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Through this information collection, ACF is gathering data on the Tribal Lead Agency's grant program to understand the design and effectiveness of the program and to inform technical assistance needs. Public reporting burden for this collection of information is estimated to average 120 hours per response for Part I (for all Tribal Lead Agencies) and 24 hours per response for Part II (for medium and large Tribal Lead Agencies), including the time for reviewing instructions, gathering and maintaining the data needed, reviewing the collection of information. This collection of information is required to retain a benefit (Pub. L. 105-285, section 680(b) as amended). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB # is 0970-0198 and the expiration date is 04/30/2025. If you have any comments on this collection of information, please contact Meryl Barofsky, Office of Child Care, by email at Meryl.Barofsky@acf.hhs.gov.



Child Care and Development Fund for Tribal Lead Agency: Puyallup Tribe of Indians

FFY 2023–2025

Plan Status: Certified as of 2022-09-22 21:16:22 GMT

This Plan describes the Child Care and Development Fund (CCDF) program to be administered by the Tribal Lead Agency for the period from 10/1/2022 to 9/30/2025. As provided for in the applicable statutes and regulations, the Tribal Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described herein.

For purposes of simplicity and clarity, the specific provisions printed herein of applicable laws and regulations are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The Tribal Lead Agency acknowledges its responsibility to adhere to them regardless of these modifications.

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Introduction and How To Approach Plan Development

The Child Care and Development Fund (CCDF) program provides resources to state, territory, and Tribal Lead Agencies that enable low-income parents to work or pursue education and training so that they can better support their families and can promote the learning and development of their children. The CCDF program also provides funding to enhance the quality of child care for all children. On November 19, 2014, the Child Care and Development Block Grant (CCDBG) Act of 2014 was signed into law (Public Law [P.L.] 113-186). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for states and territories, but Congress left discretion to the U.S. Department of Health and Human Services (HHS) to determine how the new provisions would apply to Tribes.

In September 2016, the CCDF Final Rule was released outlining the regulatory requirements for the CCDF program based on the CCDBG Act of 2014. The CCDF program requirements protect the health and safety of children in child care; help families make informed consumer choices and access information to support child development; provide equal access to stable child care for low-income children; and enhance the quality of child care and the early childhood workforce.

Tribal flexibility includes tiered requirements based on the size of their allocation: Tribal Lead Agencies with small, medium, and large allocations. The CCDF Final Rule exempts *Tribal Lead Agencies with small allocations* (less than \$250,000 in fiscal year [FY] 2016) from the majority of the CCDF program requirements, allowing those Tribal Lead Agencies more flexibility in how to spend their CCDF program funds and how to focus those funds on health and safety and quality activities. *Tribal Lead Agencies with small allocations* must spend their CCDF program funds in alignment with the goals and purposes of the CCDF program and must comply with the health and safety, monitoring, background checks, and quality spending requirements. To align with these limited CCDF program requirements, *Tribal Lead Agencies with small allocations* will complete an abbreviated CCDF Plan. This approach balances increased flexibility with accountability, and allows *Tribal Lead Agencies with small allocations* to spend their CCDF program funds in ways that would most benefit their communities.

The CCDF Plan developed by Tribal Lead Agencies is the primary mechanism that the Administration for Children and Families (ACF) uses to determine Tribal Lead Agency compliance with the requirements of the law and Final Rule. This CCDF Plan Preprint consists of two parts, which are aligned with the flexibilities that Tribal Lead Agencies have based on the size of their CCDF allocation.

Part I (*for Tribal Lead Agencies with small, medium, and large allocations*):

- 1) Define CCDF Leadership and Coordination With Relevant Systems
- 2) Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings
- 3) Supporting Continuous Quality Improvement
- 4) *Tribal Lead Agencies With Small Allocations*: Direct Services.

Part II (*for Tribal Lead Agencies with medium and large allocations only*):

- 5) Provide Stable Child Care Financial Assistance to Families
- 6) Ensure Equal Access to Quality Child Care for Low-Income Children
- 7) Promote Family Engagement Through Outreach and Consumer Education.

These sections reflect key functions of an integrated system of child care for low-income working families. The intention is that Tribal Lead Agencies and the Federal Government will be able to use this information to track and assess progress, determine the need for technical assistance (TA), and determine compliance with specific requirements and deadlines.

Plan Amendments: Tribal Lead Agencies are required to request approval from OCC through the CARS system whenever a “substantial” change in the Tribal Lead Agency’s approved CCDF Plan occurs. Please refer to the ACF Program Instruction regarding CCDF Approval of Plan Amendments, CCDF-ACF-PI-2009-01, for specific details and timelines specific to the Plan amendment process.

Note: All requirements not fully implemented in accordance with CCDF regulations are subject to compliance actions, such as corrective actions and/or penalties.

Tribal Lead Agencies are encouraged to access additional guidance for their CCDF Plans through:

- [Tribal Child Care and Development Fund: Guide for New Administrators](#)
- [CCDF Final Rule: Overview for American Indian and Alaska Native Grantees](#)
- [Child Care and Development Fund Final Rule Tribal Fact Sheet](#)

Additional questions should be directed to the OCC Regional Office.

1 Define CCDF Leadership and Coordination With Relevant Systems

This section provides information on how the CCDF program is administered, including the designated Tribal Lead Agency and administrative structure. It also addresses who was consulted in the development of the Tribal CCDF Plan and how the Tribal Lead Agency plans to coordinate CCDF services with other entities.

1.1 Tribal CCDF Applicant

1.1.1 Tribal Applicant?

1.1.1.1 Tribe or Tribal Consortium Information:

Official name of the federally recognized Tribe as listed in the *Federal Register* or Tribal Consortium:

Puyallup Tribe of Indians (Puyallup Tribe of the Puyallup Reservations)

Name of Tribal Chair, President, or Leader: **Bill Sterud**

Title: **Chairman**

Address: **3009 Portland Ave E**

City, State, ZIP Code: **Tacoma, Washington, 98404**

Telephone number: **2535737800** Ext: **7838**

Email address: **Bill.Sterud@PuyallupTribe-nsn.gov**

1.1.2 Tribal Consortium

Tribal Consortiums refer to a partnership between two or more Tribal governments authorized by the governing bodies of those Tribes to allow the Tribal Consortium to apply for and receive funding on behalf of the member Tribes.

1.1.2.1 Are you a Tribal Consortium?

☒ No (Skip to Section 1.2)

☐ Yes

1.1.2.2 Participating Member Tribes/Alaska Native Villages

Provide a comprehensive list of the participating member Tribes/Alaska Native villages and include demonstrations from the consortium's participating Tribes indicating that the consortium has the authority to seek funding on their behalf. Each consortium member must provide a demonstration every three years for the consortium Lead Agency to include with the plan submission. The purpose of the demonstration is to show that the member has authorized the consortium Lead Agency to act on its behalf.

Examples of demonstrations include a Tribal Resolution, a letter signed by the current Tribal Leader, or another official document from the Tribal/village government (98.80(c)(1-4); 98.81(b)(8)(i)).

For Alaska Native Regional Nonprofit Corporations, the list and demonstrations are for purposes of discretionary funds only.

Confirm the consortium members:

Consortium Member	Demonstration Letter for Each Consortium Member (attach letter)
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***The CARS system will prepopulate consortium members from FY 2020 child count. Tribal Lead Agency should confirm each tribe listed is currently a member and update with any changes.

If there is any change in the consortium membership, the Tribal Lead Agency must notify OCC through an amendment to the Plan. Any consortium member Tribe seeking to apply for its own CCDF grant funds must first withdraw from the Tribal Consortium and contact OCC to initiate a separate application for its own funds. OCC must receive the application on or before July 1 prior to the year in which the Tribe is seeking CCDF program funds.

1.1.2.3 Coordinated Services on behalf of participating member Tribes/Villages

A Tribal Consortium must describe how it coordinates services on behalf of each of its participating member Tribes/villages.

Summarize how the consortium is coordinating services (including direct services) on behalf of each participating member (98.81(b)(8)(ii); 98.83(c)(1)).

Describe how child care services are provided to each member of a Tribe/village:

1.2 Designated Tribal Lead Agency

The Tribe or Tribal Consortium will designate an agency to represent the Tribe/consortium as the Tribal Lead Agency. This designated agency agrees to administer the Tribal CCDF program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the attached assurances and certifications (658D; 658E(c)(1); 98.83(a)).

The Tribal Lead Agency can be a department or sub-agency, such as the CCDF department, human services department, workforce development department, and in some cases, the Tribe will administer the CCDF program.

Note: An amendment to the CCDF Tribal Plan is required in the event of a change in the designated Tribal Lead Agency.

1.2.1 Designated Agency

1.2.1.1 Designated Agency by the Tribe or Tribal Consortium

Which agency has been designated by the Tribe or Tribal Consortium to administer the CCDF program?

Name of Tribal Lead Agency: **Grandview Early Learning Center (GELC)**

Web address for Tribal Lead Agency (if any): <http://www.puyallup-tribe.com/gelc/>

1.2.2 Tribal CCDF Administrator

Identify the CCDF Administrator designated by the Tribal Lead Agency, the day-to-day contact person, or the person responsible for administering the Tribal CCDF program. If there is more than one designated contact person with shared responsibility for administering the CCDF program, please identify the Co-Administrator/Assistant Administrator and include relevant contact information.

1.2.2.1 Contact information for the Tribal CCDF Administrator:

Name of Tribal CCDF Administrator: **Deonnah McCloud**

Title: **GELC Director**

Mailing address: **3580 E Grandview Ave**

Physical address (if different than mailing address):

Phone number: **2536805515** Ext: **5526**

Cell phone number: **2532257608**

Email address: **Deonnah.McCloud@PuyallupTribe-nsn.gov**

1.2.2.2 Contact Information for Tribal CCDF Co-Administrator/Assistant Administrator (if applicable):

Name of Tribal CCDF Co-Administrator/Assistant Administrator: **Peggy McCloud and Roberta Basch**

Title: **GELC Culture Director and GELC Support Services Director**

Mailing address (if different from above):

Physical address (if different than mailing address):

Phone number: **2536805515** Ext:

Cell phone number:

Email address: **Grandview@PuyallupTribe-nsn.gov**

1.3 Administration Through Contracts or Agreements

The Tribal Lead Agency has broad authority to administer the CCDF program through contracts or agreements with other governmental, non-governmental, or other public or private local agencies. The Tribal Lead Agency remains the single point of contact and retains overall responsibility for the administration of the CCDF program (658D(b)(1)(A); 98.11(a)(3); 98.16(d)(1)). Examples of such agreements could include:

- A written agreement with another Tribal department to operate Tribal child care centers or to conduct training and monitoring

- A contract with a local agency to operate the Tribal Lead Agency's child care program (including determining family eligibility and issuing payments to child care providers or providing high-quality activities).

1.3.1 Direct Administration and Operation

1.3.1.1 Administration and operation of the CCDF Program

Will the Tribal Lead Agency **directly** administer and operate the CCDF program (98.16(d)(1))?

This question does not apply to the demonstrations referenced in Section 1.1.2 between a consortium and its participating/constituent member Tribes/villages.

☒ Yes, the Tribal Lead Agency will directly administer and operate **all** aspects of the CCDF program. **Skip to 1.4.**

☐ No, the Tribal Lead Agency **will not** directly administer and implement all aspects of the CCDF program.

1.3.1.2 Names of entities that will administer and/or operate aspects of the CCDF program

List the names of those entities that will administer and/or operate aspects of the CCDF program and describe which aspects of the CCDF program they will administer and/or operate. List and describe:

1. What processes will the Tribal Lead Agency use to monitor administrative and implementation responsibilities performed by other agencies? Describe:
2. Optional: Include copies of the contracts or agreements as Attachment #: Document was not provided by TLA

1.4 Consultation in the Development of the Tribal CCDF Plan

In the development of the Tribal CCDF Plan, the Tribal Lead Agency is required to consult with representatives of general purpose local/ Tribal government (658D(b)(2); 98.10(c); 98.14(b)). Tribal Lead Agencies are also required to conduct a public hearing to provide an opportunity to comment on the provision of the child care services under the CCDF Plan (98.14(c)). For the purposes of developing this Plan, consultation involves meeting with, or obtaining input from, appropriate representatives of the Tribal community.

1.4.1 Consultation and Representation

1.4.1.1 Entities Consulted by Tribal Lead Agency

Describe how the Tribal Lead Agency consulted with representatives of general purpose local and Tribal governments, and any other entities in the development of this plan. Describe: **The Subsidy department worked with the Office of Child Care and other consultants to define the CCDF Child Care Assistance manuals. The manuals strategically outline the program's policies and procedures for administering the CCDF child care subsidies. The Birth to Six program guidelines and services were outlined in the Parent, Employee and CCDF Child Care Assistance manuals. A Mental Health consultant/contractor was involved in creating the manuals, and defining the program's policies and procedures. The TOC consulted with the Tribe's Children Advocacy Center to incorporate the Tribal**

and State laws regarding child abuse, child neglect and exploitation of children. The CAC provides annual training and consultation. The Tribe's Culture and Language programs were included in the revised manuals which defined the following; curriculum, traditional foods, training and facilitation of the culture and Native language by the TOC. The TOC reached out to the Tribe's Emergency Land Management, local Tribal School & school district and other specific consultants regarding the emergency preparedness and response plan. The TOC consulted with the Tribal Council, Human Resources and other programs to integrate the Tribal Access Program for FBI Fingerprinting and background checks.

The TOC met with the Community Family Services department to discuss the need for servicing their population who are entering or completing treatment programs and re-entering the community after incarceration. The TOC continues to partner with Puyallup Tribal Health Authority (PTHA) for continued support of our classrooms regarding oral hygiene, as well as the Puyallup Tribe's Birth to Six program and their behavior team for support of the classrooms with behavior issues and provides monthly developmental screenings and speech services. The TOC consults with the Bates College Higher Education for professional development and teacher trainings. County programs and the Fire Department were involved in assuring the health and safety of the program facility and premises, as well as in the implementation process of the Emergency Preparedness and Response manual. An MOU between TOC and local school as an off-site emergency evacuation location. The Puyallup Tribal Police and law enforcement are involved in Emergency response and training.

1.4.2 Public Hearings

Tribal Lead Agencies are required to conduct a public hearing to provide those interested with an opportunity to comment on the provision of child care services under the CCDF Plan (658D(b)(1)(C); 98.14(c)(1-3); 98.16(e)).

The Tribal Lead Agency must conduct at least one public hearing prior to the submission of the Tribal CCDF Plan but no earlier than January 1, 2022. The Tribal Lead Agency must provide a notice of the hearing throughout the Tribe's service area. This notice must be provided no later than 20 days prior to the date of the hearing. Tribal Lead Agencies must make the contents of the Plan available to the public in advance of the hearing.

Describe the Tribal Lead Agency's public hearing process by responding to the questions below:

1.4.2.1 Date(s) of public hearing notice(s) (at least 20 calendar days prior to the public hearing): **3/11/2022**

1.4.2.2 Date(s) of public hearing(s) (no earlier than January 1, 2022): **6/17/2022**

1.4.2.3 Location(s)/ of the public hearing(s), including virtual: **3580 E Grandview Ave
Tacoma, WA 98404**

1.4.2.4 How was the public notified of the public hearing? Check only those that apply:

☒ Family newsletter

☒ Tribal/local media

☐ Internet—provide website(s):

☒ Social media (e.g., Facebook, Twitter)

☒ Posting on community bulletin board or some other message board

☒ Other. Describe: **Tribal news paper**

1.4.2.5 Input from the public hearing(s) in the development of the final Plan.

Describe how the input from the public hearing(s) was taken into consideration in the development of the final Plan:

☒ No input was received

☐ Input was incorporated into the plan in the following ways:

☐ Other. Describe:

1.4.2.6 Content of the Plan available to the service area prior to the public hearing.

How was the content of the Plan made available throughout the service area prior to the public hearing? Check only those that apply:

☒ Tribal offices (including CCDF offices)

☐ Internet. Provide website(s):

☐ Email

☒ Other. Describe: **Upon written request.**

1.4.3 Plan Availability to the Public

Tribal Lead Agencies with small allocations are not required to make the final CCDF Plan or any subsequent Plans available to the public but have the flexibility to describe if applicable.

Tribal Lead Agencies with large and medium allocations should post their Plan and Plan amendments on a website to the extent practicable.

1.4.4 Final CCDF Plan and Plan Amendments available to the public.

Describe how the Tribal Lead Agency makes the final CCDF Plan and any subsequent Plan Amendments available to the public to the extent practicable: **The approved plan will be posted on our website <http://www.puyallup-tribe.com/gelc/> or upon written request.**

1.5 Indian Child and Indian Reservation or Service Area (AUTO FILLED FROM APPENDIX 1 SUBMISSION)

Identify which Indian child(ren) are counted in the Tribal Lead Agency's child count (98.81(b)(2)(i)).

1.5.1 Indian Child

Programs and activities are to be carried out for the benefit of Indian children.

Although Tribal Lead Agencies have some flexibility in defining “Indian Child,” the definition must be limited to children from federally recognized Indian Tribes, consistent with the CCDBG Act’s definition of Indian Tribe (98.2).

This information could include children who are Tribal members, whose membership is pending, who are eligible for membership, and/or are children/descendants of members and could also include adopted children, foster children, step-children, etc.

- 1.5.1.1 The Tribal Lead Agency defines an “Indian child” as: An Alaskan Native child or a native American child who is enrolled in a federally recognized Tribe and can provide Tribal ID. A child with pending enrollment documentation from a federally recognized Tribe.

1.5.2 Indian Reservation or Service Area

Programs and activities are to be carried out for the benefit of Indian children living on or near the Indian reservation or service area. The service area must be within reasonably close geographic proximity to the borders of a Tribe’s reservation (except for Tribes in Alaska, California, and Oklahoma). Tribes that do not have reservations must establish service areas within reasonably close geographic proximity to the area where the Tribe’s population resides.

There is an expectation that the Tribal Lead Agency will be able to provide services to families throughout the service area. ACF will not approve an entire state as a Tribe’s service area. Tribal Lead Agencies can limit services within the reservation boundaries or go beyond the reservation boundaries.

If a Tribal Lead Agency establishes a different service area than the borders of the Tribe’s reservation or existing service area for CCDF purposes, it must be within reasonably close geographic proximity (658O(c)(2)(B); 98.80(e); 98.81(b)(2)(ii); 98.81(b)(3)(ii); 98.83(b)); for example, “Permanent residence is within the reservation boundaries; however, the participant is temporarily attending school outside of the reservation area,” or “[the participant] resides within 20 miles of the reservation boundaries.”

- 1.5.2.1 The Tribal Lead Agency defines the Reservation/Service Area as: Pierce County and Federal Way, Washington.

- 1.5.2.2 Optional: Attach a clearly labeled map of the service

Optional: In addition to the description above, a clearly labeled map of the service area is attached.
Attachment #: **Document was provided by TLA**

1.6 Child Count

For the purposes of determining a Tribe/Tribal organization’s annual CCDF program funding level, **the Tribal Lead Agency is required to conduct and submit a triennial child count of children younger than age 13**, as defined in 98.81(b)(2)(i). The Child Count Declaration will be submitted every 3 years with the triennial Plan. For the FY 2023 – FY 2025 Plan period, the child count must be submitted by July 1, 2022. For new Tribal Lead Agencies entering outside the Plan cycle, the child count will be submitted with their CCDF Plan.

The Tribal child count will be effective from October 1, 2022, to September 30, 2025, and will be valid for 3 years. If the consortium gains or loses one of its member organizations, then the adjustments will be made accordingly.

The Tribal Lead Agency may not count any children who are included in the child count of another CCDF Tribal Lead Agency. **The Tribal Lead Agency is required to confer with all other CCDF Tribal Lead Agencies that have overlapping or neighboring service areas** (98.61(c); 98.62(c); 98.80(b)(1); 98.81 (b)(4)).

The child count submitted is not reflective of the number of children who receive direct services. Instead, the child count gives the number of potentially eligible children who meet the Tribal Lead Agency's definition of Indian Child, and who reside in the designated service area.

Tribes that operate under an approved P.L. 102-477 Plan shall submit their triennial child counts of children younger than age 13 by July 1, 2022. The child counts will be effective from October 1, 2022, through September 30, 2025. Complete the "Child Count Declaration" at **Appendix 1-A**. The form also requests P.L. 102-477 Tribes that would like to make a request for reallocated Tribal discretionary funds to indicate that by checking "yes" or "no" if these funds become available.

1.6.1 Adjacent and Overlapping Service Areas

1.6.1.1 Adjacent and Overlapping Service Area(s) of other Tribal Lead Agencies

Is the service area (as defined in 1.5.2) adjacent to, or overlapping with, the service area(s) of any other Tribal Lead Agencies?

☐ No

☒ Yes

☒ Identify those other Tribal Lead Agencies with neighboring or overlapping service areas.

Describe: **Muckleshoot Tribe, Snoqualmie Tribe and Nisqually Tribe (SPIPA)**

☒ Describe the Tribal Lead Agency's process for ensuring unduplicated child counts for this overlapping service area: **A Memorandum of Understanding was completed between the Tribes detailing protocol to ensure there are no duplicated child counts.**

1.6.2 Child Count Declaration

1.6.2.1 Complete the "Child Count Declaration" at **Appendix 1**.

A Tribal Consortium must submit an individual Child Count Declaration, signed by an individual authorized to act for the Tribe, for each participating Tribe; a summary listing the name of each participating Tribe; each participating Tribe's individual child count; and the total child count for the entire consortium.

A "Child Count Declaration" is attached at **Appendix 1**.

1.7 Types of CCDF Providers

The Final Rule established three categories of care:

- Center-based child care: Group care provided in a facility outside of the child's or provider's home

- Family child care: Care provided in a private residence other than the child's residence
- In-home child care: Care provided in the child's home

Tribal Lead Agencies have flexibility in the types of child care providers that offer direct care to families and children. For example, a Tribal Lead Agency may provide direct child care services through a Tribally Operated Center, or a Tribal Lead Agency with a small allocation may not offer direct services at all. In addition, Tribal Lead Agencies may choose to regulate child care providers through a state licensing agency rather than a Tribal agency.

1.7.1 Providers That Offer Direct Services

1.7.1.1 Types of providers offering direct services to families and children.

Select the types of providers that offer services directly to families and children in the Tribal CCDF Program. The following list includes some variation in describing the types of direct service providers in the Tribal CCDF program, but additional sections will refer to the three categories of care. Check only those that apply:

- ☒ Tribally Operated Center(s)
- ☐ Tribally regulated (or licensed) center-based providers (not operated by the Tribal Lead Agency)
- ☐ Tribally regulated (or licensed) family child care providers
- ☒ State-licensed center-based providers
- ☒ State-licensed family child care providers
- ☐ License-exempt center-based providers
- ☐ License-exempt family child care providers
- ☒ Relative care providers over age 18
- ☒ In-home providers (care in the child's home)
- ☐ This Tribal Lead Agency does not offer direct services to families through the Tribal CCDF Program.
(Only Tribal Lead Agencies with small allocations can opt to not offer direct services.)

1.8 Coordination of Services

The Tribal Lead Agency is required to coordinate services with other Tribal, Federal, state, and/or local child care and early childhood development programs with agencies responsible for public health, employment services/workforce development, public education, the Temporary Assistance for Needy Families program, etc. (658D(b)(1)(D); 98.14(a)(1)(i-xiv); 98.14(a)(4)).

1.8.1 Coordination of the delivery of CCDF services with state or Tribal agencies or entities.

Tribal Lead Agencies must demonstrate in the Plan how they encourage partnerships among Tribal agencies, other public agencies, other Tribes and Tribal organizations, private entities, and community-based organizations to leverage existing service delivery systems, and to increase the supply and quality of child care and development services.

Describe the ways that the Tribal Lead Agency coordinates the delivery of CCDF services with the following state, and if applicable, Tribal agencies or entities, and the results of those coordination

efforts (e.g., shared goals/purposes for coordination, the process for coordinating). Check and describe only those that apply:

- [x] Public health, including the agency responsible for immunizations. Description/Results: **The Puyallup Tribe Health Authority (PTHA) administers immunizations for the majority of the children in our care. The rest of the children are current with their individual health care providers. The Puyallup Dental clinic comes to the TOC and administers fluoride treatments to the children and teaches them about good oral health. They have set up tooth brushing stations in all of the classrooms at the TOC. Coordinating our efforts allows the TOC to purchase toothbrushes and toothpaste at a discounted bulk rate through the dental clinic. The PTHA and TOC work closely together to assure that the most-up-to date health and disease prevention and intervention strategies are being implemented by the TOC and providers. The TOC follows the PTHA and the Center for Disease Control (CDC) recommendations for health and disease prevention.**
- [x] Employment services/workforce development. Description/Results: **TOC sends requested childcare applications to the director of the Tribal workforce program for their clients joining the workforce. TOC meets with families regarding child care options and determines eligibility for child care services. Coordinating our services with WIA has opened doors for those returning to the work place that they didn't know existed.**
- [x] Public education. Description/Results: **TOC partners with Bates Technical College for staff trainings and classroom needs. Enabling teachers at the TOC to achieve a higher education in ECE. Bates provides annual STARS credit, professional development, and Basic ECE courses that apply to the WA State ECE Certification. TOC partners with the University of Washington Autism center for consultation, training and professional development trainings. TOC partners with Chief Leschi kindergarten classrooms to transition the preschoolers in childcare to kindergarten with less anxiety about the change. TOC also partners with Chief Leschi Schools with the high school program to mentor or apprentice with students looking for a career as a child care provider. This program shows great promise to hire teaching staff at the TOC. Birth to Six program collaborates with area school districts regarding developmental preschool students at the TOC and coordinates the needed transportation alleviating parental stress. Partners with the Puyallup Tribe's Child Advocacy Center to train and develop child abuse, neglect, maltreatment, and exploitation standards for the TOC.**
- [x] Temporary Assistance for Needy Families program. Description/Results: **TOC works closely with State of Washington DCYF clients who qualify by helping those complete applications and referring them to any job openings throughout the Tribe. We are in the process of entering into an MOU/MOA with SPIPA TANF Agency to create referrals for service area families to receive child care services.**
- [x] Child care licensing. Description/Results: **TOC will contact DCYF if there are any concerns regarding licensed child care providers. TOC will work with DCYF on background checks and report any incidents to DCYF regarding licensed childcare.**

- [] Head Start. Description/Results:
- [] State Advisory Council on Early Childhood Education and Care or similar coordinating body.
Description/Results:
- [] Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Description/Results:
- [x] Emergency management and response. Description/Results: **TOC lead maintenance attends emergency preparedness meetings quarterly. TOC lead maintenance sets up fire drills and earthquake drills monthly at the TOC both announced and unannounced. The TOC consults with the Puyallup Tribe's Emergency & Land Management to conduct inspections, drills, and making sure the building and premises are up to code. TOC works with Tribe's Administrative, Tribal Law enforcement, Emergency and Land Management departments to coordinate a response due to an emergency or disaster event.**
- [] Child and Adult Care Food Program (CACFP) and other relevant nutrition programs.
Description/Results:
- [] McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons.
Description/Results:
- [] Agencies responsible for Medicaid and the State Children's Health Insurance Program.
Description/Results:
- [] Mental health services. Description/Results:
- [x] Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development. Description/Results: **The TOC coordinates with local child care resource and referral agencies; Child Reach early intervention services and community resources. The Tribe's Child Advocacy Center and other departments are able to provide additional professional development and trainings. Bates Technical College provides the TOC's annual Early Childhood trainings, consultation and professional development. The TOC webpage will be the main reference when families are searching for more information about the TLA or local child care services. The Tribal Lead Agency contact information will listed on the webpage. Child Care Consumer education components will be available on the TOC webpage to include; a plain description of TLA's child care procedures relating to child care, monitoring and inspections, background checks for providers, aggregated data and report information, a list/webpage to search for all localized licensed child care providers. The TOC will refer families in search of licensed care to Child Care Aware website, and the Early Achievers website is referenced to access the WA State quality rating system. The TOC webpage also includes links for the local ECE training and professional development providers. The webpage also has a list of contact information for referrals to local child care resources and referral agencies. The TOC Quality Support Coordinators will visit non-CCDF funded providers to introduce our program and potentially have them pre-approved so families have a choice of a facility that has already been screened.**

[x] Other agencies or entities with which the Tribal Lead Agency coordinates. Description/Results: **The Puyallup Tribe's Birth to Six program screens and evaluates children with speech and developmental delays through their contracted Therapists and directs parents for additional help with the child's developmental. Parent's/families of children enrolled with TOC are involved in Protective Services Programs such as Domestic Violence program, FACE program at Chief Leschi Schools, AA/NA Parent, Re-entry program, Community Family Services Program, Kwawachee Program. The Birth-to-Six program also contracts with Mental Health consultant who provides the TOC with; Conscious Discipline training, support to teachers, and support to families and children. Our NAM grant will continue to align with TOC by creating collaboration team meetings weekly to evaluate all services such as literacy coach, home visiting and tribal language. NAM will be doing pre and post assessments on all children at the TOC under the age of 5. This grant ends August 2023. The Puyallup Tribe of Indians has a child care assistance program that assists Puyallup Tribal members who do not qualify for CCDF services.**

1.8.2 Underserved Populations

In determining the Tribal community's child care needs, **Tribal Lead Agencies must include underserved populations**, such as infants and toddlers, families experiencing homelessness, children with special needs, and children in need of non-traditional hours of care.

