

**APPENDIX G-1
CHILD CARE SECTION
2010 APU**

County: Montgomery

I. Administration (Required Section)

Describe how your district is organized to administer the child care program including any functions that are subcontracted to an outside agency.

1. Identify the unit that has primary responsibility for the administration of child care for:

Public Assistance Families: **Temporary Assistance**

Transitioning Families: **Services**

Income Eligible Families: **Temporary Assistance**

Title XX: **Services**

2. Indicate the use of New York State Child Care Block Grant (NYSCCBG) Funds.

FFY 06-07 Rollover Funds (<i>this amount is available from the NYSCCBG ceiling report in the claiming system</i>)	\$246,356.00
Estimate of FFY 07-08 Rollover Funds	\$373,326.00
Estimate of Flexible Funds for Families (FFFS) for child care subsidies	\$0
NYSCCBG Allocation for SFY 08-09	\$704,772.00
Estimate of Local Share	\$20,000.00

Total Estimated NYSCCBG Amount: **\$1,098,205.00**

\$1,098,205.00

A. Subsidy	\$1,003,098.00
B. Other program costs (excluding subsidy)	\$ 80,000.00
C. Administrative costs	\$ 15,000.00

3. Does your district have a contract or formal agreement with another organization to perform any of the following functions?

Function:

Organization:

Amount of Contract:

- Eligibility screening
- Screening of legally-exempt providers
- Assistance in locating care
- Child Care Information Systems
- Other

APPENDIX G-2

II. Other Eligible Families if Funds are Available (Required Section)

Listed below are optional categories of eligible families that your district can include as part of its ICP. Select any categories your district wants to serve and describe any limitations associated with the category.

Optional Categories	Option	Limitations
1. Public Assistance (PA) families participating in an approved activity in addition to their required work activity.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved activity is job seeking
2. PA families or families with income up to 200% of the State Income Standard when the caretaker is:		
a) participating in an approved substance abuse treatment program	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all financial and programmatic requirements
b) homeless	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
c) a victim of domestic violence	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
d) in an emergency situation of short duration	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
3. Families with an open child protective services case when child care is needed to protect the child.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
4. Families with income up to 200% of the State Income Standard when child care services are needed because the child's caretaker:		
a) is physically or mentally incapacitated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	With physician or psychiatrist document stating incapacity
b) has family duties away from home	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to actively seek employment for a period up to 6 months.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

6. PA families where a sanctioned parent is participating in unsubsidized employment, earning wages at a level equal to or greater than the minimum amount under law.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
7. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to participate in:		
a) a public or private educational facility providing a standard high school curriculum offered by or approved by the local school district	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
b) an education program that prepares an individual to obtain a NYS High School equivalency diploma	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
c) a program providing basic remedial education in the areas of reading, writing, mathematics, and oral communications for individuals functioning below the ninth month of the eighth grade level	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
d) a program providing literacy training designed to help individuals improve their ability to read and write;	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
e) English as a second language (ESL) instructional program designed to develop skills in listening, speaking, reading and writing the English language for individuals whose primary language is other than English	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
f) a two year full-time degree granting program at a community college, a two year college, or an undergraduate college with a specific vocational goal leading to an associate degree or certificate of completion	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
g) a training program, which has a specific occupational goal and is conducted by an institution licensed or approved by the State Education Department other than a college or university	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements
h) a prevocational skill training program such as, a basic education and literacy training program	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Must meet all other eligibility requirements

<p>i) a demonstration project designed for vocational training or other project approved by the Department of Labor.</p> <p>The parent/caretaker must complete the selected programs listed under number seven within 30 consecutive calendar months. The parent/caretaker cannot enroll in more than one program.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p>Must meet all other eligibility requirements</p>
<p>8. PA recipients and low income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a two-year program other than one with a specific vocational sequence (leading to an associates degree or certificate of completion and that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity) as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p>Must meet all other eligibility requirements</p>
<p>9. PA recipients and low income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a two-year college or university program (other than one with a specific vocational sequence) leading to an associates degree or a certificate of completion that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p>Must meet all other eligibility requirements</p>

