Arizona Department of Education
Health & Nutrition Services
Family Child Care Homes Advisory Council
Tuesday – May 24, 2011
9:00 AM to 12:00 PM
MAY MINUTES

Kenny Barnes – Family Child Care Homes (FCCH) Advisory Council Committee Chair, called the meeting to order at approximately 9:06 a.m.

Advisory Council Attendees:

Kenny	Barnes	Arizona Department of Education
Deanna	Barrowdale	Mid-State Child Care and Nutrition
Teresa	McCormack	Arizona Department of Education
Lori	Mendoza	Association for Supportive Child Care
Phyllis	Montgomery	Child and Adult Community Resources (Teleconference)
Cathleen	Moore	Food For Children

Other Attendees:

Darci	Curtis	ABC, Inc.
Anita	Griffin	ABC, Inc.
Cathy	Reagan	Arizona Association of Family Day Care Provider
Anna	Burke	Child & Family Resources, Inc.
Angela	Hilton	Nutrition & Health Education Resources
Sandee	Montez	Nutrition For Children
Nicholas	Dunford	ADE
Milt	Ericksen	ADE
Michael	Flores	ADE
Rachael	Hatfield	ADE
Zhenzhen	Li	ADE
Tracey	Nissan	ADE
Joe	Steech	ADE

Welcome and Introductions:

- Committee Chair welcomed Advisory Council and participating sponsoring organizations: First of all, let the record reflect that Cathleen will be joining us a little later today and Phyllis is on teleconference – everybody say hello to Phyllis. Okay, let's go ahead and get started - - we got about five things I want to touch on - - some are new and some are actually reminders.

Wading Pools:

- DHS has a rule out that says Providers are not allowed to have wading pools and ADE is actually going to follow that same rule effective with the new Fiscal Year, October 1, 2012. Any Providers that have wading pools will need to get rid of them or put them up, whatever like that but they cannot be present in the home. Again, if you want to follow up on that that is DHS Rule R9-3-503 Subsection D. Any questions on that?
    - Comment: What if Provider has a wading pool and doesn't let them use it, has put it away?

- Kenny: No, they can't have them and can't use them - - Providers are not allowed to have them.

Carbon Monoxide Detectors:

- Again effective and starting this Fiscal Year, October 1, 2012, homes that use gas or have a gas furnace will be required to have carbon monoxide detectors. I went online and did some research and priced some at Home Depot and Lowe's and they are fairly inexpensive. I've got copies up here and before you leave please take one - - these are just a few, obviously but I think for the most part the average cost is going to be anywhere between $17.00 and $27.00. Some are operated by manual battery and others are actually plug-in. Again that will be effective starting this new fiscal year 2012.

Fingerprint Card Renewals:

- It was brought to my attention that there has been some questions in regards to when Providers should actually begin the renewal process as far as the renewal of their fingerprint cards. I will say that maybe about 2-3 years ago we all discussed that Providers need to show a "good faith effort" as far as starting the renewal process on their fingerprint cards in a reasonable amount of time where there is no gap between the expiration of the old card and receiving a new card. Now, in the event that the Provider requested a renewal card 30-days in advance and DPS is slow in getting them their renewal card and their card expires before the new card comes - - yes, we'll go ahead and work with the Providers in that instance right there. What we don't want to see is - - my fingerprint card expires Friday and I'll start the renewal process on Tuesday. So Providers should go ahead and start the process in a reasonable enough time and in our opinion a reasonable enough time would be 30-Days to give DPS enough time to get the card out. In the event that DPS in behind or something is going on where they can't get that renewal card out quickly enough where there is any kind of gap between the expiration date and the new card coming.
    - Sandee: So you are saying they should have their new card in their possession before the old one expires and it's not like the new Provider they take the prints and say it's in the works.
    - Kenny: Right - - that's exactly what I'm saying, it's not like a new Provider where they can just show their application because they know when their fingerprint card is going to expire and they should start the renewal process in a reasonable enough time to go ahead and allow for any kind of issues with DPS in getting their renewal card.
    - Sandee: Is this a new rule.
    - Kenny: Actually, this has been in effect for about 2-3 years because we've never given a grace period for renewal fingerprint cards.
    - Cathy: So if we do it 30-days in advance is that going to be documentation enough if we go ahead and submit it?
    - Kenny: Yes. If we can see that the Provider went ahead and started the process 3-4 weeks ahead of time and for whatever reason DPS still hasn't gotten their renewal card to them we at ADE are more than willing to work with them until their renewal card shows up. Any additional questions regarding fingerprint card renewals?
    - Comments: None

