <https://apps8.fldfs.com/proofofcoverage/Search.aspx> . If provider states that the site is not required to carry workers' compensation coverage then the provider must supply a notarized letter if they have 3 employees or less including the owner; if they have 4 employees including the owner, the owner may file for an exemption with the Division of Workers' Compensation, the site must submit a notarized letter and the documentation of the filed exemption.
- **#3 – Public School, Private School and Charter School**
 - Providers should check the box that corresponds with their status. Verify that provider has uploaded the documentation that corresponds with the selection to the *License or Exemption* Folder of the Document Library.
 - Documentation includes: verification of public school number, license from the Florida Department of Health, or copy of the charter.
- **#4 – Specialized Program Type (School Readiness contract)**
 - Provider should indicate if they are or are not a head start or early head start provider, verify status using list of head start sites: <http://www.hillsboroughcounty.org/index.aspx?NID=2599> or <http://www.sdhc.k12.fl.us/docs/00/00/13/47/HeadStartSites.pdf>.
- **#5 - IRS –W-9 Form**
 - All providers should have a completed W-9 form loaded into the *W-9* folder on the Document Library. W-9 form must be completed and signed by provider. Verify FEIN Number: Corporations are required to have a FEIN number and FCCH and non-incorporated facilities are required to provide SSN Number. The FEIN must be verified on Sunbiz.org or the IRS letter.
- **#6 – Documentation of Signature Authority**
 - Providers that have a large corporate structure may have documentation that allows certain employees that are not listed as owners sign contracts. If providers are requesting that someone other than an owner or corporate officer sign their contract they must also submit documentation of signature authority to be saved in the *Miscellaneous* folder in the Document Library.
- **#7 – Current SunBiz Print-out**
 - Providers should upload a copy of their most current active SunBiz corporate listing. This listing identifies owners, directors or authorized persons acting on behalf of the corporation. Verify that the person that executed the contract on page 17 is listed on the SunBiz listing or the provider supplied documentation of signature authority.

Step Ten:

- Page 20 - **Provider Reimbursement Rates**

- Verify that the provider's name is listed in the first box
- Verify that the provider's hours are as entered and match the provider's listing on provider license.
- Verify if the provider has a Gold Seal or not. If they have a Gold Seal "yes" should be checked, if not "no" should be checked.
- Verify that providers entered their Daily Private Pay Rates in the first section for the ages of the children they serve.
- Verify that the rates that are entered into the Daily Private Pay Rates match the provider's public rate sheet from the *Provider Public Rate Sheet* folder in the Document Library.
- Use Rate to determine EFS CCMS payment rate. Coalition cannot pay more than Public Rates.
- If rates are entered for infants and 1 year olds, verify on child care license that '**special conditions: infant capacity**' is NOT zero

Step Eleven:

- Page 21 – **Approved PROVIDER Reimbursement Rate**
- Verify that the system has correctly calculated the provider's reimbursement rate.
- Correct any that are incorrect or enter any missing rates.
- VPK Wrap rate- enter PR3, PR4 and PR5 rates into the FTV and PTV boxes for the School Readiness contract.

Step Twelve:

- Page 22 – **Exhibit 4: Holiday Schedule**
- Verify that the provider selects up to 10 holidays of their choice and the holidays selected by the provider are not weekend days.
- Provider selected holidays will be entered into EFS on the Holiday screen.

Step Thirteen:

- Save and close OEL-SR 20.

Step Fourteen:

- Open and verify OEL –SR 20L or OEL-SR 20LE have been completed with the provider's name and type.

Incomplete Contract

Step One:

- If upon review the contract is found to be incomplete by the Provider Services Specialist the Provider Services Specialist will contact the provider for corrections clicking **Defer Agreement back to Provider** so that corrections can be made and the document can be resubmitted.
- Provider Services Specialist will contact the provider initially using both an email and posting the message on the portal message board indicating what items are missing or need correction before the contract can be sent for certification.
- If the provider does not respond within 3 business days of sent email notification the Provider Services Specialist will follow up by calling the provider to offer technical assistance.

Complete Contract:

Step One:

- The Provider Services Specialist has reviewed the contract and did not find any errors, click **Agreement Successfully Reviewed**

Step Two:

- Send email to provider and post message on the portal using the standard format listed below:
“Good _____,(insert provider name), your School Readiness contract has been reviewed and is currently awaiting final approval. You can expect to receive notification upon completion of your executed contract.”

Contract Certification

Provider Services Coordinator and Provider Services Manager will check documents in **Reviewed** status daily during peak processing times. During non-peak processing times Coordinator and Manager will review applications in **Reviewed** status after receiving notification from the Provider Services Specialist.

Step One:

- Provider Services Coordinator and Manager will use the above Steps One through Fourteen to review the contract and determine if it is able to be certified.

Incomplete Contract

Step One:

- If upon review, the contract is found to be *incomplete* the Provider Services Coordinator or Manager will return the contract to the Provider Services Specialist by clicking the **Return to Reviewer** button.

Step Two:

- The Provider Services Coordinator or Manager will follow up with the Provider Services Specialist to discuss items that were found to be missing or incomplete in the contract. The Provider Services Specialist will then contact the provider.

Complete Contract

Step One:

- If the contract is complete and able to be certified the Provider Services Coordinator or Manager will edit the document on the signature page entering the name of the CEO and the date. The Provider Services Coordinator or Manager will save the changes and click **Certify Agreement**.

School Readiness and CSC Scholarship Certified Contract

Step One:

- Provider Services Specialists will review Agreement Status folder daily to determine if contract has been certified.