<p>10. PA recipients and low income families with incomes up to 200% of the State Income Standard who are satisfactorily participating in a four-year college or university program (leading to a bachelor degree and that is reasonably expected to lead to an improvement in the parent/caretaker's earning capacity) as long as the parent(s) or caretaker is also working at least 17 ½ hours per week. The parent/caretaker must demonstrate his or her ability to successfully complete the course of study.</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p>Must meet all other eligibility requirements</p>
<p>11. Families with income up to 200% of the State Income Standard when child care services are needed for the child's caretaker to participate in a program to train workers in a employment field that currently is or is likely to be in demand in the near future, if the caretaker documents that he or she is a dislocated worker and is currently registered in such a program, provided that child care services are only used for the portion of the day the caretaker is able to document is directly related to the caretaker engaging in such a program.</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

APPENDIX G-3

III. Reasonable Distance, Very Low Income, Family Share, Case Closings and Openings, and Fraud and Abuse Control Activities (Required Section)

Reasonable Distance

Your district is required to define reasonable distance based on community standards for determining accessible child care.

The following defines "reasonable distance": **Fifteen miles.**

Describe any steps/consultations made to arrive at your definition:

Montgomery County is a rural county, with most employment opportunities outside of the county. This requires ownership or access to a vehicle.

Very Low Income

Very Low Income is defined by each district and is used in determining priorities for child care benefits.

Very Low Income is defined as **175%** of the State Income Standard.

Family Share

Family share is the weekly amount paid towards the costs of the child care services by the child's parent or caretaker. In establishing family share, your district must select a percentage from 10% to 35% to use in calculating the family share. The family share of child care is calculated by applying the family share percentage against the amount of the family's annual gross income that is in excess of the State Income Standard divided by 52.

Family Share Percentage selected by our district **35%**.

Case Closings (select one or two)

1. The district must describe below how priority is given to federally mandated priorities and describe local priorities. If all NYSCCBG funds are committed, the district will discontinue funding to those families that have lower priorities in order to serve families with higher priorities. Described below is how the district will select cases to be closed in the event that there are insufficient or no funds available.

1 – Families above 175% of poverty

2. The district has not established priorities beyond the federally-mandated priorities. If all NYSCCBG funds are committed, case closings for families which are not eligible under a child care guarantee and are not a federally-mandated priority must be based on the length of time in receipt of services. The length of time used to close cases may be based either on the shortest or longest time receiving child care services but must be consistent for all families. The district has chosen to close cases based on:

- shortest time receiving child care services
- longest time receiving child care services

Case Openings

The district must describe below how priority is given to federally mandated priorities and how the district will select cases to be opened in the event that there are insufficient funds available.

- 1 – Very low income cases (below 175%)**
- 2 – Children having special needs**
- 3 – Teenage parents**

Fraud and Abuse Control Activities

The district must identify below the criteria it will use to determine which child care subsidy applications suggest a higher than acceptable risk for fraudulent or erroneous child care subsidy payment and procedures for referring such applications to the district's front end detection system.

Referral to the front end fraud detection system is based on the following indicators:

- >Financial obligations are current, but stated expenses exceed income with no reasonable explanation.**
- >Working off the books (currently or previously).**
- >Supported by loans or gifts from family/friends.**
- >Application is inconsistent with prior case information.**
- >Prior history of denial, case closing, or overpayment resulting from an investigation.**

The district must describe below its sampling methodology used to determine which cases it will seek verification of an applicant or recipient's continued need for child care including, as applicable, verification of participation in employment, education or other required activities.

Any case with one or more of the listed indicators is referred for investigation.

The district must describe below its sampling methodology used to determine which child care providers of subsidized child care services they will review for the purpose of comparing the child care providers' attendance forms for children receiving subsidized child care services and any child and adult care food program inspection forms to verify that child care was actually provided on the days listed on the attendance forms.

Providers are all required to submit time sheets with both parent and caregiver signatures to verify times of child care provision.