Update on Meal Pattern Changes:

- Next on the agenda – update on meal pattern changes. At last meeting we had mentioned that we participated in a webinar that discussed possible revision to the meal pattern - - as of right now there hasn't been any kind updates as far as not just what the meal pattern changes are going to be or when they will take effect. I actually when into FRAC's website yesterday looking for any kind of updates or any kind of comments they might have and as of yesterday there has been no updates. We haven't received anything saying that these are some possible changes - - so nothing new from the last meeting has occurred or come up regarding meal pattern changes.
    - Anna: I recently got all of the new USDA memos and so milk for sure by October.
    - Kenny: One of the possible changes that they were talking about is adding a meat component to breakfast so those are like the meal pattern changes we are talking about. The 1%, 2% milk is always going to be in the mix but not one of the revisions I was talking about.
    - Cathy: Is milk going to be one of the new requirements?
    - Kenny: As far as the 1-year olds that requirement hasn't changed - - 1%, 2% milk we're good with either one. So if your Providers are serving 2% milk we're not going to write them up. 1% and 2% milk - - I've talked to Melissa about it and using 1% is fine with us as a State Agency.
    - Anna: How about the water memo?
    - Kenny: It just has to be available. Okay, any other questions regarding the meal patterns?
    - Comments: None

- **Introduction of new H&N Director and CACFP Specialist.**
    - Milt Ericksen joined our staff about five weeks ago. Milt is going to help us out as far as outreach and he brings wealth of knowledge and experience and is a good guy. He is going to help us out not just from a standpoint of how we can increase our client base but what we can do. Please say hello and welcome Milt.
    - Rachael Hatfield joined our staff four weeks ago and Rachael is taking over Barb's specialist position and Rachael brings a lot of experience and energy that she is going to bring to the position. She is currently learning the position and is going to be a great help to us - - I would assume that as of right now all Provider applications now will be coming to Rachael.
    - Nicholas Dunford, H&N Operations Director - - you all know Nick, he is the money guy right there because I can't do anything for you from a money standpoint.
    - Kenny: I'm very happy to have you guys sit in.

Guardianship:

- I received an email regarding Providers who have grandchildren living with them - - Does Provider need legal guardianship document or are the grandchildren considered their own? The answer to this question is actually in your Compliance Manual, Section 202 under Provider's Own: "In the event that the grandparent doesn't have actual legal custody of the kids but the grandchildren are living with her on a daily basis the children are part of the economic household unit and they are considered belonging to the grandparent and will be considered Providers Own."
    - Comment: No legal document?
    - Kenny: Okay, no legal document is necessary and again that is in your Compliance Manual under Section 202 – Provider's Own.

ADE/USDA Regulations Regarding Providers placed on DES Suspension:

- This was actually brought up by Lori and what exactly did you want to know about this Lori?
  - Lori: I'm just seeking clarification - - we are encountering more and more Provider's that are DES that are being placed both "probation" and a lot of times right now "suspension". And, about a year ago I thought I had it down once the expectation is if a Provider is suspended then it would be to classify them as "Seriously Deficient" and give them 90-days to comply with whatever it is that DES is looking for, which a lot of times we don't know why they are on suspension. Once they have complied and they are back in "good standing" with DES then they can continue with participation with the food program. What we are seeing now is at times they are going from DES suspension to voluntarily withdrawing which seems to be an issue of terms of - - if they are 'seriously deficient" and we haven't lifted the serious deficiency or we haven't taken them out of the corrective action situation and where that leaves them in further participation if they choose to continue with the food program. We are seeing it and I don't know if you all are as well - - and I just want to do it the way guidelines say we need to but it seems that what worked and what I was doing a year ago isn't what I'm hearing needs to happen.
  - Anna: Kenny, can I say one thing - - and one thing is and I understand but there are some Provider's who are really struggling to pay their house insurance and DES is getting stricter now in Tucson and the providers get put on probation, probation, probation for like two years. The new person down there is leaving them on suspension if they don't have their insurance and the Provider on wants to take care of kids and then decides he doesn't want to go thru this anymore so they go AA. So they are ruining us, they are not going to pay for their own insurance and they take care of the neighbor kids across the street and so they are not going to pay for insurance on their houses and are going to AAs. I don't think that someone in my case should be placed on serious deficiency with CACFP because DES put them on suspension because of the insurance issues.
  - Kenny: Okay, let's go ahead and address the suspension part of this. In the event DES suspends anybody for whatever reason they are automatically unable to claim on CACFP. This is first and foremost, now once they are put on suspension they do have to come back into compliance before they can transfer to become an AA Provider. It would be the same thing if one of you placed a Provider "Seriously Deficient" and let's say she owed you $500 and because she is upset with you for declaring her seriously deficient and assessing a fiscal action to her - - she just can't go from you to another sponsoring organization. This will have to be corrected before they can transfer. I understand what you are saying, maybe the reason they got suspended was minute but unfortunately the fact remains that DES put them on suspension for a reason whether it was up here or down there. So until they come back into compliance then they cannot claim on the CACFP program.
  - Anna: So if they want to become AA then they have to pay insurance for 1-month.
  - Kenny: Right – exactly, so if it's a case of like you said insurance and they are mad at DES and now they pay their insurance and then they can become an AA because they don't want to deal with DES anymore. But again they have to come back into compliance before they can even think about transferring to DES to AA.
  - Angela: What do we need to make sure they are in compliance.

- Kenny: You need to get something from DES and DES should be sending you something not only letting you know that they were placed on suspension and this is the reason why they were placed in suspension but also notifying you that the Provider has now paid her insurance now and she is in compliance and has been taken off DES suspension. Now if you aren't getting this information from DES then I would say this is definitely something that you want to address with DES. Asking them if there is any way of getting an update of why and reason why they were suspended because you need to know that.
- Angela: DES won't want to do that.
- Sandee: That just happened to me last month - - an honest Provider on DES called me last Monday and said her home was being suspended… something to do with a child. I would have never know if the Provider has not been honest.
- Kenny: Okay, how about this then - - Provider calls you and says DES just placed me on suspension because of whatever. Can I get a copy from you saying this is why she was suspended?
- Sandee: Well, I was thinking in the first place that provider alerted me - - I would have never known, she could have continued claiming.
- Kenny: Right.
- Sandee: Is there some kind of a process that DES notifies you guys and ADE let us know so that we are notified somehow?
- Kenny: I know we get information for DHS about stuff like that but personally I have never seen anything from DES saying that this provider has been suspended or whatever like that. We definitely get information from DHS. That'll be something that I can address with the powers that be at DES if there is something they can work out where they can get some information to you guys - - again, not just letting you know that "Provider A" has been suspended but why she has been suspended and to let you know when that provider does come back into compliance.
- Sandee: It seems that DES isn't going to see what agency the provider works thru so they would have to go thru you guys - - DES needs to alert ADE.
- Kenny: Personally, I've never seen anything from DES.
- Angela: Just for the ones that want to come into compliance - - I would think that DES would be most likely to notify the Provider than anyone else so the Providers that get evidence that they are in compliance should be able to get this from DES.
- Kenny: She is saying that the providers don't let them know that they have been suspended or they don't even know they have been suspended.
- Sandee: Well, if they are trying to come on as an AA - - she is waiting until all of that is cleared up in her home but as I'm saying I would have never known.
- Lori: We have someone now that we have moved forward on and put them on as an AA. They were suspended and DES let her "voluntarily withdraw" and now we know what the issues are and we did do some research and found out what those issues were but as far as I understand as of yesterday via phone message that even if she assures us that she'll stay within ratio and she'll secure the chemicals that I think it was that I think she voluntarily withdrew and probably didn't get everything in order before she voluntarily withdrew. She is ineligible, am I correct? And unless they get reinstated with DES there is no way or open door with continuing with the program.

