

West Virginia Child Care Stabilization Payment Policy & Procedure Manual

American Rescue Plan Act
Child Care Funding

Child Care Stabilization Payment Policies and Procedures Manual

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October 1, 2021

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CHAPTER 1: WV CHILD CARE STABILIZATION PROGRAM GOALS AND DEFINITION

1.0. WV Child Care Stabilization Grant Program Description and Goals

1.0.1. Program Description

As child care providers continue to face financial hardships caused by the ongoing pandemic, the Center for Disease Control (CDC) requirements, lower than normal enrollment, staffing shortages and day to day budget demands, child care providers need an influx of funds to continue offering quality child care services to the families of West Virginia.

1.0.2. West Virginia State Goals

The primary goal of child care services is to provide experiences to children which will foster their healthy development while enabling their parents to participate in work or educational activities. The WV Child Care Stabilization Grant payment program will assist child care providers to continue to provide care and protection that a child receives from his parents.

1.0.3. Federal Goals

The American Rescue Plan (ARP) Act Child Care Funding will support stabilization grants to child care providers to cover their operating expenses as they face less revenue and higher expenses during the pandemic.

1.1. Definition of Program Terms

The following definitions of program terms shall be used in interpreting WV Child Care Stabilization Grant Program policy:

1.1.1. Certificate of Registration: A statement issued by the Commissioner for a period of up to two years to a family child care home upon receipt of a self-certification statement of compliance with the applicable rules promulgated by the Commissioner.

1.1.2. Child Care Resource & Referral Agency (CCR&R or R&R): An agency under contract with the Department of Health and Human Resources to maintain provider resources, provide consumer education, manage the child care subsidy program, refer parents to available providers, and offer services to improve the quality of child care, such as provider training and technical assistance.

1.1.3. Child Care Center: A facility operated for the care of 13 or more children on a nonresidential basis.

1.1.4. DHHR: West Virginia Department of Health and Human Resources.

1.1.5. FACTS: The Family and Children Tracking System (FACTS) is the management information system used to maintain child care information on families and providers, determine eligibility and process payments.

1.1.6. FACTS Plus: West Virginia website where child care providers are able to track child care payments. <https://www.wvfacts.org/factsplusnet/>

1.1.7. Family Child Care Home: A facility which is used to provide nonresidential child care for compensation in the provider's home. The provider may care for four to six children, including children who are living in the household, who are under six years of age. No more than two of the total number of children may be under twenty-four months of age.

1.1.8. Family Child Care Facility: Any facility which is used to provide nonresidential child care for compensation for seven (7) to twelve (12) children for four (4) or more hours per day, including children who are living in the household who are under six years of age. No more than four (4) of the total number of children may be under 24 months of age.

1.1.9. Informal Family Child Care: An informal family child care home provides care for three (3) or fewer children. At least one (1) child is not related to the provider. Informal child care providers are exempt from regulatory requirements but may volunteer to register in order to receive federal child care or food program funding.

1.1.10. In-Home Care: In-home child care is provided by relatives or non-relatives for a child or children in the child's own home.

1.1.11. Out of School Time Child Care Program: A child care service that offers activities to children before and after school, on school holidays, when school is closed due to emergencies and on school calendar days set aside for teacher activities. OST Programs provide out of school time services typically for fewer than four (4) hours daily, and not more than 30 full days annually for children aged 5 and up.

1.1.12. Revoke/revocation: Negative action taken by terminating licensure or registration when a provider fails to maintain established requirements of child care.

1.1.13. Relative Family Child Care: A relative family child care home provides care only to children related to the caregiver. The caregiver must be a grandparent, great grandparent, aunt, uncle, great-aunt, great-uncle, or adult sibling. Relative family child care homes are exempt from regulatory requirements but may volunteer to register in order to receive federal child care or food program funding.