Step Two:

- All certified contracts are to be saved as a PDF on BOX by Provider Services Specialist at the following location: **Provider Services>20 -20 SR Executed Agreements** by letter (A-J), (K-V)

Step Three:

- The communication below will be sent to the provider once their agreement has been successfully certified;
- Congratulations! Your (Enter type of Agreement) provider agreement has been executed. Please login to the portal and select the appropriate agreement type, view agreement details, click on the agreement type/year, and click on the form you wish to print. Finally click on the link at the top of the page 'Download as a PDF'. Now you can print/save a copy of your agreement.
- Providers will also be sent an email from ELCHC staff.
- Provider's information will be added to the weekly update email sent by the Provider Services Manager.

DRAFT

DEPARTMENT: Provider Services	SUBJECT: Procedure for review and certification of the VPK provider application and contract
EFFECTIVE: 3/1/2016	AUTHORIZATION APPROVAL: CEO or designee

PURPOSE: Procedure to review and certify the VPK application and contract.

SCOPE: Review and certification of the OEL-VPK 10, OEL-VPK 11A, OEL-VPK 11B, OEL-VPK 20 and OEL-VPK 20L or 20PS using the Instruction for Forms documentation supplied by OEL.

PROCEDURE:

Provider Services Specialists will review the VPK Provider Applications and contracts in the **Submitted** mode daily. Using the following procedure:

Step One:

- Log into the Provider Portal.
- Click the Agreements Tab and select a provider and the agreement type for an application review the status of the application must be in **Submitted Mode**
- Click **Reviewing** to move the application from “submitted” to “reviewing”
- Click on Agreement Type >VPK for the fiscal year you are reviewing.

Step Two:

- Click on the OEL-VPK10
- Verify the correct program year is selected.
- Verify that the appropriate application status button is selected; *New Application* for a new program year, or *Updated Application & Date* for a change submitted after the application has been approved.
- Verify that the information on the **OEL-VPK 10** is correct as per the ***Instructions for Forms*** document. (see attached).
- Open the Provider’s document library to review the supporting documentation.
 - *License or Exemption folder:* License
 - *Accreditation and-or Gold Seal:* Accreditation and/or Gold Seal certificates
 - *VPK Director Credential:* Director’s Credential
- If all information is correct the Provider Services Specialist will enter their name and date at the bottom of the form and save and close.

Step Three:

- Click on the OEL-VPK11A
- Verify that the appropriate application status button is selected; *New Application* for a new program year, or *Updated Application & Date* for a change submitted after the application has been approved.
- Verify the provider’s name matches their license.
- Verify that the correct program year is selected.
- Verify that the Employer Identification number matches the provider’s EIN.
- Using the ***Instructions for Forms*** document review the instructors, aide and substitute information entered on the form for accuracy.

- Open the Provider's Document library to review the supporting documentation.
 - *VPK Instructor's Credential*: Credentials and required trainings
 - *VPK Background Screening*: Level 2 clearance letters from DCF
 - *VPK Affidavit of Good Moral Character*: Staff Affidavits of Good Moral Character
- Using the Official Use section of the **Instructions for Forms** document complete the boxes on the right hand side of the form. (DO NOT check the LS box – Local background checks are no longer a requirement)
- If all information is correct the Provider Services Specialist will enter their name and date at the bottom of the form and save and close.

Step Four:

- Click on the OEL-VPK 11B
- Verify that the appropriate application status button is selected; *New Application* for a new program year, or *Updated Application & Date* for a change submitted after the application has been approved.
- Verify the provider's name matches their license.
- Verify that the correct program year is selected.
- Verify that the Employer Identification number matches the provider's EIN.
- Using the **Instructions for Forms** document review the calendar information for accuracy.
- If all information is correct the Provider Services Specialist will enter their name and date at the bottom of the form and save and close.

Step Five:

- Using the document library for the provider Verify that the provider has the appropriate insurance in place, Liability, Transportation and Workers' Compensation as per the OEL-VPK 20L.
- Verify that the provider has submitted a W-9 form.

Step Six:

- Click on the OEL-VP20 (August 2014).
- Verify the correct date, coalition and provider information is entered in Section I, 1.
- Verify that #3 has the correct term of the contract and contract begins date.
- Verify that Section II, 7, a. has the correct provider type selected.
- Check page 7 to see if the provider selected to be paid by advance payments. If provider did check the box on page 7. Use the Placing a VPK provider on the advance or reimbursement payment schedule procedure to correctly document that selection in EFS.
- Page 13 -Verify that contract is signed by an authorized representative of the provider.
- Save and close
- Open OEL-VPK 20PP or 20PS – Verify that Section I, 1- Parties is completed with the provider's information.
- Verify that the correct provider type is selected in Section 1, 2 – Provider Type.
- Click "Reviewed" to move contract for certification.

Step Seven:

Incomplete Contract

Step One:

- If upon review the contract is found to be incomplete by the Provider Services Specialist the Provider Services Specialist will contact the provider for corrections clicking **Defer Agreement back to Provider** so that corrections can be made and the document can be resubmitted.

- Provider Services Specialist will contact the provider initially using both an email and posting the message on the portal message board indicating what items are missing or need correction before the contract can be sent for certification.
- If the provider does not respond within 3 business days of sent email notification the Provider Services Specialist will follow up by calling the provider to offer technical assistance.