- Kenny: That's correct, because again once they have been placed on suspension before they can even think about claiming again, before they can think about transferring from DES to AA they have to come back into compliance.
- Anna: DES is always behind - - way behind on stuff and on the other end - - you are trying to get the renewed certificate and they wait up to 2-3 months and trying to get an updated certificate is difficult.
- Cathy: Are you saying that they let her voluntarily withdraw leave DES?
- Lori: Rather revoking, yes - - I'm thinking sometimes they revoke them and sometimes for whatever reason they let them voluntarily withdraw even though they haven't corrected what it is that put them into suspension.
- Cathy: If they let them voluntarily withdraw that means it doesn't go on a record that they have been revoked.
- Lori: Right - - that's cut-and-dried and that door in closed and that's the way it reads in the agreement.
- Kenny: But the last action that was taken with DES was that they were suspended.
- Lori: No the last action was that DES let them voluntarily withdraw.
- Kenny: But still though at some point they were suspended by DES and they never came back into compliance and now whether they elected to go ahead and self-terminate from DES or not whatever the issue was that caused them to get suspended that has to be corrected before they can do anything else where they self-terminate or not. So and again, I understand that the issues and what they might have been suspended for was minute - - I also understand that DES may have an issue as far as responding to these things in a timely manner but we can't let them continue to participate on this program until they have shown that the issues that they got suspended for have been corrected. Again, if a provider wants to transfer from one sponsor to another and they hadn't corrected the actions that you placed them on serious deficiency for they could self-terminate from you but they can't transfer to someone else until you say she has corrected the issues - - whether it's sign-in sheets, meal counts and whatever like that - - those issues have to be corrected before she can transfer to someone else.
- Cathy: Does anyone have that DES rule written down anywhere? Is that one of the rules, that if they are suspended that they can self-terminate.
- Lori: And I think the Providers need to be informed so they know and they can make a choice whether they are going to comply even though they don't choose to continue with DES would they know the consequences for the Food Program or other programs.
- Cathy: So that provider goes off the program for 6-months and then decides to go AA with someone else - - that is the problem.
- Kenny: And I agree, if DES is not going to have any kind of decent communication as far as letting you know that Susie Schwartz was suspended because of whatever - - and of course knowing that she goes ahead and apply for your program and of course you don't know any better but I would not only review DES's rules regarding that but I will see who I can contact over at DES regarding at least open up some kind of communication as far as letting you guys know when the provider has been suspended and why the provider has been suspended and when they actually come back into compliance, okay.
- Lori: How long do we give them to comply? It is somewhat out of our control because DES is the one determining what the problem is and how long and their follow-up. I have

been giving them 90-days when I've been alerted to the fact that there is a suspension but I think there is a conflict with that and the Federal Regs state that its 60-days and sometimes things can really linger and drag on.

- Anna: Kenny, even in their system, something called the 'rumba' - - and in their system when a provider self-terminates it doesn't even show that the provider was suspended. They don't have a whole lot of records - - I am in an office with them… it's not like they were suspended then they self-terminated and a lot of times the system just erases the suspension when you move it to termination. No, so there won't even be a record after the termination.
- Kenny: 3-months is definitely too long. I believe it is 60-days to come into compliance but again when they are suspended by DES they should be giving them a specific timeframe about when to come back into compliance.

Health & Fire Inspections and Sponsors Responsibility Regarding Follow-up:

- Regarding follow-up on Health and Fire inspections - - Comments.
  - None

Provider Self-Termination (Example: Going from DES to AA after being suspended or seriously deficient):

- We just kind of discussed the whole self-termination thing.

Advisory Council Chair requested Public Participation Request forms.

Public Participation: None

Other Updates and issues:

Does anyone have anything they want to share with the rest of the class.

- Anna: I have a question - - so you are saying that children over the age of 2-years on their menus we still need to write 2% milk after October 2011 even though the USDA memo is saying different.
- Kenny: We are saying that 1% or 2% milk is fine, okay. And to make sure I can follow-up on that. We just had a discussion on it last week but when I send out the minutes I'll go ahead and clarify that point for everybody so it will actually be in writing.
- Angela: Issue with auditors on sign-in and out for Providers Own.
- Deanna and I were just talking about that before we got started - - but I'll check with Melissa because it was always my interpretation that providers own kids did not need to sign-in.