1.8.2.1 Underserved populations in determining the Tribal community's child care needs.

Which underserved populations are included in determining the Tribal community's child care needs?
Check all that apply:

☒ Infants and toddlers

☐ Families experiencing homelessness

☐ Children with special needs

☐ Children in need of non-traditional hours of care

☐ Other. Describe:

1.9 Program Integrity and Accountability

The Tribal Lead Agency, as the single point of contact for the administration of the Tribal CCDF program, is responsible for making sure that policies and procedures are in place to monitor programs and services; ensuring compliance with the rules of the program; and providing oversight in the expenditure of all funds, including identifying improper payments and undertaking fraud prevention and recovery efforts (98.11(b); 98.60(i); 98.66; 98.67; 98.68).

1.9.1 Identify Improper Payments

Tribal Lead Agencies are required to describe effective internal controls to identify improper payments through program policies and fiscal procedures.

19.1.1 How does the Tribal Lead Agency prevent and identify improper payments?

How does the Tribal Lead Agency prevent and identify improper payments? Check only those that apply:

- ☒ Train staff on CCDF policies and regulations.
- ☒ Conduct supervisory staff reviews or quality assurance reviews.
- ☐ Share data with other programs (e.g., state CCDF program, Tribal or state TANF program, Head Start, CACFP, other Tribal offices).
- ☒ Run system reports that flag errors.
- ☒ Review enrollment documents and attendance or billing records.
- ☒ Review provider records.
- ☒ Perform ongoing monitoring and assessment of policy implementation.
- ☐ Other. Describe:

1.9.1.2 Investigating and collecting improper payments resulting from fraud

The Tribal Lead Agency is required to recover improper payments that are the result of fraud. How does the Tribal Lead Agency investigate and collect improper payments resulting from fraud? Check only those that apply:

- ☒ Coordinate with and refer to other Tribal, state, or Federal agencies (e.g., Tribal Council, law enforcement).
- ☐ Require recovery if the improper payment exceeds a specific dollar amount. Identify the minimum dollar amount: \$
- ☒ Recover through repayment plans.
- ☐ Reduce payments in subsequent months.
- ☒ Recover through payroll deductions (i.e., for CCDF clients, providers, and staff employed by the Tribe).
- ☐ Other. Describe:

1.9.1.3 Recovering improper payments from unintentional errors/program violations.

The Tribal Lead Agency has the flexibility to recover improper payments that are the result of unintentional errors/program violations. Does the Tribal Lead Agency choose to investigate and collect improper payments resulting from unintentional errors/program violations?

- ☐ No.
- ☒ Yes. How will the Tribal Lead Agency investigate and collect improper payments resulting from unintentional errors/program violations? Check only those that apply:

- ☐ Coordinate with and refer to other Tribal, state, or Federal agencies (e.g., Tribal Council, law enforcement).
- ☐ Require recovery if the improper payment exceeds a specific dollar amount. Identify the minimum dollar amount: \$
- ☒ Recover through repayment plans.
- ☒ Reduce payments in subsequent months.
- ☒ Recover through payroll deductions (for CCDF clients, providers, and staff employed by the Tribe).
- ☐ Other. Describe:

1.10 Disaster Preparedness and Response Plan

In past disasters, and in response to the coronavirus disease 2019 (COVID-19) pandemic, the provision of emergency child care services, and the process of rebuilding and restoring the child care infrastructure has emerged as an essential service. **Tribal Lead Agencies are required to establish a Child Care Disaster Plan for the Tribal Service Area** (658E(c)(2)(U); 98.16(aa)). They must describe how they will address the needs of children, including the need for safe child care before, during, and after a state of emergency declared by the Governor or Tribal Chief Executive or a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122).

1.10.1 Child Care Disaster Plan Coordination

1.10.2.1 Child Care Disaster Plan developed in collaboration with appropriate stakeholders.

Describe how the Child Care Disaster Plan was developed in collaboration with the appropriate stakeholders, which may include other programs within the Tribal Lead Agency's governance structure or any other stakeholders identified by the Tribal Lead Agency: **Tribal departments were consulted to appropriate a revised Emergency & Disaster response plan for the TOC: Tribal Police, Tribal Administration, Tribal Planning and Land Management agencies, Chief Leschi Schools, Peirce County Planning Agency, Puyallup Tribal Health Authority, the Center for Disease Control, The National Violent Prevention Resource Center and Tribal / Public Health and Safety officials. As a result of the coordination and consultation from community stakeholders, an Emergency Preparedness and Disaster Response Plan was completed and distributed to all staff at the TOC and providers on the Subsidy program. Training is provided annually to rehearse the Emergency and Disaster plan for all Employees of the TOC.**

1.10.2 Disaster Plan Guidelines for Child Care Subsidies and Child Care Services

1.10.2.1 Child Care Disaster Plan with guidelines for child care subsidies/services.

Describe how the Child Care Disaster Plan includes the Tribal Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster, and temporary operating standards for child care after a disaster: **TLA guidelines for the continuation of child care services and subsidies**

will follow all recommendations from Tribal Administration and state officials to ensure child care services through an emergency. Temporary locations such as Chief Leschi Schools and the Puyallup Tribal Youth Center may be used to accommodate the family child care needs at that time. Families may apply on line or in person at the temporary locations. During an emergency, families will be enrolled according to priority; Children who are homeless or in foster care and children of first responders will have access to child care regardless of their income for as long as it takes to settle the disaster and resume normal activities. Payments to existing providers will continue to be processed through a remote work station if the TOC or annex location are not safe for occupancy. All families currently enrolled at the TOC will be able to switch to authorized child care providers if the center is closed due to a disaster once they complete and turn in the required paperwork for the new provider per the website and parent handbook.

1.10.3 Post-Disaster Recovery

1.10.3.1 Procedures for coordination of post-disaster recovery of child care services.

Describe Tribal Lead Agency procedures for the coordination of the post-disaster recovery of child care services: The TOC collaborated with Tribal Planning and Land Management agencies, Pierce County Emergency Planning Agency, Tribal Health and Safety officials, Chief Leschi Schools, and by recommendation of "Caring for our Children" or other stakeholders, the TLA created a childcare provider disaster plan that includes the following components: land maps, building maps with emergency parking, a list of local emergency management officials, hazard and mitigation, utility control, staff/children/parent training, drills, child release and family reunification procedures, emergency supplies, drill forms, mitigation form, fire safety and evacuation plan and floor plans with exits.

The Post-disaster recovery of child care services will include: If post disaster does not allow for use of the TOC, a recommendation is to identify an alternative location to utilize until proper repairs can be made. The TOC will work with Puyallup Tribal Administration, Chief Leschi Schools and the Puyallup Tribal Youth Center to find appropriate locations for temporary child care services. Family and in-home care procedures for post-disaster recovers of child care services will begin with notifying all CCDF providers of temporary locations available for services, should their facility not be safe for children. The TLA will be in communication with all providers and families via email to ensure all are informed.

In response to a disaster, TOC will assist families and providers in finding post-disaster child care services. Post-disaster child care service providers will be determined in collaboration with the Puyallup Tribe's planning and land management, Puyallup Tribe emergency management, Puyallup Tribal health and safety officials, and Pierce County emergency planning.

Post-disaster child care services: TOC will maintain communication with all providers and families via email to ensure all are informed. Providers will receive announcements of temporary locations available for child care services, should their facility not be safe for children. If any health and safety inspection determines a provider's location is not safe for child care services, an alternative location will be utilized until proper repairs can be made. TOC post disaster recovery enrollment will be determined by a priority tier system, to give families in need of child care services priority who are;

homeless, foster care, or first responders.

1.10.4 Disaster Procedures

1.10.4.1 Confirmation that providers' disaster procedures are in place.

Describe how the Tribal Lead Agency ensures that providers who receive CCDF program funds have the following procedures in place:

- evacuation;
- relocation;
- shelter-in-place;
- lockdown;
- communications with and reunification of families;
- continuity of operations;
- and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions (98.41(a)(1)(vii)).

(*Note:* The Tribal Lead Agency should also describe these requirements for CCDF providers in Section 2.1.2.7 Standards and Training Requirements for Emergency Preparedness and Response Planning.)
Procedures are in place to address evacuation, relocation, shelter-in-place, lockdown, communications with and reunification of families, continuity of operations and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions per the TOC policies and procedures manual.

The TOC Employees, children and families are trained to plan, prepare and respond in the event of a natural disaster or a human caused crisis event. Employees are equipped with a written Emergency Preparation and Response plans in each of their classrooms and emergency supply bags. They rehearse drills regularly with the children to gain the skills and confidence to respond to an actual natural disaster or crisis event.

TOC Employees are trained to be knowledgeable about how each drill plan is carried out, the location of plan, the health and safety plan during an emergency, where the supplies are located, how supplies are administered, the roles of each person, and how and where to best safeguard children until they are re-united with their families.

Procedures are in place for all of the listed natural or human caused disasters for the TOC for non-relative-in-home providers per the Subsidy policies and procedures manuals. These policies accommodate infants and toddlers, children with disabilities and children with chronic medical conditions.

Parents and In-home care providers are to work together to have an agency approved disaster plan for their home that includes the listed criteria and necessary supplies in different types of emergencies. Parents must have an evacuation plan and practice these drills with the provider and children in care. Additional requirements of in-home providers include communication protocols with the parents of children as well as 911 or other emergency services. Portable emergency kits will be provided to the in-home provider by the Quality Support Coordinators. Relative providers are exempt from this training but are given informational flyers and tools to set up their individual plans in case of

an emergency. The Quality Support Coordinators will supply kits to assist them in developing their own plans if they need assistance.

1.10.5 Emergency Preparedness Training

1.10.5.1 Provider emergency preparedness training and practice drills.

Describe how the Tribal Lead Agency requires child care staff and volunteers (for providers who receive CCDF program funds) to complete emergency preparedness training and practice drill procedures. (*Note:* The Tribal Lead Agency should also describe these requirements for CCDF providers in Section 2.1.2.7 Standards and Training Requirements for Emergency Preparedness and Response Planning.) **The TOC is required to have a written evacuation plan and practice drills for the following emergency response scenarios: evacuation, fire, lockdown, earthquake, shelter-in-place. Each parent and staff will be notified prior to conducting a drill. Sending an "Emergency" message to families via our communication management system, emails and text messages. We use a "Safety Drill Record Form" to record and evaluate each drill.**

The TOC staff and providers conduct 3 critical drills, to assure our staff and children are prepared to respond to emergencies:

1. Fire Evacuation Drill (Monthly)

-Evacuate the building following the Evacuation Plan

2. Earthquake Drill (Quarterly)

-Follow Drop, Cover and Hold

-Then follow the Evacuation Plan

3. Lockdown (Quarterly)

-Secure Building and follow the Lock Down Plan

Staff will be trained to document each drill using the Safety Drill Record Forms. The forms will record which drill took place (Fire, Lockdown, Shelter-in-Place, Disaster, or Earthquake), and will include: The date the drill was conducted, the number of children present, the start and end time of drill, and recommendations.

Volunteers are used once they pass a background check. Since they are temporary individuals, the above list of trainings are not required. If such an emergency should happen while the volunteer is on site, they will be instructed by the lead teach of the classroom they are working in on what to do.

2 Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings

Health and safety requirements apply to all Tribes regardless of allocation size and apply to all child care providers who receive CCDF program funds, including providers who only receive quality funds. **All Tribal Lead Agencies must certify that there are health and safety requirements applicable to providers serving CCDF children in effect.** These health and safety requirements must be appropriate to the provider setting (i.e., center-based child care including Tribally Operated Centers), family child care, or in-home child care) and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures to ensure that providers are complying with the requirements.

This section covers health and safety and comprehensive background checks requirements, including:

- Health and safety standards (98.41(a))
- Health and safety training (98.44(b))
- Monitoring and enforcement procedures to ensure that child care providers comply with health and safety requirements (98.16(n))
- Exemptions made for relative care providers over age 18 (98.16(l))
- Group size limits; child/staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m))
- Comprehensive background check requirements (98.16(o))

2.1 Overview of Health and Safety Standards and Monitoring

2.1.1 Overview of health and safety standards and monitoring.

Use the tables below to describe the health and safety standards used by the Tribal Lead Agency for each provider type, and the agency responsible for monitoring and enforcing the health and safety standards.

Use the tables below to describe the health and safety standards and monitoring agency for each category of care offered.

- If the Tribal Lead Agency has developed its own standards (even if those standards were adapted from other sources, such as Caring for Our Children: Basics and/or Minimum Health and Safety Standards: A Guide for American Indian and Alaskan Native Child Care and Development Fund Grantees or state licensing standards), check “Tribal Standards.”
- If the Tribal Lead Agency requires providers to meet standards established by a state agency (such as state licensing agency or state department of education), check “State Standards.”

- If the Tribal Lead Agency requires providers to meet standards from more than one source (e.g., state licensing standards for off-reservation providers and tribally developed standards for providers on the reservation), check “Tribal Standards,” “State Standards,” and “Other Standards or Combination of Standards ” and describe which standards apply to which providers.
- If the Tribal Lead Agency requires providers to meet standards from a source not listed in the table (such as Indian Health Service, the Child and Adult Care Food Program, Caring for Our Children: Basics, and Caring for Our Children), then check “Other Standards or Combination of Standards” and describe the standards and the source(s) of the standards.
- If monitoring and inspection is conducted by an entity or agency other than the Tribal Lead Agency, such as the state licensing agency or the Indian Health Service, please indicate who conducts the visits and how the Tribal Lead Agency obtains the results of the monitoring. In cases where a combination of monitors/inspectors are used, check those that apply and provide a description.

2.1.1.1 Health and Safety Standards Used by the Tribal Lead Agency

Note: Provider Categories are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services.

Provider Categories

Center-Based Child Care

☒ Tribal Standards

☒ State Standards

State(s): Washington State

☐ Head Start/Early Head Start Standards

☐ Other Standards or Combination of Standards (*e.g., describe how more than one set of standards selected above are combined*)

Describe:

Family Child Care

☒ Tribal Standards

☒ State Standards

State(s): Washington State

☐ Head Start/Early Head Start Standards

☐ Other Standards or Combination of Standards (*e.g., describe how more than one set of standards selected above are combined*)

Describe:

In-Home Care (in the child’s home)

☒ Tribal Standards

☐ State Standards

State(s):

☐ Head Start/Early Head Start Standards

☐ Other Standards or Combination of Standards (*e.g., describe how more than one set of standards selected above are combined*)

Describe:

2.1.1.2 Health and Safety Monitoring Used by the Tribal Lead Agency

Note: Provider Categories are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services.

Provider Categories

Center-Based Child Care

☒ Tribal Monitoring

Entity: TLA-Grandview Early Learning Center

☒ State Monitoring

State(s): Washington State

☐ Indian Health Services

☐ Other Monitoring (*e.g., describe how more than one monitoring agencies selected above are combined*)

Describe:

Family Child Care

☒ Tribal Monitoring

Entity: TLA-Grandview Early Learning Center

☒ State Monitoring

State(s): Washington State

☐ Indian Health Services

☐ Other Monitoring (*e.g., describe how more than one monitoring agencies selected above are combined*)

Describe:

In-Home Care (in the child's home)

☒ Tribal Monitoring

Entity: TLA-Grandview Early Learning Center

☒ State Monitoring

State(s): Washington State

☐ Indian Health Services

☐ Other Monitoring (*e.g., describe how more than one monitoring agencies selected above are combined*)

Describe:

2.1.2 Tribal Lead Agencies that select only "state standards" and "state monitoring"

Tribal CCDF programs that only use state-licensed providers for all provider types can skip detailed descriptions of the health and safety standards, training requirements, the health and safety monitoring, and enforcement policies and practices. Skip to 2.4.

2.1.2.1 Optional: Tribal Lead Agencies that rely only on state health and safety standards and monitoring to regulate all provider types may provide web links to relevant state agency policies.
<http://www.puyallup-tribe.com/gelc/>

2.2 Health and Safety Standards and Training Requirements for CCDF Providers

Tribal Lead Agencies are required to establish health and safety standards for all types of child care programs (i.e., center-based child care, including Tribally Operated Centers, family child care, or in-home child care) serving children receiving CCDF assistance, relating to the topics listed below, as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care providers receiving CCDF program funds, including those providers who are receiving only CCDF quality dollars through the Tribal Lead Agency. The only exception to this requirement is for providers over age 18 who are caring for their own relatives; Tribal Lead Agencies have the option to exempt relative care providers over age 18 from the health and safety requirements (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c))). This exemption applies only if the individual cares for relative children only. Exemptions for relative providers' standards and training requirements will be addressed in section 2.3.

Tribal Lead Agencies are required to have minimum *pre-service and/or orientation training requirements* (to be completed within 3 months) for caregivers, teachers, and directors, as appropriate to the provider setting and the age of children served, that address the health and safety requirements described in 2.1.2 and 2.1.3 and child development.

Tribal Lead Agencies must also have *ongoing training requirements* on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF program funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). The Tribal Lead Agency must describe its requirements for pre-service/orientation training and ongoing training.

Tribal Lead Agencies have flexibility in determining the number of training hours to require, but they may consult *Caring for Our Children: Basics* and/or *Minimum Health and Safety Standards: A Guide for American Indian and Alaskan Native Child Care and Development Fund Grantees* for best practices and recommended guidelines to address these training requirements.

2.2.1 Health and Safety Standards

Certify by describing how the following health and safety standards and ongoing training requirements for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(I)).

Note: Monitoring and enforcement will be addressed in subsection 2.2.

For each of the required health and safety topics, Tribal Lead Agencies must provide their definition and any variations based on the category of care (i.e., center-based child care, including Tribally Operated Centers, family child care, or in-home child care) and the ages of children served.

For example, Tribal Lead Agencies need to ensure that providers follow their safe-sleep practices for each age group in a center-based child care program. As such, Tribal Lead Agencies need to set standards

around infant sleep practices (e.g., activities that prevent sudden infant death syndrome [SIDS]) and to ensure that providers who care for infants are trained on and met these standards. Likewise, Tribal Lead Agencies would set different safe-sleep standards for children of different ages (e.g., no safe-sleep practices for school-age children) and would ensure that providers who cared for children of other ages were aware of and met those standards.

2.2.1.1 Prevention (including immunizations) and control of infectious diseases.

Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care or ages of the children served: **Employee, parent and subsidized care manuals have been updated to detail policies regarding the prevention and control of infectious disease topics of; diapering, feeding, hand washing, sanitizing, disinfecting, vaccinations, TB testing for all TOC staff per our policies and procedures manuals.**

The TOC will follow the guidance from the Puyallup Tribal Health Authority (PTHA) and the Center for Disease Control and Prevention (CDC), standard precautions to handle exposure to blood and the handling of other potentially infectious fluids.

The TOC will use standard precautions for handling potential exposure to blood, body fluids and tissue discharges, and other potentially infectious fluids. Training will cover the requirements consistent with the Occupational Safety and Health Administration (OSHA) and recommendations of PTHA.

The TOC will work with families to assure children receive the PTHA recommended vaccinations prior to attending child care, to help prevent the spread of infectious diseases, viruses, and other serious illnesses.

Standard precautions when potentially exposed to bodily fluids:

1. TOC Staff are required to be educated regarding standard precautions to prevent transmission of blood borne pathogens.
2. TOC Staff will be required to follow the proper use of personal protective equipment (PPE), cleaning, sanitizing and disinfecting process (See, Table 2.1).
3. Personal protective equipment (PPE) should be worn before cleaning, sanitizing or disinfecting.
4. Surfaces or clothing that may come in contact with potentially infectious body fluids must be disinfected.
5. When spills of body fluids, vomit, urine, feces, blood, saliva, nasal discharge, eye discharge, injury or tissue discharges occur, these spills should be cleaned up immediately and disinfected.
6. For spills of blood or other potentially infectious body fluids, including injury and tissue discharges, the area should be cleaned and disinfected.
7. Care should be taken, and eye protection used to avoid splashing any contaminated materials onto any mucous membrane (eyes, nose, and mouth).
8. Blood-contaminated material and diapers should be disposed of in a plastic bag with a secure tie.
9. If blood or bodily fluids enter a mucous membrane (eyes, nose, mouth)
10. Flush the exposed area thoroughly with water for at least fifteen (15) to twenty (20) minutes.
 - a. It is recommended to follow-up with a health care professional.

All children enrolled at GELC will have up-to-date vaccination records or a Certificate of Exemption on file, signed by a medical professional. The Certificate of Exemption waives the requirement of

vaccinations due to personal, philosophical or religious reasons. The form must be signed by a medical professional and filed with TOC prior to child enrollment.

Tribal Standards for non-relative in-home providers are the same as above to prevent and control infectious diseases and are listed in the manuals.

Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.2 Prevention of SIDS and the use of safe-sleep practices.

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care or ages of the children served: **The TLA requires the TOC and In-home providers to follow safe sleep practices when infants are napping or sleeping. These practices include placing infants on their back, use of appropriate equipment, not allowing blankets, toys, etc., not covering an infant's head or face, and ensuring the correct body temperature. Any variations to sleep position must be supported with medical documentation or cultural preference such as a baby board. Additionally, the health policies and procedures and the parent handbook and licensed centers or family homes must include information on how the provider plans to follow infant safe sleep practices. Family providers are exempt from this practice.**

TOC Employees will follow safe sleep practices and training requirements including reducing the risk of Sudden Infant Death Syndrome (SIDS), safe infant sleep position and crib safety.

THE TOC uses safe sleep practices that prevent and reduce the risk of Sudden Infant Death Syndrome (SIDS). It is crucial for teachers to be knowledgeable of the syndrome and how to prevent them before they care for infants. All staff, parents/guardians, volunteers and others approved to enter rooms where infants are cared for will receive training on the importance of consistent use of safe sleep policies and practices. Documentation that training has occurred and that these individuals have received and reviewed the written policy before they care for children should be kept on file.

1. **An child care Employee (Teacher) trained in safe sleep practices and approved to care for infants shall be present in each room at all times where there is an infant. This Teacher shall remain alert and actively supervise sleeping infants in an ongoing manner.**
2. **The Teacher will check frequently to ensure that the infant's head remains uncovered and re-adjust clothing as needed.**
3. **Infants up to twelve months of age will be placed for sleep in a supine position (wholly on their back or in cradleboard on back) for every nap or sleep time unless an infant's primary health care provider**

has completed a signed waiver indicating that the child requires an alternate sleep position.

4. Infants will be placed for sleep in safe sleep environments; which include a firm crib mattress covered by a tight-fitting sheet.

5. No monitors or positioning devices will be used unless required by the child's primary health care provider, and no other items shall be in a crib occupied by an infant except for a pacifier.

6. Infants will not nap or sleep in a car safety seat, bean bag chair, bouncy seat, infant seat, swing, and jumping chair, play pen or play yard, highchair, chair, futon, sofa or couch, or any other type of furniture or equipment.

7. If an infant arrives at the facility asleep in a car safety seat, the parent/guardian or caregiver/teacher will immediately remove the sleeping infant from this seat and place them in the supine position in a safe sleep environment (i.e., the infant's assigned crib);

8. If an infant falls asleep in any place that is not a safe sleep environment, staff shall immediately move the infant and place them in the supine position in their crib.

9. Only one infant shall be placed in each crib.

10. Soft or loose bedding will be kept away from sleeping infants and out of safe sleep environments.

11. Infants who are swaddled; use one light weight blanket, kept loose around the hips and legs, you must not overdress or swaddle an infant in a manner that allows them to overheat.

12. Toys, including mobiles and other types of play equipment that are designed to be attached to any part of the crib shall be kept away from safe sleep environments.

13. When teachers place infants in their crib for sleep, they will ensure that the temperature in the room is comfortable for a lightly clothed adult, check the infants to ensure that they are comfortably clothed (not overheated or sweaty), and that bibs, necklaces, and garments with ties or hoods are removed.

14. Infants will be directly observed by sight and sound at all times, including when they are going to sleep, are sleeping, or are in the process of waking up.

15. Bedding will be changed between children, and if mats are used, they will be cleaned between uses.

16. The lighting in the room must allow the teacher to see each infant's face, to view the color of the infant's skin, and to check on the infant's breathing and placement of the pacifier (if used).

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.3 Administration of medication, consistent with standards for parental control.

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care or ages of the children served: The TLA requires the TOC and in-home providers

administer medication only when written consent is received from the child's legal guardian. The guardian must complete a Medication Form. All medications must be in original container and labeled with child's name, medication name, dosage, frequency and length of time. Over the counter drugs will be administered per dosage label and age appropriate for child. All medications will be inaccessible to children and kept at proper temperature. Lead teacher of a classroom or individual provider will be responsible for administering and keeping documentation for child's file. Family providers are exempt from this practice.

TOC Employees will provide Administration of Medications that are limited to only medications ordered by a prescribing health professional. Administration instructions from a parent/guardian and the child's prescribing health professional are required before an Employee may administer medication.

A Medication Administration Form must be filled out by parents or medical professional and approved prior to medication being administered.

TOC Employees will use the following Administration of Medication process:

1. Designated child care Employees must have an Administration of Medication training certificate must be on file. Lead teachers and Administrators only.
2. Only a lead Teacher or Administrator will administer medication.
3. All medications require clear, accurate instructions and medical confirmation of the need for the medication to be given while the child is in the facility.
4. All medications must be in their original packaging labeled with the child's name, medication name, dosage, relevant warnings, pharmacy name and phone number, frequency and length of time to give medication.
5. All medications on site will be secured under lock and key inaccessible to children, and/or stored at the proper temperature.
6. If medication requires Employee training and education, the child will not be allowed to attend until formal training is completed.
7. GELC will provide documentation when the medicine/agent is administered to the child as prescribed.
8. If a medication mistake or unintentional poisoning does occur, call your local poison center immediately at 1-800-222-1222 and then notify the parent/guardian.

Topical Ointments GELC will only apply non-prescription ointments if:

1. There is signed Medication Administration from on file from parent/guardian.
2. The Non-prescription ointment is in its original container with instructions.

Teething Medication:

1. Teething medication will be administered upon request of the parent.
2. A signed Medication Administration form will remain on file from the parent/guardian.
3. The non-prescription teething medication is in its original container with instruction.

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.4 Prevention of and response to emergencies due to food and allergic reactions.

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care or ages of the children served: **Chronic health conditions such as food and allergic reactions require an individual plan of care for the child with the known conditions. Parents must provide documentation from a medical professional listing the food items and treatment if they are accidentally ingested. Parent must provide any equipment necessary for any such emergency, such as an EpiPen. All kitchen areas and meal serving areas throughout all the classroom of the TOC will post food allergies of all children in the classroom so all staff are aware of the potential danger. Providers and parents of children receiving services through in-home provider or family care discuss any allergies their children may have and show the provider where any necessary medications or equipment is and train them on how to use it. Family care providers are exempt from this training.**

The TOC and Providers will create a written list of known food allergies, and each child with a known food allergy will have a written Child Health Care Plan for appropriate Medical Condition treatments if the child develops an acute allergic reaction while in child care. Providers will be trained to respond in the event of a severe allergic reaction.

Allergic reactions to food can range from mild skin or gastrointestinal symptoms to severe life-threatening reactions. A major factor in death from anaphylaxis has been a delay in the administration of lifesaving emergency medication, particularly epinephrine. The creation and implementation of written care plans for the treatment of reactions are essential for all children with food allergies. Employees and parents/guardians should arrange for the facility to have the necessary medications, proper storage of such medications, and the equipment and training to manage the child's food allergy while the child is at the early care and education facility. Staff and teachers should have the training necessary to respond in the event of an allergic reaction to food or other form of contact with an allergy.