Complete Contract:

Step One:

- The Provider Services Specialist has reviewed the contract and did not find any errors, click **Agreement Successfully Reviewed**

Contract Certification

Provider Services Coordinator and Provider Services Manager will check documents in **Reviewed** status daily during peak processing times. During non-peak processing times Coordinator and Manager will review applications in **Reviewed** status after receiving notification from the Provider Services Specialist.

Step One:

- Provider Services Coordinator and Manager will use the above Steps One through Six to review the contract and determine if it is able to be certified.

Incomplete Contract

Step One:

- If upon review, the contract is found to be *incomplete* the Provider Services Coordinator or Manager will return the contract to the Provider Services Specialist by clicking the **Return to Reviewer** button.

Step Two:

- The Provider Services Coordinator or Manager will follow up with the Provider Services Specialist to discuss items that were found to be missing or incomplete in the contract. The Provider Services Specialist will then contact the provider.

Complete Contract

Step One:

- If the contract is complete and able to be certified the Provider Services Coordinator or Manager will edit the document on the signature page entering the name of the CEO and the date. The Provider Services Coordinator or Manager will save the changes and click **Certify Agreement**.

Step Two:

- Provider Services Specialists will review Agreement Status folder daily to determine if contract has been certified.

Step Three:

- All certified contracts are to be saved as a PDF on BOX by Provider Services Specialist at the following location: **Provider Services>20 -20 VPK Executed Agreements** by letter (A-J), (K-V)

- The communication below will be sent to the provider once their agreement has been successfully certified;
- Congratulations! Your (Enter type of Agreement) provider agreement has been executed. Please login to the portal and select the appropriate agreement type, view agreement details, click on the agreement type/year, and click on the form you wish to print. Finally click on the link at the top of the page Download as a PDF. Now you can print/save a copy of your agreement.
- Providers will also be sent an email from ELCHC staff.
- Provider's information will be added to the weekly update email sent by the Provider Services Manager.

DRAFT



STATE OF FLORIDA
VOLUNTARY PREKINDERGARTEN EDUCATION PROGRAM

Instructions for Forms OEL-VPK 10, OEL-VPK 11A, and OEL-VPK 11B

Who must complete Form OEL-VPK 10 and Form OEL-VPK 11A & B?

Each Voluntary Prekindergarten Education (VPK) Program applicant (private providers and public schools) wishing to deliver the VPK Program must complete Form OEL-VPK 10 (04/30/2010) for each VPK site and submit the completed form to its early learning coalition (coalition). The private provider or school must notify the coalition of changes of information in writing. If information submitted to the coalition is inaccurate or untrue, the private provider or school will be subject to dismissal from eligibility to offer the VPK program and may be required to return overpayments. Each applicant must complete both portions (A & B) of Form OEL-VPK 11 (04/30/2010) each program year for each VPK site. You may complete as many copies of each portion of Form OEL-VPK 11 as needed for each VPK site to provide all the information for the site.

Completing the Form OEL-VPK 10 and Form OEL-VPK 11.

Forms OEL-VPK 10 and 11 (the forms) are available electronically at www.floridaeearlylearning.com. You may edit the form fields on a computer for submission to your coalition. You may also contact your coalition for hard copies of the forms which you may complete by using a typewriter or by printing clearly in black or blue ink.

Submitting Form OEL-VPK 10 and Form OEL-VPK 11.

Submit the completed forms to your coalition (based on the county in which your VPK site is located). A list of the coalitions, their addresses, and the counties they serve may be found at www.floridaeearlylearning.com

Notification of completion of Form OEL-VPK 10 and Form OEL-VPK 11.

Once you have submitted all of the required information and supporting documents, the early learning coalition will inform you if you are eligible to deliver the VPK program. *Submission of completed forms does not guarantee eligibility to deliver the VPK program.* If you are eligible, your coalition will request that you sign a copy of the Statewide Provider Agreement (Form OEL-VPK 20) and submit it to your coalition. You must receive a copy of the Statewide Provider Agreement signed by your coalition **before** receiving payment or beginning VPK classes.

Common errors

Providing incomplete forms will cause processing delays. To avoid delays, be sure to: complete all required items; type or print clearly using black or blue ink; attach all required supporting documents; submit to your county's early learning coalition; keep a copy of the application for your records. *Forms are not considered to be complete unless all required attachments are submitted with the forms.*

If you discover an error after submitting the forms, please contact your coalition by telephone or email.

OEL-VPK 10

I. PRIVATE PROVIDER / PUBLIC SCHOOL INFORMATION

At the top of the Form OEL-VPK 10, insert the program year into the available space. Mark an X indicating whether the information provided is entirely new, updated, or the same (no change) as information provided on a previously submitted OEL-VPK 10. If the information is updated, write the date in the available space.

Item 1. Provider Name.—If you are a licensed facility, enter the name of your business as it appears on your license as issued by the Florida Department of Children and Family Services (DCF). If you are a non-licensed facility, enter the name of your business as it appears on your accreditation certificate. If you are a public school, enter the name of the school where the VPK classes will be held.

Item 2. Employer identification number.—Enter the employer identification number (EIN) of the organization (e.g., provider, owner's business, school district) that will receive payments for the VPK program. This nine-digit number is assigned to a business by the Internal Revenue Service. If you do not have an EIN (e.g., family day care home), enter the director's/operator's social security number (SSN). If you do not provide either an EIN or an SSN, the form is incomplete and processing may be delayed.

PRIVACY ACT STATEMENT

Your employer identification number (EIN) or social security number (SSN) is requested in accordance with ss. 119.071(5)(a)2. and 119.092, F.S., for use in the records and data systems of the Office of Early Learning (OEL) and early learning coalitions. Submission of your EIN or SSN on this form is mandatory. Your EIN or SSN will be used for processing payments to you as a VPK provider or school, for reporting those payments for federal tax purposes, and for routine identification of your provider or school.

