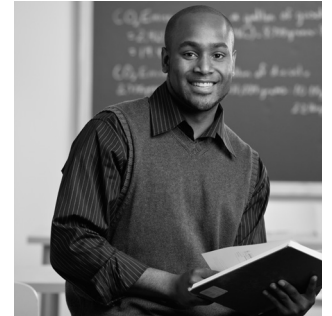


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CHILD CARE SERVICES

EXECUTIVE SUMMARY

SERVICE INTRODUCTION

Child care services provide eligible adults living with HIV who have the primary responsibility for the care of children with quality child care as needed. Child care services will be appropriately provided throughout Los Angeles County through licensed family child care or licensed child care centers.

The goal of child care for people living with HIV is to reduce barriers in accessing, maintaining and adhering to primary health care and related social services. Group-based child care activities can help reduce isolation and provide them with an opportunity to learn age-appropriate social and developmental skills.

SERVICE/ORGANIZATIONAL LICENSURE CATEGORY

Programs will comply with California regulations, Title 22, governing the provision of child day care services as they currently exist or shall exist at any future time while such services are being delivered. Child care services will be provided at facilities licensed through the Community Care Licensing Division. Child care facilities/providers will meet licensing requirements as set forth in Title 22, Division 12, Chapters One, Two and/or Three, Child Day Care and Family Child Care General Licensing Requirements, child care needs and in accordance with other applicable State and County laws, rules and regulations.

SERVICE CONSIDERATIONS

General Considerations: Child care services provide eligible adults living with HIV who have the primary responsibility for the care of children (responsible adult) with quality licensed child care for children under the age of 13 (unless child has a special need) as needed. Child care services are coordinated by a child resource center that ensures that services are appropriately provided throughout Los Angeles County by licensed family child care providers or licensed child care centers. All child care services will be linguistically, culturally and developmentally appropriate to the target population.

Confidentiality: The protection of client confidentiality is especially important in delivering child care services for both programs coordinating child care services and providers of child care services. Child care staff must be aware that while they may know about a client's diagnosis, other members the client's family may not.

Outreach: Programs coordinating HIV child care services will promote the availability of child care services for responsible adults. Promotion and outreach will include facilitating access to child care services throughout the eight Service Planning Areas (SPAs) of Los Angeles through ongoing collaboration with HIV primary health care and support services providers.

Intake: Client or family intake determines eligibility and includes demographic data, emergency contact information, next of kin and eligibility documentation. When possible, client intake will be completed in the first contact with the potential client.

Family Eligibility and Assessment: All responsible adults requesting child care services will be subject to eligibility determination and given a family assessment that determines the need for child care services. The program coordinating child care services is responsible for determining eligibility. Family assessments may be completed by either the program coordinating child care services or the provider of child care services, or both, and will include an assessment of a family's ability to access alternate child care resources and an evaluation of child's medical, emotional and behavioral needs that may require special attention.

Referral: Programs coordinating child care services will provide linked referrals and information about other available resources to adults living with HIV who have the primary responsibility for the care of children.

Policies and Procedures: Programs coordinating child care services are responsible for establishing written policies and procedures regarding child care, and, providers of child care services are responsible for operationalizing them.

Program Records: Programs coordinating child care services and providers of child care services will maintain records for each child and/or family served.



Services are based on a family assessment.

STAFFING REQUIREMENTS AND QUALIFICATIONS

At minimum, all child care facilities/providers will be able to provide linguistically, culturally and developmentally appropriate care for children of people living with HIV and complete documentation as required by their positions. Child care staff will complete an agency-based orientation before providing services. Staff will also be trained and oriented regarding client confidentiality and Health Insurance Portability and Accountability Act (HIPAA) regulations. In addition, all staff providing child care services must attend the Division of HIV and STD Programs (DHSP)—formerly referred to as the Office of AIDS Programs and Policy (OAPP)—eight-hour basic HIV training.