Some children may have an allergic reaction just from being in proximity to the offending food, without actually ingesting it. Such contact should be minimized by washing children's hands and faces and all surfaces that were in contact with food.

Upon registration, GELC will create a written Care Plan for each child with a known allergy. The plan will include steps to take when a situation arises that requires rapid response by an Employee, such signs and symptoms of anaphylaxis (severe allergic reaction) or difficulty breathing and severe redness and swelling of the face or mouth. The completed plan will be on file and accessible to staff caring for the child and available to parents/guardians on request.

1. The child will have a written Child Health Care Plan prepared by the child's primary health care provider upon enrollment, which includes the following information:
 - a) A written list of the food(s) to which the child is allergic and instructions for steps that need to be

taken to avoid that food.

b) A detailed treatment plan to be implemented in the event of an allergic reaction, including the names, doses, and methods of administration of any medications that the child should receive in the event of a reaction.

c) The plan should include specific symptoms that would indicate the need to administer one or more medications or an epi-pen.

2. Based on the child's care plan, the child's teachers will receive training, demonstrate competence in and implement measures for:

Preventing exposure to the specific food(s) to which the child is allergic

Recognizing the symptoms of an allergic reaction

Treating allergic reactions

3. If an Epi-Pen is required, the family will provide an Epi-pen to remain at GELC while the child is in care. Child will not attend GELC until there is an Epi-pen present.

4. GELC will promptly and properly administer prescribed medications in the event of an allergic reaction according to the instructions in the Child Health Care plan.

5. GELC will provide specific foods as alternatives to foods the child is allergic to.

6. GELC will notify parents/guardians immediately of any suspected allergic reactions, the ingestion of the problem food, or contact with the problem food, even if a reaction did not occur.

7. GELC will recommend to the family that the child's primary health care provider be notified if the child has required treatment by the facility for a food allergic reaction.

8. The Center will contact medical services (EMS) system immediately if the child has any serious allergic reaction and/or whenever epinephrine (i.e. Epi-Pen) has been administered, even if the child appears to have recovered from the allergic reaction. See, Medical Emergency.

9. Parents/guardians of all children in the child's class should be advised to avoid any known allergens in class treats or special foods brought into the early care and education setting.

10. Individual child's food allergies should be posted prominently in the classroom where staff can view them and/or wherever food is served.

11. The written Child Health Care plan, a mobile phone, and a list of the proper medications for appropriate treatment if the child develops an acute allergic reaction should be routinely carried on field trips or transport out of the early care and education setting.

In the event that a child who attends GELC displays signs and symptoms that are suspected or appear to be symptoms of a severe allergic reaction, due to difficulty breathing and severe redness and swelling of the face or mouth:

Employees should contact the Director or designee, the Director will dispatch the Emergency Medical Services 9-1-1. See, Medical Emergency.

The Director or designee will contact the emergency medical services if the child displays signs of a serious allergic reaction and/or whenever, even if the child appears to have recovered from the allergic reaction.

The family will be notified immediately, and will need to take the child to the child's primary health care provider for follow-up and complete a Child Health Care Plan.

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.5 Safety of building and physical premises.

Safety of building and physical premises, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care, or ages of the children served: **The TLA will follow the Tribal Standards handbooks using annual assessments of the TOC and non-relative providers to access the building and physical premises safety, including identification and protection from hazards that include electrical hazards, bodies of water, and vehicular traffic. The TOC is inspected by maintenance staff daily for hazards with a checklist. A work order book is in place for any repairs that the TOC maintenance staff needs to address. An assessment of the environment at the TOC will be conducted two (2) times every year to assure the health and safety of all employees, children and visitors. The assessment of the environment will evaluate safety hazards, potential environmental hazards, outdoor and indoor environment, general furnishings and equipment, space and rooms, playground equipment, the physical land and building.**

Using the Tribal Standards of the TLA, the quality support coordinator will conduct an assessment of the physical premises where children are cared for at the TOC and in the non-relative in-home settings using the following process:

The Quality Support Coordinators will conduct one (1) announced inspection of the TOC and in-home provider site a year and one (1) unannounced inspection a year for both. The Quality Support Coordinators will use the approved checklist to assess each criterion of the location.

Any findings will be addressed at the time and the provider and family will be given a timeframe to correct the infraction. If an assessment identifies a health and safety risk, the safety risk will be corrected or repaired effectively and in satisfactory time. If the risks cannot be wholly mitigated right away, the location of the risk should be avoided and blocked off from anyone accessing the area, until the risk is remedied. When the infraction is remedied, the compliance manager will send a department notification to the directors. The TOC compliance manager will receive and keep record of the final report.

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.6 Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment.

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care or ages of the children served: **Shaken baby syndrome is a serious brain injury resulting from forcefully shaking an infant or toddler. It is also known as abusive head trauma, shaken impact syndrome, inflicted head injury or whiplash shaken infant syndrome. TOC and in-home providers must not or allow others to restrict a child's breathing, deprive a child of sleep, food, clothing, shelter, physical activity, needed first aid, required or emergency medical or dental care, interfere with a child's ability to take care of his or her own hygiene and toileting needs or withhold hygiene care, toileting care, or diapering changing to any child unable to provide such care for him or herself. Family care providers are exempt from this training**

The TOC will provide child care that is preventative of shaken baby syndrome and abusive head trauma. The Teachers and Providers will be trained and become knowledgeable on how to prevent or identify signs of shaken baby syndrome and abusive head trauma.

Shaken baby syndrome/abusive head trauma is the occurrence of brain injury in newborns, infants, and children younger than 3 years caused by shaking a child. Even mild shaking can result in serious, permanent brain damage or death. The brain of the young child may bounce inside of the skull, resulting in brain damage, hemorrhaging, blindness, or other serious injuries or death. Shaken baby syndrome and abusive head trauma are completely preventable.

Victims of shaken baby syndrome/abusive head trauma may exhibit one or more of the following symptoms: Irritability, Trouble staying awake, Trouble breathing, Vomiting, Unable to be woken up. Shaken baby syndrome or abusive head trauma is completely preventable. It is crucial for Teachers and Providers to be knowledgeable of both syndromes and how to prevent them before they care for infants.

TOC Employees will be trained to recognizing potential signs and symptoms of shaken baby syndrome/abusive head trauma. Employees will demonstrate nurturing strategies for coping with a crying, fussing, or distraught child. If a Teachers suspects a child in their care has symptoms of shaken baby syndrome or abusive head trauma, they will report to the Director or designee the signs and observations immediately.

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.7 Emergency preparedness and response planning

Emergency preparedness and response planning resulting from a natural disaster or a human-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1-2) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1-2)).

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care, or ages of the children served: **Natural Disasters are natural events such as a flood, earthquake, or hurricane that causes great damage or loss of life. Human caused crisis events include industrial accidents, shootings, acts of terrorism, and incidents of mass violence. As with natural disasters, these types of traumatic events may also cause great damage or loss of life. They may also prompt evacuations from certain areas and in the affected communities.**

The TOC schedules regular drills to practice the safest routes and procedures in the event of an Emergency at or near GELC property. It is our goal to evacuate children in the safest and most calm manner to the nearest designated evacuation site. Each child and employee at GELC will become familiar with emergency routines, and what to do in cases of an emergency. Evacuation of children, including those who cannot walk:

1. Grab the emergency supplies bags, emergency medications or medical supply, emergency contact list and attendance forms.
2. The TOC will escort children by foot and emergency evacuation wheeled cribs are available for infants or for those who cannot walk (including those who have a disability or with chronic medical conditions that prevent them from walking).
3. The TOC will quickly and calmly escort all children out of the building to the designated evacuation location.

The TOC employees are trained to be knowledgeable about how each drill plan is carried out, the location of the plan, the health and safety plan during an emergency, where the supplies are located, how supplies are administered, the roles of each person, and how and where to best safeguard children until they are re-united with their families.

Parents and In-home care providers are to work together to have an agency approved disaster plan for their home that includes the listed criteria and necessary supplies in different types of emergencies. Parents must have an evacuation plan and practice these drills with the provider and children in care. Additional requirements of in-home providers include communication protocols with the parents of children as well as 911 or other emergency services. Portable emergency kits will be provided to the in-home provider by the Quality Support Coordinators. Family care providers are exempt from this training but are given informational flyers and tools to set up their individual plans in case of an emergency. The Quality Support coordinators will supply kits to assist them in developing their own

plans if they need assistance.

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.8 Handling and storage of hazardous materials and the appropriate disposal of biocontaminants.

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care, or ages of the children served: **TOC and in-home providers standard is defined as handling and storage of hazardous materials and the appropriate disposal of bio contaminants. The maintenance department of the TOC is thoroughly trained and responsible for the handling, storage, and disposal of bio contaminants for the TOC. Providers are required to store hazardous materials in a way that is inaccessible to children. These materials should be stored in original containers, consistent with fire marshal requirements and with proper ventilation. Providers are required to follow a number of requirements for disposing of diapers, including using containers with liners that prevent contamination and are inaccessible to children. Providers are to follow written blood borne pathogen plan that details how to clean up bodily fluids using appropriate protective gear and cleaning, disinfecting and disposition of waste materials. Family care providers are exempt from this training. TOC employees create and maintain a safe work environment, provide adequate training for hazardous materials at the premises where children are in care, and properly store and handle hazardous materials.**

TOC Employees will be trained to properly store, label and handle hazardous materials. All hazardous materials will be stored in a dry, cool and ventilated area and separate from classrooms and out of children's reach. In childcare prevention is key, and the TOC is dedicated to keeping employees and children safe from hazardous materials.

1. Assess the risks that exist in the workplace and know which materials in the workplace that represents hazards.

2. Annual inspections conducted by the quality care team will help mitigate hazards/risks.

3. Train employees on first aid skills and how to respond to coworkers who may be injured or experience chemical exposure (See Chemical Exposure Appendix)

4. Always use the proper personal protection equipment (PPE). Old or damaged PPE should be replaced, and the PPE should be inspected prior to each use.

Safely handling hazardous materials or chemicals:

1. Always lock away chemicals or hazardous materials in cabinets and keep out of reach of children.
2. Always keep lids closed in leak-proof and vapor-tight containers.
3. Clothing or areas that are soiled or are touched with chemicals, blood, feces, or bodily fluid will be properly bagged.

4. Never eat or drink while handling hazardous materials, and always wash hands after using, handling hazardous chemicals.
5. Employees handling hazardous materials should always read the labels.
6. Report any concerns about damaged containers or potential hazardous leaks or spills.
7. Dispose of hazardous materials properly (read hazardous materials disposal instructions)

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.9 Precautions in transporting children (if applicable)

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care, or ages of the children served: **The TOC adheres to all Washington State Patrol and Tribal use regulations regarding vehicles, drivers, and safety procedures. TOC Employees will receive the PTOI transportation safety training for driving children to out-of-facility activities.**

The purpose of the transportation program is to provide safe transportation of the center's children. All drivers, passenger monitors, chaperones, and assistants receive instructions in transporting children safely. At least one adult who accompanies or drives children for field trips and out-of-facility activities should receive training by a professional knowledgeable about child development and procedures, to ensure the safety of all children.

Preventative action s taken:

1. Check vehicle carefully before each trip.
2. Each vehicle should have the registration, proof of insurance and the owner's manual in the vehicle at all times.
3. Each vehicle should have a first aid kit, hazard kit, fire extinguisher, and maps.
4. Each vehicle should have some type of communication (cell phone) if at all possible.
5. Ensure that each vehicle has a spare tire and tools to change a flat tire.
6. Report any problems to your supervisor immediately.
7. Strictly obey all safety laws.
8. Seat belts must be worn at all times.
9. Enforce bus rules, stopping if necessary to ensure orderliness of riders.
10. Drive defensively at all times.
11. Do not hurry, even if late.
12. Drive in slow lane on freeway.
13. Always keep in mind that large vehicles such as buses are slow moving and require more response time and greater space in dealing with emergency situations.

Safe transportation and supervision of children:

It is especially important that children are monitored carefully and remain safe while in unfamiliar settings.

1. Never leaving a child unattended in or around a vehicle.
2. Child supervision during out-of-facility/fieldtrips include never leaving children unattended during bathroom breaks, while eating, near bodies of water, or at any other point and time. The driver and caregiver will have a valid pediatric first aid and CPR certificate, a valid driver's license and insurance. Copies of the license and insurance must be on file in the GSA office.
3. All vehicles used by GELC are GSA vehicles and maintained through the Tribe's GSA office.
4. Any emergency medications that a child might require, such as self-injecting epinephrine for life-threatening allergy, should also be available at all times.
5. Staff to child ratios should be maintained on field trips and during transport.
6. No child should ever be left alone in or around the vehicle.
7. Use of developmentally appropriate safety restraints.
8. Have a "Grab and Go" bag with emergency supplies or medications necessary, stored out of reach of children.
9. Names of the children and parent/guardian contact information should be carried in the vehicle along with identifying information (parent/emergency contact information, name, address, and telephone number), along with a medical release form for each child.
10. Names of all teachers, volunteers or chaperones in each vehicle, and identifying information (name, address, and telephone number, emergency contact).
11. Each classroom lead teacher is responsible to clean the vehicle after each use.
12. No food/drink is allowed in the GSA vehicle at any time.
13. Under no circumstances shall your supervisor approve your travel on GELC business with your personal vehicle if you do not have a current driver's license and proof of insurance. Make sure your driver's license and proof of insurance is kept current with the GELC administration.
14. Children will never be transported in personal vehicles.

Tribal Standard for transporting children by the non-relative in-home provider is they are required to provide a current driver's license and proof of insurance. The Quality Support Coordinators will inspect the vehicle used for the transportation of the children, as approved by the parent. Should the vehicle deem unsafe by the Coordinators, the parent will be notified immediately and the provider will not be allowed to transport until the vehicle's safety issues are resolved.

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.10 Pediatric first aid and cardiopulmonary resuscitation (CPR)

1. **Standard(s):** Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care, or ages of the children served: **The TOC, in-home providers and relative providers with the TLA must complete and maintain approved First aid and CPR certifications, according to Washington State Licensing requirements within 90 days of hire. Each provider is required to keep First aid and CPR certifications current and appropriate to the age of the child, and to submit a certificate of completion to be placed in each providers file. All providers are reimbursed for the cost of this training. The TOC employees are trained to respond in any situation when an infant or child may exhibit signs or symptoms of injury, restricted breathing or in any life threatening situation, until the emergency medical professionals and/or parent arrives.**

First Aid: TOC classrooms will maintain fully equipped first aid kits in case of an injury. The First Aid kit should be kept in a container, cabinet, or drawer that is labeled and stored in a location that is known. When children leave the TOC for recess or a walk or to be transported, a designated employee should bring a First Aid kit in a portable device (i.e., Go-bag, backpack) or otherwise ensure that a first aid kit is readily available.

If needed, First Aid practices will be followed:

1. **When a child is injured, the appropriate Pediatric First Aid procedures will be followed immediately, according to the severity of the injury.**
2. **If a child has a minor injury, First Aid will be given as needed. Parent will be contacted right away if there is any head injury.**
3. **If a child has a serious injury or medical emergency, contact the Assistant Director or designee immediately.**
4. **If the medical emergency requires or is life-threatening, the Assistant Director or designee will call Emergency Medical Services 9-1-1 and parents/emergency contacts.**

Cardiopulmonary Resuscitation (CPR): Early care and education programs with Employees trained in pediatric first aid and CPR can mitigate the consequences of injury and reduce the potential for death from life-threatening conditions and emergencies. Knowledge of pediatric first aid and CPR includes addressing a blocked airway (choking), as well as rescue breathing.

If needed, CPR procedures will be followed:

1. **In the event that a child has a restricted airway or cannot breathe for himself/herself, a trained Employee will begin CPR.**
2. **If another Employee is present, that Employee will call the Director or designee.**
3. **The Director or designee will call 9-1-1 and the parents or emergency contacts.**
4. **Employee will follow Medical Emergency procedures.**

If no other Employees are available:

5. **Employee will attempt to dial 9-1-1 directly and follow the instructions of the 9-1-1 Emergency Operator.**
6. **At first availability, the Director or designee and parent/guardian will be notified.**
7. **Parents will be given instructions for re-unification.**
8. **Employee will follow Medical Emergency procedures.**

2. **Pre-Service and Orientation Training:**

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.11 Recognition and reporting of child abuse and neglect

1. Standard(s): Provide a brief summary of how this standard is defined. The description should identify the practices that must be implemented by child care programs. Include any variations based on the category of care, or ages of the children served: **Child abuse is any act of omission or commission that endangers or impairs a child's physical or emotional health and development.**
Tribal Standards list the required training on how to recognize child abuse and neglect and how to report it. The TOC, in-home providers and relative providers are required to complete this training and to report all suspected cases of child abuse. All providers on this program are mandated reporters and are immune from possible criminal or civil action which may arise as a result of having made a report in good faith (WAC 388-150-420).
The TOC staff and in-home providers will receive initial and ongoing training to assist them in preventing child abuse and neglect and in recognizing signs of child abuse and neglect. TOC partners with primary health care providers, child care health consultants and/or child protection advocates to provide training and to be available for consultation. Parents/guardians will be notified upon enrollment of the child abuse and neglect reporting requirement and procedures.
The TOC staff and in-home providers will be oriented to when, how, and what to report, and reporting system phone numbers will be in a location accessible to all employees. Providers are not expected to diagnose or investigate child abuse and neglect, it is important that they be aware of common physical and emotional signs and symptoms of child maltreatment.
The TOC staff and in-home providers will report an instance in which there is reasonable cause to believe that child abuse and/or neglect has occurred to the child.
Per the Tribal Standards, Mandated Reporting Steps will be followed by calling one of the Mandatory Reporter numbers and complete a report of the suspected abuse, negligent treatment, maltreatment, exploitation, or abandonment of a child.
 - a. Child's name names of family members including tribal ties.
 - b. Child's specific Indian ancestry, enrollment, and/or eligibility.
 - c. Note that CPS may request records about a child kept by mandated reporters for review during a CPS investigation.
 - d. It is important to provide as much factual information as possible.
 - e. Mandated reporters will be asked to provide their name, position, agency, and relationship to the child.
 - f. Report the name, address, age of the child and parents, stepparents, guardians, or any other caretakers who have custody of the child.
 - g. Nature and extent of alleged abuse and/or neglect.
 - h. Any knowledge of previous incidents of abuse and/or neglect.
 - i. Issues that may impact the child's safety such as their age, vulnerability, parent's mental health or

substance abuse.

When providers have completed the verbal report to the appropriate authorities, they will not withhold the child from the parents, guardians, or any other authorized adults at pick-up. Law enforcement and CPS investigators will determine the next steps.

2. Pre-Service and Orientation Training:

To demonstrate compliance, certify by checking below how the Tribal Lead Agency requires this training topic be completed by providers during either pre-service or during an orientation period within 3 months of hire. Include any variations based on the category of care, or ages of the children served.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.1.12 Child Development

1. Describe how training addresses child development principles, including the major domains of cognitive, social, emotional, and physical development and approaches to learning (98.44(b)(1)(iii)). **TOC Staff and in-home providers will have ongoing professional development trainings that include the domains of Early Childhood development including the following curriculum: emergent curriculum, teaching strategies gold, creative curriculum, conscious discipline, outdoor classroom, and the GELC/Puyallup Tribal language and culture program.**

Teachers implement the teaching principles that include the five domains of child development:

1. Approaches to learning; skills and behaviors
2. Social and emotional development
3. Language and literacy
4. Cognition; science and emergent mathematics
5. Perception, motor, and physical development

2. Pre-Service and Orientation Training:

- i. Describe any variations based on the category of care, or ages of the children served: **TOC**

Teachers will:

1. receive training by Bates Technical College and other professionals in all areas of early childhood development.
2. use the following implementation strategies that assure all areas of child development are addressed:
 - a. collaborate with the culture and language program to create cultural and linguistic sustaining curriculum.
 - b. interface with the behavioral health team to build upon children's socio-emotional skills using conscious discipline curriculum.
 - c. build relationships with families through daily family engagement and include the family's culture, language, values, and home-life connection.
 - d. foster children's developmental growth using developmental goals from Teaching

Strategies Gold and Creative Curriculum.

- e. be flexible during interactions with children, permitting time in the daily schedule for child-led interest area activities.
- f. use fun and engaging materials and approaches to learning.
- g. foster consistent relationships with affectionate care that is essential to healthy child development.
- h. include the outdoor classrooms to teach lessons or do structured activities in the natural environment.

Teachers will create a weekly lesson plan of classroom activities, which includes the following components of planning, preparing, implementing, reflecting and assessing:

- 1. An emergent focus of early childhood learning; topic, theme, project.
- 2. Daily activities and times of activities.
- 3. Activity name and objectives of learning.
- 4. Each domain of learning across the week including the outdoor classroom, language, and culture.
- 5. Lesson materials needed.
- 6. Adaptations or accommodations for individual children or groups.

- ii. To demonstrate compliance, certify by checking below when the Tribal Lead Agency requires these training topics be completed by providers during either pre-service or during an orientation period within 3 months of hire.

☐ Pre-service

☒ Orientation within 3 months of hire

2.2.2 Ongoing Training Requirements

2.2.2.1 Provide the number of hours of ongoing training required annually for eligible CCDF providers in the following settings (658E(c)(2)(G)(iii)).

- 1. Center-Based Child Care Providers (e.g., Tribally Operated Centers): **30**
- 2. Family Child Care: **0**
- 3. In-Home Child Care (care in the child's home): **10**

2.2.2.2 Describe any variations based on the ages of the children served: The variation applies based on the ages of children served:

Instructional teachers who care for children ages birth to 5 children receive ECE child development training specific for very young child birth to Preschool.

Instructional teachers who care for children ages 5 and older receive training that addresses ECE and School-Age Developmental needs.

The same training principles are addressed as in 2.2.1.12

- 1. Approaches to Learning

2. Social and Emotional Development
3. Language and Lit
4. Cognition; science, emergent math
5. Perception, motor, physical
6. Cultural and Linguistic
7. Outdoor Classroom

2.2.2.3 How do providers receive updated information and/or ongoing training regarding the standard(s)?
This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Include any variations based on the category of care, or ages of the children served: **TOC Staff and in-home providers will complete and provide certifications of completion for the training requirements within the first ninety (90) days of hire.**

Required Trainings:

In-Home providers are required to have immunizations for contagious diseases and corresponding records for pets or animals that may be in contact with children.

TOC and in-home providers must attend and complete the following trainings within ninety (90) days of employment:

1. Prevention (including immunizations) and control of infectious diseases
2. Prevention of sudden infant death syndrome and the use of safe sleep practices
3. Administration of medication
4. Prevention of and response to emergencies
5. Safety of building and physical premises, identification of and protection from hazards
6. Prevention of shaken baby syndrome and SIDS
7. Emergency preparedness and response planning
8. Handling and storage of hazardous materials
9. Transporting children
10. Pediatric first aid and cardiopulmonary resuscitation (CPR)
11. Recognition and reporting of child abuse and neglect
12. First aid training

Relative providers are required to have immunizations for contagious disease and corresponding records for pets or animals that may be in contact with children

- a. **Must attend and complete the training for pediatric first aid and cardiopulmonary resuscitation (CPR)**

2.2.3 Optional Standards

The Tribal Lead Agency may also establish standards on optional health and safety topics that reflect the needs of the community served by the Tribal Lead Agency. These optional standards can include those related to nutrition, access to physical activity, care for children with special needs, and any other topic determined to be relevant by the Tribal Lead Agency (98.41(a)(1)(xii)).

2.2.3.1 Optional health and safety standards.

Does the Tribal Lead Agency include optional standards in addition to the required health and safety topics in their health and safety standards?

☐ No. **If no, skip to 2.2.4.**

☒ Yes. If yes, please complete the following questions, 2.2.3.2 to 2.2.3.5, as appropriate, on optional health and safety standards.

2.2.3.2 Nutrition.

1. Summarize how this standard is defined, including any variations based on the category of care, or ages of the children served: **n/a**

2.2.3.3 Access to physical activity.

1. Summarize how this standard is defined, including any variations based on the category of care, or ages of the children served: **The TOC is a strong proponent of physical activity and the outdoor classroom curriculum used at the Center Employees and by Providers. Children will spend a great amount of time on a regular basis outdoors, exploring in the natural environment. Using GELC outdoor classroom teaching philosophy, child care employees (teachers) will provide a safe and enriching learning environment and plenty of engaging learning opportunities in the outdoor classrooms. The TOC has an outdoor classroom environment which includes a building area, sensory water play area, large motor bikes or push toys, gardening, balancing, walking, and climbing areas, along with a greenhouse, a music are, digging, sand play and art area. Teachers will facilitate engaging and intentional teaching in the outdoor classroom using all outdoor designated areas and classrooms. The outdoor classroom teaching philosophy includes:**
 1. Providing children with learning experiences in the natural outdoor environment.
 2. A Teacher will supply children in care with materials that are age and developmentally appropriate. For each age group of children in care, a teacher will supply a variety of materials that satisfy individual, developmental, and cultural needs.
 1. Teachers will prepare the outdoor classroom environment to meet the developmental needs of all children in care.
 2. The outdoor classroom will be used as an extension of learning in all domains of child development.
 3. The outdoor classroom will be used as an extension of learning what is educated indoors.
 4. Teachers will provide the materials necessary to teach lessons and activities in the outdoor classrooms.
 5. Teachers will be in close proximity to children providing them feedback, instructions, and support for using the outdoor classrooms.**Children will be given opportunity to expand in all domains of development in the outdoor environment.**

2.2.3.4 Caring for children with special needs.

1. Summarize how this standard is defined, including any variations based on the category of care, or ages of the children served: **Children with documented or undocumented special health care needs diagnosis or disabilities that may require additional individual support in the areas of physical, health or learning will be enrolled on a case-by-case basis.**

Childcare can play a significant role in supporting the developmental needs of children with special health conditions and disabilities. The TOC supports inclusion of all children in the natural childcare setting, when possible, GELC will enroll children with special health care needs or disabilities.

The TOC may need to seek professional consultation and obtain appropriate training in order to include children with special needs, such as children with severe disabilities and children with special health care needs or chronic illnesses, into the childcare setting. It is essential that the classrooms have adequate preparation, understanding, training, resources, and development of skills among those involved. For this reason the TOC will review enrollment of children with special needs or disabilities prior to enrollment and after enrollment, as necessary.

The following will be taken into consideration to specify the practices needed to ensure that the child with a disability or chronic illness has full, safe inclusion:

- a. The education, experience, and qualifications of teachers.
- b. The classroom group size, teacher-to-child ratio.
- c. Services and supports available to child and the family.
- d. Accommodations needed to care for the child.
- e. The amount of time needed to provide adequate support for the child's safety, physical, health, or learning needs seriously impacts the time available for meeting the needs of other children.
- f. The accommodations available, or within the center's financial means.

The TOC reserves the right, if one or more of the above conditions are not met, to recommend alternative childcare settings.

Each enrollment applicant will be reviewed by the director or designee and members of the ECE team, prior to enrollment, to assure the child's healthcare, physical and learning needs can be met in our center-based childcare.

1. If the director or designee determines that GELC center-based care is equipped to provide childcare for the child with health care needs or disability, the following steps will be taken:

- a. The director or designee will notify the teachers and members of the ECE team of the child's enrollment in advance.
- b. A child health care plan will be developed by the teachers and ECE team, to best meet the child's needs based on the child's assessment or by the child's child Health Care Plan created by a medical professional (See Appendix N).
- c. The care plan will be written and reviewed by all stakeholders involved and by the parent/guardian and will be maintained as a part of child's confidential record.
- d. Teachers and members of the ECE team will become familiar with the child's care plan, health care plan, IFSP or IEP.
- e. If necessary, teachers and behavioral health team will be trained to provide health, physical or learning supports for child.
- f. Parents will be asked to share updates or results of the child's health or development assessment and any accommodations or interventions that are recommended by medical professionals.
- g. Teachers and members of the ECE team will meet regularly regarding the progress of each child, and

determine any necessary accommodations needed.