Item 3. DCF identification number or exemption number.—If you are licensed by DCF or a local licensing agency, enter your DCF license number. If you are a provider that claims exemption from licensure, enter your DCF assigned identification number which begins with "X."

Items 4-7. Address of VPK program site.—Enter the physical street address of the program site where the VPK program is delivered. Include the city, county, and five-digit zip code (ZIP+4 if available).

Items 8-10. Contact Information.—Enter your business telephone number with area code (item 8). Enter your business fax number with area code (item 9). Enter your business email address, if available (item 10).

Items 11-14. Mailing address.—If your mailing address is different from the address of your VPK program site as entered in items 4-7, enter a street address or post office box, city, county, state, and five-digit postal zip code. If the mailing address is the same as the provider's VPK program site, mark an X indicating "same as VPK site."

Items 15-17. Owner / school district information.—If you are a private provider, enter the owner's name, the legal name of the owner's business, and a daytime telephone number, with area code, for the owner. If you are a public school, enter the name and daytime telephone number, with area code, of the district staff who is coordinating the VPK program for your school district.

II. TYPE OF SETTING AND LICENSING INFORMATION

Item 18. Type of setting.—To offer the VPK program, you must be one of the listed types of settings. Mark an X indicating the type of setting which describes you. If you are a private provider and are not licensed, you must be accredited by an agency that is a member of an organization listed in item 22. *(If you are a licensed private provider, attach a copy of your DCF issued license. If you are a license-exempt provider or non-public school, attach a copy of your DCF or DOE issued*

license-exemption documentation and accreditation certificate.)

Item 19. Specialized program type.— A provider may also be one or both of the specialized program types listed. Mark an X for all that apply. If neither apply, leave the item blank.

Item 20. District and school number.— If you are a public school, enter the district and school number.

Item 21. Total child capacity.—Enter the total number of children you are able to serve at a given time. The total number should include all children, not only children in the VPK program. If you are licensed, do not provide a total number greater than your licensed capacity.

III. ACCREDITATION INFORMATION

If you are a non-licensed private provider, you must complete this section; licensed private providers and public schools are requested to complete this section as applicable.

Item 22. Accrediting agency member organization. — If you are a non-licensed private provider, mark an X next to the organization of which your accrediting agency is a member. If you are a non-licensed private provider and are not accredited by an accrediting agency that is a member of the listed organizations, attach a copy of your Gold Seal Quality Care Designation certificate to the form.

Items 23-24. Name of accrediting agency; expiration date. — Enter the name of the accrediting agency by which you are fully accredited (item 23) and the expiration date of the accreditation certificate (item 24). If you are not fully accredited by an accrediting agency which is a member of an umbrella organization, enter "Florida DCF" as your accrediting agency and the expiration date of your Gold Seal Quality Care Designation certificate.

IV. DIRECTOR OR PRINCIPAL INFORMATION

Item 25. Name of director or principal.—Enter the full name of your director or school principal.

Items 26-27. Daytime telephone, email.—Enter your director's or principal's daytime telephone number with area code (item 26). Enter your director's or principal's email address, if available (item 27).

Items 28-31. Director credential type, certificate number, issue date, expiration date.— If you are a private provider, mark an X indicating which type of director credential was completed by your director (item 28). Enter the credential certificate issue date (item 29), the credential certificate number (item 30), and expiration date (item 31). Attach documentation of the director credential held by your director.

Items 32-35. Signature, date, print name, daytime telephone.— An authorized representative must sign, date, and print his or her name on each form (for private providers, the owner, director, or operator; for public schools, the principal or designated school district staff member). Enter a daytime telephone number in item 35 which may be used to contact the individual signing the form. By signing the document you are certifying the statement above items 32-35 as true.

REQUIRED SUPPORTING DOCUMENTATION FORM OEL-VPK 10

- DCF issued license for licensed private providers.
- Accreditation certificate for accredited providers.
- Gold Seal Quality Care Designation certificate for Gold Seal accredited providers.
- Director's credential for private providers.

OEL-VPK 11

At the top of each Form OEL-VPK 11A and 11B, enter the name and employer identification number entered in items 1 and 2 of the OEL-VPK

Instructions for Forms OEL-VPK 10, OEL-VPK 11A, and OEL-VPK 11B (04/30/10)
6M-8.300, F.A.C.

10. Enter the Program Year. Mark a box to indicate if the application is new, updated, or unchanged from a previous application.

OEL-VPK 11A – INSTRUCTORS

Use the Instructors portion of the form to provide information regarding each VPK instructor and the class he or she will teach. You may enter information on up to ten instructors on each copy of the form.

Item 1. Class ID — Enter a unique Class ID for each classroom:

-In the first space, select a letter for each class starting with "A".

-In the second space, select either "F" for a school-year (fall) class or "S" for a summer class.

Example: The first school-year class listed for the 2010-2011 program year would have the unique Class ID: A F

Item 2. Legal Name — Enter the instructor's legal name.

Item 3. Calendar — Enter a letter which corresponds to a class calendar on Form OEL-VPK11B. The letter entered for the Class ID in item 1 may be different from the letter entered here.

Item 4. Type — Select the instructor's position type within the class: Lead, Assistant, or Substitute instructor.

Item 5. Credential — Enter the credential that qualifies the instructor to fill the role listed in item 4 using the following Credential Key:

30HR: Family Child Care Home or Large Family Child Care Home 30 hour training course.