CHAPTER 2: OVERVIEW OF WV CHILD CARE STABILIZATION PAYMENT ELIGIBILITY

2.1. Who is Eligible?

Any child care provider in West Virginia who meets the specified conditions and that has a child care license or certificate of registration is eligible, including:

- Type 1 Child Care Centers (serving 30 or fewer children)
- Type 2 Child Care Centers (serving 60 or fewer children)
- Type 3 Child Care Centers (serving 61 or more children)
- Family Child Care Home Facilities
- Family Child Care Homes
- Out of School Time Programs (one month prior to opening and during the months of operation)

2.2. Conditions for eligibility:

2.2.1. Possess a valid provisional or regular license or certificate of registration.

2.2.2. Must provide full-time child care services in West Virginia, defined as a program that is open and offering at least eight consecutive hours of care per day, five days per week. (Out of School Time Programs that operate in West Virginia are exempt from the eight consecutive hour requirement.)

2.2.3. Must have at least 25% of the child care program's revenue received from private pay tuition and/or West Virginia's child care subsidy program.

2.2.4. Have a Provider Services Agreement in good standing.

2.2.5. Have not committed substantiated misrepresentation or fraud.

2.2.6. Are current on any signed repayment agreement.

2.3. Providers Not Eligible

Providers are not eligible if any of the following apply:

- The provider is a Pop-up Site.
- The provider transports children to a location out of state to provide care.
- The provider is in violation of any section of the Provider Services Agreement.
- The provider is behind or has reneged on a repayment agreement.
- The provider has failed to enter into a repayment agreement when necessary.
- Providers who have committed substantiated misrepresentation or fraud.

CHAPTER 3: ACCEPTABLE USE OF STABILIZATION PAYMENTS

3.1. Child care providers may use these funds to cover a range of expenses.

3.1.1. Personnel costs.

Wages and benefits for child care program personnel, including increases in compensation for any staff in a child care center or family child care providers and their employees; health, dental, and vision insurance; scholarships; paid sick or family leave; and retirement contributions. Other examples of allowable personnel costs include ongoing professional development or training, premium or hazard pay, staff bonuses, and employee transportation costs to or from work. Child care providers may also use resources to support staff in accessing COVID-19 vaccines, including paid time off for vaccine appointments and to manage side effects, as well as transportation costs to vaccine appointments.

3.1.2. Rent or Mortgage payments.

Rent (including rent under a lease agreement) or payment on any mortgage obligation, utilities, facility maintenance, (as it applies to the portion of the home or property used for caring for children). It also may include late fees or charges related to late payment. ECE recommends you consult your tax advisor regarding Internal Revenue Service Rules for business use of the home.

3.1.3. Insurance premiums.

Employee health, dental, vision insurance. Insurance premiums for, general and professional liability insurance, home or property liability insurance, (as it applies to the portion of the home or property used for caring for children). ECE recommends you consult your tax advisor regarding Internal Revenue Service Rules for business use of the home.

3.1.4. Facility maintenance and improvements

Funds may not be used for construction or major renovations. Allowable facility maintenance and improvements may include, but are not limited to, building, or upgrading playgrounds, renovating bathrooms, installing railing, ramps, or automatic doors to make the facility more accessible, and removing non-load bearing walls to create additional space for social distancing. In addition, maintenance, and minor renovations to address COVID-19 concerns are appropriate. The facility maintenance and improvements must be assisting with meeting state and local health and safety guidelines or facilitate business practices consistent with safety protocols.

3.1.5. Personal protective equipment (PPE) and COVID-related supplies. Training and professional development related to health and safety practices.