2. The following steps will be taken if it is determined that GELC center-based care is not in the best interest of the child with documented/undocumented special health care conditions or disabilities:

- a. Director or designee will determine whether it's in the child's best interest to enroll in another program that has more resources and specialized employees, members who can provide the type of support that is recommended for the child.
 - b. The director or designee will notify the child's parent/guardian and recommend alternative childcare settings or subsidized care.
 - c. Should the tuition be prepaid, the parent will be refunded the amount remaining thirty (30) days subsequent to the notification that the child can no longer be served by GELC.
3. Should a parent enroll a child without a diagnosis and the director finds a reason to believe that there may be a need to consider a medical or psychological assessment, as a result of observed difficulty with learning, development or health concerns:
- a. The director or designee will inform parents that they need to seek outside professional evaluation.
 - b. Based on the results of the assessment, the director or designee will determine whether it's in the child's best interest to enroll in another program that has more resources and specialized employee who can provide the type of support that is recommended for the child or if the center will be able to continue to work with the child in the existing program with some accommodations.
 - c. Should the tuition be prepaid, the parent will be refunded the amount remaining thirty (30) days subsequent to the notification that the child can no longer be served by GELC.

2.2.3.5 Other areas promoting child development or protecting children's health and safety.

Any other areas determined necessary to promote child development or to protect children's health and safety.

Summarize how this standard is defined, including any variations based on the category of care or ages of the children served: **n/a**

2.2.4 Standards on Child/Staff Ratios, Group Sizes, and Qualifications for CCDF Providers

Tribal Lead Agencies are required to establish child care standards for providers receiving CCDF program funds regarding appropriate child to staff ratios (by age range of the child), group size limits for specific age populations, and the required qualifications for providers based on the type of child care setting (i.e., center-based child care providers (including Tribally Operated Centers), family child care providers, or in-home child care providers). This requirement also applies to providers who are only receiving quality CCDF dollars (658E(c)(2)(H); 98.16(m); 98.41(d)).

Tribal Lead Agencies have flexibility in defining standards and provider types that are reflective of the culture and language, and that meet the needs of the children and families served.

2.2.4.1 Describe standards on child/staff ratios and group sizes for CCDF providers.

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

1. Center-Based Child Care Providers

i. Infant

Define age range: from **1** weeks [] months **[x]** years []
through **11** weeks [] months **[x]** years []

Ratio: **3:1**

Group size: **6**

ii. Toddler

Define age range: from **12** weeks [] months **[x]** years []
through **29** weeks [] months **[x]** years []

Ratio: **6:1**

Group size: **12**

iii. Preschool

Define age range: from **30** weeks [] months **[x]** years []
through **5** years [] months [] years **[x]**

Ratio: **9:1**

Group size: **18**

iv. School-Age

Define age range: from **5** years [] months [] years **[x]**
through **12** years [] months [] years **[x]**

Ratio: **12:1**

Group size: **24**

v. Mixed-Age Groups (if applicable):

Ratio: **Follows ratio for youngest child in group**

Group size: **10**

2. Family Child Care Providers

i. Infant

Define age range: from **1** weeks [] months **[x]** years []
through **11** weeks [] months **[x]** years []

Ratio: **exempt for non-licensed relative providers/state ratios apply for licensed providers**

Group size: **2**

ii. Toddler

Define age range: from **12** weeks [] months **[x]** years []
through **29** weeks [] months **[x]** years []

Ratio: **exempt for non-licensed relative providers/state ratios apply for licensed providers**

Group size: **4**

iii. Preschool

Define age range: from **30** weeks [] months [x] years []
through **5** weeks [] months [] years [x]

Ratio: **exempt for non-licensed relative providers/state ratios apply for licensed providers**

Group size: **4**

iv. School-Age

Define age range: from **5** weeks [] months [] years [x]
through **12** weeks [] months [] years [x]

Ratio: **exempt for non-licensed relative providers/state ratios apply for licensed providers**

Group size: **4**

v. Mixed-Age Groups (if applicable)

Ratio: **exempt for non-licensed relative providers/state ratios apply for licensed providers**

Group size: **10**

3. In-Home Child Care Providers

i. Infant

Define age range: from **1** weeks [] months [x] years []
through **11** weeks [] months [x] years []

Ratio: **2:1**

Group size: **2**

ii. Toddler

Define age range: from **12** weeks [] months [x] years []
through **29** weeks [] months [x] years []

Ratio: **4:1**

Group size: **4**

iii. Preschool

Define age range: from **30** weeks [] months [x] years []
through **5** weeks [] months [] years [x]

Ratio: **8:1**

Group size: **8**

iv. School-Age

Define age range: from **5** weeks [] months [] years [x]

through **12** weeks [] months [] years [**x**]

Ratio: **10:1**

Group size: **10**

v. Mixed-Age Groups (if applicable):

Ratio: **Youngest age ratio**

Group size: **10**

2.2.5 Provide the teacher/caregiver qualifications for each category of CCDF providers.

2.2.5.1 Center-Based Child Care Providers (e.g., Tribally Operated Centers):

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

1. Describe the teacher qualifications: Each teacher is required to maintain education and training in early childhood education and use best practices that support safety and healthy child development of all children at GELC.

Child care promotes healthy development that is based on the developmental needs of infants, toddlers, preschool children and school-age children. Teachers are chosen for their knowledge of, and ability to respond appropriately to, the needs of children of this age generally, and the unique characteristics of individual children.

Lead teachers must have at least the following education, experience and skills:

1. An associate degree in early childhood education, elementary education, child development, social work, nursing, or other related field, or an associate degree in early childhood education and currently working towards a bachelor degree
2. A minimum of one (1) year on-the-job training in providing a nurturing indoor and outdoor environment and meeting the child's out-of-home needs
3. One or more years of experience, under qualified supervision, working as a teacher serving the ages and developmental abilities of the children in care
4. A valid certificate in WA State Food Handler's, Medication Management, First Aid, including CPR
5. Thorough knowledge of normal child development and early childhood education, as well as knowledge of indicators that a child is not developing typically
6. The ability to respond appropriately to children's needs
7. The ability to recognize signs of illness and safety/injury hazards and respond with prevention interventions
8. Strong oral and written communication skills
9. Model exemplary professionalism and work ethics
10. Must pass a comprehensive background check

Teacher's assistants must have at least the following education, experience and skills:

1. High School Diploma/GED and six (6) months experience working with groups of young children required
2. Must complete basic STARS training within one year of hire
3. Must complete all three steps of the WA state stackable certificates (47 credits) within three (3) years of hire and meet all milestone requirements during required timeframes
4. A valid certificate in WA State Food Handler's, first aid and CPR

5. The ability to respond appropriately to children's needs
 6. The ability to recognize signs of injury, illness, safety hazards, and be able to respond with prevention interventions
 7. Strong oral and written communication skills
 8. Model exemplary professionalism and work ethics
 9. Must pass a comprehensive background check
2. Describe the director qualifications: The director of GELC will possess the essential skills to manage the facility and set appropriate expectations.
- The director of GELC is the team leadership of a childcare business. Both administrative and child development skills are essential for this individual to manage the facility and set appropriate expectations. The director of a center plays a pivotal role in ensuring the day-to-day smooth functioning of the facility within the framework of appropriate child development principles and knowledge of family relationships. The well-being of the children, the confidence of the parents/guardians of children in the facility's care, and the high morale and consistent professional growth of the staff depend largely upon the knowledge, skills, and dependable presence of a director who is able to respond to long-range and immediate needs and able to engage staff in decision-making that affects their day-to-day practice. Management skills are important and should be viewed primarily as a means of support for the key role of educational leadership that a director provides. A skilled director will know how to use early care, education consultants, and how to access health, education, mental health, community resources, and be able to identify specialized personnel to enrich the staff's understanding of health, development, behavior, and curriculum content.
- A director must have at least the following education, experience and skills:
- a. Have a minimum of a bachelor degree
 - b. A valid certificate of successful completion of first aid that includes cardiopulmonary resuscitation (CPR), and medication administration
 - c. Knowledge of health and safety resources and how to access to education, health, and mental health consultants
 - d. Knowledge of community resources available to children with special health care needs and the ability to use these resources to make referrals or achieve interagency coordination
 - e. Administrative and management skills in facility operations
 - f. Capability in curriculum design and implementation, ensuring that an effective curriculum is in place
 - g. Strong oral and written communication skills
 - h. Demonstrated life experience skills in working with children in more than one setting
 - i. Interpersonal skills
 - j. Satisfactory background screening

2.2.5.2 Family Child Care Providers:

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

1. Describe the teacher qualifications: Must pass a background check and have valid CPR, First Aid and driver's license with proof of insurance. Must be over 18 and cannot live in the home with the child.

2. Describe the director qualifications (if applicable): not applicable

2.2.5.3 In-Home Child Care Provider (care in the child's home):

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

1. Describe the teacher qualifications: Must pass a background check and have valid CPR, First Aid and driver's license with proof of insurance. Must be over 18 and cannot live in the home with the child.

2.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

2.3.1 Enforcement of Health and Safety Requirements

Tribal Lead Agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable Tribal and/or state and local health, safety, and fire standards, including those described in 98.41 and 98.42(a).

This certification may include, but is not limited to, any systems used to ensure that providers met health and safety requirements, any documentation required to be maintained by child care providers, and any other monitoring procedures to ensure compliance. Tribal Lead Agencies are subject to the provision at 98.42(b)(2) to require inspections of child care providers and facilities that receive CCDF program funds.

Tribal Lead Agencies must conduct at least one pre-licensure/pre-service inspection for compliance with health, safety, and fire requirements and annual, unannounced inspections for licensed/regulated providers and facilities. Tribal Lead Agencies must also conduct annual inspections for license-exempt CCDF providers for compliance with health, safety, and fire requirements.

Tribal Lead Agencies may propose an alternative approach to meet the annual inspection requirements. In its justification, the Tribal Lead Agency must describe how the alternative approach is appropriately comprehensive and protects the health and safety of children in care.

2.3.1.1 Annual inspections of CCDF providers policies and practices.

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

Describe the Tribal Lead Agency's policies and practices for annual inspections of CCDF providers for compliance with health, safety, and fire requirements for the following categories of providers. In-home child care providers can answer "not applicable" if they are not regulated.

Center-Based Child Care Providers (e.g., Tribally Operated Centers): Pre-inspections of CCDF providers are performed within 30 days of new enrollment to check for compliance with health and safety fire requirements.

Family Child Care Providers: Pre-inspections of CCDF providers are performed within 30 days of new enrollment to check for compliance with health and safety fire requirements.

In-Home Child Care Providers (care in the child's home): Pre-inspections of CCDF providers are performed within 30 days of new enrollment to check for compliance with health and safety fire requirements.

2.3.1.2 Does the Tribal Lead Agency have a stand-alone licensing system (Tribal Lead Agencies do not need to describe a state licensing system for state licensed providers)?

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

☒ No (Skip to 2.3.1.3)

☐ Yes

If yes, describe the Tribal Lead Agency's pre-licensure inspections and annual, unannounced inspections for licensed CCDF providers policies and practices for the following categories of providers.

Center-Based Child Care Providers (e.g., Tribally Operated Centers):

Family Child Care Providers:

In-Home Child Care Providers (care in the child's home):

2.3.1.3 Alternative approach to inspection requirements.

Does the Tribal Lead Agency have an alternative approach to the inspection requirements at 98.42(b)(2)?

☐ Yes. Describe how the alternative approach is appropriately comprehensive and protects the health and safety of children in care:

☒ No.

2.3.2 Monitoring Inspectors

Tribal Lead Agencies must have policies and practices ensuring that individuals who are hired as inspectors or monitors are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served.

Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the requirements detailed in Section 2.1.2 (658E(c)(2)(K)(i)(I); 98.42(b)(1)).

2.3.2.1 Qualifications for inspectors or monitors to inspect facilities and providers.

To certify, describe how the Tribal Lead Agency ensures that inspectors or monitors are qualified to inspect child care facilities and providers: **Inspectors are required to complete the four modules of training through the National Association of Regulatory Agencies (NARA) and provide the certificate for their employment file within 90 days of their hire date. No inspectors will do home visits until they have successfully completed this training.**

2.3.2.2 Inspectors or monitors training on health and safety requirements.

To certify, describe how the inspectors or monitors have received training on health and safety requirements that are appropriate to the age of the children in care, and the type of provider setting (98.42(b)(1)): **All required training modules in Section 2.2.1 of this preprint are required for all**

inspectors. In addition to the required health and safety trainings, all inspectors are required to review and acknowledge administrative and program policies and procedures. Inspectors are also required to take Sexual Harassment training and Diversity Training.

2.3.2.3 Ratio of Inspectors or Monitors to Child Care Providers

The Tribal Lead Agencies must have policies and practices requiring the ratio of inspectors or monitors to child care providers and facilities to be maintained at a level sufficient to conduct effective inspections of child care providers and facilities on a timely basis in accordance with Tribal, Federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

Policies and procedures for the Quality Support Coordinators job duties and ratios is outlined in the GELC Subsidized Childcare Manual. 15:2 is the current ratio and we feel these inspections can be completed in a timely basis.

2.3.2.4 Policies and practices regarding the ratio of inspectors or monitors to child care providers.

Describe the Tribal Lead Agency's policies and practices regarding the ratio of inspectors to child care providers (i.e., the number of inspectors per number of child care providers) and facilities within that agency's inspection area and include how the ratio is sufficient to conduct effective inspections on a timely basis: **Quality Support Coordinators have a mixed caseload of TOC, center-based state licensed facilities, family care(relative providers) and in-home providers totaling around 80 providers at this time. Currently we have two monitors which makes this a 40:1 ratio. Per our grant, we will be monitoring the TOC and all in-home providers. That total at this time is 16. The rest of the providers are either licensed centers or relative providers. These providers are not required to be monitored per our grant, but we will be making several visits to them to ensure that they have the necessary equipment and health and safety items to provide quality care for the children on this program.**

2.4 Exemptions for Relative Providers

Tribal Lead Agencies have the option to exempt relatives over age 18 (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from some/all health and safety requirements. *Note:* This exception applies if the individual cares only for relative children.

Check and describe, where applicable, the policies that the Tribal Lead Agency has regarding exemptions for eligible relative providers over age 18 for the following health and safety requirements. The description should include the health and safety requirements that relatives are exempt from, if applicable, and which of the federally defined relatives the exemption applies to.

2.4.1 Health and Safety Standards

2.4.1.1 Health and Safety Standards (as described in Sections 2.2.1, 2.2.2, 2.2.4, and 2.2.6).

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

☐ Relative providers are exempt from all health and safety standard requirements

☒ Relative providers are exempt from a portion of health and safety standard requirements.

Describe: **The TLA insures the health and safety of children by requiring CPR and First Aid certificates of all relative providers.**

☐ Relative providers must fully comply with all health and safety standard requirements.

2.4.2 Health and Safety Training

2.4.2.1 Health and Safety Training (as described in Sections 2.2.2 and 2.2.3).

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

☐ Relative providers are exempt from all health and safety training requirements.

☒ Relative providers are exempt from a portion of all health and safety training requirements. Describe: **The TLA insures the health and safety of children by requiring CPR and First Aid certificates of all relative providers.**

☐ Relative providers must fully comply with all health and safety training requirements.

2.4.3 Monitoring and Enforcement

2.4.3.1 Monitoring and Enforcement (as described in Section 2.3).

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

☒ Relative providers are exempt from all monitoring and enforcement requirements.

☐ Relative providers are exempt from a portion of monitoring and enforcement requirements. Describe:

☐ Relative providers must fully comply with all monitoring and enforcement requirements.

2.5 Comprehensive Background Checks

In this section, Tribal Lead Agencies will describe the types of providers subject to comprehensive background checks and the methods used for each component of the eight background checks (e.g., which database or repository is checked). In addition, the Tribal Lead Agency will describe the policies in place for disqualifying crimes for employment eligibility, fees, timeliness, and privacy in returning comprehensive background check results. Next, Tribal Lead Agencies will describe the processes in place for child care providers to provisionally employ child care staff (including employee, prospective employee, or household member) when not all the comprehensive background checks are returned. Tribal Lead Agencies will also describe the process for child care staff (including employee, prospective employee, or household member) to appeal unfavorable results. Finally, Tribal Lead Agencies will need to justify and describe their alternative approach, if applicable.

The CCDBG Act requires Tribal Lead Agencies, regardless of allocation size, to have in effect requirements, policies, and procedures to conduct comprehensive background checks for (1) all child care staff members (including prospective staff members) of all child care programs that are licensed, regulated, approved, or registered under Tribal law (including Tribally Operated Centers) and for (2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF-eligible providers) (98.43(a)(1)(i)).

2.5.1 Methods used for each of the eight comprehensive background check components (98.43(b))

Under the CCDF rule, a comprehensive background check must include eight separate and specific components (98.43(b)), which encompass three in-state checks, two national checks, and three interstate checks (if the individual resided in another state in the preceding 5 years). Comprehensive background

check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(b)(2)).

Tribal Lead Agencies must describe the methods used for the background check components, such as the database or repository that is checked or a memorandum of understanding (MOU)/memorandum of agreement (MOA) or contract with a state or third-party vendor to conduct the checks on the Tribal Lead Agency's behalf.

Tribal Lead Agencies may use alternative approaches in addition to or instead of the pre-approved methods. For example, Tribal Lead Agencies are encouraged (but not required) to check registries maintained by the Tribe (rather than a state). Tribal Lead Agencies must provide justification in 2.5.7 for using any alternative approaches that are identified in 2.4.1. The alternative approach is subject to ACF approval, and ACF will not approve approaches with blanket exemptions that bypass the intent of protecting children's safety.

In instances in which a child care provider has already met the state's background check requirements consistent with the CCDF rule (because that provider is licensed by the state and/or receives CCDF program funding from the state), it is not necessary for the Tribal Lead Agency to require additional or duplicative background checks.

For family child care providers, the comprehensive background check requirement includes the caregiver and household members (i.e., any other adults residing in the family child care who are age 18 or older (98.43(a)(2)(ii)(C))). ACF will consider an alternative approach for limiting the background checks for household members to those who are feasible. OCC will not approve alternative approaches that do not include **any background** checks for other adults in a family child care. As stated in the preamble of the CCDF Final Rule (81 FR 67542-43), ACF expects that Tribal Lead Agencies will conduct **some components of a background check for these individuals**, for example, a check of Tribal criminal history records. Tribal Lead Agencies who use this alternative approach must indicate which background checks apply to household members and must justify the alternative approach in 2.5.7.

This requirement does not apply to individuals over age 18 who are related to all children for whom child care services are provided (98.43(a)(2)(i)(A)).

Each of the tables below describes one component of the eight comprehensive background checks. Select which methods are used for each provider type for each component.

- Check the pre-approved and/or alternative approach method(s) used for each provider type. Tribal Lead Agencies must justify any alternative approach in 2.5.7.
- Tribal Lead Agencies may select more than one method for a provider type. (For example, a Tribal Lead Agency may search the Tribal criminal fingerprint records and the state criminal fingerprint records for staff employed in Tribally Operated Centers.)
- If relative providers over age 18 are exempt from that background check component, check "Exempt."
- Check "Family child care household members not included" for background check components that are not conducted for household members. (OCC will not approve alternative approaches

that do not include at least one **background** check component for other adults in an family child care.)

- Describe any Tribal or state database or repository (e.g., the Tribal criminal fingerprint records or a state criminal fingerprint records) used for any background check components at the end of each table.

If the Tribal Lead Agency uses any alternative approach that is not listed, check “Other” and describe the approach. Tribal Lead Agencies must justify the alternative approach in 2.5.7.

2.5.1.1 Components of in-state background checks

For in-state registry checks, OCC will consider alternative approaches that include checks of Tribal criminal, sex offender, and/or child abuse and neglect registries. OCC will also consider approaches that include checks of databases of third-party or private entities. Tribal lead agencies must justify any alternative approach in 2.5.7.

1. Criminal registry or repository using fingerprints in the current state of residency (check only those methods used)

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative Approach
Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)	<input type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency’s behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input checked="" type="checkbox"/> Other, <i>describe:</i> Castle Branch without fingerprinting
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State database or repository <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency’s behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
Relative Providers	<input type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency’s behalf <input type="checkbox"/> Exempt	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input checked="" type="checkbox"/> Other, <i>describe:</i> Castle Branch without fingerprinting

All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Family child care household members not included <input checked="" type="checkbox"/> Other, <i>describe:</i> Castle Branch without fingerprinting
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- i. Tribal or state databases or repositories. Tribal Lead Agencies may use Tribal or state databases or repositories for some or all of their in-state background check components. Describe any Tribal or state database or repository indicated in the table above.

☐ No Tribal or state database or repository used in criminal fingerprint checks.

☐ Tribal database or repository. Describe:

☒ State database or repository. Describe: **The Castle Branch performs State and National Record Indicator + Sex Offender Registry (flat rate including maiden & alias names), County Criminal (including maiden & alias names), Residency History Social Security Alert, Motor Vehicle Records, ALL State Access, WA State wide and Nationwide Federal Criminal search- including maiden/alias names**

2. Sex offender registry or repository check in the current state of residency (check only those methods used)

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative Approach
Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State database or repository <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
Relative Providers	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> Exempt	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>

All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Other, <i>describe</i> :
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- i. Tribal or state databases or repositories. Tribal Lead Agencies may use Tribal or state databases or repositories for some or all of their in-state background check components. Describe any Tribal or state database or repository indicated in the table above.
- ☐ No Tribal or state database or repository used in sex offender checks.
- ☐ Tribal database or repository. Describe:
- ☒ State database or repository. Describe: **The Washington State Sex Offender Registry.**

3. Child abuse and neglect registry and database check in the current state of residency (check only those methods used)

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative Approach
Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe</i> :
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State database or repository <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe</i> :
Relative Providers	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> Exempt	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe</i> :

All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe</i> :
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- i. Tribal or state databases or repositories. Tribal Lead Agencies may use Tribal or state databases or repositories for some or all of their in-state background check components. Describe any Tribal or state database or repository indicated in the table above.
- ☐ No Tribal or state database or repository used in child abuse and neglect checks.
- ☐ Tribal database or repository. Describe:
- ☒ State database or repository. Describe: **NEED MOA TO CONDUCT THESE CHECKS WITH FAMLINK. There is a request form from DCYF to get this done.**

2.5.1.2 Components of national background check

1. FBI (Federal Bureau of Investigation) fingerprint check (check only those methods used)

For FBI fingerprint checks, the CCDBG Act does not provide explicit authority for Tribes to request FBI fingerprint checks for all child care staff. Tribes may have authority under a different Federal statute to request FBI fingerprint-based background checks for child care staff, including (but not limited to) State Statute (P.L. 92-544, 34 U.S.C. 41101), Indian Child Protection and Family Violence Prevention Act (P.L. 101-630, 25 U.S.C. 3207), National Child Protection Act/Volunteers for Children Act (NCPA/VCA) (P.L. 101-209, as amended, 34 U.S.C. 40101 et seq.), and Improving Head Start for School Readiness Act (P.L. 110-134, 42 U.S.C. 9843a).

The four pre-approved methods for Tribes to access the FBI fingerprint check are through (1) a state repository (through an MOU/MOA), (2) U.S. Department of Justice Tribal Access Program (TAP), (3) an FBI-approved channeler, and (4) fingerprint sent directly to the FBI (i.e., submitting hard-copy fingerprint cards through the U.S. mail).

OCC will consider alternative approaches (such as name-based checks of Tribal or state record management systems) when the process of obtaining fingerprints from one of the four pre-approved methods is not available or feasible. Tribal Lead Agencies must justify any alternative approach in 2.5.7.

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative Approach
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Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input checked="" type="checkbox"/> U.S. Department of Justice (DOJ) TAP <input type="checkbox"/> FBI-approved channeler <input type="checkbox"/> Direct to FBI	<input type="checkbox"/> Non-CCDBG Tribal authority <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe</i> :
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> DOJ TAP <input type="checkbox"/> FBI-approved channeler <input type="checkbox"/> Direct to FBI	<input type="checkbox"/> Non-CCDBG Tribal authority <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe</i> :
Relative Providers	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> DOJ TAP <input type="checkbox"/> FBI-approved channeler <input type="checkbox"/> Direct to FBI	<input type="checkbox"/> Non-CCDBG Tribal authority <input type="checkbox"/> Third-party vendor <input checked="" type="checkbox"/> Other, <i>describe</i> : Exempt
All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> DOJ TAP <input type="checkbox"/> FBI-approved channeler <input type="checkbox"/> Direct to FBI	<input type="checkbox"/> Non-CCDBG Tribal authority <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input checked="" type="checkbox"/> Other, <i>describe</i> : Castle Branch without fingerprinting.

2. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search (check only those methods used)

Because there is no Federal authority under the CCDBG Act for Tribes to access information through the NCIC NSOR name-based search, OCC will consider approaches that do not include accessing the NCIC NSOR name-based search. An alternative approach to checking the NCIC NSOR name-based check may include a check of a private or public sex offender registry. Tribal Lead Agencies must justify any alternative approach in 2.5.7.

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative approach
Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> National FBI fingerprint NCIC NSOR automatic check plus name-based search of NCIC NSOR	<input checked="" type="checkbox"/> Private or public sex offender registry <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Other, describe:
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> National FBI fingerprint NCIC NSOR automatic check plus name-based search of NCIC NSOR	<input type="checkbox"/> Private or public sex offender registry <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Other, describe:
Relative Providers	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> National FBI fingerprint NCIC NSOR automatic check plus name-based search of NCIC NSOR <input type="checkbox"/> Exempt	<input checked="" type="checkbox"/> Private or public sex offender registry <input type="checkbox"/> Other, describe:
All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input type="checkbox"/> State agreement (e.g., MOU or MOA) <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> National FBI fingerprint NCIC NSOR automatic check plus name-based search of NCIC NSOR	<input checked="" type="checkbox"/> Private or public sex offender registry <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Other, describe:

2.5.1.3 Components of interstate background checks for place(s) of residency in last 5 years

For interstate registry checks, OCC will consider alternative approaches that include checks of Tribal criminal, sex offender and/or child abuse and neglect registries. OCC will also consider approaches that include checks of databases of third-party or private entities. Tribal Lead Agencies must justify any alternative approach in 2.5.7.

1. Criminal registry or repository using fingerprints in the previous state of residency

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative Approach
Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care, family child care, and in-home providers)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State database or repository <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
Relative Providers	<input type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input checked="" type="checkbox"/> Exempt	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>

- i. Tribal or state databases or repositories. Tribal Lead Agencies may use Tribal or state databases or repositories for some or all their child abuse and neglect registry and database check component. Describe any Tribal or state database or repository indicated in the table above.

☐ No Tribal or state database or repository used in background checks.

☐ Tribal database or repository. Describe:

☒ State database or repository. Describe: **The Castle Branch performs State and National Record Indicator + Sex Offender Registry (flat rate including maiden & alias names), County Criminal (including maiden & alias names), Residency History Social Security Alert, Motor Vehicle Records, ALL State Access, WA State wide and Nationwide**

Federal Criminal search- including maiden/alias names

2. Sex offender registry or repository check in the previous state of residency (check only those methods used)

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative Approach
Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State database or repository <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
Relative Providers	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> Exempt	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Other, <i>describe:</i>

- i. Tribal or state databases or repositories. Tribal Lead Agencies may use Tribal or state databases or repositories for some or all of their interstate background check components. Describe any Tribal or state database or repository indicated in the table above.

☐ No Tribal or state database or repository used in interstate criminal background checks.

☐ Tribal database or repository. Describe:

☒ State database or repository. Describe: **The Castle Branch performs State and National Record Indicator + Sex Offender Registry (flat rate including maiden & alias names), County Criminal (including maiden & alias names), Residency History Social Security Alert, Motor Vehicle Records, ALL State Access, WA State wide and**

Nationwide Federal Criminal search- including maiden/alias names

3. Child abuse and neglect registry and database check in the previous state of residency

Note: Rows are enabled based on the Provider Types specified in 1.7.1 Providers that Offer Direct Services

	Pre-Approved Methods	Alternative Approach
Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
State-Licensed Providers (includes center-based child care and family child care)	<input type="checkbox"/> State database or repository <input checked="" type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
Relative Providers	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf <input type="checkbox"/> Exempt	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Other, <i>describe:</i>
All other providers eligible to deliver CCDF services (includes state license-exempt and in-home child care providers)	<input checked="" type="checkbox"/> State database or repository <input type="checkbox"/> State conducts background check on Tribal Lead Agency's behalf	<input type="checkbox"/> Tribal database or repository <input type="checkbox"/> Third-party vendor <input type="checkbox"/> Family child care household members not included <input type="checkbox"/> Other, <i>describe:</i>

- i. Tribal or state databases or repositories. Tribal Lead Agencies may use Tribal or state databases or repositories for some or all of their interstate background check components. Describe any Tribal or state database or repository indicated in the table above.