- Cathy: That was actually on the original instructions that ADE sent out.
- Comment: Who said that they did need to sign-in?
- Kenny: Okay, so I already have it written down and I'll find out today and I'll send out a mass email so that everyone is on the same page as far as what is required and what's not required as far as sign-in and sign-out signature.
- Deanna: Can you also include sign-in and out as far as times on the menus - - can that be included because to us we don't have them send in sign-in and out sheets - - so our office would be counted as a time in and out on menus.
- Kenny: Sign-in and sign-out on menus, okay.
- Deanna: On meal count sheets we didn't require the providers to put their time in and out for their own children and that's where the question came in with the auditors because we do not receive sign-in and out sheets. Any child that did not have a time in and out including providers own would be disallowed.
- Phyllis: That's not right.
- Angela: We have our providers sign-in and out on the menu and for providers own we have TC=for total care or whatever FT=full time and that's not acceptable either. John C Todd said that the provider should sign their own child in at 7:am and sign their own child out at 7:pm if those are their care hours - - then I said, well then the child looks like they live there and that's ridiculous, why would you do that. Because then it looks like a non-resident child - - coming and leaving home and that's falsifying materials because the child lives there.
- Cathy: Did you get written up for that?
- Deanna: Because I sound a little angry - - no, just a point of discussion.
- Kenny: Let me ask you a question - - I'll bring it up and I'll find out something today and let everybody know by close of business today.
- Angela: That is always an issue when we are being audited and the policy manual and the auditors look at us differently.
- Kenny: And the thing is in the past - - I'm pretty sure that Tracey, Joe and Michael have had the same situation where it's an issue that is questionable or borderline the auditors will usually call us and say - - What is your policy on this? And we let them know and then they may disallow a meal or whatever like that. I haven't received any phone calls from auditors.
- Sandee: I know the auditors call and I might and that's why it's just a point of discussion if nothing was written up but that is what we don't want.
- Deanna: But we want to be able to prepare the Providers because they are saying that its upcoming so then if any provider - - are they going to look back if we have an Admin Audit and are we going to be disallowed if providers to not have times on their menus? I mean we immediately sent out a memo to our providers saying that they have to put times on their menus or we can't pay you for your children because that's what auditors are saying is the rule.
- Kenny: Okay.
- Phyllis: But not everybody uses the same type of menu that you use - - we use sign-in and out sheets. For the Providers own kids because the reason that we notice that we have DES providers that have a limit of four kids for compensation and kids of their own. They tell us that my kid wasn't there and we tell them if he is a household member he is there - - so he is counted in the ratio right from the very beginning. A lot of times we notice that when they do tell us that the kid is not there and we tell them - - you know what, it doesn't make sense that the kid is not there during meal time and you've got an extra kid coming in seeing that your kid wasn't there - - so it is

an issue with that but I still don't understand why and it doesn't make sense to me why a provider would have to keep an sign-in and out sheet on their own kid when we are going to count them there anyway because they are part of the household.

- Deanna: That was our discussion with the auditors and even if they didn't have a sign-in and out sheet that they have to have a time in and out on the menu - - on the meal count sheet.
- Phyllis: So you are doing your meal count different - - your menu is different than ours. We go by the hours of meal service times and you guys write on your menus and we don't do that. We go strictly by their application and when they are supposed to be there and the times they are in and out of school so we don't write on our menus and that's the big difference I think.
- Kenny: Nick, do you want to say something.
- Nick: I just want to point out that John C Todd and Heinfeld & Meech are doing programs and is actually part of the contract they have with ADE.
- Cathy: Is there a timeline of when they are supposed to do this.
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Closing Remarks:

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- No closing remarks from Advisory Council - - Meeting concluded at approximately 10:00 a.m.

Next Advisory Council Meeting:

August 16, 2011 (Tuesday)
Time: 9:00A – 12:00P
ADE Central – Conference Room 106