APPENDIX G-4

IV. District Options (Required Section)

Districts have certain flexibility to administer the child care subsidy program to meet local needs. Check which options that your district wishes to include in your county plan. Complete attachments for any area(s) checked.

1. Our district has identified local priorities in addition to the federal priorities (complete Appendix G-5).
2. Our district has chosen to establish funding set-asides for NYSCCBG (complete Appendix G-6).
3. Our district is using Title XX funds for the provision of child care services (complete Appendix G-7).
4. Our district has chosen to establish additional local standards for child care providers (complete Appendix G-8).
5. Our district has chosen to make payments to child care providers for absences (complete Appendix G-9).
6. Our district has chosen to make payments to child care providers for program closures (complete Appendix G-10).
7. Our district has chosen to pay for transportation to and from a child care provider (complete Appendix G-11).
8. Our district has chosen to pay up to a 15% higher than the applicable market rates for regulated child care services that have been accredited by a nationally recognized child care organization (complete Appendix G-11).
9. Our district has chosen to pay up to 15% higher than the applicable market rates for non-traditional hours (complete Appendix G-11).
10. Our district has chosen to pay up to 75% of the enhanced market rate for legally-exempt family and in-home child care providers who have completed 10 hours of training and the training has been verified by the legally-exempt care giver enrollment agency (complete Appendix G-11).
11. Our district has chosen to pay for child care services while a caretaker who works the second or third shift sleeps (complete Appendix G-11).

12. Our district has chosen to make payments to child care providers who provide child care services, which exceed 24 consecutive hours (complete Appendix G-12).
13. Our district has chosen to include 18, 19 or 20 year olds in the Child Care Services Unit (complete Appendix G-12).
14. Our district is seeking a waiver from one or more regulatory provisions. Such waivers are limited to those regulatory standards that are not specifically included in law (complete Appendix G- 12).
15. Our district has chosen to pay for breaks in activity for low income families (non public assistance families, complete Appendix G-12).
16. Our district has chosen to use local equivalent forms such as, but not limited to, child care application, client notification and/or legally exempt enrollment forms (attach copies of the local equivalent forms your district uses).

Any previous approvals for local equivalent forms will not be carried forward into this county plan. Therefore, any local equivalent forms a district wishes to establish or renew must be included in this plan and will be subject to review and approval by OCFS.

**APPENDIX G-5
PRIORITY POPULATIONS-ADDITIONAL LOCAL PRIORITIES**

In addition to the federal priorities of very low income families and families with children who have special needs, the following additional local priorities have been selected:

Category: **Teenage parents**

Rank: **3**

Description:

Category:

Rank:

Description:

**APPENDIX G-9
PAYMENT TO CHILD CARE PROVIDERS FOR ABSENCES**

The following providers are eligible for payment for absences:
(Check any that are eligible)

- Day Care Center Legally Exempt Group
 Group Family Day Care School Age Child Care
 Family Day Care

Our district will only pay for absences to providers with which the district has a contract or letter of intent. Yes No

Base period selected (check one) 3 months 6 months

Number of absences allowed during base period:

Period	Routine Limits (# of days)	Extenuating Circumstances (# of days)	Total Number of Absences Allowed (# of days)
In a month	12	0	12
Base period	12	0	12

List reasons for absences for which the district will allow payment:

Provider has not had notice of absence 24 hours or more in advance.

List any limitations on the above providers' eligibility for payment for absences:

Time paid cannot exceed normal care schedule for any given day.

Note: Legally exempt family child care and in-home child care providers are **not** eligible to receive payment for absences.

APPENDIX G-11
TRANSPORTATION, DIFFERENTIAL PAYMENT RATES, ENHANCED MARKET RATES FOR LEGALLY EXEMPT, SLEEP

Transportation

Describe below under what circumstances and limitations if any your district will use to reimburse for transportation, what type of transportation will be reimbursed (public vs. private), and how much your district will pay (per mile or trip). Note if paying for transportation, Appendix F will need to reflect this choice.

Differential Payment Rates

Indicate below the percentage above the market rate your district has chosen.

Accredited Programs may receive a differential payment up to _____ % above market rate.

Care during non-traditional hours may be paid up to _____ % above market rate.