☐ No Tribal or state database or repository used in interstate child abuse and neglect checks.

☐ Tribal database or repository. Describe:

☒ State database or repository. Describe: **The Castle Branch performs State and National Record Indicator + Sex Offender Registry (flat rate including maiden & alias names), County Criminal (including maiden & alias names), Residency History Social Security Alert, Motor Vehicle Records, ALL State Access, WA State wide and Nationwide Federal Criminal search- including maiden/alias names**

2.5.2 Disqualifying Crimes for Employment Eligibility

Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry (98.43(c)(1)(i-iii)). Potential staff members also cannot be employed by a provider receiving CCDF program funds if they have been convicted of:

- A felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or—subject to an individual review (at the Tribal Lead Agencies’ option)—a drug-related offense committed during the preceding 5 years
- A violent misdemeanor committed as an adult against a child, including the following crimes—child abuse, child endangerment, or sexual assault
- A misdemeanor involving child pornography (98.43(c)(1)(iv-v)).

Tribal Lead Agencies that only use state-licensed providers and rely on state-conducted background check policies and procedures should select “No”.

2.5.2.1 Other disqualifying crimes.

Does the Tribal Lead Agency disqualify child care staff members based on their conviction for any other crimes not specifically listed in 98.43(c)(i)?

☒ No.

☐ State conducts all background checks and determines disqualifying crimes.

☐ Yes. Describe other disqualifying crimes and provide a citation:

2.5.2.2 Alternative approach to lifetime ban for disqualifying offenses.

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

ACF will consider alternative approaches where the Tribal Lead Agency implements less than a lifetime ban for offenses that are not crimes against children. Tribes may adopt an individualized review process for determining employment eligibility for those convicted of crimes that are not crimes against children. Tribal Lead Agencies must justify any alternative approach in 2.5.7.

Does the Tribal Lead Agency use an alternative approach that implements a less than lifetime ban for offenses that are not crimes against children?

☒ No

☐ Yes

1. If yes, check the type of provider(s) to which the alternative approach for disqualifying crimes applies.

☐ Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)

☐ State-Licensed Providers (includes center-based child care and family child care)

☐ Relative Providers

☐ All other providers eligible to deliver CCDF services (includes license-exempt and in-home child care providers)

2.5.3 Fees

The Tribal Lead Agency may not charge fees that exceed the actual costs of processing applications and administering a comprehensive background check, regardless of whether they are conducted by the Tribe, a state, or a third-party vendor or contractor (98.43(f)). Tribal Lead Agencies can report that no fees are charged if applicable (98.43(f)).

Tribal Lead Agencies that only use state-licensed providers and rely on state-conducted background check policies and procedures should select “No”.

2.5.3.1 Does the Tribal Lead Agency charge fees?

☐ Yes.

☒ No. **Skip to 2.5.4**

2.5.3.2 What are the fees that the Tribal Lead Agency charges for completing the background checks?

2.5.3.3 Ensuring background check fees do not exceed cost of processing and administration.

How does the Tribal Lead Agency ensure that fees charged for completing the background checks do not exceed the actual cost of processing and administration?

2.5.4 Timeliness and Privacy in Returning the Results

The Tribal Lead Agency must conduct the comprehensive background checks as quickly as possible, and the process shall not exceed 45 days after the child care provider submits the request. The Tribal Lead Agency shall provide the results of the background check in a statement to the provider that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the Tribal Lead Agency will provide information about each disqualifying crime to the staff member.

ACF will consider alternative approaches to the requirement to carry out the background check requests within 45 days. Tribes may also make employment eligibility decisions in the event that not all background

check components are completed within 45 days. Tribal Lead Agencies must justify any alternative approach in 2.5.7.

Tribal CCDF Programs that only use state-licensed providers and rely on state-conducted background check policies and procedures should select “No”.

2.5.4.1 Check the timeliness for conducting comprehensive background check results.

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

☒ Approved approach: For all types of providers, the Tribal Lead Agency returns results within 45 days.

☐ Alternative approach for OCC approval: For some or all types of providers, the Tribal Lead Agency returns results after 45 days.

1. If the Tribal Lead Agency uses an approach in which results are returned after 45 days, for which providers (check only those that apply):

☐ Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)

☐ State-Licensed Providers (includes center-based child care and family child care)

☐ Relative Providers

☐ All other providers eligible to deliver CCDF services (includes license-exempt and in-home child care providers)

☒ Other approach, including relying on state background check system to return results.

2.5.4.2 Privacy of comprehensive background checks.

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

Tribal Lead Agencies must ensure the privacy of comprehensive background checks by providing the results of the background check to the child care provider (i.e., employer) in a statement that indicates whether a child care staff member (including employee, prospective employee, or household member) is eligible or ineligible for employment, without revealing any documentation of criminal history, or disqualifying crimes, or other related information regarding the individual.

ACF will consider alternative approaches that allow some information to be shared with the child care provider. *Note:* This provision is subject to limitations in FBI policy and state or Tribal privacy requirements, which may prevent the release of information. Tribal Lead Agencies must justify any alternative approach in 2.5.7.

The Tribal Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Check if the privacy of the child care staff member (including employee, prospective employee, or household member) is ensured when returning results to the child care provider (i.e., employer).

☒ Approved approach: For all types of providers, the Tribal Lead Agency ensures the privacy of the child care staff member (including employee, prospective employee, or household member).

☐ Alternative approach for OCC approval: For some or all types of providers, the Tribal Lead Agency allows some information to be shared with the child care provider (i.e., employer).

1. If the Tribal Lead Agency uses an approach in which some information is shared with the child care provider, for which providers (check only those that apply):

☐ Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)

☐ State-Licensed Providers (includes center-based child care and family child care)

☐ Relative Providers

☐ All other providers eligible to deliver CCDF services (includes license-exempt and in-home child care providers)

☐ Other approach, including relying on state background check system to return results.

2.5.5 Provisional Employment

Child care providers must submit a request to the appropriate Tribal or state agency for a comprehensive background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member (98.43(d)(1) and (2)). “Prospective staff members” have applied for a position, but have not yet begun working. A prospective child care staff member may not begin work until at least one of the following results have been returned as satisfactory:

- FBI fingerprint check
- Tribal or state criminal registry or repository using fingerprints in the Tribe or state where the prospective staff member resides

ACF will consider an alternative approach that allows for staff members to be provisionally employed once the background check request has been submitted, but prior to receiving the results of the check. New staff members are considered “provisionally employed” during the time from when one of the above fingerprint checks have been returned as satisfactory to the time when all background checks are returned as satisfactory. An alternative approach to provisional employment must require that the provider submit all comprehensive background check requests before the prospective staff person begins working.

Under either approach, the provisionally employed staff member must be supervised at all times by an individual who has completed the background check (98.43(d)(4)).

2.5.5.1 Check the provisional employment approach used by the Tribal Lead Agency.

Note: Applicable Provider Types can be selected in 1.7.1.1 Providers that Offer Direct Services

☒ Approved approach: For all types of providers, provisional employment is permitted after a satisfactory result from the FBI fingerprint check, or the Tribal or state criminal registry or repository, using fingerprints in the Tribe or state where the prospective staff member resides.

☐ Alternative approach for OCC approval: For some or all types of providers, provisional employment is permitted after the comprehensive background check requests have been submitted, but before the results of either fingerprint checks have been returned.

1. If the Tribal Lead Agency uses the alternative approach in which provisional employment is permitted after the comprehensive background check requests have been submitted, for which providers (check only those that apply):
 - ☐ Tribally Operated Centers and Tribally Regulated Providers (includes center-based child care and family child care)
 - ☐ State-Licensed Providers (includes center-based child care and family child care)
 - ☐ Relative Providers
 - ☐ All other providers eligible to deliver CCDF services (includes license-exempt and in-home child care providers)
- ☐ Not applicable, Tribal Lead Agency does not have provisional employment.

2.5.6 Appeals for Child Care Staff (including employee, prospective employee, or household member).

The Tribal Lead Agency must have a process for a child care staff member (including employee, prospective employee, or household member) to appeal the results of a background check to challenge the accuracy or completeness of the information contained in a staff member's background report (98.43(e)(3)). The Tribal Lead Agency shall ensure the following:

- The child care staff member is provided with information related to each disqualifying crime in a report, along with information and/or a notice on the opportunity to appeal.
- A child care staff member will receive clear instructions about how to complete the appeals process for each background check component if the child care staff member wishes to challenge the accuracy or completeness of the information contained in such member's background report.
- If the staff member files an appeal, the Tribal Lead Agency will attempt to verify the accuracy of the information challenged by the child care staff member, including making an effort to locate any missing disposition information related to the disqualifying crime.
- The appeals process is completed in a timely manner for any appealing child care staff member.
- Each child care staff member shall receive written notice of the decision. In the case of a negative determination, the decision should indicate (1) the Tribal Lead Agency's efforts to verify the accuracy of the information challenged by the child care staff member; (2) any additional appeals rights available to the child care staff member; and (3) information on how the individual can correct the Federal, state, or Tribal records at issue in the case (98.43(e)(3)).
- The Tribal Lead Agency must work with other agencies that are in charge of background check information and results (such as the child welfare office and the state identification bureau) to ensure the appeals process is conducted in accordance with the CCDBG Act.

2.5.6.1 Notification of applicant about their eligibility to work in a child care program.

Describe how the applicant is notified about their eligibility to work in a child care program. **For TOC staff, they are notified by phone by Human Resources department of the Puyallup Tribe. Once the background check comes back clear for the subsidy program, the provider is notified via email with instructions on how to submit for payment each month and the start date of services.**

2.5.6.2 Background check appeals

Describe how the Tribal Lead Agency provides opportunities for applicants to appeal the results of background checks. **The Puyallup Tribal human resource department will verify that background checks requirements are met for all employees prior to hire. If any negative findings from the background check or the fingerprinting are discovered, it may result in immediate termination of hire agreement or employment. Employees have ten (10) days after a negative finding from a background check to provide written proof of the correction and request a supervisory review. The supervisor then has fifteen (15) days to uphold, overturn, or modify the enforcement decision. Once an employee, he or she has a duty to disclose current and future convictions or non-convictions.**

2.5.6.3 Review process for individuals disqualified due to a felony drug offense.

Describe whether the Tribe has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43 (e)(2-4)). **A person is automatically disqualified from being employed in or volunteering in positions where the person has regular contact with, or control over elders, vulnerable adults, and/or children, if it has been less than (3) years since the conviction date or since the individual was released from incarceration (whichever is later) for conviction of the following crimes:**

- a. Burglary 2;**
- b. Any physical assault that resulted in a misdemeanor conviction;**
- c. Any misdemeanor weapons-related crime;**
- d. Any theft of an item(s) valued less than \$750;**
- e. Any violation of Tribal, State, or Federal drug laws, except for convictions related to marijuana if those laws conflict with the laws of the Puyallup Tribe; or**
- f. Any combination of three or more gross misdemeanors or felonies within the immediate three years prior to the date of the background check.**

2.5.7 Justification for Alternative Approach(es)

Lead agencies may use alternative approaches in addition to or instead of the pre-approved methods. For example, Tribal Lead Agencies may use name-based checks of Tribal or state record management systems for the FBI fingerprint check when one of the four pre-approved methods are not available or feasible. The alternative approach is subject to ACF approval, and ACF will not approve approaches with blanket exemptions or waivers that bypass the intent of protecting children's safety.

2.5.7.1 Issues or barriers preventing Tribal Lead Agency from conducting the required checks.

What are the issues or barriers preventing the Tribal Lead Agency from conducting the required checks? Check only those that apply:

- ☐ Does not apply—no alternative approach is used for any of the background check components
- ☐ Does not have the authority under the CCDF statute to conduct a NCIC NSOR name-based search
- ☐ No direct authority under the CCDF statute to conduct an FBI fingerprint check
- ☐ No existing formal or informal MOU or MOA with a state

[x] Other. Describe: **The TLA has just received the authority for TAP (FBI Fingerprint) but have not implemented it yet. The TLA does not have the authority under the CCDF statute to conduct a NCIC NSOR name-based search.**

2.5.7.2 Comprehensive alternative approach to ensure health and safety of children.

Describe how the alternative approach is comprehensive and ensures the health and safety of children in child care.

The description should include an alternative approach that affects the methods for conducting comprehensive background checks; the implementation of less than lifetime bans for offenses that are not crimes against children; the policies that allow longer than 45 days to conduct comprehensive background checks; any private information shared with the child care provider (i.e., employer); or provisional employment, as applicable. If a Tribal Lead Agency does not use any alternative method for their comprehensive background check, please enter "Does not apply." **The TLA has just received the authority for TAP (FBI Fingerprint) but have not implemented it yet. The in state criminal records check is currently run through Castle Branch and is name-based only, however, the TLA is working to submit a request for to get these done with DCYF. Implementation of the child abuse and neglect checks are under development.**

3 Supporting Continuous Quality Improvement

As of FY 2022, all Tribal Lead Agencies are subject to a 9-percent quality set-aside. Tribal Lead Agencies must spend quality funds on at least 1 of 10 allowable quality activities, including:

- Training and professional development;
- Early learning and developmental guidelines;
- Quality rating and improvement systems;
- Supply and quality of services for infants and toddlers;
- Child care resource and referral services;
- Licensing, inspection, monitoring, training, health & safety;
- Evaluating the quality of child care programs;
- Supporting providers in the voluntary pursuit of accreditation;
- High-quality program standards; and
- Other measurable quality improvement activities, including culturally responsive activities, such as language immersion.

3.1 Quality Improvement Goals and Activities

In completing this section, the Tribal Lead Agency should describe activities currently underway, planned, or expected during the 3-year Plan period. Any significant changes to the quality improvement goals or activities should be addressed through an amendment to the Plan.

The Tribal Lead Agency should only describe activities funded either entirely, or in part, with CCDF dollars. All Tribal Lead Agencies must spend a percentage of their total CCDF expenditures on quality improvement activities.

Required Minimum for Quality Spending (As of FY 2022)		
	Tribal Lead Agencies with Small Allocations	Tribal Lead Agencies with Medium and Large Allocations
Quality Set-Aside	9%	9%
Infant-Toddler	NA	3%
Total Quality	9%	12%

3.1.1 Quality Improvement Activities

Check the quality activities in 3.1.2.1 through 3.1.2.10 that the Tribal Lead Agency will invest in during this plan cycle (98.41; 98.83). Tribal Lead Agencies can, and are encouraged to, incorporate culturally responsive practices into their quality improvement activities.

3.1.1.1 Child care workforce training and professional development.

Supporting the training and professional development of the child care workforce. Check only those that apply:

- ☒ Promotion of child development
- ☒ Curriculum development and instruction

- ☒ Implementing developmentally appropriate and culturally and linguistically responsive instruction
- ☒ Language and literacy
- ☒ Developing or providing training to providers about Indigenous early learners and epistemologies
- ☒ Developing or providing training to providers about the local Indigenous Nations and community
- ☒ Family engagement
- ☒ Caring for children with special health or developmental needs
- ☒ Required health and safety training topics, as described in 2.1.3
- ☒ Access to physical activity
- ☒ Indigenous nutrition and foods
- ☐ Child care as a business
- ☐ Fiscal management for providers
- ☐ Administration and program management for providers
- ☒ Supporting (through funding, scholarships, etc.) the career development pathways of the child care workforce through:
 - ☒ Credit toward required training hours
 - ☒ Certificates (including those incorporating Indigenous studies and Indian education for providers)
 - ☐ Credentials
 - ☒ Degrees (including those incorporating Indigenous studies and Indian education for providers)
- ☒ Other: **Gardening-Farm to Table**
Outdoor Classroom-1 year old Waddler Classroom addition
Create vision, mission and goals for the Land Based Education Program for the 2023 School age program by June 2023.

Optional: Describe any of the activities checked above: **Native Language and Literacy Goals**

- 1. Annually increase the number of both English and Twulshootseed literacy materials in GELC learner's homes by 20% over established baseline levels by January 2024.**
- 2. Demonstrate improved proficiency in English as measured by an annual increase in the number and percentage of learners demonstrating proficiency in literacy/language GOLD inventory assessment results (For both oral and written English) by at least 10% over baseline.**
- 3. Demonstrate improved Twulshootseed language as measured by frequency and duration of preschooler and parent exclusive functional use of Twulshootseed of at least 15 minutes per day exclusive Twulshootseed as measured every six months.**

4. All GELC staff will engage in weekly professional development from the Puyallup Tribal Language program.
5. Change all staff job descriptions to include learning Tribal Language, Twulshootseed by June 2023.
6. With the assistance of Human Resources, update the current position description of teaching staff to include mandatory professional development in the Twulshootseed language by January, 2023.
7. Develop a step increase in salary upon completion of current language certification in the Twulshootseed language for GELC staff, and implement new policy by October 1, 2023.
8. Increase staff professional development in cultural learning events offered in the community such as canoe, cedar weaving, wool weaving, story-telling, and other ceremonial events.

3.1.1.2 Early learning/developmental guidelines.

Improving on the development or implementation of early learning and developmental guidelines (658E(c)(2)(T); 658G(b)(2)).

Early learning guidelines are intended to help teachers, caregivers, and directors learn what children should know and be able to do at different developmental stages to experience school success. Early learning guidelines often provide examples of activities that can be used to develop a curriculum but are not intended to serve as a curriculum development activity. Check only those that apply:

- ☐ Supporting the use of the state's early learning guidelines
- ☐ Participating in the development or revision of the state's early learning guidelines
- ☐ Adapting a state's guidelines to reflect the Tribal Nation's language and culturally specific early learning and development goals/benchmarks
- ☒ Developing or implementing the Tribal Lead Agency's own tribally specific guidelines
- ☒ Providing trainings for staff on child development and early learning guidelines
- ☐ Other. Describe:

Optional: Describe any of the activities checked above:

3.1.1.3 Quality rating and improvement system (QRIS).

Developing, implementing, or enhancing a quality rating and improvement system (QRIS) for child care providers and services (658G(b)(3)).

A QRIS is a systemic approach to assess, improve, and communicate the level of quality in early and school-age care and education programs. Similar to rating systems for restaurants and hotels, a QRIS awards quality ratings to early and school-age care and education programs that meet a set of defined program standards.

By participating in their state's or Tribe's QRIS, early and school-age care providers embark on a path of continuous quality improvement. Even providers that have met the standards

of the lowest QRIS levels have achieved a level of quality that is beyond the minimum requirements to operate. Check only those that apply:

- ☐ Participating in a state QRIS
- ☒ Developing a Tribal QRIS or similar rating system
- ☐ Implementing a Tribal QRIS or similar rating system
- ☐ Collaborating with other Tribes to implement a QRIS or similar rating system
- ☐ Other. Describe:

Optional: Describe any of the activities checked above:

3.1.1.4 Supply and quality of child care services for infants and toddlers.

Improving the supply and quality of child care services for infants and toddlers. Check only those that apply:

- ☒ Developing infant-toddler components within the early learning and developmental guidelines/standards, etc.
- ☒ Indigenous language and culturally responsive practices for infants and toddlers
- ☒ Providing training and professional development to enhance child care providers' abilities to provide developmentally appropriate services for infants and toddlers
- ☒ Providing coaching, mentoring, and/or TA on this age group's unique needs from networks of qualified infant-toddler specialists
- ☒ Improving the ability of families to access transparent and easy-to-understand consumer information about high-quality infant-toddler care that includes information on infant-toddler language, social-emotional, and early literacy and numeracy cognitive development
- ☐ Offering non-traditional hours
- ☒ Supporting the child care provider workforce through stabilization subgrants
- ☐ Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities
- ☐ Coordinating with Early Head Start or Early Head Start – Child Care Partnerships
- ☒ Coordinating with home visiting activities
- ☐ Other. Describe:

Optional: Describe any of the activities checked above: **The TOC will be constructing an outdoor classroom specifically for the Waddler Class (1 year old's) and hope to have it certified by Nature Explore when completed.**

3.1.1.5 Child care resource and referral (CCR&R) services.

Establishing or expanding a system of child care resource and referral (CCR&R) services, assisting families in finding and choosing a child care provider, collecting and analyzing child

care provider supply-and-demand data, and providing training and support to providers (658E(c)(3)(B)(iii); 658G(b)(5)). Check only those that apply:

- ☐ Using a state CCR&R
- ☐ Operating a CCR&R
- ☐ Partnering with other Tribes to offer CCR&R services
- ☒ Incorporating CCR&R services into program services
- ☐ Other. Describe:

Optional: Describe any of the activities checked above:

3.1.1.6 Licensing, inspection, monitoring, training, and health and safety.

Supporting compliance with requirements for licensing, inspection, monitoring, training, and health and safety. Check only those that apply:

- ☒ Provide health and safety materials/equipment (e.g., carbon monoxide detectors, fencing, personal protective equipment)
- ☐ Grants/mini-grants for health and safety materials/equipment
- ☒ Classroom materials and resources
- ☐ Financial assistance in meeting licensing requirements
- ☒ Conduct monitoring visits of child care providers
- ☐ Other. Describe:

Optional: Describe any of the activities checked above:

3.1.1.7 Evaluating the quality of child care programs.

Evaluating the quality of child care programs, including how programs positively impact children. Check only those that apply:

- ☒ Purchasing quality assessment tools
- ☐ Contracting with an outside evaluator to assess child care program quality
- ☒ Implementing surveys to collect stakeholder input
- ☐ Conducting internal training on the use of quality evaluations
- ☒ Other. Describe: **Using documentation to set goals to access where children have made progress in the Language.**

Optional: Describe any of the activities checked above:

3.1.1.8 Supporting providers in the voluntary pursuit of accreditation.

Tribal Lead Agencies can use quality funds to support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and

reliable program standards of high quality. Accreditation is one way to differentiate the quality of child care providers. To gain accreditation, center-based child care and family child care providers must meet certain quality standards outlined by accrediting organizations. Check only those that apply:

- ☐ Using accreditation guidelines as a quality measure
- ☐ Funding any aspect of national accreditation (e.g., accreditation from the National Association for the Education of Young Children, or the National Association for Family Child Care, or accreditation developed by a Tribal association)
- ☒ Paying annual accreditation fees
- ☐ Other. Describe:

Optional: Describe any of the activities checked above:

3.1.1.9 High-quality program standards.

Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development. Check only those that apply:

- ☐ Using Head Start Program Performance Standards
- ☐ Using *Stepping Stones to Caring for Our Children*
- ☐ Using *Caring for Our Children: Basics*
- ☐ Using *Minimum Health and Safety Standards: A Guide for American Indian and Alaska Native Child Care and Development Fund Grantees*
- ☒ Using a combination of the above listed standards. Describe: **We have updated our standards manual, combining the Caring for Our Children policies along with cultural traditions and curriculum guidelines.**
- ☐ Other. Describe:

Optional: Describe any of the activities checked above: **Along with the updating standards manual, we have updated the Employee Handbook, Subsidy Manual and Parent Handbooks.**

3.1.1.10 Other quality improvement activities.

Other activities the Tribal Lead Agency will engage in to improve the quality of child care services. Check only those that apply:

1. ☒ Culturally Relevant Activities
 - ☒ Incorporating Tribal language into child care settings
 - ☒ Providing teacher training related to implementing language and culture in the classroom
 - ☒ Implementing immersion classrooms or language nests

- ☒ Partnering with language and culture departments to build curricula
- ☒ Modifying curricula to reflect Tribal culture
- ☒ Offering culturally based training opportunities for families and providers
- ☒ Providing information and training to non-Native providers about working with Native children and families
- ☒ Serving traditional Native foods in child care programs
- ☐ Other. Describe:

Optional: Describe any of the activities checked above: **All GELC staff will engage in weekly professional development from the Puyallup Tribal Language program changing all staff job descriptions to include learning Tribal Language, Twulshootseed. With the assistance of Human Resources, we will update the current job descriptions of teaching staff to include mandatory professional development in the Twulshootseed language. A pay step increase in salary will occur when staff completes current certification in the Twulshootseed language. Increase staff professional development in cultural learning events offered in the community such as canoe, cedar weaving, wool weaving, story-telling, and other ceremonial events.**

2. ☒ Consumer Education for Families and Providers

- ☒ Written materials, including newsletters, brochures, and checklists, on child care topics
- ☒ Tribal and/or local media
- ☒ Social media, such as Facebook, Twitter, and Instagram
- ☒ Consultation from CCR&Rs, including information about other early childhood and social/human services programs for which families and providers may qualify
- ☐ Internet options, including electronic media, publications, and webcasts on child care topics
- ☒ Postings on community bulletin boards
- ☐ Other. Describe:

Optional: Describe any of the activities checked above: **The Quality Support Coordinators are working on establishing a manual that lists all of the opportunities for assistance and education regarding childcare throughout the Puyallup Tribe and Pierce County.**

3. ☒ Provider Stabilization Subgrants

Describe: Using ARPA funds, we will continue to accept applications on a rolling basis through this grant cycle by providing licensed childcare centers subgrants to cover their losses during the Covid pandemic.

- 4. ☒ Provider retention grants/bonuses
- 5. ☐ Purchase of vans and busses
- 6. ☐ Other quality activities, besides the activities checked above, that the Tribal Lead Agency intends to implement during this Plan period:

3.1.2 Identification of Goals and Activities to Improve Quality

3.1.2.1 Identifying the goals and activities to improve quality as described in 3.1.1.

How did the Tribal Lead Agency identify the goals and activities to improve quality as described in 3.1.1? For example, did the Tribal Lead Agency conduct provider surveys or assessments that identified the need for quality improvements? Check only those that apply:

- ☒ Site visits and/or monitoring inspection visits
- ☐ Surveys to families, providers, and Tribal leadership
- ☒ Community assessments
- ☒ Self-assessments
- ☒ Parent, family, community, or Tribal meetings
- ☐ Other. Describe:

3.1.3 Evaluation of Progress for Child Care Quality Improvement Goals and Activities

3.1.3.1 Evaluating progress toward meeting the overall child care quality improvement goals.

How does the Tribal Lead Agency evaluate progress toward meeting the overall child care quality improvement goals and activities described in 3.1.1 (658G(d)(3))?

- ☒ Site visits and/or monitoring inspection visits
- ☒ Follow up surveys to families, providers, and Tribal leaders
- ☒ Ongoing community assessments
- ☒ Self-assessments and program evaluations
- ☐ Parent, family, community, or Tribal meeting sign-in sheets/attendance logs

Describe the items checked above: **Storage and Parking are issues when we have an event at the TOC. We are evaluating the need for additional parking and have come up with a solution to increase overflow at the annex property across the street during the monthly Parent Nights and community events. We have also looked into storage options for each classroom as they switch out their curriculum every season or lesson.**

- ☐ Other. Describe:

3.2 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

The Tribal Lead Agency must develop training and professional development requirements (documented in Section 2.1.5), including pre-service or orientation training (to be completed within 3 months) and ongoing requirements designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce.

Such requirements shall be applicable to child care providers caring for children receiving CCDF program funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

3.2.1 Training and Professional Development Requirements

3.2.1.1 Specific training and professional development requirements.

To meet the needs of the following age groups or groups of children, describe the specific training and professional development requirements you have in place for child care providers who care for:

[x] Infants and toddlers. Describe: TOC offers the following trainings throughout the year for staff and in-home providers: Quorum-CCDF required health and safety trainings, Outdoor Classroom implementation through Nature Explore, Conscious Discipline, Tribal Language Classes and Bates Technical College ECE classes. All of the above trainings are appropriate for the social, emotional, physical and cognitive development of the children in this age group and are accessible and on-going.

Child Care Basics (30 hour)- ECE Child Development

Conscious Discipline / Positive Guidance: Socio-emotional

Emergency Preparedness and Response

Bates ECE Professional Development courses; Early Childhood development, family engagement, professionalism in ECE, teacher-child interactions, classroom environment, Infant and toddler sleep, Ages and Stages, sensory play, toy safety, Developmentally Appropriate Practice, active engagement, observation and documentation.

Neurodiversity (ASD); sleep, routines, challenging behaviors, supporting children with diverse accommodations and adaptations in ECE.

Teaching Strategies Gold; Observing and documenting, Infants, Toddlers and Twos, Creative Curriculum, and assessment.