Personal protective equipment (PPE), cleaning and sanitization supplies and services, or training and professional development related to health and safety practices. Uses of funds under this category are not limited to those designed specifically in response to the COVID-

19 public health emergency and may include equipment, supplies, services, and training that support meeting state and local health and safety guidelines, including those related to the prevention and control of infection diseases, prevention of sudden infant death syndrome and use of safe sleep practices, administration of medication (consistent with standards for parental consent), prevention and response to emergencies due to food and allergic reactions, building and physical premises safety, prevention of shaken baby syndrome and abusive head trauma and child maltreatment, response planning for emergencies from a natural disaster or a man-caused event, handling and storage of hazardous materials and the appropriate disposal of bio contaminants, appropriate precautions in transporting children, pediatric first-aid and CPR, and recognition and reporting of child abuse and neglect.

3.1.6. Equipment and Supplies

This category includes purchases of or updates to equipment and supplies to respond to the COVID-19 public health emergency. So long as the equipment and supplies are in response to the COVID-19 public health emergency, they may include indoor and outdoor equipment and supplies that facilitate business practices consistent with safety protocols and developmentally appropriate practice, as well as business items needed to respond to new challenges, such as business software and upgrades. This also includes technological upgrades that programs can use to collect data and report to lead agencies.

3.1.7. Goods and services needed to resume providing care.

This category includes any material good or service necessary for the operation of a child care program. Examples of goods that might be necessary to maintain or resume child care services include food and equipment and materials to facilitate play, learning, eating, diapering and toileting, or safe sleep. Examples of services that are allowable include business automation training and support services, shared services, child care management services, food services, and transportation. The category also covers fees associated with licensing and costs associated with meeting licensing requirements.

3.1.8. Mental health supports for children and early educators.

Providers may use these funds to support the mental health of children and employees. Infant and early childhood mental health consultation (IECMHC), an evidence-based, prevention-based strategy that teams mental health professionals with people who work with young children and their families to improve their social, emotional, and behavioral health and development in the settings where children learn and grow, is one example of an allowable mental health support. The wellbeing of caregivers is also important to stabilizing the child care sector because the mental health and wellbeing of staff impacts training, recruitment, and retention as well as the level of care provided to children. Mental health consultations for staff and other types of mental health supports to staff are also allowable.

3.1.9. Reimbursement of costs associated with the current public health emergency, including paying for past expenses.

Prior to the passage of the ARP Act, child care providers incurred substantial financial losses. In order to keep providing these essential services to their communities throughout the pandemic, and there were not sufficient resources available over the past year to support the child care sector. Prolonged and short-term closures, reduced hours, tuition adjustments,

low enrollment, extra expenses related to sanitation and safety, and accommodations for new safety and staffing protocols have placed many child providers on very precarious financial footing for which prospective stabilization grants will not compensate. Assisting child care providers with these past financial losses will help ensure their future viability and are an essential component to stabilizing the availability of child care for families and communities.

3.2.0. Timeline for Child Care Stabilization payments

3.2.1. Child Care Stabilization monies must be utilized for acceptable expenses on or before December 31, 2023.

3.1.2. Child Care Stabilization monies can be utilized for acceptable expenses incurred after January 1, 2020.

CHAPTER 4: AVAILABLE FUNDING AMOUNTS

4.1. Grant Amounts

Depending upon the quality rating of the child care provider, monthly payments will begin October 1, 2021 and end December 31, 2023.

4.2. Payment Rate

Provider Type	Quality Tier I	Quality Tier II	Quality Tier III
Type 1 Child Care Center (serving 30 or fewer children)	\$5,000	\$10,000	\$22,000
Type 2 Child Care Center (serving 60 or fewer children)	\$9,000	\$15,000	\$24,000
Type 3 Child Care Center (serving 61 or more children)	\$11,000	\$20,000	\$27,000
Family Child Care Home Facility	\$1,500	\$2,400	\$3,200
Family Child Care Home	\$750	\$1,200	\$1,600
Out of School Time Program	\$10,000	N/A	N/A

4.3. Tracking WV Child Care Stabilization payments

DHHR will automatically process monthly stabilization payments for all eligible providers. Providers will be able to track these payments through FACTS Plus. Providers who do not currently have FACTS Plus accounts can obtain one here:

<https://www.wvfacts.org/factsplusnet/>

CHAPTER 5: APPLICATION PROCESS

5.0 Overview

To determine the eligibility of providers for the WV Child Care Stabilization Grant, every child care provider must apply prior to November 1, 2021.