Limitations to the above differentials are as follows:

Payments may not exceed 15% above market rate. However, if your district wishes to establish a payment rate that is in excess of 15% above the applicable market rate must describe below why the 15% maximum is insufficient to provide access within the district to accredited programs and/or care provided during non-traditional hours.

Enhanced Market Rate For Legally-Exempt Family and In-Home Child Care Providers

If a district elects to establish a payment rate that is in excess of the enhanced market rate for legally- exempt family and in-home child care providers who have annually completed 10 or more hours of training and the training has been verified by the legally-exempt care giver enrollment agency. The district must state the percentage above the market rate it proposes to use.

Our district is requesting to increase the legally-exempt enhanced market rate up to _____percent of the applicable registered family day care market rate. Market rate may not exceed 75 percent (75%) of the child care market rates established for registered family day care.

A district that selects the option to increase the legally-exempt enhanced market rate must select one of the options listed below for implementation of the legally-exempt enhanced market rate:

for all legally-exempt family and in-home child care providers that have been approved by the applicable legally-exempt caregiver enrollment agency; or

for those legally-exempt family and in-home child care providers who were receiving the enhanced rate on the date of the regulations, but only for the remainder of their current one-year enrollment period; or

for those legally-exempt family and in-home child care providers who were receiving the enhanced rate on the date of the regulations, for the remainder of the time they remain enrolled and continue to meet the ten-hour annual training requirement.

Sleep

The following describes the standards that will be used in evaluating whether or not to pay for child care services while a parent or caretaker that works a second or third shift sleeps and any limitations pertaining to payment:

Montgomery County will pay for daytime child care while a parent or caretaker sleeps after working second or third shift.

Indicate the number of hours allowed by your district (maximum number of hours allowed is eight). **Hours are allowed as needed, up to eight.**



Montgomery County Department of Social Services

BROADWAY, P.O. BOX 745 · FONDA, N.Y. 12068-0745 · PHONE (518) 853-4646 · FAX (518) 853-8223

William M. Cranker

Commissioner

**FRONT END DETECTION SYSTEM (FEDS) REFERRAL
CHILD CARE SUBSIDY ONLY**

Case Name: _____ Case #: _____

Address: _____

Client Phone Number: _____

REASON FOR REFERRAL – FEDS INDICATORS

- Working off the books (currently or previously)
- Current application is inconsistent with prior case information
- Prior history of denial, case closing or overpayment resulting from an investigation (i.e. fraud, FEDS, EVR)
- No absent parent information or information is inconsistent with application
- No documentation to verify identity
- Applicant cannot provide a birth certificate for a child younger than six years of age
- Self employed but without adequate business records to support financial assertions.
- Documents or information provided are inconsistent with application, such as different name used for signature
- PO Box used as mailing address without a reasonable explanation
- Unsure of own address
- Child case provider lives in household

Comments: _____

Eligibility Worker: _____ Date: _____

**

FEDS Findings:

_____ -

Inv. Signature: _____ Date: _____

Rev. 6/07

**APPENDIX H
ANNUAL PLAN UPDATE
CHECKLIST
ADMINISTRATIVE COMPONENT – LOCAL DEPARTMENT OF SOCIAL
SERVICES**

Montgomery County

All Local Department of Social Services are required to complete this checklist. For each item below, please indicate by marking “YES” or “NO” whether there are any changes to report. For each item that is answered “Yes” or where a “NO” response is not an option, a written response is required clearly indicating what has changed and reason for the change. Responses should be attached on separate page and added at the end of this appendix. . Please note that Appendices G-1 must be completed.