[x] Preschoolers. Describe: TOC offers the following trainings throughout the year for staff and in-home providers: Quorum-CCDF required health and safety trainings, Outdoor Classroom implementation through Nature Explore, Conscious Discipline, Tribal Language Classes and Bates Technical College ECE classes. All of the above trainings are appropriate for the social, emotional, physical and cognitive development of the children in this age group and are accessible and on-going.

Child Care Basics (30 hour)- ECE Child Development

Conscious Discipline / Positive Guidance: Socio-emotional, mental health promotion.

Emergency Preparedness and Response

Bates ECE Professional Development courses; Early Childhood development, family engagement, professionalism in ECE, teacher-child interactions, classroom environment,

Infant and toddler sleep, Ages and Stages, sensory play, toy safety, Developmentally Appropriate Practice, active engagement, observation and documentation.
Neurodiversity (ASD); sleep, routines, challenging behaviors, supporting children with diverse accommodations and adaptations in ECE.
Teaching Strategies Gold; Observing and documenting, Preschool, Creative Curriculum, and assessment.

[x] School-age children. Describe: TOC offers the following trainings throughout the year for staff and in-home providers: Quorum-CCDF required health and safety trainings, Outdoor Classroom implementation through Nature Explore, Conscious Discipline, Tribal Language Classes and Bates Technical College ECE classes. All of the above trainings are appropriate for the social, emotional, physical and cognitive development of the children in this age group and are accessible and on-going.

Center-based Care providers receive:

*School-Age Basics (30 hour)- ECE Child Development

Conscious Discipline / Positive Guidance: Socio-emotional, mental health promotion.

Emergency Preparedness and Response

Bates ECE Professional Development courses; Early Childhood development, family engagement, professionalism in ECE, teacher-child interactions, classroom environment, Infant and toddler sleep, Ages and Stages, sensory play, toy safety, Developmentally Appropriate Practice, active engagement, observation and documentation.

Neurodiversity (ASD); sleep, routines, challenging behaviors, supporting children with diverse accommodations and adaptations in ECE.

Teaching Strategies Gold; Observing and documenting.

[x] Children who are Indigenous-language learners. Describe: The children at GELC are cared for and nurtured in a rich cultural atmosphere, which is supportive of learning the Twulshootseed language and culture of the Puyallup Tribe of Indians. GELC children are immersed in the cultural and linguistic teachings each day, that provide them with a sense of identity and belonging to the community.

The Puyallup Tribal language and culture is an essential part in the GELC program, as well as to the community.

A. GELC works closely with the Puyallup Tribe's language program and language teachers to reach common goals for the children who learn the Twulshootseed language learners:

1. All Employees at the center are actively involved in learning and teaching the culture and language of the Puyallup Tribe of Indians.
2. Teachers will partner with the culture and language program to implement cultural and linguistic sustaining curriculum.
3. The language is embedded into the daily learning environment at the center, as well as in the lessons and everyday interactions with children.
4. As language program teachers engaged with children in their classrooms, they speak the language as frequently as possible.
5. Teachers follow the lead of language and culture program activities, making materials available for children to grasp the concepts in a developmentally appropriate way.
6. The program provides many cultural, language and literacy opportunities for the families

to participate and foster language use at home.

7. The center also interacts closely with the community to assure that each child is a part of ceremonies, traditional feasts, gatherings, and learning from the elders.

8. Traditional storytelling, using the cultural stories of the Tribe and surrounding areas, as well as children's books written in the Native language.

B. Language songs: singing, drumming, and dancing is passed down from generation to generation and helps children learn the traditional ways of their people.

C. The cultural teachings woven into daily activities for the children to carrying-on such as including concepts of weaving, canoes, the Medicine Creek Treaty, fishing and game, harvesting, Coast Salish art, drumming, regalia, plants, animals, carving, pow wow, teaching from our elders and other traditional values and beliefs.

D. Teachers will implement lessons and activities from the Puyallup Tribe's language and culture program using the following strategies:

1. Teachers will collaborate with members of the community to implement the Puyallup Tribe's cultural teachings into the classroom.

2. Classrooms will participate in; and collaborate with the GELC language and culture program.

3. Teachers will collaborate with the Puyallup Tribe's language program to implement the Tribe's language into the classroom

4. Teachers will partake in the Native language courses taught by the Puyallup Tribal language program.

Children being cared for by in-home providers are given language tools to encourage the language be used in the home. These tools are from the Language department and include books with audio discs for correct pronunciation as well as links to the Tribal language website to attend online classes with the children.

[x] Children with developmental delays and disabilities. Describe: **The Birth to Six Program**, which is housed at GELC, provides trainings on an on-going basis to child care providers of children with developmental delays and disabilities. This program has service provider contracts with a mental health consultant, a developmental screening team and a speech/language pathologist (SLP). The mental health consultant is available for monthly consultations with staff/care givers to discuss mental health and behavioral issues of children with challenging behaviors. These discussions often result in behavior support plans or other support services for families. The mental health consultant is a certified **Conscious Discipline** trainer and assists in the implementation of the Conscious Discipline structures in the center. The Conscious Discipline curriculum is a trauma-informed, brain based social emotional strategy that was developed to assist teachers/childcare staff in managing classrooms of children with special needs. There are also 2 behavior support staff in the Birth to Six program, who, along with the consultant, make up the Mental Health Promotion Team (MHPT). Conscious Discipline trainings are provided on an on-going basis. They are also available to provide supports to staff and families on an as needed basis. In addition, this program also contracts an agency to come in and provide by-monthly developmental screenings. The Birth to Six staff follow-up with families after the screenings. Follow-ups include, but are not limited to school district referrals, medical referrals or rescreens. The

developmental screeners are available to provide staff trainings/info on child development and community resources. Lastly, the Birth – Six program contracts a speech/language that provides speech evaluations and therapy on as needed basis to children enrolled in GELC. This therapist also provides training and info on all matters pertaining to speech/language pathologist development. All of the above services are available to all children enrolled at the TOC or on the subsidy program through in-home providers or relative providers.

3.2.1.2 Participation in the state’s training and professional development system.

Do Tribal CCDF providers participate in the state’s training and professional development system? For example, Tribal CCDF providers might participate in trainings offered by the local child care resource and referral agencies or state-funded training organizations.

☐ Yes. Describe:

☒ No. Check only those that apply:

☐ The Tribal Lead Agency does not have sufficient information about the state’s training and professional development opportunities to share with Tribal CCDF providers.

☒ The state’s training and professional development opportunities are not appropriate for providers caring for Native children.

☐ The state’s training and professional development opportunities are not accessible to Tribal CCDF providers.

☐ The state’s training and professional development opportunities are not affordable for Tribal CCDF providers.

☐ Other. Describe:

☐ Unknown.

3.2.1.3 Culturally relevant trainings and professional development opportunities.

Has the Tribal Lead Agency been contacted by the state for input on how to make its trainings and professional development opportunities more culturally relevant for Native American children?

☐ Yes. Describe:

☒ No.

4 Tribal Lead Agencies With Small Allocations Only—Direct Services

CCDF direct services may be provided through a subsidy program in which the Tribal Lead Agency offers certificates for families to use in any approved child care setting; through a Tribal CCDF-operated center; or through grants or contracts that allocate slots with a provider who offers child care services. The Final Rule established three categories of care:

- In-home child care: Care provided in the child’s home
- Family child care: Care provided in a private residence other than the child’s residence
- Center-based child care: Group care provided in a facility outside of the child’s or provider’s home

The Final Rule recognizes that Tribal Lead Agencies receiving small CCDF allocations do not have to operate a full CCDF program with all CCDF requirements. For example, Tribal Lead Agencies with small allocations do not have to offer subsidies/direct services—all CCDF program funds can be expended on quality activities.

Tribal Lead Agencies with small allocations have a lot of flexibility in how CCDF services are provided. For example, Tribal Lead Agencies with small allocations could establish their own subsidy program based on their unique needs, including determining their own eligibility requirements. *Tribal Lead Agencies with small allocations* who provide subsidies/direct services must provide OCC with an overview of their program requirements as part of their abbreviated CCDF Plan.

4.1 Direct Child Care Services Offering

4.1.1 Direct Child Care Services

4.1.1.1 Direct child care services for Tribal Lead Agencies with small allocations.

Indicate if this *Tribal Lead Agency with a small allocation* will offer direct child care services. Check the appropriate box below:

Not applicable, as a *Tribal Lead Agency with a medium or large allocation*, we will describe direct services in the next section. **Skip to Section 5.**

5 Provide Stable Child Care Financial Assistance to Families (*Tribal Lead Agencies With Medium and Large Allocations*)

5.1 Eligible Children and Families

Tribal Lead Agencies with large and medium allocations must include the basis for determining family eligibility through one of two options, or a combination of both, as described below.

Standard Eligibility. Tribal Lead Agencies must determine eligibility for services pursuant to the criteria found in 98.20(a) and 98.81(b)(1)(ii). When eligibility is determined, children must (1) be under age 13; (2)(a) reside with a family whose income does not exceed 85 percent of the Grantee Median Income (GMI) for a family of the same size and (2)(b) reside with a family whose assets do not exceed \$1,000,000 (as certified by such family member); and (3)(a) reside with a parent(s) who is working or attending a job training or an educational program or (3)(b) receive, or need to receive, protective services (658P(4); 98.20(a)).

Categorical Eligibility. If the Tribe's median income is below 85 percent of the State Median Income, the Tribal Lead Agency has the option to consider any Indian child in the Tribe's service area to be eligible to receive CCDF program funds, regardless of a family's income, work, or training status, provided that the provision for services still goes to those with the highest need (98.81(b)(1)(ii)). Tribal Lead Agencies that use categorical eligibility must still ensure that children meet the Tribe's Indian child and Indian reservation or service area definitions to be eligible for services. Tribal Lead Agencies that use categorical eligibility may create opportunities to align CCDF programs with other Tribal early childhood programs, including Tribal home visiting, Early Head Start, and Head Start. This provision also allows Tribes to support Early Head Start – Child Care Partnership grants.

Tribal Lead Agencies that elect to use categorical eligibility will receive the same funding allocation as if they had chosen to use standard eligibility thresholds. Additional funds will not be allocated. Additionally, Tribal Lead Agencies that implement categorical eligibility are subject to the remaining CCDF requirements, such as the quality expenditure requirements, health and safety standards, and enforcement and comprehensive background checks.

Combination of Standard and Categorical Eligibility: Tribal Lead Agencies may also use a hybrid approach to determining eligibility, that is, a combination of standard and categorical eligibility. For example, Tribal Lead Agencies may choose to use standard eligibility and categorical eligibility in different parts of their service area, or a Tribal Consortium may establish different eligibility tracks based on the preferences of its participating Tribes.

5.1.1 Eligibility Criteria Related to the Child's Age

5.1.1.1 Eligibility criteria related to child's age.

The Tribal CCDF program serves children from ages **1** (weeks [] months [x] years []) through **12** (weeks [] months [] years [x]) (may not equal or exceed age 13).

Note: Eligible children who reach the maximum age within the 12-month eligibility period shall continue to receive CCDF services until their current 12-month eligibility expires. Tribal

Lead Agencies that opt to use Categorical Eligibility must still meet all other CCDF requirements around stable financial assistance and equal access, including age eligibility.

5.1.1.2 Children incapable of self-care.

Does the Tribal Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are physically and/or mentally incapable of self-care (658P(3); 98.20(a)(1)(ii))?

☐ No

☒ Yes

1. The upper age is 18 (may not equal or exceed age 19).
2. Define “physical or mental incapacity”: Physically and/or mentally incapable of self-care as diagnosed by a licensed therapist or doctor.

5.1.1.3 Children under court supervision.

Does the Tribal Lead Agency allow CCDF-funded child care for children ages 13 and older, but below age 19, who are under court supervision (98.20(a)(1)(ii))?

☒ No.

☐ Yes. The upper age is (may not equal or exceed age 19).

5.1.1.4 Children residing with a family.

Define “residing with”: **The dwelling where the child sleeps the majority of the time during any month.**

5.1.1.5 Defining additional eligibility terms.

Define “in loco parentis”: **In the place of a parent**

5.1.2 Categorical Eligibility

5.1.2.1 Does the Tribal Lead Agency implement categorical eligibility?

☐ No. **Skip 5.1.2.2 through 5.1.2.5 and fill out Section 5.1.3.**

☒ Yes, the Tribal Lead Agency only implements categorical eligibility for the entire service area. **If yes, fill out Section 5.1.2 and skip section 5.1.3 through and including 5.1.6.**

☐ Yes, the Tribal Lead Agency implements categorical eligibility for part of the service area or, for a Tribal Consortium, for one or more participating Tribes. **If yes, fill out 5.1.2 through and including 5.1.6.**

5.1.2.2 Justification for Categorical Eligibility.

Demonstrate that the Tribal Median Income (TMI) is below 85 percent of the State Median Income (SMI). For a family size of four:

1. 100 percent of State Median Income: **\$9014.00** /month

2. 85 percent of State Median Income: **\$7662.00** /month
3. 100 percent of Tribal Median Income: **\$6727.00** /month (must be less than 85 percent SMI)

5.1.2.3 Documentation of TMI and SMI data sources

Document the TMI and SMI data sources. Tribal Lead Agencies may use tribally collected income data, but Census data are preferred. The data should be the most recent median income (TMI or SMI) data available.

1. Source of data for Tribal Median Income (e.g., American Community Survey, 2020): **U. S. Census-My Tribal Area-2016-2020 American Community Survey**
 - i. Date: **1/1/2022**
 - ii. Attachment #: **Document was provided by TLA**
 - iii. Web address: **<https://www.census.gov/tribal/?aianihh=3000>**
2. Source of data for State Median Income: **WA State Department of Social and Health Services**
 - i. Name of State: **Washington**
 - ii. Date: **12/10/2021**
 - iii. Attachment #: **Document was provided by TLA**
 - iv. Web address: **desh.wa.gov/esa/eligibility-z-manual-ea-z/state-meidan-income-chart**

5.1.2.4 Describe categorical eligibility requirements, including if there are variations in categorical eligibility (e.g., different categorical eligibility in different geographical areas): **Categorical Eligibility Priority List**

1. **Children who meet the Tribal Lead Agency's definition of protective services.**
2. **Children experiencing homelessness.**
3. **Families in Tribal Programs: Children's Services, Wrap Around Program, Domestic Violence Program and Puyallup Tribal Health Authority**
4. **Parents in job search.**
5. **Family income at poverty level.**
6. **Family income at or below the 85% median income.**
7. **Unemployed foster/relative placement family for child's developmental needs.**
8. **Parents employed as essential workers (case by case).**
9. **Families over the 85% median income.**

Definitions

Working: Parent must work a minimum of 20 hours per week and receive documented monetary compensation for services. Self-employed or seasonal workers and artists will provide tax returns for proof of income. Job search for three months after termination of

employment will be allowed if family has become unemployed while on this program.

Job training: Documented job training. Attendance must be such as to successfully complete the training and obtain a skill to be able to enter the work place. Minimum 10 hours.

Education: Education included high school, general educational development (GED) programs, adult basic education, public and private technical, community college, state/city College or tribal college. Minimum hours per week-20.

Attending job training or education program: Enrolled and attending a documented course to include study time, travel time, and class time. Minimum 10 hours for job training. Parents attending substance abuse education classes through CPS as a part of a rehabilitation plan set up by CPS. Duration of program determined by CPS. Parents attending an out-patient treatment facility for substance abuse. Duration of program determined by CPS. Minimum 20 hours for education programs.

Protective Services:

Children of teenage parents

Documented foster children, relative placement children, adopted foster children

Children with a developmental or behavioral disability as documented by a mental health professional or physician

Children whose parents are in a treatment or recovery program documented by an agency

Children with a history of abuse or neglect who the Tribe/State court has placed in custody of the court while the parents work on issues related to abuse and neglect.

Children in the Tribal CPS system through a Tribal social worker.

Relative placement children with court documents or written notification from parent.

Relative placement children who need respite care-maximum 25 hours per month.

Children where one parent works while the other is not due to known substance abuse.

Children where one parent works while the other is not working because of documented physical or mental limitations.

Children experiencing homelessness.

Elderly grandparents who are not working but caring for the children whose parents are in a documented in-patient treatment program or documented supervision by CPS.

Families who are unemployed and wish to enroll children for childcare, must be affiliated/enrolled in a Protective Services Program and show documented proof for the file.

Enrollment with the Tribal Program meets reason for care eligibility requirements as part of the Protective Services. Yearly verification from the Tribal Program will be used to re-determine eligibility.

Income: Receiving monetary compensation for services rendered. All earned and unearned income. Net income is used to calculate co-payments for child care services and includes deductions for child support payments, tax liens, garnishments, medical insurance, dental insurance, 401k and retirement. Tribal General Welfare and Per capita payments are excluded as income.

5.1.2.5 Ensuring services for those with the highest need

How does the Tribal Lead Agency ensure that the provision of services still goes to those with the highest need? (98.81(b)(1)(i)): **Pending multiple applications, a point system will be utilized to serve the family most in need.**

Skip to Section 5.2 if the Tribal Lead Agency implements categorical eligibility for the entire service area. (Skip pattern triggered by 5.1.2.1.)

5.1.3 Eligibility Criteria Based on Reason for Care

To be eligible to receive CCDF services, children must reside with a parent or parents who are working, are attending a job training or an educational program, or are engaged in a job search activity and/or must receive or need to receive protective services.

Tribal Lead Agencies have broad flexibility in defining “working,” “attending a job training program,” and “attending an educational program.” The definitions provided below should include any allowable activities, including travel time and study time. For example, a definition of “working” could include working for a salary or wages, self-employment, drug or alcohol rehabilitation, subsistence activities, job search, and/or volunteering as well as the travel time to and from the activity. Definitions should also address any limitations, such as minimum hours required or maximum hours allowed.

5.1.3.1 Definition of work, job training and education.

How does the Tribal Lead Agency define “working, job training, and education” for the purposes of CCDF eligibility at the time of determination? Make sure to include a definition for “attending” within the “job training and education” definitions (e.g., number of hours, travel time) (98.16(g)). Provide the definitions below:

“Working”:

“Job training” (include a definition for “attending a job training” e.g., number of hours, travel time):

“Education” (include a definition for “attending an education program” e.g., number of hours, travel time):

5.1.4 Eligibility Based on Protective Services and Vulnerable Populations

Tribal Lead Agencies have the flexibility to define protective services beyond formal child welfare or foster care cases, including other vulnerable children, such as children experiencing homelessness.

If the Tribal Lead Agency provides CCDF-funded child care to children in foster care whose foster care parents are not working or in education/training activities, these children are considered to be in protective services and must be included in this definition for CCDF purposes.

5.1.4.1 Protective services.

For the purposes of CCDF eligibility, does the Tribal Lead Agency include children who receive, or need to receive, protective services?

[] No. **Skip to 5.1.5.**

☐ Yes.

1. Define “protective services” for the purposes of eligibility:
2. Are children in foster care considered to be in protective services?

☐ No.

☐ Yes. Foster care is included under the Tribal Lead Agency’s definition of protective services in 5.1.4.1 above. (This means that, for CCDF purposes, the Tribal Lead Agency considers these children to be served under the protective services eligibility category.)

3. Does the Tribal Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (658E(c)(5))?

☐ No

☐ Yes

4. Does the Tribal Lead Agency provide respite child care to custodial parents of children in protective services?

☐ No.

☐ Yes. Respite care is included under the Tribal Lead Agency’s definition of protective services in 5.1.4.1 above.

5. Does the Tribal Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

☐ No.

☐ Yes.

5.1.5 Eligibility Criteria Based on Family Income

5.1.5.1 Definition of income for purposes of eligibility.

For the purposes of eligibility determination, Tribal Lead Agencies have flexibility in defining “income.” This flexibility allows for the exclusion or deduction of certain types of income from calculations of total family incomes.

How does the Tribal Lead Agency define “income” for the purposes of eligibility?

5.1.5.2 Establishing CCDF family income eligibility limits.

Tribal Lead Agencies must establish CCDF family income eligibility limits. Those limits cannot exceed 85 percent of the Grantee Median Income (GMI). A Tribal Lead Agency has the flexibility to use either State Median Income (SMI) or Tribal Median Income (TMI) as its Grantee Median Income. Check the appropriate box below to indicate which option the Tribal Lead Agency has selected:

☐ State Median Income for a family of the same size.

Source (e.g., Census Bureau, etc.):

State:

Year:

[] Tribal Median Income for a family of the same size residing in the area served by the Tribal Lead Agency.

Source: (e.g., Tribal community assessment, etc.):

Year:

Tribal Lead Agencies may use tribally collected income data, but ACF strongly recommends that Tribal Lead Agencies use Census data. For either option, the data should be the most recent SMI or TMI data available.

5.1.5.3 Establishing CCDF income eligibility levels.

Tribal Lead Agencies must establish CCDF income eligibility levels. Complete Table 5.1.5.3 for the Tribal Lead Agency's CCDF income eligibility levels.

Column (a) lists 100 percent of the current Grantee Median Income (GMI) for each family size.

Column (b) lists 85 percent of the current GMI for each family size. (By law, this is the maximum allowable income for CCDF eligibility.)

Has the Tribal Lead Agency chosen to set income eligibility limits below 85 percent of the current GMI?

[] No. **Complete column (a) in Table 5.1.5.3. Column(b) will be automatically calculated. Do not complete columns (c) through (f).**

[] Yes. **Complete columns (a), (c), and (e) in Table 5.1.5.3. Columns (b), (d) and (f) will be automatically calculated.**

Columns (c) and (d) show the Tribal Lead Agency's maximum income eligibility level for each family size at the time a family applies for CCDF services. Tribal Lead Agencies have the option of setting income eligibility limits below 85 percent of the current GMI.

- Columns (e) and (f) list the Tribal Lead Agency's graduated phase-out or maximum "exit" income levels. If the Tribal Lead Agency sets income eligibility limits below 85 percent of the current GMI, it is subject to the graduated phase-out requirement described below. Tribal Lead Agencies that set their initial income eligibility levels at 85 percent of the current GMI are not subject to the graduated phase-out requirement (98.21(b)). Tribal Lead Agencies that establish initial family income eligibility below 85 percent of GMI must provide graduated phase-out by implementing two-tiered eligibility thresholds, with the second tier of eligibility (used at the time of eligibility redetermination) set at 85 percent of State Median Income (SMI) for a family of the same size—or an amount lower than 85 percent of SMI but

above the Tribal Lead Agency’s initial eligibility threshold. If the Tribal Lead Agency uses an amount lower than 85 percent of GMI, it must take into account the typical household budget for a low-income family and provide justification that the eligibility threshold (1) is sufficient to accommodate increases in family income that promote and support family economic stability and (2) reasonably allows a family to continue accessing child care services without unnecessary disruption (98.21(b)).

The income limit in column (e) cannot exceed the amount shown in column (b).

Table 5.1.5.3: Tribal CCDF Income Eligibility Levels

Family Size	(a) 100% of GMI \$/month	(b) 85% of GMI \$/month [Multiply (a) by 0.85]	(c) <i>(If Applicable)</i> Maximum Income Level if Lower Than 85% Current GMI \$/month	(d) <i>(If Applicable)</i> Maximum Income Level if Lower Than 85% Current GMI % of GMI [Divide (c) by (a), multiply by 100]	(e) <i>(If Applicable)</i> Maximum Phase-Out/Maximum “Exit” Income Level (Cannot exceed 85% GMI) \$/month	(f) <i>(If Applicable)</i> Maximum Phase-Out/Maximum “Exit” Income Level (Cannot exceed 85% GMI) % of GMI [Divide (e) by (a), multiply by 100]
1*						
2						
3						
4						
5						
6						
7						
8						

* *Note:* On a case-by-case basis, Tribal Lead Agencies may consider a child in foster care to be a “family of one” for purposes of determining CCDF income eligibility.

5.1.5.4 Income fluctuations in determining or redetermining eligibility.

During the eligibility determination or redetermination process, **the Tribal Lead Agency must consider fluctuations in family income.** This is particularly important for families who rely on work that is unpredictable or seasonal in nature, such as agriculture; construction work; or subsistence activities, such as hunting and fishing. Families may experience a temporary spike in income due to working increased hours over a short period, yet those earnings are not representative of the family’s income over the course of a year.

How does the Tribal Lead Agency take income fluctuations into account when determining and redetermining eligibility? Check all that apply:

- ☐ Averaging income annually
- ☐ Disregarding temporary, short-term income increases
- ☐ Other. Describe:

5.1.5.5 Family assets.

Tribal Lead Agencies are required to ensure that children receiving CCDF program funds do not have family assets that exceed \$1,000,000, as certified by a family member (98.20(a)(2)(ii)). Tribal Lead Agencies can meet this requirement through family self-certification, either in the application, during the interview process, or through another method as determined by the Tribal Lead Agency.

Describe how the family member certifies that family assets do not exceed \$1,000,000:

5.1.6 Additional Eligibility Criteria

The Tribal Lead Agency has flexibility in establishing additional eligibility criteria. Additional criteria could include, for example, Tribal applicants first applying with the state CCDF program or higher income limits in one part of the Tribal service area.

5.1.6.1 Does the Tribal Lead Agency establish additional eligibility criteria (98.16(g)(5), 98.20(b))?

- ☐ No
- ☐ Yes. Describe:

5.1.6.2 Attachment for additional income eligibility.

If additional eligibility criteria include different income eligibility limits, please attach additional income eligibility tables and indicate attachment(s) #: **Document was not provided by TLA**

5.2 Application and Eligibility Determination/Redetermination Process

5.2.1 Dissemination of Information on Applying for Child Care Assistance

Tribal Lead Agencies must inform families of eligible children and the general public of the process by which they can apply for Tribal CCDF assistance (658E(c)(2)(E)(i)(1)).

5.2.1.1 Informing Families.

How are families informed of the availability of child care assistance under the Tribal CCDF program? Check only those that apply:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Tribal Lead Agency | <input type="checkbox"/> Early Head Start/Head Start programs |
| <input checked="" type="checkbox"/> Child care providers | <input checked="" type="checkbox"/> Health Clinics |
| <input type="checkbox"/> CCR&R agencies | <input type="checkbox"/> TANF offices |
| <input checked="" type="checkbox"/> Public and/or Tribal schools | |

☒ Other Tribal offices

☐ Other governmental offices

☒ Community outreach events

☒ Tribal newsletter/newspaper

☐ Radio and/or television

☒ Social media

☒ Internet. Provide website(s):

<http://www.puyallup-tribe.com/gelc/>

☐ Other. Describe:

5.2.2 Applying for Child Care Services

5.2.2.1 How can families apply for child care services? Check only those that apply:

☒ In-person interview or orientation

☐ Phone

☒ Mail

☐ At the child care provider's site

☒ Electronically via online application or email (provide website):

GELC.Enrollment@PuyallupTribe-nsn.gov

☐ Other. Describe:

5.2.3 Eligibility Documentation Procedures

Tribal Lead Agencies are required to have procedures for documenting and verifying that children and families receiving CCDF program funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)).

Lead agencies should note that there are no Federal requirements for specific documentation or verification procedures.

5.2.3.1 Document verification at initial determination and redetermination.

Check the information that the Tribal Lead Agency documents and verifies at initial determination and redetermination and describe, at a minimum, what information is required and how often. Check only those that apply:

☒ **Child's age: Initial determination: Family applying for services must provide one of the following for the child(ren) they wish to enroll: Tribal identification, immunization records, medical records or birth certificate.**

Redetermination: Yearly updates must be made to make sure the initial determination document has not expired.

☒ **Indian child: Family applying for services must provide proof that the child(ren) they wish to enroll are members of a federally recognized tribe and have documented copies with the application. Families must provide updated documentation as needed or when expired. CIB, Tribal ID, or letter from the Tribe stating that the child will be enrolled. Documents are requested every 12 months if not expired.**

Redetermination: Yearly updates must be made to make sure the initial determination document has not expired.

[x] Work: Families must supply a written pay stub or employment letter from employer stating when they will start and the amount of pay. Parents are required to submit an actual pay stub when their first pay stub is received to calculate the co-payment requirements of the grant. Self-employed parents must submit a tax return to prove employment. Updated documents are requested every 12 months.

Redetermination: Yearly updates must be made to make sure the initial determination document is current and co-payments can be calculated correctly.

[x] Job training: Proof of enrollment in a training class must be supplied as well as a list of classes attending. Updated documents are requested every 12 months.