Facilities/providers will meet the licensing requirements as specified in Title 22, Division 12, Chapters One, Two and/or Three, Child Day Care and Family Child Care General Licensing Requirements, child care needs and in accordance with other applicable state and county laws, rules and regulations. All child care providers will submit to annual tuberculin skin testing and have current immunizations for measles, mumps and rubella (MMR) and pertussis.

In addition, staff who provide child care services will complete the following training given by an approved institution (at minimum):

- ◆ First aid/cardiopulmonary resuscitation (CPR)
- ◆ Fire and electrical safety
- ◆ Cultural awareness and diversity
- ◆ Child development
- ◆ Approved infectious waste disposal procedures

- ◆ Hazardous waste disposal
- ◆ Universal precautions for infection control
- ◆ Child abuse
- ◆ Domestic violence
- ◆ Information on the specific needs of children in families impacted by HIV
- ◆ Other topics essential to quality child care provision



CHILD CARE SERVICES

SERVICE INTRODUCTION

Child care services provide eligible adults living with HIV who have the primary responsibility for the care of children with quality child care as needed. Child care services will be appropriately provided throughout Los Angeles County through licensed family child care or licensed child care centers.

All programs will use available standards of care to inform clients of their services and will provide services in accordance with legal and ethical standards. Maintaining confidentiality is critical and its importance cannot be overstated. All programs must comply with the Health Insurance Portability and Accountability Act (HIPAA) standards for information disclosure.

The goal of child care for people living with HIV is to reduce barriers in accessing, maintaining and adhering to primary health care and related social services. Group-based child care activities can help children feel less isolated and provide them with an opportunity to learn age-appropriate social and developmental skills.

Recurring themes in this standard include:

- ◆ Child care services must be delivered in a culturally, linguistically and age-appropriate manner.
- ◆ Child care services must guard the confidentiality of clients and their families at all times.
- ◆ Child care services will be based on a family assessment, around which service plans and referrals are based.
- ◆ Ongoing monitoring of a child's physical and emotional/mental well-being is an integral part of child care services.
- ◆ Child care staff require specialized training to care for children of people living with HIV.
- ◆ Child care services must be provided in a safe environment.

The Los Angeles County Commission on HIV and Division of HIV and STD Programs (DHSP)—formerly referred to as the Office of AIDS Programs and Policy (OAPP)—have developed this standard of care to set minimum quality expectations for service provision and to guarantee clients consistent care, regardless of where they receive services in the County.



Activities help children feel less isolated.

This document represents a synthesis of published standards and research, including:

- ◆ *HIV/AIDS Other Support Services, Child Care Contract Exhibit*, Office of AIDS Programs and Policy
- ◆ Standards of care developed by several other Ryan White Title 1 Planning Councils—most valuable in the drafting of this standard were Chicago, 2002; San Antonio, 2004 and Baltimore, 2004

SERVICE/ORGANIZATIONAL LICENSURE CATEGORY



All child care services will be provided in accordance with Commission on HIV guidelines and procedures, local laws and regulations. Programs will comply with California regulations, Title 22, governing the provision of child day care services as they currently exist or shall exist at any future time while such services are being delivered. Child care services will be provided at licensed child care facilities throughout Los Angeles County. Such facilities will be licensed through the Community Care Licensing Division. (See http://cclcd.ca.gov/ChildCareL_1728.htm.)

Child care facilities/providers will meet licensing requirements as set forth in Title 22, Division 12, Chapters One, Two and/or Three, Child Day Care and Family Child Care General Licensing Requirements, child care needs and in accordance with other applicable State and County laws, rules and regulations. (See <http://www.dss.cahwnet.gov/getinfo/pdf/cc7.PDF> for text of Title 22, Division 12, Chapter One.)

DEFINITIONS AND DESCRIPTIONS

Client intake is a process that determines a person's eligibility for child care services.

Family assessment determines a family's eligibility and need for child care services.

Health Insurance Portability and Accountability Act (HIPAA) addresses the security, privacy and confidentiality of health data. (See <http://www.cms.hhs.gov/HIPAAgenInfo/> for more information.)

Licensed child care center is a non-residential facility licensed specifically to provide care and enrichment to groups of children under the supervision of qualified adults.