40HR: 40 Hour introductory child care training course.

AS: Associate of Arts (A.A.), Associate of Science (A.S.), or Associate in Applied Science (A.A.S.) in an approved field with required minimum hours and experience.

BA: Bachelor of Arts (B.A.) or Bachelor of Science (B.S.) in an approved field with required minimum hours and experience.

FCCP: Active Birth through Five Florida Child Care Professional Credential (FCCPC), DOE Early Childhood Professional Certificate (ECPC), Child Care Apprenticeship Certificate (CCAC), or Florida Child Development Associate Equivalency Credential (CDAE).

MA: Master of Arts (M.A.) or Master of Science (M.S.) in an approved field with required minimum hours and experience.

NECC: National Early Childhood Certificate. Recognition is determined by DCF. See <http://www.myflfamilies.com/service-programs/child-care/necc> for a list of recognized certificates.

PHD: Doctorate in an approved field with required minimum hours and experience.

SDS: Substitute teacher for local school district.

STNR: Assistant (second) teacher, credential not required.

Item 6. Curriculum — Select the name of the curriculum used in the classroom using the following key:

If the curriculum used in the classroom is not listed by name below, type the name of the curriculum in the available space.

ABEK: A-BEKA

BCCT: Beyond Centers & Circle Time

BCR: Beyond Cribs & Rattles

CREA: Creative Curriculum

HR: High Reach

HS: High Scope

MONT: Montessori

WAL: Waldorf

WEE: Wee Learn

Item 7. SSN. — Enter the instructor's Social Security Number.

PRIVACY ACT STATEMENT

The social security number (SSN) of each VPK instructor is requested under s.

119.071(5)(a)2., F.S., for use in the records and data systems of the OEL, DCF, DOE, and early learning coalitions. If you submit an instructor's SSN, it will be used to confirm the instructor's background screening clearances and validate the instructor's educational credentials in accordance with ss. 1002.55, 1002.61, and 1002.63, F.S. Submission of each instructor's SSN on this form is voluntary and, if DCF or DOE has assigned the instructor an identification number in lieu of a SSN, you are instead requested to submit the identification number.

Item 8. Cert — If the instructor listed is a certified teacher, select "Yes." If the instructor listed is not a certified teacher, select "No."

Item 9. Degree — Enter the instructor's highest degree using the following Degree Key:

LTHD: Less Than High School.

GED: Passed a General Education Development test.

HS: Completed High School.

TECH: Received a Technical Certificate, including NECC, FCCPC, ECPC, CCAC, CDAE.

AA: Received an Associate of Arts Degree

AS: Received an Associate of Science or A.A.S. Degree.

BA: Received a B.S. or a B.A.

MA: Received an M.A. or an M.S.

PHD: Received a doctoral degree of any kind.

Item 10. Start Date. — Enter the date the instructor listed will begin instructing the VPK class.

Items 11-14. — The provider's authorized representative (the owner, director, or operator for private providers or the principal or designated school district staff for public schools) must sign (item 11), date (item 12), and print (item 13) his or her name on the form. Enter a daytime telephone number (item 14), which may be used to contact the individual signing each form. By signing the document, you are certifying that all information provided is true and correct and attesting that the statement immediately above items 11-14 is true.

OEL-VPK 11B – CALENDARS

Use the Calendars portion of the form to provide information regarding each unique class calendar which will be offered at the VPK site. If classes are offered at identical times on identical dates, they utilize the same class calendar (e.g., all classes are scheduled from 8:00am to 11:00am, Monday through Friday, starting on January 11). If classes are not offered at identical times on identical dates, they utilize unique class calendars which must be identified separately on this form.

Class Calendar. — Select a letter, beginning with "A", for each unique class calendar. This letter will be entered into item 3 of the OEL-VPK 11A to show which calendar each instructor will follow.

Program Type. — Mark a box to identify whether the class calendar is for a school-year (540 hour) or a summer (300 hour) program type.

Start Date and End Date. — Enter the first day VPK instruction will be delivered for the class and the final day VPK instruction will be delivered for the class with the indicated calendar.

VPK days per week. — Check the box by the days of the week that VPK instruction will be delivered.

Times of VPK instruction. — Enter the times of VPK instruction for the days of the week that VPK instruction will be delivered.

Non-instructional dates between class start and end dates. — Enter the dates between the start date and end date which have been designated as VPK days per week on which VPK instruction will not be delivered, such as vacations and holidays.

Signature, Date, Printed Name, and Daytime Telephone — An authorized representative must sign, date, and print his or her name on each form (for private providers, the owner, director, or operator; for

public schools, the principal or designated school district staff). Enter a daytime telephone number which may be used to contact the individual signing the form. By signing the document, you are certifying the statement immediately above the signature line as true.

REQUIRED SUPPORTING DOCUMENTATION **FORM OEL-VPK 11 A & B**

PRIVATE PROVIDERS ONLY — Submit written documentation of:

- Level 2 background screening clearances including
 - Local criminal records checks;
 - Statewide criminal records checks;
 - Statewide juvenile records checks for family child care homes, where applicable; and
 - Federal criminal records checks.
- Attestation/Affirmation of Good Moral Character.
- Credentials and emergent literacy training of lead instructors.

OFFICIAL USE ONLY —

Official Use Only sections are for use by coalition personnel only. If you are a provider, do not complete these sections.