Redetermination: Yearly updates must be made to make sure the initial determination document is current and proof is still valid of attending a job training program.

[x] Education program: Proof of enrollment in a training class must be supplied as well as a list of classes attending. Updated documents are requested every 12 months. Documents from a CPS worker listing the classes a parent is attending to comply with a court order. Duration of class is determined by CPS worker and will provide updates on the family situation as requested.

Redetermination: Yearly updates must be made to make sure the initial determination document is current and proof is still valid of attending an education program.

[x] Family income: Actual pay stub or tax return for seasonal workers are required to calculate family income to determine co-payment. Documents are requested every 12 months.

Redetermination: Yearly updates must be made to make sure the initial determination document is current and co-payments can be calculated correctly.

[x] Household composition: Actual pay stub or tax return for seasonal workers are required to calculate family income to determine co-payment. Documents are requested every 12 months.

Redetermination: Yearly updates must be made to make sure the initial determination document is current and co-payments can be calculated correctly.

[] Applicant identity:

[x] Applicant's relationship to the child: Self attestation on the application. Documents are requested every 12 months.

Redetermination: If updated documents regarding the custody or placement of the child receiving services is available, families must update their files when any changes occur regarding the child in their custody that has been enrolled on the program.

[x] Applicant's residence (e.g., must reside within Indian reservation or service area): Parent can provide a copy of a driver's license, mortgage statement, cell phone bill, utility bill, or landlord statement with the correct address. Documents are requested every 12 months.

Redetermination: Families must provide proof of residency every year on the program.

☒ Other: **Certificate of Indian Blood, Tribal ID, or letter from the Tribe stating that the child will be enrolled. Documents are requested every 12 months if not expired.**

Redetermination: If a child's Tribal ID expires, the family will need to update the Tribal ID. If the child was enrolled with a letter from their tribe stating they will be enrolled at the next tribal enrollment meeting, and if that meeting has happened, the family must update the file with the actual tribal ID for the child.

5.2.4 Timeliness of Eligibility Determinations

5.2.4.1 Timeliness of eligibility upon receipt of applications.

Which strategies, if any, will the Tribal Lead Agency use to ensure the timeliness of eligibility determinations upon receipt of applications? Check only those that apply:

☒ Time limit for making eligibility determinations. Describe the length of time: **Once all required paperwork is received and the family qualifies for services, the approval process is within two weeks.**

☒ Track and monitor the eligibility determination process.

☐ Other. Describe:

☐ None.

5.2.5 12-Month Eligibility

Tribal Lead Agencies are required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in a family's eligibility including changes in child's age (including turning 13 years old during the 12-month eligibility period) and changes in family's residency within a Tribal service area (658E(c)(2)(N)(i) and (ii); 45 C.F.R § 98.21(a)(1)).

Tribal Lead Agencies must provide a minimum 12-month eligibility and redetermination period as long as the family's income does not exceed the Federal threshold of 85 percent of the grantee median income. The Tribal Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

5.2.5.1 Minimum 12-month eligibility.

Describe the Tribal Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements: **All families who are approved will be given a 12-month eligibility timeframe upon enrollment. During that 12-month term, families will still need to be enrolled in an educational program, Protective Service program or working to remain on this program. Temporary loss of work or attendance at a training or education program will not affect the minimum 12-month eligibility. If a family is experiencing a permanent eligibility change during the 12-month eligibility period, they will be given a three-month period to secure employment.**

5.2.5.2 Definitions required minimums of temporary change.

Describe and define the Tribal Lead Agency’s policy for each of the minimum required elements listed below that are included in the lead agency’s definition of “temporary change.”

- ☒ Time-limited absence from work for an employed parent due to such reasons as the need to care for a family member, or an illness. Describe or define the Tribal Lead Agency’s policy: **If a family has a time-limited absence from work due to a family member illness or recovery from a medical procedure, there will be no lapse in child care coverage.**
- ☒ Interruption in work for a seasonal worker. Describe or define the Tribal Lead Agency’s policy: **Interruption of work for seasonal workers is allowed.**
- ☒ Student holidays or breaks for a parent participating in a training or educational program. Describe or define the Tribal lead agency’s policy: **Families who are participating in training or an educational program and have student holidays during the 12-month eligibility period will not lose their child care services.**
- ☒ Reduction in work, training, or education hours, as long as the parent is still working or attending a training or an educational program. Describe or define the Tribal Lead Agency’s policy: **As long as the approved parent continues to work at least 20 hours per week or attends their training program at least 10 hours per week there will be no deduction in CCDF child care services.**
- ☐ Other cessation of work or attendance at a training or an educational program that does not exceed 3 months, or a longer period of time established by the Tribal Lead Agency. Describe or define the Tribal Lead Agency’s policy:
- ☒ Changes in residency within the Tribal service area. Describe or define the Tribal Lead Agency’s policy: **If a family moves out of the service area of Pierce County and Federal Way, Washington during the 12-month approved period, they may still continue services until that 12-month eligibility period has ended so as not to disrupt the child(ren)s schedule.**
- ☒ A child turning 13 years old during the 12-month eligibility period. Describe or define the Tribal Lead Agency’s policy: **If a child turns 13 years old during the 12-month eligibility period, they will remain enrolled in the child care program until the beginning of the new fiscal year which is October 1st after their 13th birthday and then the child will be aged out the following fiscal year from the childcare program.**

5.2.5.3 Additional definitions of temporary changes.

Describe any additional conditions in the Tribal Lead Agency’s definition of “temporary changes in activity”: **None.**

5.2.6 Option to discontinue assistance during the 12-month eligibility period.

A Tribal Lead Agency has the option to discontinue assistance during the 12-month eligibility period due to a parent’s non-temporary loss of work, or cessation of attendance at a job training or an educational program; however, it must provide at least 3 months of continued assistance at the

same level after such loss or cessation. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of SMI, assistance cannot be terminated, and the child must continue receiving assistance until the next scheduled redetermination or, at the Tribal Lead Agency's option, for an additional minimum 12-month eligibility period (98.21 (a)).

5.2.6.1 Discontinuation of assistance during a minimum 12-month eligibility period.

Does the Tribal Lead Agency choose to discontinue assistance during the minimum 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity?

☒ Yes. Describe the Tribal Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change: **Families are approved for twelve consecutive months of services upon the initial application approval process. If they are unemployed or stop attending school during this 12-month eligibility period, they will have three months to return to work or school. If they have not secured employment or returned to school/training during the allowed three months they will be terminated from the program. The three month time frame does not apply to student holiday breaks, only to when the individual no longer is enrolled as a student.**

☐ No. The Tribal Lead Agency does not discontinue assistance during the 12-month eligibility period due to a parent's non-temporary change.

5.2.6.2 Job search/continuation of services.

Describe the Tribal Lead Agency's policies and procedures for offering a minimum 3-month period to allow parents to engage in a job search, and to resume participation in an eligible activity.

Describe: Families are offered a three month period to obtain a job or return to school if their current employment expired or their school quarter was complete. During that three months, the family is to be actively seeking employment or applying for training programs. If after the three month period, and the family has not secured employment or entering into a higher education or training program, they will no longer qualify for childcare services and will be removed from the program.

The Tribal Lead Agency may discontinue assistance prior to the next 12-month redetermination in the following limited circumstances. Check only those that apply:

☒ Excessive unexplained absences (after multiple attempts to contact the family, including the prior notification of a possible discontinuation of assistance).

☐ A change in residency outside of the Tribal service area.

☒ Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility. Describe the violations that lead to discontinuing assistance: **If a family is proven to be dishonest on their application regarding the required documentation such as paystubs, school enrollment, children's tribal ID and proof of residency, they will be removed immediately from child care services and not allowed to reapply for child care**

services for a period of one year. Should the family be proven to partake in fraud in receipts of payments for child care services they and their provider will not be allowed to reapply for services for a period of five years.

5.2.7 Change reporting during the 12-month eligibility period.

Families are required to report to the Tribal Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the GMI, taking into account irregular fluctuations in income (98.21(e)(1)).

Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., that impact the Tribal Lead Agency's ability to contact the family or pay the child care providers) and shall not require an office visit. In addition, the Tribal Lead Agency must offer a range of notification options to accommodate families.

Tribal Lead Agencies are required to have procedures and policies in place to ensure that families (especially families receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Tribal Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

5.2.7.1 Requirements for families to report changes.

Does the Tribal Lead Agency require families to report other changes (e.g., change of address, change in need for child care, change in child care provider)?

☐ No.

☒ Yes. Describe **Parents are to notify TOC if there is any change in the original application such as family address, new childcare provider, family income above the maximum 85% median state income or a permanent change in their enrollment in school or employment status.**

5.2.7.2 Ensuring reporting is not burdensome.

Describe how the Tribal Lead Agency ensures that reporting changes are not burdensome and avoid an impact on continued eligibility between redeterminations (e.g., reporting changes by mail, email, online forms, or in-person; extended submission hours): **All changes can be reported by mail, email or in person. Email addresses are on all the applications.**

5.2.8 Procedures for Unlimited Access for Parents

Tribal Lead Agencies are required to have in effect procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF program funds (658E(c)(2)(B); 98.16(t); 98.31).

5.2.8.1 Describe the Tribal Lead Agency's procedures for meeting the parental access requirement: **Parents are told at the time of enrollment at the TOC that they can drop in at any time. New parents stay with their children for several hours during their first days at the TOC. Parents are encouraged to join their children for lunch or to come and visit the classroom when their schedule permits. Parents are also encouraged to share cultural stories, dancing and**

traditions. All providers on the subsidy program are informed of our policy to allow parental access at all times in the application for services where it is listed along with their other requirements.

5.2.9 TANF Agency Definitions

Tribal Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child younger than age 6 (98.16(v); 98.33(f)).

The TANF agency, not the Tribal CCDF lead agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record. This question is for informational purposes.

The Tribal Lead Agency may choose to coordinate with either the Tribal TANF agency or agencies within the service area, the state TANF agency, or both. The definitions provided should be gathered from the TANF agency that is most relevant and works more closely with the Tribal Lead Agency.

5.2.9.1 Identify the TANF agency that established these criteria or definitions:

State TANF Agency: **Washington State DSHS**

Tribal TANF Agency:

5.2.9.2 Provide the following criteria or definitions established by the TANF Agency:

1. "Appropriate child care": **Child care licensed, certified or approved under federal, state or tribal law and regulations for the type of care the family wants and was free to choose within locally available options.**
2. "Reasonable distance": **Within range without traveling farther than is expected in their community.**
3. "Unsuitability of informal child care": **Care that does not meet the definition of appropriate child care.**
4. "Affordable child care arrangements": **Does not cost more than the co-payment would under the WCCC program.**

5.2.9.3 TANF work requirements exceptions.

How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements? Briefly describe the process:

☒ In writing. Describe: **They are informed by the Washington State TANF Agency.**

☐ Verbally. Describe:

5.3 Improving Access for Vulnerable Children and Families

Tribal Lead Agencies are required to give priority for child care assistance to “children with special needs” and children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (e.g., prioritize for enrollment, serve without placing vulnerable populations on waiting lists, waive co-payments, pay higher rates for access to higher quality care, use grants or contracts to reserve slots for priority populations).

5.3.1 Children With Special Needs

Tribal Lead Agencies have flexibility in how they define “children with special needs.” The definition of “children with special needs” may include children with physical or mental disabilities or children who are considered part of “vulnerable populations” (e.g., families with very low incomes, children at risk of receiving protective services, children with teen parents).

5.3.1.1 Describe how the Tribal Lead Agency defines “children with special needs”: **Children of teenage parents, homeless children, documented foster children, relative placement children, adopted foster children, children with a developmental or behavioral disability as documented by a mental health professional or physician, and children whose parents are in a treatment or recovery program documented by an agency.**

5.3.1.2 Children with special needs.

Describe how the Tribal Lead Agency will give priority for child care services to children with special needs: **Children with special needs are given first priority for enrollment. In coordination with the Birth to Six program, children with documented mental, physical, or social concerns are screened, with parental consent, by mental health professionals and given the opportunity to use the subsidy program for specialized child care needs for the child when availability permits.**

5.3.2 Services for Children Experiencing Homelessness

As defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a; 98.2), children experiencing homelessness are those who lack a fixed, regular, and adequate nighttime residence, and who are:

- Sharing the housing of others due to a housing, economic hardship, or similar reason
- Living in hotels, motels, trailer parks, or campgrounds due to the lack of alternative adequate accommodations
- Living in emergency or transitional shelters
- Abandoned in hospitals
- Living in a primary nighttime residence that is public or not designed for human beings
- Living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings
- Migrant children

Tribal Lead Agencies are required to expend CCDF program funds to:

- Permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained—allowing a grace period
- Provide training and TA to child care providers and the appropriate Tribal Lead Agency (or designated entity) staff in identifying and serving children experiencing homelessness
- Conduct specific outreach to families experiencing homelessness (658E(c)(3)(B)(i); 98.51)

5.3.2.1 Access for families experiencing homelessness.

Describe how the Tribal Lead Agency improves access to child care for children and families experiencing homelessness (e.g., adding new providers near homeless shelters): **We allow an extended period (90 days) to obtain the documentations needed to complete the application for services. At a minimum, the parent must prove employment, enrollment in a training program or Protective Services to begin services while we wait for the other documents; Tribal ID, immunizations, legal documentation.**

5.3.2.2 Services for families experiencing homelessness.

Indicate how services are prioritized for children experiencing homelessness, as defined by the Tribal Lead Agency. Check only those that apply:

☒ Prioritize for enrollment in child care services

☒ Serve without placing on waiting list

☒ Waive co-payments (on a case-by-case basis) as described in 5.4.1(g)

☐ Pay a higher rate for access to higher quality care

☐ Using grants or contracts to reserve spots

5.3.2.3 Outreach for families experiencing homelessness.

Describe how the Tribal Lead Agency conducts outreach to children experiencing homelessness and their families: **Resources are given to families experiencing homelessness such as:**

1. **Child Care Aware: free resources for families seeking child care early learning information and financial assistance.**
2. **Homeless Child Care Program-supports Pierce County children and families through short-term child care subsidy and enhanced referral coordination and basic needs resources.**
3. **Kaleidoscope Plan & Learn Groups: Weekly facilitated groups offering children’s early learning through every day activities, and to build relationships with other participants. These weekly groups are led in families’ native languages and within their communities.**
4. **Coordination with Tribal Protective Services Programs.**

5.3.2.4 Grace periods.

Tribal Lead Agencies must establish a grace period that allows children experiencing homelessness and children in foster care to receive CCDF assistance while providing their

families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements. The length of such a grace period shall be established in consultation with the state, territorial, or Tribal health agency (658E(c)(2)(l)(i)(I); 98.41(a)(1)(i)(C)).

Describe the grace period and how the length of the grace period was established in consultation with state or Tribal health agencies for:

- a) children experiencing homelessness: **Children experiencing homelessness: The length of time established as a grace period to obtain required documentation for enrollment in this CCDF program for children experiencing homelessness has been established to be 90 days per the Puyallup Tribal Health Authority (PTHA).**
- b) children in foster care: **The length of time established as a grace period to obtain required documentation for enrollment in this CCDF program for foster children has been established to be 90 days per the Puyallup Tribal Health Authority (PTHA).**

5.3.3 Additional Priority Rules or Categories

5.3.3.1 Does the Tribal Lead Agency have additional priority rules or categories?

☒ No.

☐ Yes. Define the additional priority rule(s):

5.3.4 Building the Supply of Child Care

Tribal Lead Agencies are required to develop and implement strategies to increase the supply of child care services and to improve the quality of care for children who are typically underserved.

These populations include children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (See

<https://www.acf.hhs.gov/occ/policy-guidance/building-supply-high-quality-child-care> for additional guidance.)

5.3.4.1 Supply and quality improvement strategies.

Describe the strategies being implemented by the Tribal Lead Agency to increase the supply and to improve the quality of child care services for each of the following groups of children.

Children in underserved areas. Describe: **TOC has increased the building by the addition of two classrooms to accommodate the waiting list. All providers on the subsidy program are offered trainings and classes through Bates Technical College to obtain ECE degrees.**

Provider Payment Rates That Support High-Quality Care Financial Incentives for Expanding the Supply of Highly Qualified Teachers and Caregivers through professional development, training and education.

Providing access to new developmentally appropriate materials such as; building, art, large motor toys, water play, science materials, and a wide-array of DAP materials.

Ongoing Evaluation and Assessment of learning, environment and teaching strategies.

Infants and toddlers. Describe: **Expanding the Outdoor Classroom environment to meet the physical and developmental needs of infants and toddlers. TOC has increased the building by the addition of two classrooms to accommodate the waiting list. All providers on the subsidy program are offered trainings and classes through Bates Technical College to obtain ECE degrees.**

Children with disabilities. Describe: **Birth to Six Program is involved with all children who apply for services with developmental and behavior needs and families are offered specialized child care for their specific needs is TOC is unable to accommodate the family. Children who meet the underserved definition receive additional support and services through the development of the Individual Learning Plan (ILP).**

Children who receive care during non-traditional hours. Describe: **Children who need care for non-traditional hours are referred to on-line care sites for locations near the family that can accommodate their needs. We reach out to our service area daycare centers to see what their hours of operations are and if they are willing to accommodate earlier or later hours for our families.**

5.4 Family Contribution to Payments

Tribal Lead Agencies must establish and periodically revise a sliding-fee scale that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF program funds (658E(c)(5)).

5.4.1 Family Contribution to Payment

In addition to income and size of the family, the Tribal Lead Agency may use other factors when determining family contributions/co-payments. Tribal Lead Agencies, however, may not use the cost of care or amount of a subsidy payment in determining copayments (98.45(k)(2)).

5.4.1.1 Complete the co-payment information based on the most populous area of the service area (defined as the area serving the highest number of CCDF children). Calculate the percent of income by dividing the co-payment by the family income.

	Lowest income level where family is charged a co-pay (greater than \$)	What is the monthly co-payment for a family of this size based on the lowest income level?	What percentage of income is this co-payment at the lowest income level?	Highest income level before a family is no longer eligible?	What is the monthly co-payment for a family at the highest income level?	What is the percentage of income at the highest income level?
Family size of 1	1133.00	50.00	4.41	3984.00	100.00	2.51
Family size of 2	1526.00	50.00	3.28	4575.00	100.00	2.19

Family size of 3	1919.00	50.00	2.61	5651.00	100.00	1.77
Family size of 4	2313.00	50.00	2.16	6727.00	100.00	1.49
Family size of 5	2706.00	50.00	1.85	7804.00	100.00	1.28

5.4.1.2 What is the effective date of the sliding-fee scale(s)? 1/1/2023

5.4.1.3 Will the attached sliding-fee scale be used in all parts of the service area?

☒ Yes.

☐ No. Attach additional sliding-fee scale(s). Attachment(s) #: **Document was not provided by TLA.** Effective date:

5.4.1.4 Calculation of family contribution.

How will the family's contribution be calculated, and to whom will it be applied? Check only those that apply:

☒ The fee is a dollar amount and:

☐ The fee is per child, with the same fee for each child.

☐ The fee is per child and is discounted for two or more children.

☐ The fee is per child up to a maximum per family.

☐ No additional fee is charged after a certain number of children.

☒ The fee is per family.

☐ The contribution schedule varies because it is set locally and/or regionally. Describe:

☐ Other. Describe:

☐ The fee is a percentage of income and:

☐ The fee is per child, with the same percentage applied for each child.

☐ The fee is per child, and a discounted percentage is applied for two or more children.

☐ The fee is per child up to a maximum per family.

☐ No additional percentage is charged after a certain number of children.

☐ The fee is per family.

☐ The contribution schedule varies because it is set locally and/or regionally (as indicated in 5.4.1.3). Describe:

☐ Other. Describe:

5.4.1.5 Additional factors to determine family's co-payment.

Does the Tribal Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? *Reminder:* Tribal Lead Agencies may not use the cost of care or amount of a subsidy payment in determining copayments (98.45(k)(2)).

☒ No.

☐ Yes. Check and describe those additional factors below:

☐ Number of hours the child is in care. Describe:

☐ Lower co-payments for a higher quality of care, as defined by the Tribal Lead Agency. Describe:

☐ Other. Describe:

5.4.1.6 Affordability of family contribution/co-payment.

How will the Tribal Lead Agency ensure that the family contribution/co-payment is affordable and is not a barrier to families receiving CCDF program funds? Check only those that apply:

☒ Limit the maximum co-payment per family to a dollar amount. List the maximum dollar amount, and describe: **Based on the sliding fee scale, the family will pay a set monthly rate. The maximum dollar amount a family will pay is \$100 per month.**

☐ Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage, and describe:

☐ Minimize the abrupt termination of assistance before a family can afford the full cost of care ("the cliff effect") as part of the graduated phase-out of assistance. Describe:

☐ Other. Describe:

5.4.1.7 Waiving family contributions/co-payments.

The Tribal Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size; for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility; or for families who meet other criteria established by the Tribal Lead Agency (98.45(k)(4)).

Does the Tribal Lead Agency waive family contributions/co-payments? Check only those that apply:

☒ Yes, the Tribal Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.

☒ Yes, the Tribal Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Tribal Lead Agency for purposes of CCDF eligibility.

☒ Yes, the Tribal Lead Agency waives family contributions/co-payments for other criteria established by the Tribal Lead Agency (e.g., families experiencing homelessness, migrant

workers, victims of human trafficking, families receiving TANF). Describe the criteria: **If a family chooses to use a licensed center that exceeds the allowed monthly payment through this CCDF program, then the family will pay the difference and will not be charged a monthly co-payment if the overage exceeds the set co-payment.**

☐ No, the Tribal Lead Agency does not waive family contributions/co-payments.

5.4.1.8 Allowance of additional amounts exceeding subsidy payment.

Does the Tribal Lead Agency allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

☐ No.

☒ Yes. If yes, describe the policy and/or procedure: **TOC rates are comparable to the market rate of our service area. Parents who choose to use a provider that charges more than the TOC rates are told at the time of enrollment that they will be responsible for the balance due after this program makes the maximum allowed payment to the provider per month. No co-payments will be charged to these families that have to cover the cost overages charged by their licensed providers.**

6 Ensure Equal Access to Quality Child Care for Low-Income Children (*Tribes with Medium and Large Allocations*)

6.1 Description of Direct Child Care Services

CCDF direct services may be provided through a subsidy program in which the Tribal Lead Agency offers certificates for families to use in any approved child care setting; through a Tribal CCDF-operated center; or through grants or contracts that allocate slots with a provider who offers child care services. The Final Rule established three categories of care:

- Center-based child care: Group care provided in a facility outside of the child’s or provider’s home
- Family child care: Care provided in a private residence other than the child’s residence
- In-home child care: Care provided in the child’s home

***Tribal Lead Agencies with large allocations* are required to operate a certificate program that permits families to choose care from all three categories of care.**

6.1.1 Child Care Services (658E(c)(2)(A); 658E(c)(3)(A)-(B); 658P(6)-(7); 98.16(i)(1); 98.30; 98.50)

6.1.1.1 In-home care limits.

If the Tribal Lead Agency allows for in-home care (i.e., care provided in the child’s own home), as described in 98.16(i)(2), does the Tribal Lead Agency limit the use of in-home care in any way?

☐ No.

☒ Yes. What limits does the Tribal Lead Agency set? Check only those that apply:

☐ Restricted based on the minimum number of children in the care of the provider due to the Fair Labor Standards Act (minimum wage) requirement. Describe:

☒ Restricted based on the provider meeting a minimum age requirement (a relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2). Describe: **All providers must be 18 years of age or older.**

☐ Restricted based on hours of care (e.g., a certain number of hours, non-traditional work hours). Describe:

☐ Restricted to care by relatives only. Describe:

☐ Restricted to care for children with special needs or medical conditions. Describe:

☐ Restricted to in-home providers that meet additional health and safety requirements beyond those required by the CCDF program. Describe:

☐ Other. Describe:

6.1.1.2 Funding direct child care services by the Tribal Lead Agency.

How does the Tribal Lead Agency fund its direct child care services? Check only those that apply:

☒ Certificates. *(Tribal Lead Agencies with large allocations must operate certificate programs).*

☐ Grants or contracts with approved child care providers.

☒ CCDF-funded Tribally Operated Center.

1. Does the Tribal Lead Agency provide child care services exclusively through a Tribally Operated Center(s)?

☐ Yes *(option available only to Tribal Lead Agencies with medium allocations).*

Skip the rest of Section 6. Continue to Section 7.

☒ No. **Continue to the next question.**

6.1.1.3 Provision of grants or contracts.

CCDF direct services may be provided through grants or contracts that allocate slots with a provider who offers child care services. Does the Tribal Lead Agency use grants or contracts for child care slots to increase the supply and/or to improve the quality of child care programs (658E(c)(2)(M))?

☒ No, grants or contracts are not used for the purposes of increasing supply or improving quality.

☐ Yes. Grant- or contract-funded slots are used to increase the supply and/or to improve the quality of the following types of child care programs through (check only those that apply):

☐ Providers offering Native language education or a culturally based curriculum.

☐ Providers serving specific populations. (Please reference and complete Table 6.1.1.4 below.)

☐ Providers serving children needing care during non-traditional hours.

☐ Providers meeting or exceeding higher quality standards, such as programs with higher QRIS ratings or nationally accredited programs.

☐ Providers offering bonuses, higher pay, or other financial incentives to teaching staff for reaching higher levels of education and/or qualifications.

☐ Other. Describe:

Table 6.1.1.4:

<i>Grants or Contracts Are Used in Child Care Programs That Serve</i>	<i>To Increase the Supply of Care</i>	<i>To Increase the Quality of Care</i>
i. Children with disabilities	<input type="checkbox"/>	<input type="checkbox"/>
ii. Infants and toddlers	<input type="checkbox"/>	<input type="checkbox"/>
iii. School-age children	<input type="checkbox"/>	<input type="checkbox"/>
iv. Children needing non- traditional hour care	<input type="checkbox"/>	<input type="checkbox"/>
v. Children experiencing homelessness	<input type="checkbox"/>	<input type="checkbox"/>
vi. Children with diverse linguistic or cultural backgrounds	<input type="checkbox"/>	<input type="checkbox"/>
vii. Children in underserved areas	<input type="checkbox"/>	<input type="checkbox"/>
viii. Children in urban areas	<input type="checkbox"/>	<input type="checkbox"/>
ix. Children in rural areas	<input type="checkbox"/>	<input type="checkbox"/>
x. Other populations, please specify	<input type="checkbox"/>	<input type="checkbox"/>

6.1.2 Methods to Inform Families of Child Care Provider Categories

6.1.2.1 Informing families of child care provider options.

How are families informed of the option to choose from the full range of child care provider categories—for example, center-based child care, family child care, in-home child care providers, and other provider types as applicable (658E(c)(2)(A)(i); 658P(2); 658Q)? Check only those that apply:

☐ Certificate that also includes information about the choice of providers, including high-quality providers

☒ Consumer education materials on choosing child care

☒ Verbal communications at the time of application

☐ Community outreach, workshops, or other in-person activities

☐ Other. Describe:

6.2 Assessing Child Care Market Rates

The regulations at 98.83(d)(1)(iv) exempt all Tribal Lead Agencies from the requirement to use a market rate survey or alternative methodology to set provider payment rates because many Tribal service areas are in rural, isolated areas, making such a requirement difficult.

Although they are exempt from the market rate survey requirement, **Tribal Lead Agencies must set sufficient base payment rates to provide equal access to the full range of child care services and must set rates that cover the costs of providing higher quality care.** At a minimum, *Tribal Lead Agencies with large allocations* must operate certificate programs and are required to show how payment rates are adequate, including a description of how payment rates are established; how they support the health, safety, quality, and staffing requirements, along with the cost of providing higher quality care; and, where applicable, how they support cultural and linguistic appropriateness.

Tribal Lead Agencies, at their option, may still conduct a market rate survey or an alternative methodology approach or use the state's methodologies to set payment rates. If using an alternative methodology, a Tribal Lead Agency may use child care resource and referral data to assess child care costs in its service area. See <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2018-01> for additional alternative methodology guidance.