Licensed family child care is a setting in which the resident of a home obtains a license to care for a small group of children in his or her own home.

Outreach promotes the availability of and access to HIV child care services to potential clients and service providers.

HOW SERVICE RELATES TO HIV

At the end of 2013, approximately 60,050 people were estimated to be living with HIV infection in Los Angeles County. Los Angeles County comprises 40% of the total AIDS cases in the State of California (Epidemiologic Profile of HIV in Los Angeles County, 2013).

The lack of child care has been cited as a major barrier to receiving services for parents and guardians living with HIV (Office of HIV Planning, 2002; Hackl, et al., 1997). Reviews of the literature have found that:

- ◆ Women with a child in the household were more likely to delay getting medical care for themselves (Office of HIV Planning, 2002; Siegel, Karus & Raveis, 1997; Brown, et al., 2000).
- ◆ Clients with children have been found to be more likely to be retained in care as a result of receiving child care (Conviser & Pounds, 2002).
- ◆ In one study, women living with HIV missed a higher percentage of clinic appointments than men. When free onsite child care was provided, adherence to scheduled appointments improved dramatically (Mehta, Moore & Graham, 1997).

The responsibility of child care can also impact medication adherence. Roberts and Mann (2000) posit that women with young children may be so busy caretaking that adherence to medication is of secondary importance. Another Roberts study (2000) reported that women were more likely than men to mention care giving as a factor in medication non-adherence.

SERVICE COMPONENTS

Child care services provide eligible adults living with HIV who have the primary responsibility for the care of children (responsible adult) with quality licensed child care, as needed, for children under the age of 13 (unless child has a special need). Services are meant to reduce barriers by assisting responsible adults with accessing, maintaining and adhering to primary health care and HIV-related support services. Child care services are coordinated by a child resource center that ensures services are appropriately provided throughout Los Angeles County by licensed family child care providers or licensed child care centers. All child care services will be linguistically, culturally and developmentally appropriate to the target population (see Program Requirements and Guidelines in the Standards of Care Introduction).

This document details standards of care both for the agencies that coordinate child care services and the providers of such services. In general, coordinating agencies are held to a more comprehensive set of standards. In the following section, standards are identified as applying to Programs Coordinating Child Care Services and/or Providers of Child Care Services.

CONFIDENTIALITY

The protection of client confidentiality is especially important in delivering child care services for both programs coordinating child care services and providers of child care services. Child care staff must be aware that while they may know a client's diagnosis, other members of the client's family may not. They should never assume that family members, children, or others in a client's social support network are aware of that client's diagnosis. HIV status should never be disclosed to ANYONE without the written permission of a client. The consequence of disclosing can be devastating to all parties and subjects individual providers, facilities and coordinating agencies to the risk of litigation and legal penalty.

STANDARD	MEASURE
Client confidentiality will be maintained at all times. HIV status will never be disclosed without written permission from a client.	Program review and monitoring to confirm. Release of information for disclosure on file at provider agency.

OUTREACH

Programs coordinating HIV child care services will promote the availability of child care services for responsible adults. Promotion and outreach will include facilitating access to child care services throughout the eight Service Planning Areas (SPAs) of Los Angeles through ongoing collaboration with HIV primary health care and support services providers. Programs should attempt to disseminate information about the availability of child care throughout all components of the continuum of HIV care, including promotional meetings with staff, service provider networks and posting information in HIV medical and social services facilities.

Programs will develop an outreach plan that demonstrates collaboration with HIV medical outpatient providers and other services providers.

The outreach plan will include (at minimum):

- ◆ Written strategy for providing child care services that links with HIV medical outpatient services and other supportive services
- ◆ Assessment of other available resources and services
- ◆ Timeline for implementation
- ◆ Memoranda of Understanding (MOU) to formalized linkages
- ◆ Evaluation plan

STANDARD	MEASURE
Programs coordinating child care will outreach to potential clients and providers.	Outreach plan on file at coordinating agency to include (at minimum): <ul style="list-style-type: none"> • Strategy for linking child care with services • Assessment of other resources • Timeline for implementation • MOUs • Evaluation plan

INTAKE

It is unlikely that a client's point of entry into the HIV service system will be through a program coordinating child care services; however, if a client's first contact with the HIV continuum of care is through these services, the programs coordinating child care services will be responsible for client intake.