<u>YES</u>	<u>NO</u>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	I. Financing Process
<input type="checkbox"/>		a. General Information
<input type="checkbox"/>		b. Purchase of Services
<input type="checkbox"/>		c. Performance or Outcome Based Provisions
<input type="checkbox"/>	<input checked="" type="checkbox"/>	II. Monitoring Procedures
<input type="checkbox"/>	<input checked="" type="checkbox"/>	III. Appendices
<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. Appendix A – Legal Assurances
<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. Appendix B – Summary of Memorandum of Understanding with the District Attorney’s Office for Child Protective Services
<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. Appendix C – Estimate of Persons to be Served
<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. Appendix D – Non-Residential Services to Victims of Domestic Violence
<input type="checkbox"/>	<input checked="" type="checkbox"/>	e. Appendix E – Chafee Foster Care Independence Program Use of Allocations
<input checked="" type="checkbox"/>	<input type="checkbox"/>	f. Appendix F – Department of Social Services – Program Information Matrix
<input checked="" type="checkbox"/>		g. Appendix G – Child Care
<input type="checkbox"/>	<input checked="" type="checkbox"/>	1. Appendix G-1 – Administration
<input type="checkbox"/>	<input checked="" type="checkbox"/>	2. Appendix G-2 – Other Eligible Families if Funds are Available
<input checked="" type="checkbox"/>	<input type="checkbox"/>	3. Appendix G-3 – Reasonable Distance, Very Low Income, Family Share, Case Closings and Case Openings, and Fraud and Abuse Control Activities
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4. Appendix G-4 – Districts Options
<input type="checkbox"/>	<input checked="" type="checkbox"/>	5. Appendix G-5 – Priority Populations
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6. Appendix G-6 – Funding Set-Asides
<input type="checkbox"/>	<input checked="" type="checkbox"/>	7. Appendix G-7 – Title XX Child Care

- | | | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8. Appendix G-8 – Additional Local Standards for Child Care Providers |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Appendix G-9 – Payment to Child Care Providers for Absences |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10. Appendix G-10 – Payment for Child Care Providers for Program Closures |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. Appendix G-11 – Transportation, Differential Payment Rates, and Sleep |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. Appendix G-12 – Child Care Exceeding 24 Hours, Child Care Service Unit, Waivers, Break in Activities |

**APPENDIX H
ANNUAL PLAN UPDATE
CHECKLIST
ADMINISTRATIVE COMPONENT – LOCAL DEPARTMENT OF SOCIAL
SERVICES**

Montgomery County

All Local Department of Social Services are required to complete this checklist. For each item below, please indicate by marking “YES” or “NO” whether there are any changes to report. For each item that is answered “Yes” or where a “NO” response is not an option, a written response is required clearly indicating what has changed and reason for the change. Responses should be attached on separate page and added at the end of this appendix.

YES NO

- | | | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | I. Financing Process |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. General Information |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Purchase of Services |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Performance or Outcome Based Provisions |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | II. Monitoring Procedures |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | III. Appendices |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | a. Appendix A – Legal Assurances |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | b. Appendix B – Summary of Memorandum of Understanding with the District Attorney’s Office for Child Protective Services (Check “No” if the memorandum is current, designates suitable locations for abandoned infants and there are no changes since the last CFSP or APU.) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | c. Appendix C – Estimate of Persons to be Served |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | d. Appendix D – Non-Residential Services to Victims of Domestic Violence |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | e. Appendix E – Chafee Foster Care Independence Program Use of Allocations |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | f. Appendix F – Department of Social Services – Program Information Matrix |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | g. Appendix G – Child Care |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 1. Appendix G-1 – Administration |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 2. Appendix G-2 – Other Eligible Families if Funds are Available |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 3. Appendix G-3 – Reasonable Distance, Very Low Income, Family Share, Case Closings and Case Openings, and Fraud and Abuse Control Activities |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 4. Appendix G-4 – Districts Options |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 5. Appendix G-5 – Priority Populations |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 6. Appendix G-6 – Funding Set-Asides |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 7. Appendix G-7 – Title XX Child Care |

- | | | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 8. Appendix G-8 – Additional Local Standards for Child Care Providers |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 9. Appendix G-9 – Payment to Child Care Providers for Absences |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 10. Appendix G-10 – Payment for Child Care Providers for Program Closures |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 11. Appendix G-11 – Transportation, Differential Payment Rates, and Sleep |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 12. Appendix G-12 – Child Care Exceeding 24 Hours, Child Care Service Unit, Waivers, Break in Activities |