5.1. Child Care Stabilization Payment Certification Agreement

5.1.1. Each eligible provider applying for funds is **REQUIRED** to fill out and return the Child Care Stabilization Payment Certification Agreement, signed, and dated. The Child Care Stabilization Payment Certification Agreement is posted on the WV DHHR Division of Early Care and Education website:

<https://dhhr.wv.gov/bcf/ece/Pages/default.aspx>

5.1.2. This agreement must be completed and returned via email, by November 1, 2021, to continue to receive stabilization payments to:

[mailto: ECEProviders@WV.gov](mailto:ECEProviders@WV.gov)

5.1.3. Providers who do not complete and return the Certification Agreement by the due date will not be eligible to receive additional stabilization payments.

5.2. Providers will Certify:

5.2.1. When open and providing services, implement policies in line with guidance and orders from states, territorial, Tribal, and local authorities, and , to the greatest extent possible, implement policies in line with guidance from the Centers for Disease Control and Prevention (CDC).

5.2.2. For each employee, pay at least the same amount in weekly wages and maintain the same benefits. This stipulation does not prevent the provider from increasing wages and/or benefits.

5.2.3. Will not involuntarily furlough employees through the duration of the receipt of Child Care Stabilization Payments and,

5.2.4. To the extent possible, provide relief from the copayments and tuition payments for families enrolled in the program, and prioritize relief for families struggling to make payments.

CHAPTER 6: ADDITIONAL INFORMATION

6.0. Additional Requirements

6.1. Taxes

The Stabilization Grant payment is considered taxable income. The WV DHHR will issue an IRS Form 1099 to each provider at the end of the year. Please contact a tax professional with questions regarding how to report this income

CHAPTER 7: PROCEDURES

7.1. Stabilization Payment Monitoring

The Division of Early Care and Education will create a Child Care Stabilization Payment Excel Master Chart. This chart will be updated on a monthly basis as providers open or change provider type or tier status.

7.1.1. The Quality Improvement State Lead is responsible for informing the Child Care Program Manager of changes in tier status monthly. The QISL is responsible for including notice of any change in Stabilization Payment amounts in the notice of Tier change.

7.1.2. The Child Care Policy Specialist shall collect information monthly from the Child Care Resource and Referral Agencies regarding:

- Providers entering repayment or falling behind on repayments.
- Providers who have had their Provider Services Agreement revoked or received a strike.
- The Child Care Policy Specialist is responsible for sending notice to providers whose Stabilization Payment amount will be changed based on information collected from the regional Child Care Resource & Referral agencies.

7.1.3. The regulatory specialists in the child care center licensing and family child care units will be responsible for sending notice of change in Stabilization Payment amounts that occur as a result of negative action such as temporary closures due to complaint or IIU investigations.

7.1.4. The regulatory specialists in the child care center licensing and family child care units will update the Master Chart by removing closed providers and adding any new providers opened during the month by the first working day of the next month. For example, all new providers opened in October 2021, must be added to the list by the first working day in November 2021.

7.1.5. The regulatory specialists in the child care center licensing will be responsible for notifying the Child Care Program Manager of seasonal start-up of any OST programs at least 45 days prior to opening date of the program.

7.1.6. The Child Care Program Manager will update amounts owed to providers based on information received in the above areas on the first working day of the month.

7.1.7. The Child Care Program Manager will send the monthly Master List to finance on or before the first working day of the month.

7.1.8. WV Division of Finance will enter payments by the third working day of the month as per the chart, making a data entry of chosen expenditure areas indicated by the provider on the Certification Agreement.