Client intake determines eligibility and includes demographic data, emergency contact information, next of kin and eligibility documentation. When possible, client intake will be completed in the first contact with the potential client. The complete intake process, including registration and eligibility, is required for every client at his/her point of entry into the service system. If an agency or other funded entity has the required information and documentation on file in the agency record for that client or in the countywide data management system, further intake is not required.

will be strictly maintained and enforced. All programs will follow HIPAA guidelines and regulations for confidentiality. As needed, Release of Information forms will be gathered. These forms detail the specific person/s or agencies to or from whom information will be released as well as the specific kind of information to be released. New forms must be added for individuals not listed on the most current Release of Information (specification should indicate the type of information that can be released).

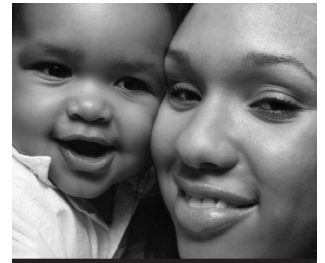
As part of the intake process, the client file will include the following information (at minimum):

- ◆ Written documentation of HIV status
- ◆ Proof of Los Angeles County residency
- ◆ Verification of financial eligibility for services
- ◆ Date of intake
- ◆ Client name, home address, mailing address and telephone number
- ◆ Emergency and/or next of kin contact name, home address and telephone number

Required Forms: Programs must develop the following forms in accordance with State and local guidelines.

Completed forms are required for each client:

- ◆ Release of Information (must be updated annually). New forms must be added for those individuals not listed on the existing Release of Information (specification should be made about what type of information can be released).
- ◆ Limits of Confidentiality (confidentiality policy)
- ◆ Consent to Receive Services
- ◆ Client Rights and Responsibilities
- ◆ Client Grievance Procedures



Programs must provide a safe environment.

STANDARD	MEASURE
Intake process will begin during first contact with client at the program coordinating child care services.	Intake tool in client file to include (at minimum): <ul style="list-style-type: none"> • Documentation of HIV status • Proof of LA County residency • Verification of financial eligibility • Date of intake • Client name, home address, mailing address and telephone number • Emergency and/or next of kin contact name, home address and telephone number
Confidentiality policy and Release of Information will be discussed and completed	Release of Information signed and dated by client on file and updated annually.
Consent for Services will be completed.	Signed and dated Consent in client file.
Client will be informed of rights and responsibility and grievance procedures.	Signed and dated forms in client file.

FAMILY ELIGIBILITY AND ASSESSMENT

All responsible adults requesting child care services will be subject to eligibility determination and given a family assessment that determines the need for child care services.

The program coordinating child care services is responsible for determining eligibility, based on the following requirements (at minimum):

- ◆ Verification of HIV diagnosis (if not already obtained)
- ◆ Proof of Los Angeles County residency (if not already obtained)

- ◆ Verification of financial eligibility (if not already obtained)

Family assessments may be completed by either the program coordinating child care services or the provider of child care services, or both, and will include (at minimum):

- ◆ Assessment of and ability to access alternate child care resources
- ◆ Evaluation of child’s medical, emotional and behavioral needs that may require special attention (e.g., Parents’ Evaluation of Developmental Status, Desired Results Development Profile, Ages and Stages)

STANDARD	MEASURE
Clients requesting child care services will have eligibility determination completed by coordinating program.	Eligibility documentation on file at coordinating program to include: <ul style="list-style-type: none"> • Proof of HIV diagnosis • Proof of LA County residency • Financial verification
Clients requesting child care services will be given a family assessment by either the coordinating program or the provider, or both.	Family assessment on file at provider agency to include (at minimum): <ul style="list-style-type: none"> • Assessment of alternate resources • Evaluation of medical, emotional and behavioral needs

REFERRAL

Programs coordinating child care services will provide referrals and information about other available resources to adults living with HIV who have the primary responsibility for the care of children. Special consideration should be given to helping clients find longer term child care options such as placement on Los Angeles County’s Centralized Eligibility List (LA CEL) for full-time care. DHSP’s service utilization data management system will be used to facilitate, track and document referrals. Whenever appropriate, program staff will provide linked referrals demonstrating that clients, once referred, have accessed services. Documentation of referral efforts will be maintained in the child care records.