OEL-VPK 10, OEL-VPK 11A & B

For each OEL-VPK 10 and each OEL-VPK 11A & B, coalition personnel must follow the instructions below to complete the Official Use Only sections at the bottom of each form. When inputting updated information submitted by a provider, do not strike through, white-out, or otherwise obliterate information on form. Instead, enter the information on a new line and follow the instructions below. Revisions to the form should be evident (e.g., use a different color ink than the provider).

Process Agent and Date — The authorized coalition staff member who reviews the form and the associated attachments to determine accuracy of information submitted and provider eligibility must sign and date each form when he or she completes the processing of the form.

Process Manager and Date — The authorized coalition process manager must sign and date the form to indicate that he or she has reviewed the work of the process agent and has determined that the form has been processed properly.

OEL VPK 11A

Screening, Credential, Lit Training, GMC. — Mark the boxes to indicate that the instructor has been properly screened using Level 2 background screening within the last five (5) years and that the coalition has received proof that the federal level ("FS"), state level ("SS"), and local level ("LS") screenings did not reveal anything which would prohibit the individual from acting as a VPK instructor.

Mark the "C" box if the coalition has determined that the instructor currently holds a credential required to fill the role listed in item 4 and that the coalition has received proof of such credential.

Mark the "L" box if the coalition has confirmed the instructor has completed the required emergent literacy training and that the coalition has received proof of that training, if the instructor is a lead instructor.

Mark the "G" box if the coalition has received a current attestation from the instructor that the instructor is of good moral character.

Changed by — If a VPK provider submits written changes to the information on a form, enter the name of the coalition staff member who makes the change.

Date changed — If a VPK provider submits written changes to the information on a form, enter the date the change is made by a coalition staff member.

End date — If an instructor listed on a form is removed from a VPK class, enter the date on which the instructor last taught the VPK class and use a new line to enter information for a new instructor assigned to the VPK class.

**Florida Department of Education
Office of Early Learning**

TAP #07-01: Appendix A

School-Year VPK Instructor Credential Qualifications: Public and Private Providers

Applicant Name: _____ **Date of Review:** _____

Reviewer Name: _____ **Eligible/Not Eligible:** _____

Instructions: An applicant must meet at least one of the following options. For option 1, 2, or 3, the applicant must have "yes" checked in both or all components. For options 5 and 7, the applicant must have "yes" checked in one option. Note: The term "degree" means an educational credential awarded by an institution of higher education, not an educator certificate or other professional license.

Option	Florida Statutes	Requirements	Y	N	Comments
1	s.1002.55(3)(c)1a	CDA issued by the Council for Professional Recognition and Completion of the DOE Emergent Literacy Course			
2	s.1002.55(3)(c)1b	CDAE issued by a DCF-approved program and Completion of the DOE Emergent Literacy Course			
3	s.1002.55(4)(d)	An associate's or higher degree in an unrelated field and At least 6 credit hours in early childhood education or child development and At least 480 hours of experience in teaching or providing child care services for children any age from birth through 8 years of age			
4	s.1002.55(4)(c)	An associate's or higher degree in child development			
5	s.1002.55(4)(a)	A bachelor's or higher degree in early childhood education or A bachelor's or higher degree in prekindergarten or primary education or A bachelor's or higher degree in preschool education or A bachelor's or higher degree in family and consumer science			
6	s.1002.55(4)(b)	A bachelor's or higher degree in elementary education if the prekindergarten instructor has been certified to teach children any age from birth through 6th grade • certificate need not be current • certificate need not be from Florida, but may not be suspended or revoked			
7	s.1002.55(4)(e) (Equivalent degrees approved by the State Board of Education, June 21, 2005)	An associate's degree in early childhood education or A bachelor's or higher degree in exceptional student education or A bachelor's or higher degree in special education or A bachelor's or higher degree in mental disabilities or A bachelor's or higher degree in specific learning disabilities or A bachelor's or higher degree in physically impaired or A bachelor's or higher degree in varying exceptionalities or A bachelor's or higher degree in emotional disabilities or A bachelor's or higher degree in hearing impaired or A bachelor's or higher degree in speech-language pathology			

CDA-Child Development Associate
DCF-Department of Children and Families

CDAE-Child Development Associate Equivalent
DOE-Department of Education

Florida Department of Education
Office of Early Learning

TAP #07-01: Appendix B

Summer VPK Instructor Credential Qualifications: Public and Private Providers

Applicant Name: _____ Date of Review: _____

Reviewer Name: _____ Eligible/Not Eligible: _____

Instructions: An applicant must meet at least one of the following options (1-6) in order to be eligible. For option 6, the applicant must have "yes" checked in both components.

Note: The term "degree" means an educational credential awarded by an institution of higher education, not an educator certificate or other professional license.

Options	Florida Statutes	Requirement(s)	Y	N	Comments
1	s. 1002.61(4)(a)	A Temporary or Professional Florida Educator Certificate <ul style="list-style-type: none"> certification may be in any area school district shall give priority to teachers who have experience or coursework in early childhood education 			
2	s. 1002.61(4)(b) s. 1002.55(4)(a)	A bachelor's or higher degree in early childhood education			
3	s. 1002.61(4)(b) s. 1002.55(4)(a)	A bachelor's or higher degree in prekindergarten or primary education			
4	s. 1002.61(4)(b) s. 1002.55(4)(a)	A bachelor's or higher degree in preschool education			
5	s. 1002.61(4)(b) s. 1002.55(4)(a)	A bachelor's or higher degree in family and consumer science			
6	s. 1002.61(4)(b) s. 1002.55(4)(b)	A bachelor's or higher degree in elementary education if the prekindergarten instructor has been certified to teach children any age from birth through 6 th grade <ul style="list-style-type: none"> certificate need not be current certificate need not be from Florida, but may not be suspended or revoked 			

DEPARTMENT: Provider Services	SUBJECT: Procedure for notifying providers of upcoming expiring documents
EFFECTIVE: 1/1/2016	AUTHORIZATION APPROVAL: Provider Compliance Manager

PURPOSE: Procedure to notify providers of documents that are expiring during the term of their contract.

SCOPE: Provider Services Specialist will use the following process to notify providers in advance that a document submitted with their contract is expiring during the term of the contract and/or that a document has expired.

PROCESS:

Step One:

- Provider Services Specialists will review the expiring document report every two weeks to determine if a provider in their caseload has any documents expiring within the upcoming 10 to 30 days.
- Provider Services Specialists will send Expiring Document Notice via email to notify the provider of the document(s) that is expiring and the expiration date.
- Provider Services Specialists will post the message in the portal message center to remind them of the expiring documents.

REMINDER OF EXPIRING DOCUMENT(S)

The documents indicated below will expire in _____ days. Please remit all requested items prior to their expiration date to remain in compliance with the terms of your agreement with The Early Learning Coalition of Hillsborough County.

Item Requested	Expiration Date
General Liability Insurance	
Automobile Liability Insurance	
Workers' Compensation Insurance	
Child Care License	
Accreditation Certificate	
Gold Seal Certificate	

This is a friendly reminder that the items indicated above must be submitted by 11:59 p.m. of the expiration date. The requested items are required to ensure your program remains in compliance with your School Readiness or Voluntary Prekindergarten Contract. Providers will not be reimbursed for any days where there is a lapse of coverage for Liability Insurance, Automobile Insurance or child care license and the contract(s) may be terminated for non-compliance.

Step Two:

- If the provider does not remit the expiring document on the day before it expires the Provider Services Specialist will contact the provider via phone to inform them that they have a required document expiring the next day.
- The Provider Services Specialist will inform the provider they have 24 hours to remit the required document.
- If after 24 hours the provider does not remit the expired document the provider is sent a Notice of Non-Compliance via email and posting in the portal message center. (see attached notice)

Step Three:

- Notification of expired document will be sent to the Program Assurance team via the internal referral process.

Step Four:

- Dates of Insurances, accreditation and Gold Seal are to be updated on the custom screen in EFS as necessary.
- Accreditation and Gold Seal effective and expiration dates are also to be updated in CCRR in EFS.
- Re-enter the original issue data of the accreditation and/or Gold Seal and enter the new expiration date if there was no lapse in the Gold Seal status.
- The following documents will result in non-payment to the provider if there is a lapse between expiration and effective dates:
 - Liability Insurance
 - Auto insurance (if transporting)
 - Child Care License
- Gold Seal and Accreditation – if there is a lapse between the expiration and an effective date of these certificates the provider's gold seal enhancement rate is removed from EFS by changing the provider's type in CCMS and CCRR and updating the rate screen date by entering the effective date of the new payment rate.
- *If there was a lapse in the Gold Seal for the provider enter the new effective date and the new termination date and history code GSAB (Gold Seal Break) with detailed information about the previous gold seal and the newly issued gold seal.*
- For expired Gold Seal: enter the day after the expiration on the rate screen to pay the provider through the last day.
- Enter a history note in EFS indicating the expiration date of the previous certificate and any communication with provider to obtain new certificate.
- Reimbursement is notified via the weekly provider update process if an adjustment for a Gold Seal payment amount is needed.

Step Five:

- VPK providers with an instructor that has an expired background screening will be informed that the instructor is not permitted in the VPK classroom until an updated screening result is received from DCF.

- The provider will be notified to use a substitute in that class during the time the document is expired or submit a change in instructors.
- Notification will be sent to the Program Assurance team via the internal referral process.

NOTICE OF NON-COMPLIANCE

This is notification that you are non-compliant with the Provider Responsibilities of the State of Florida Statewide School Readiness Provider Contract (Section II, 3) and/or Section III Paragraph 13,a (page 3) of the CSC Scholarship Provider Contract. You failed to submit the following document, required by this section:

ITEM	EXPIRATION DATE

As a result reimbursement payments will be held until receipt of the document or until termination of the Provider Agreement whichever comes first.

Please be aware that a lapse in coverage between document effective days and expiration dates will result in nonpayment for any days within that period.

VPK NOTICE OF EXPIRING DOCUMENT(S)

The documents indicated below will expire in ____ days. Please remit all requested items prior to their expiration date to remain in compliance with the terms of your agreement with The Early Learning Coalition of Hillsborough County.

Item Requested	Staff Member	Expiration Date
Director's Credential (for VPK)		
FCCP/NECC/ECPC Credential		

	(for VPK)		
	Background Screening (for VPK)		

This is a friendly reminder that the documents indicated above must be submitted by 11:59 p.m. on the day prior to the expiration date shown. The requested items are required to ensure your program remains in compliance with your VPK Provider Contract and Florida Statutes.

If the background screening documents for a Lead, Aide or Substitute instructor have expired that person is not permitted to be in the VPK classroom until updated background screening results are received.

If the credential for the Lead Instructor has expired providers *may* continue to use that instructor in the VPK class however, the days and hours must be tracked on the Substitute Tracking Form until the credential is renewed or a Credentialed Instructor replaces that instructor permanently.