STANDARD	MEASURE
Programs will provide referrals to responsible adults.	Program review to confirm. Record of referral activities on file at child care coordinating program.
Clients requesting child care services will be given a family assessment by either the coordinating program or the provider, or both.	Family assessment on file at provider agency to include (at minimum): <ul style="list-style-type: none"> • Assessment of alternate resources • Evaluation of medical, emotional and behavioral needs

POLICIES AND PROCEDURES

Programs coordinating child care services are responsible for establishing written policies and procedures regarding child care, and providers of child care services are responsible for operationalizing them.

Policies and procedures are required for the following:

- ◆ Eligibility for child care services
- ◆ Confidentiality
- ◆ HIV sensitivity and ongoing HIV training of child care staff
- ◆ Receiving and releasing children that guarantees their safety
- ◆ Protecting the personal rights of children served and the family’s right to privacy

- ◆ Ensuring that any health threats to immuno-compromised children or responsible adults as identified by the Centers for Disease Control (CDC) are addressed. For example, reptiles (including lizards, snakes and turtles) should be forbidden due to the associated medical dangers of salmonella (see MMWR 52(49), pp. 1206-1209)
- ◆ Care and isolation of children who become ill, including administering medication as instructed by responsible adult
- ◆ Care of the child in the event responsible adult does not return for pick up. Contingency care plans must be discussed with and agreed upon by the responsible adult and updated quarterly
- ◆ Waste disposal and hazardous waste disposal plans
- ◆ Handling emergencies and/or potentially disruptive occurrences, including:
 - Medical emergencies
 - Physical confrontations
 - Persons displaying improper or threatening behavior
 - Natural disasters
- ◆ Compliance with Public Law 103-227 (Pro-Children Act of 1994) which prohibits smoking in child care facilities (See http://www.cdc.gov/tobacco/research_data/youth/464119.htm.)
- ◆ Provision of nutritionally sound meals and snacks where indicated
- ◆ Use of child restraint devices certified to meet federal safety standards Child restraint devices will be used correctly according to California state law by all children under 60 pounds or six years of age



Staff will be trained in child development.

STANDARD	MEASURE
Programs coordinating child care services will develop written policies and procedures.	Written policies and procedures on file to include the following: <ul style="list-style-type: none"> • Eligibility for child care services • Confidentiality • HIV sensitivity and training • Receiving and releasing children that guarantees their safety • Protecting personal and privacy rights • Forbidding reptiles • Care and isolation of children who become ill • Care of the child in the event a responsible adult does not return for pick up • Waste disposal plans • Handling emergencies • Compliance with Public Law 103-227 • Provision of meals and snacks • Use of child restraint devices
Providers of child care services will operationalize policies and procedures set forth by coordinating program.	Program review and monitoring to confirm.

PROGRAM RECORDS

Programs coordinating child care services will maintain records for each child served, including (but not limited to):

- ◆ Name, address and telephone numbers of responsible adults
- ◆ Documentation of responsible adults' HIV diagnosis, proof of Los Angeles County residency and verification of financial eligibility
- ◆ Copy of family assessment
- ◆ Current child care contingency plan. Contingency care plans must be discussed with

- and agreed upon by the responsible adult and updated quarterly
- ◆ Copy of child’s current immunization record and documentation of health insurance, if any
- ◆ Relevant custody documents as appropriate
- ◆ Documentation of observations and assessments made about child’s physical and mental condition
- ◆ Documentation of referral activities and contact information of relevant agencies that are working with the family

Providers of child care services will maintain the following records:

- ◆ Name, address and telephone numbers of responsible adults
- ◆ Copy of family assessment
- ◆ Current child care contingency plan. Contingency care plans must be discussed with and agreed upon by the responsible adult and updated quarterly
- ◆ Copy of child’s current immunization record and documentation of health insurance, if any
- ◆ Documentation of observations and assessments made about child’s physical and mental condition

STANDARD	MEASURE
<p>Programs coordinating child care services will maintain records for each child.</p>	<p>Child care records on file at coordinating program to include (at minimum):</p> <ul style="list-style-type: none"> • Responsible adults’ contact info • Documentation of responsible adults’ eligibility • Copy of family assessment • Child care contingency plan • Child’s immunization record/health insurance • Custody documents as necessary • Observations and assessments of child • Referral activities/agency contacts
<p>Providers of child care services will maintain records for each child.</p>	<p>Child care records on file with provider to include (at minimum):</p> <ul style="list-style-type: none"> • Responsible adults’ contact info • Copy of family assessment • Child care contingency plan • Child’s immunization record/health insurance • Observations and assessments of child

STAFFING REQUIREMENTS AND QUALIFICATIONS

At minimum, all child care facilities/providers will be able to provide linguistically, culturally and developmentally appropriate care for children of people living with HIV and complete documentation as required by their positions. Child care staff will complete an agency-based orientation before providing services. Staff will also be trained and oriented regarding client confidentiality and HIPAA regulations. In addition, all staff providing child care services must attend DHSP’s eight-hour basic HIV training.

Facilities/providers will meet the licensing requirements as specified in Title 22, Division 12, Chapters One, Two and/or Three, Child Day Care and Family Child Care General Licensing Requirements, child care needs and in accordance with other applicable state and county laws, rules and regulations. All child care providers will submit to annual tuberculin skin testing and have current immunizations for measles, mumps and rubella (MMR) and pertussis.

In addition, staff who provide child care services will complete the following training given by an approved institution (at minimum):

- ◆ First aid/cardiopulmonary resuscitation (CPR)
- ◆ Fire and electrical safety
- ◆ Cultural awareness and diversity
- ◆ Child development
- ◆ Approved infectious waste disposal procedures
- ◆ Hazardous waste disposal
- ◆ Universal precautions for infection control
- ◆ Child abuse
- ◆ Domestic violence
- ◆ Information on the specific needs of children in families impacted by HIV
- ◆ Other topics essential to quality child care provision



Programs provide quality licensed child care.

STANDARD	MEASURE
All child care providers will be able to provide linguistically, culturally and developmentally appropriate care to children under the care of responsible adults.	Resume on file at provider agency to confirm.
All staff will be given orientation prior to providing services. All child care providers will attend DHSP basic HIV training.	Record of orientation and DHSP training in employee file at provider agency.
All child care providers will submit to annual tuberculin skin testing and have current immunizations for MMR and pertussis.	Record of tests and immunizations in employee file at provider agency.
At minimum, staff will be trained in: <ul style="list-style-type: none"> • First aid/CPR • Fire and electrical safety • Cultural awareness and diversity • Child development • Waste disposal procedures • Universal precautions • Child abuse • Domestic violence • Needs of children in families impacted by HIV 	Record of trainings on file at provider agency.
Staff will meet licensing requirements as specified in Title 22, Division 12, Chapters 1, 2 and 3 and in other applicable State and County laws, rules and regulations.	Program review and monitoring to confirm.

UNITS OF SERVICE

Unit of service: Units of service defined as reimbursement for child care services are based on services provided to eligible clients.

- ◆ **Child care provision units** – calculated in number of hours provided

Number of clients: Client numbers are documented using the figures for unduplicated clients within a given contract period.

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ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
CDC	Centers for Disease Control and Prevention
CPR	Cardiopulmonary Resuscitation
DHSP	Division of HIV and STD Programs
HIPAA	Health Insurance Portability and Accountability Act
HIV	Human Immunodeficiency Virus
LA CEL	Los Angeles County's Centralized Eligibility List
MMR	Measles, Mumps and Rubella
MOU	Memoranda of Understanding
SPA	Service Planning Area
STD	Sexually Transmitted Disease