DRAFT

DEPARTMENT: Provider Services	SUBJECT: Review and re-certification of a change to the VPK application
EFFECTIVE: 1/1/16	AUTHORIZATION APPROVAL: CEO or designee

PURPOSE: Procedure for the review and re-certification of changes to the VPK application

SCOPE: Review and approval of VPK changes in the portal and data entry into EFS

PROCEDURE:

Step One:

- Provider Services Specialist will check the **Certified – Change Submitted** mode daily
- Select provider
- Click **Certified-Reviewing** to move application to reviewing mode (this ‘locks’ the agreement not allowing the provider to make further changes).

Step Two:

- Select and download the latest documents submitted using the date/time as reference
- Compare the recently submitted forms to all previous submissions
- Verify that “updated application” box has been checked and the date have been entered at the top of the forms
- Verify that any new lead instructors meet the credential requirements
- Verify that any new director meets the credential requirements
- Verify that any substitute meets the credential requirements
- Verify background screening and Affidavit of Good Moral Character
- Verify any change to schedule still meets the 540 or 300 hour requirement
- Check the FS, SS, C, L and G boxes if supporting documents have been submitted for all areas
- If requested change is unclear contact provider for more information

Step Three:

Application is complete

- If application is complete and all supporting documents have been uploaded for the new changes
- Click **Edit**
- Enter name and date in Process Agent boxes
- Click **Save**
- For Changes to Instructors pull up previous certified version of VPK 11 A
- Click **Edit**
- Enter the end date for the instructor that is being replaced, enter Provider Services Specialist name processing change and date change processed
- Click **Save**
- Click the **Agreement Successfully Reviewed**

Application is missing documents or incorrectly completed

- Provider Services Specialist will contact provider requesting that the correct or missing documents be uploaded to the portal by sending an email to the provider and posting the message in the portal message center after all pages of the VPK application have been reviewed.
- If the application needs corrections, the Provider Services Specialist will reject the application back to the provider by clicking the **Reject** button, also sending an email to the provider and posting a message in the portal message center that explains the corrections that are needed.

Step Four:

Changes to Instructors:

- Provider Services Specialists will enter all changes to the VPK classes into EFS
- On main CCMS screen click **Provider>Provider Demographics**
- Access provider in EFS by pressing F11> F2 and begin typing provider's name
- Highlight selected provider> click ok > F12
- Click Classroom
- Change title of old instructor to **REPL** for replaced lead and **REPS** for replaced secondary
- For new instructor enter title **NEWL** for new lead instructor and **NEWS** for new secondary instructor
- Click OK to return to main screen>click OK to exit provider demographics mode and return to main CCMS screen

Changes to Calendar:

- VPK providers are allowed to change the calendar to their VPK program 2 times
- Verify that the new schedule meets the 540 or 300 hour requirement
- Provider Services Specialists will enter all changes to the VPK classes into EFS
- On main CCMS screen click **Provider>Provider Demographics**
- Access provider in EFS by pressing F11> F2 and begin typing provider's name
- Highlight selected provider> click ok > F12
- Click Classroom
- Make changes to the classroom name if there is a change to the number of hours per day, start or end date or the days of the week class is offered.
- Click Details to change the times the classes are offered
- Delete the time in the field and reenter new time
- If the provider has one calendar code for all classes and does not change the schedule for all the classes, a new calendar code will have to be entered for the class affected by the change. If there are children enrolled in the VPK classroom the enrollments must be removed before the calendar code can be changed.
- Enter new calendar into EFS using *Process for entering VPK calendar into EFS*.
- Email Provider Services Manager regarding removal of enrollments. Provider Services Manager will remove the current enrollments for the affected classes and reenter the enrollments once the change has been finalized.
- Provider Services Manager will notify the Provider Services Specialist when the class enrollments have been removed and the change can be processed.
- Enter new calendar code into classroom calendar field.
- Click Ok to return to main screen> Click Ok to return to main CCMS screen

Certification of change to VPK application

Complete application change

Step One:

- Provider Services Manager or Coordinator will check **Certified –Change Reviewed** daily
- Verify that any new lead instructors meet the credential requirements
- Verify that any new director meets the credential requirements
- Verify that any substitute meets the credential requirements
- Verify background screening and Affidavit of Good Moral Character
- Verify any change to schedule still meets the 540 or 300 hour requirement

Step Two:

- If application is complete and all supporting documents have been uploaded for the new changes
- Click **Edit**
- Enter name and date in Process Manager boxes
- Click **Save**
- If change was to an instructor open previously certified VPK 11 A forms
- Verify that the VPK 11 A has been modified to show end date, Provider Services Specialist name and date changed
- Click the **Close Form**
- Click **Certify Agreement**

Step Three:

- Verify that the changes to the classrooms have been entered correctly in EFS
- On CCMS main screen Click provider button
- Press F11>F2> begin typing provider's name
- Click OK>F12 to bring up provider record
- Click classroom>verify changes

Step Four:

- Provider Services Specialists will email the following communication to the provider a once the change has been successfully processed and approved.

Approved changes to VPK staff

The following changes have been approved for the 20__-20__ School Year VPK program:

Class ____ change of Lead Instructor from ____ to ____.

Class ____ change of Assistant Instructor from ____ to ____.

Incomplete Application Change

Step One:

- If upon review an agreement application is found to be *incomplete* the Provider Services Coordinator or Manager will return the agreement to the Provider Services Specialist by clicking the **Return to Reviewer** button.

Step Two:

- The Provider Services Coordinator or Manager will follow up with the Provider Services Specialist to discuss items that were found to be missing or incomplete in the agreement. The Provider Services Specialist will then contact the provider.