6.2.1 Determining Cost of Care

6.2.1.1 Cost of care by Tribal Lead Agency.

How did the Tribal Lead Agency determine the cost of care? Please indicate if any of the following sources of information were used in assessing the cost of care or price of care within the service area. Check only those that apply:

☐ State market rate survey. State(s): Date(s) completed:

☐ State alternative methodology. State(s): Date(s) completed:

☐ Child care resource and referral data. Describe:

☒ Tribal market rate survey. Date completed: **3/1/2022**

☐ Alternative methodology. Date completed:

☐ Other. Describe:

6.3 Establishing Adequate Payment Rates

Tribal Lead Agencies are required to establish payment rates for child care services that ensure eligible families have equal access to child care services comparable to those services provided to families not eligible to receive CCDF services (658E(c)(4); 98.16(r); 98.45(a); 98.45(b)(1)-(2); (98.45(b)(7)-(8)).

6.3.1 Establishing Payment Rates

6.3.1.1 Describe how the Tribal Lead Agency establishes payment rates: Payment rates were established by requesting several area daycares and our in-home providers for their rates, then we compared them to the Washington State rates and based our rates on the EA Level 4 rate for Washington State. The state had indicated that the Level 4 rate providers access to high quality child care and support state PreK standards which are higher standards than state child care licensing.

6.3.2 Base Payment Rates

Tribal Lead Agencies are required to set base payment rates *at least* at a level sufficient to cover the costs to the provider of the health, safety, quality, and staffing requirements included in the CCDBG Act and Final Rule.

6.3.2.1 Description of how base payment rates support needs of providers.

Describe how the Tribal Lead Agency's base payment rates enable providers to meet the health, safety, quality, and staffing requirements under the CCDF program: **The TLA is basing their rate on EA Level 4 DCYF Washington State rates to insure sufficient payment to providers which should allow them to adequately staff their facility. The state had indicated that the Level 4 rate providers access to high quality child care and support state PreK standards which are higher standards than state child care licensing.**

6.3.3 Base Rates Support of Quality

6.3.3.1 Description of how base rates support needs of Tribal communities.

Describe how the Tribal Lead Agency's base payment rates support quality and meet the needs of the Tribal communities they serve (e.g., where applicable, cultural and linguistic appropriateness): **The state had indicated that the Level 4 DCYF Washington State rate providers provide access to high quality child care and support state PreK standards which are higher standards than state child care licensing standards.**

6.3.4 Payment Rates

The payment rates should reflect the variety of care offered in the Tribal Lead Agency's program (e.g., different rates based on the child's age, the category of care). Tribal Lead Agencies are reminded that payment rates cannot be based on a family's eligibility, such as receiving TANF or participation in education or training. Include all payment rates and the definition of service areas in the attached payment rates.

For center-based providers and family child care providers, provide the full-time weekly base payment rate for each age group that the Tribal Lead Agency serves. If weekly rates are not published, then the Tribal Lead Agency will need to calculate its equivalent. If the payment rates differ, use the most common payment rates for center-based providers and family child care provider.

6.3.4.1 Full-time weekly base payment rates for center-based care

Infant (6 months): **415**

Toddler (18 months): **360**

Preschooler (4 years): **320**

School-age child (6 years; Based on full-day, full-year rates that would be paid during the summer): **235**

6.3.4.2 Payment rates for family child care providers

Infant (6 months): **340**

Toddler (18 months): **295**

Preschooler (4 years): **270**

School-age child (6 years; Based on full-day, full-year rates that would be paid during the summer): **235**

6.3.4.3 Effective date of payment rate.

The effective date of those payment rates is: **1/1/2023** (Include tiered/differential rates in the payment rate attachment(s).)

6.3.5 Tiered, Differential, or Add-On Rates

Tribal Lead Agencies can choose to establish tiered rates, differential rates, or add-ons to their base rates. This process allows them to increase payments for targeted needs (i.e., a higher rate for children with special needs as an incentive and for additional costs).

Tribal Lead Agencies must set payment rates that ensure eligible families have the same access to care as families not eligible for subsidies. They may set the rates based on what providers charge for care, but also must take into account the cost of care to providers. Providers usually set their prices based on a number of factors impacted by the cost of providing care, such as staff salaries and benefits, training and professional development, curricula and supplies, group size and child/staff ratios, enrollment levels, facility size, and other costs. Taking those factors into account means that Tribal Lead Agencies may set different rates for different kinds of care; for example, payment rates for infants may be higher than rates for school-age children because it costs providers more to offer infant care given more restricted child/staff ratios.

In addition, Tribal Lead Agencies can choose to set tiered payment rates or create rate add-ons (sometimes called “differential rates”) to their regular rates to increase payments for targeted needs. For example, a Tribal Lead Agency could encourage more care during non-traditional hours by paying providers who work evenings a 15-percent add-on over the regular payment rate. An example of tiered rates is paying family child care providers who earn a child development associate (CDA) 5 percent more than the regular rate and paying those who earn accreditation 10 percent more. Tiered rates and add-ons are often used to encourage and support care for specific populations (such as children with special needs, infants and toddlers, school-age children, children in rural areas, or children experiencing homelessness) and to encourage providers to increase or sustain their program quality.

6.3.5.1 Types of tiered payment or differential rates by Tribal agency.

Does the Tribal Lead Agency provide any type of tiered payment or differential (add-on) rates (658E(c)(4)(C)(ii))?

☐ No.

☒ Yes. Describe each of the tiered or differential (add-on) rates that the Tribal Lead Agency has chosen to implement. Check only those that apply:

☐ Tiered or differential rate for non-traditional hours

☒ Tiered or differential rate for children with special needs (special needs as defined by the Tribal Lead Agency)

☐ Tiered or differential rate for infants and toddlers

☐ Tiered or differential rate for school-age programs

☐ Tiered or differential rate for higher quality (quality as defined by the Tribal Lead Agency)

☐ Other tiered or differential rates. Describe:

6.3.6 Payment Rates to Support Equal Access

6.3.6.1 Ensuring sufficient payment rates for equal access.

How does the Tribal Lead Agency ensure that payment rates are sufficient to ensure equal access? Equal access would offer children receiving CCDF subsidies access to the same services (e.g., type of care, quality of care) as children not receiving CCDF subsidies.

To certify, check only those that apply and provide a description of the rationale that the Tribal Lead Agency used to determine equal access (658E (c)(4)(A)).

☐ Feedback from families, including family/parent surveys or family/parent complaints. Describe:

☒ Feedback from providers, including provider surveys or provider complaints. Describe: **Our Tribal Market Rate Survey was compiled by using the State of Washington rates as well as our current providers rates to come up with the payment rates that are comparable to same services in our area.**

☐ Payment rates are set at the 75th percentile or higher of the most recent state or Tribal market rate survey. Describe:

☐ Using tiered rates/differential rates (as described in 6.3.5) to increase access for high-need populations. Describe:

☐ Other. Describe:

6.4 Implement Generally Accepted Payment Practices and Ensure Timeliness of Payments

The Tribal Lead Agency must establish payment practices that apply to all CCDF child care providers in the Tribe's service area, including measures to ensure timely payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent feasible, the Tribal Lead Agency must also

support the fixed costs of providing child care services by delinking provider payments from a child’s occasional absences by (1) paying based on a child’s enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Tribal Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Tribal Lead Agencies are also required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless the Tribal Lead Agency is able to demonstrate that the following policies are not generally accepted in its service area or among particular categories or types of providers, Tribal Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying families (658E(c)(2)(S); 98.45(l)(3)).

In addition, there are other generally accepted payment practices that are required. **Tribal Lead Agencies are required to ensure that child care providers receive payment for any services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family’s eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4)–(6); 658E(c)(2)(S)(ii)).**

6.4.1 Timeliness of Payments

6.4.1.1 Ensuring timeliness of payments.

The Tribal Lead Agency must ensure the timeliness of payments by either option below. Check which option the Tribal Lead Agency is implementing:

☐ **[]** Paying providers prior to the delivery of child care services. Describe the policy or procedure:

☒ **[x]** Paying providers within no more than 21 calendar days of the time a complete invoice for services has been received from the provider. Describe the policy or procedure: **Invoices are due at the first of the month following services. Once approved, calculated and entered, it usually takes a week for a check to be received by mail to the provider. We ask for a two-week time frame for check distribution in case of vacations or sick leave of staff processing checks.**

6.4.2 Delinking Provider Payments from Occasional Absences

To the extent feasible, the Tribal Lead Agency must support the fixed costs of providing child care services by delinking provider payments from a child’s occasional absences. Tribal Lead Agencies that do not choose one of the three options listed below have the flexibility to use an alternative approach but must provide justification that the alternative approach is as thorough as the three options provided. (For example, a Tribal Lead Agency may choose to allow for additional excused and/or unexcused absences above the level of 85 percent or allow for more than five absences and

still provide for the full payment. They also may choose an alternative time period for measuring absences, such as using multiple months instead of just 1 month).

6.4.2.1 Supporting fixed costs of providing child care services.

The Tribal Lead Agency must support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences. Check the option below that the Tribal Lead Agency is implementing. The lead agency must choose at least one of the following:

☐ Paying providers based on a child's enrollment rather than paying based on attendance.

☐ Providing full payment to providers if the child attends at least 85 percent of the authorized time.

☒ Providing full payment to providers if the child is absent for 5 or fewer days in a month.

☐ Using an alternative approach for which the Tribal Lead Agency provides justification in its plan. Describe the alternative approach and provide a justification that this approach is not weaker than the three options listed above:

6.4.3 Payment Practices

The Tribal Lead Agency's payment practices must reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. Describe the policy or procedure for the following two practices or evidence that such practices are not generally accepted in its service area (658E(c)(2)(S); 98.45(l)(3)).

6.4.3.1 Paying on a part-time or full-time basis

Paying on a part-time or full-time basis (rather than paying hourly or for smaller increments of time). Describe the policy or procedure or describe why this practice is not generally accepted:

Providers are paid on a daily rate with a listed maximum rate per month. Full time rate is considered 5 or more hours per day. Part time rate is less than 5 hours per day.

6.4.3.2 Reasonable mandatory registration fees by provider.

Paying for reasonable mandatory registration fees that the provider charges to private-paying families. (This requirement does not include other fees, such as activity or transportation fees.)

Describe the policy or procedure or describe why this practice is not generally accepted: **TLA will cover reasonable yearly registration fees if included in the monthly billing.**

6.4.4 Payment Disputes

The Tribal Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, such as rates, schedules, any fees charged to the providers, and the dispute-resolution process.

6.4.4.1 Describe the policy or procedure: Once a provider is approved to provide child care services, a Certificate for Child Care Assistance is emailed to the provider and parent. This certificate

details the name of the family, dates of approved services, names and birth dates of the children and the full and part time rates paid. TLA lists all the information about the provider and the possible total monthly payment allowed per our payment rates and the co-payment due from the family. A payment calendar invoice is enclosed along with a Welcome to the Program letter. Contact information for any payment dispute is listed on the welcome letter. If there is a payment dispute, the provider will notify the TLA with details where the discrepancy is. If there is an error, the corrected payment will be processed as soon as possible (within 7 days of receipt of error). If there is an overpayment, repayment amounts will be mutually agreed upon and deducted monthly until the overpayment is paid in full.

6.4.5 Notifying Providers of Eligibility Changes

The Tribal Lead Agency ensures prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Tribal Lead Agency becomes aware that such a change will occur.

- 6.4.5.1 Describe the policy or procedure: A notice is sent to the provider and parent no later than the day that the TLA becomes aware that such change will occur. This notice could include that an increase in the child's age changes the payment rate, the family co-payment may have changed due to flex in family income, or notice that the family no longer qualifies for the program listing when and if services will end. Notices may be in writing or email or phone.

6.4.6 Payment Appeal and Resolution Process

The Tribal Lead Agency ensures it has a timely appeal and resolution process for payment inaccuracies and disputes.

- 6.4.6.1 Describe the policy or procedure: The Welcome to the Program letter sent to all new providers states the contact information should there be a payment dispute. If a provider disputes a payment, TLA staff will review the complaint to make a determination and contact the provider with a resolution or findings within 7 business days of the original date of the dispute of payment. Upon notification, TLA will begin processing payment inaccuracies on the day they are received. If a payment is lost, the provider will contact TLA and a stop payment will be issued once our Accounting office verifies that the check had not been cashed. The reissue of the check will be done immediately and payment should be made within days of receipt of the request. Over payments for services will be deducted on the next monthly payment. If the over payment is of a substantial sum. Monthly payments may be deducted up to six months to repay the overpayment as not to be too much of a hardship on the provider.

7 Promote Family Engagement Through Outreach and Consumer Education (Tribal Lead Agencies with Medium and Large Allocations)

Tribal Lead Agencies are required to support families in making informed choices about the services that best suit their needs. Tribal Lead Agencies may provide information to families through the child care assistance system, partner agencies, and other methods of their choosing.

In this section, Tribal Lead Agencies will address how information on accessing high-quality child care and other financial assistance is made available to eligible families. In addition, Tribal Lead Agencies will describe how information on developmental screenings and best practices concerning children’s development, including their social-emotional development, is shared. Tribal Lead Agencies have the option to share this information through a consumer education website targeting families receiving CCDF assistance, the general public, and when appropriate, child care providers. Tribal Lead Agencies will also describe the parental-complaint process in this section. Finally, this section addresses the consumer statement that is provided to families supported with CCDF program funds.

Tribal Lead Agencies are not subject to the requirement to produce a consumer education website, but must still collect and disseminate the provider-specific consumer education information above. Tribal Lead Agencies may do so using methods other than a website such as making paper copies of consumer education information available to the public.

7.1 Parental-Complaint Process

The Tribal Lead Agency must certify that the Tribe maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)).

Tribal Lead Agencies must provide a detailed description of the reporting process for parents to submit complaints about child care providers, including the following information:

- The process for substantiating complaints
- The manner in which the Tribal Lead Agency maintains a record of substantiated parental complaints
- Ways that the Tribal Lead Agency makes information on such parental complaints available to the public on request (98.16(j); 98.32(b)(c)(d)).

7.1.1 Process for Reporting Complaints

7.1.1.1 Process of reporting complaints by Tribal Lead Agencies.

Describe the Tribal Lead Agency’s reporting process through which parents can submit complaints about child care providers (including a Tribally Operated Center, if applicable). Provide a link if it is a Web-based process: **In the event that a parent is unsatisfied with the care their child is receiving from the CCDF provider, they may file a Complaint. The Parental Complaint form is available via fax, mail, email or at the main office located at 3580 E Grandview, Tacoma, WA 98404. Parental Complaint forms may also be found in the GELC**

Parent and Subsidy Handbooks given out at enrollment.

7.1.2 Process for Responding to Complaints

7.1.2.1 Process of responding to complaints by Tribal Lead Agencies.

Describe the Tribal Lead Agency's process and timeline for screening, substantiating, and responding to complaints regarding CCDF providers. Describe whether the process includes monitoring and highlight any differences in processes for providers monitored by the Tribal Lead Agency, a state-licensing agency, or another entity or agency. *Note:* Monitoring details are referenced in section 2: **Once a completed Parental Complaint form is received, CCDF Administrator will screen the parental complaint and possibly interview the complaining parent for clarification or for more information within 24 hours of receipt of the complaint. Assignment of an investigator will prompt the search for other parental complaints and review of monitoring reports. An investigator will be assigned within 24 hours of the receipt of a Parental Complaint. An investigation must be conducted within 24 hours of the investigator assignment. A Parental Complaint Investigation Report must be completed within 7 calendar days of the investigation (depending on the nature of the complaint it may take longer). A response from a completed Parental Complaint Investigation Report will be sent to the complainant with 7 calendar days of the completion of the Parental Complaint Investigation Report. An investigation includes a monitoring visit to the child care provider in question. The investigation includes, but is not limited to, observations and interview with staff, parents, and other witnesses. If the resulting Parental Complaint Investigation finds that the complaints is valid and breaks CCCDF or licensing rules, the finding is Substantiated. Substantiated complaints require a Corrective Action Plan and may include a Licensing Violation and depending on the severity of the Substantiated complaint, a revocation of Child Care License. Unsubstantiated reports are filed and a letter explaining the findings without any Personal Identification is sent to the parent who filed the complaint.**

7.1.3 Maintaining Parental Complaints Records

7.1.3.1 Maintaining a record of substantiated parental complaints.

Certify by describing how a Tribal Lead Agency, a state-licensing, or another entity or agency maintains a record of substantiated parental complaints. Highlight any differences in processes for CCDF and non-CCDF providers and Tribally regulated, licensed, and license-exempt providers. Additionally, how does the Tribal Lead Agency coordinate with a state-licensing agency, or another entity or agency to ensure that the complaint has been addressed: **All Substantiated Parental Complaints are kept in a locked filing cabinet, are made available upon written request, and an Excel Spreadsheet will be used to monitor the complaints and actions thereafter listing dates, times, investigators, reports, findings, etc. Any state licensed complaints can be found through DCYF at <http://www.dcyf.wa.gov/safety/child-care-complaints>. The Subsidy Enrollment Staff will search this site for any documented complaints during the enrollment process.**

7.1.4 Providing Public Access to Substantiated Parental Complaints

7.1.4.1 Information about parental complaints available to the public.

Certify by describing how the Tribal Lead Agency, a state-licensing agency, or other entity/agency makes information about substantiated parental complaints available to the public upon request: **TLA certifies that any and all Substantiated Parental Complaints will be made available to the public upon written request. Complaints will not have any personal identifiable information. The report for the public to request will have Date of Complaint, Nature of Complaint, Time of Complaint, Child Care Provider Name and Address, Investigation Information including date and time of visit, Interviews (Adult A, Child B), substantiated or unsubstantiated, policies and rules that were deviated from, results of requested changes, and Corrective Action Plan.**

7.2 Consumer Education for Families, Providers, and the Public

7.2.1 Consumer Education Accessibility and Providing Monitoring and Inspection Information

Tribal Lead Agencies are required to provide information to families, the general public, and when applicable, child care providers through a method of their choice, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The available information must include provider-specific information, monitoring and inspection reports about the provider, and the quality of each provider (if such information is available about the provider) (658E(c)(2)(D); 98.33(a)). The information should also provide access to an annual service area report on deaths, serious injuries, and the number of substantiated cases of child abuse that have occurred in child care settings. To assist families with any additional questions, the information should provide contact information to local CCR&R organizations and any other agencies that can assist families in better understanding the information.

7.2.1.1 Ensuring information is consumer-friendly and accessible.

Describe how the Tribal Lead Agency ensures that its information is consumer-friendly and easily accessible. (*Note:* Although there is no Federal CCDF definition for easily accessible, Tribal Lead Agencies may consider easily accessible information to be simple to obtain, written in plain language, and easy to understand.): **TLA provides on-line sources from Child Care Aware, Child Care Resources and Early Achievers in our applications for families to look at records on their potential choice of child care provider. All of these websites are consumer-friendly and easily accessible. The TOC webpage lists any findings on current CCDF providers on the program with easy access for parents. This information includes provider-specific information, monitoring and inspection reports about the provider and an annual service report detailing any serious injuries and the number of substantiated cases of child abuse that occurred in the child care setting. All contact information is included on the webpage should a family have additional questions. All manuals and policies and procedures for the TLA lists on-line resources as well.**

7.2.1.2 Monitoring and inspecting child care providers.

Describe how the Tribal Lead Agency informs families, providers, and the public on how the Tribal Lead Agency and/or another entity or agency conducts monitoring and inspections of child care providers (including Tribally Operated Centers, if applicable). Refer to Section 2.3

where monitoring enforcement policies and practices for CCDF providers are described: **Upon enrollment to the program, all families are informed that the providers they have chosen for their child care needs are subject to monitoring and inspecting their premises where the children will be cared for, with the exception of relative providers. Potential CCDF providers are informed in the TOC Employee Handbook and the Subsidized Child Care Assistance Manual that each provider/center will provide access to our Quality Support Coordinators to complete the required monitoring and inspections of their facilities and homes within 90 days of employment and during each year of employment with this program. Upon acceptance to the program the initial inspection is scheduled and an unannounced inspecting will soon follow.**

7.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

7.3.1 Dissemination of Policies and Procedures for Background Checks, Regulated Providers, and Provider Quality

7.3.1.1 Consumer information about conducting background checks.

Describe how the Tribal Lead Agency informs families, providers, and the public on the policies and procedures related to comprehensive background checks for providers/staff members of child care providers, and the offenses that prevent individuals from being employed by a child care provider or a provider from receiving CCDF program funds. (*Note:* Background check policies and processes are described in Section 2.5): **To inform families, providers, and the public on the policies and procedures related to comprehensive background checks we offer training, Parent Night information, distribution of manuals and webpage social media information.**

7.3.1.2 Listing licensed providers.

Describe how the Tribal Lead Agency lists all licensed providers and, at the discretion of the Tribal Lead Agency, all providers eligible to deliver Tribal CCDF services. Providers caring for children to whom they are related do not need to be included. Check only those that apply:

- ☐ Not applicable, as this Tribal CCDF Program does not serve any licensed providers and the Tribal Lead Agency opts not to list all providers eligible to deliver Tribal CCDF services.
- ☐ Prepares a document with a list of providers
- ☒ Uses the state's website link for a localized list of providers searchable by ZIP Code
- ☒ Uses a CCR&R agency to obtain lists of providers
- ☐ Other:

7.3.1.3 Quality information and reporting of quality ratings

Tribal Lead Agencies must also identify specific quality information about each child care provider for whom they have quality information. Tribal Lead Agencies may determine the type of quality information provided. How does the Tribal Lead Agency report quality ratings or

other quality information included with provider-specific information? Check only those that apply:

- ☐ Not applicable, as the Tribal Lead Agency does not have a QRIS or obtain any quality information
- ☐ QRIS managed by the Tribal Lead Agency
- ☒ QRIS managed by the state
- ☐ National accreditation
- ☐ Enhanced licensing system
- ☐ Meeting Head Start/Early Head Start Program Performance Standards
- ☐ Meeting prekindergarten (preK) quality requirements
- ☐ School-age standards, where applicable
- ☐ Other. Describe:

7.3.2 Monitoring and Inspection Reporting

Tribal Lead Agencies are required to make monitoring and inspection reports available about each licensed provider and about each non-relative provider eligible to provide CCDF services. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language (i.e., communication the audience can understand the first time they read it), as defined by the Tribal Lead Agency and must be timely to ensure that the results of the reports are available and easily understood by parents and families when they are deciding on a child care provider. Tribal Lead Agencies must provide at least 3 years of reports (when available), beginning October 1, 2019, and going forward.

7.3.2.1 Describe how the reports are made available to the public.

- ☒ Online (e.g., uses the state's website link)
- ☐ Hard copy by request
- ☐ Require provider to post
- ☐ Other. Describe:

7.3.2.2 What is the Tribal Lead Agency's definition of plain language? (Note: If states issue monitoring and inspection reports, "Not applicable, state issues monitoring and inspection reports.") **Communication the audience can understand the first time they read it.**

7.3.2.3 Are monitoring and inspection reports in plain language?

- ☐ Not applicable, state issues monitoring and inspection reports.
- ☒ Yes.

- ☐ No. If no, describe how plain-language summaries are used to meet the regulatory requirements and include a link to a sample summary:

7.3.2.4 Monitoring and inspection report contents.

Check to certify what the monitoring and inspection reports and/or their plain-language summaries include regarding the following CCDF requirements:

- ☐ Not applicable, the state issues monitoring and inspection reports.
- ☒ Date of inspection
- ☒ Full report of inspection, including areas of compliance and non-compliance.
- ☒ Health and safety violations, including violations that resulted in fatalities or serious injuries. Describe how these health and safety violations are prominently displayed: **All violations, including health and safety, are prominently documented on a Facility Licensing Compliance Agreement (FLCA), which is available on the website with the inspection reports.**
- ☒ Corrective actions taken by the Tribal Lead Agency and/or child care provider. Describe: **TOC describes the plan of action and timeline agreed to by the provider and licensor to correct health and safety violations.**
- ☒ The process for correcting inaccuracies in reports. Describe: **If an error is found the provider can bring it to the attention of the Quality Support Coordinators and they can request administrative staff to reopen the record for corrections to occur by the TLA. Any process that would initially need an approval, would go through the proper protocol within the policies and procedures manual.**
- ☒ The process for providers to appeal the findings in reports, including the time requirements and timeframes for filing the appeal, for undertaking the investigation, and for removing any violations determined on appeal to be unfounded. Describe: **Providers have 30 days from the date the compliance agreement was signed to request an internal review. The TLA then has 15 days to uphold, overturn, or modify the enforcement decision. The document is not posted to the webpage until after the time to appeal a decision has passed.**
- ☒ How reports are made available in a timely manner. Specifically, provide the Tribal Lead Agency's definition of "timely" and describe how it ensures that reports are made available within its timeframe: **The TLA defines timely as no later than 90 days after inspection or corrective action. However, TLA posts reports (monitoring visit checklists) immediately upon completion and posts compliance agreements if required, due to monitoring findings, immediately after all components are documented and the provider's 10 day period to appeal compliance findings has passed.**

Although Tribal Lead Agencies define “timely,” OCC recommends Tribal Lead Agencies update results as soon as possible and no later than 90 days after an inspection is done or corrective action is taken.

7.3.2.5 Maintaining monitoring reports.

Describe the process for maintaining monitoring reports. Specifically, provide the minimum number of years reports are made available and the policy for record-keeping (98.33(a)(4)(iv)). (*Note:* There is a requirement that a minimum number of 3 years of reports be made available. If states issue monitoring and inspection reports, “Not applicable, state issues monitoring and inspection reports.”): **TLA removes reports from the webpage after 3 years.**

7.3.3 Aggregated Data on Serious Injuries, Deaths, and Substantiated Cases of Child Abuse

Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be made available. The data must be organized by category of care (e.g., center-based child care, family child care, in-home child care) for all eligible CCDF provider categories in the Tribal Lead Agency’s service area. The aggregate report should not list individual provider-specific information or personally-identifiable information.

Certify by describing:

7.3.3.1 Submission of reports relating to serious injuries or deaths.

A description of how child care providers must submit reports of any serious injuries or deaths of children occurring in child care to the designated entity (98.16 (ff)): **All CCDF providers must submit a report of any serious injury or death of a child in their care to the TLA. All licensed centers, TOC, Family home and in-home providers must submit their reports should this happen in their facility or home. All data received will be organized by category of care and will be posted on the webpage.**

Obtaining aggregate data from the monitoring agency. A description of how the Tribal lead agency obtains the aggregate data from the entity: **Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in a child care setting is collected by the inspectors and organized by category of care. No individual names will be used in this data.**

7.3.3.2 Definition of “substantiated child abuse”.

The definition of “substantiated child abuse” used by the Tribal Lead Agency for this requirement: **Unusual marks or bruises anywhere on the child’s body upon arrival at the provider’s center or home where an explanation does not seem likely. A reported incident is considered “substantiated child abuse” if Child Protective Services issues a founded finding.**

7.3.3.3 Definition of “serious injury”.

The definition of “serious injury” used by the Tribal Lead Agency for this requirement: **The TLA defines “serious injury” as any of the following:**
-Injury resulting in overnight hospital stay
-Severe neck or head injury

- Choking/unexpected breathing problems
- Severe bleeding
- Shock or acute confused state
- Unconsciousness
- Chemicals in eyes, on skin, or ingested in the mouth
- Near-drowning
- Broken bone
- Severe burn requiring professional medical care
- Poisoning
- Medical overdose
- An ambulance is required
- Seizure

7.3.4 Contact Information for Referrals

The consumer education information should include contact information for referrals to local child care resource and referral organizations.

7.3.4.1 Providing CCR&R referrals.

How does the Tribal Lead Agency provide referrals to local CCR&R agencies through the consumer education information? Describe: **There are links to resources and referrals for child care needs on the Tribe's website and on all applications for services**

7.3.5 Contact Information for Consumer Education Information

7.3.5.1 Consumer education information.

The consumer education information should include how families can contact the Tribal Lead Agency, its designee, or other programs that can help the parent understand the information included. Describe: **Consumer education contact information is included in all applications of this CCDF program. Further information or help on navigating the website can be found by contacting the TOC administration.**

7.4 Additional Consumer and Provider Education

Tribal Lead Agencies are required to certify that they will collect and disseminate information about the full range of child care services to promote parental choice to parents of eligible children, the general public, and where applicable, child care providers. The consumer education information can be provided through CCR&R organizations or through direct conversations with eligibility case workers and child care providers. Outreach and counseling can also be effectively provided via information sessions or intake processes for families (658E(c)(2)(E); 98.15(b)(4); 98.33(b)).

7.4.1 Availability of Child Care Services

7.4.1.1 Information and availability about child care services.

Describe how the Tribal Lead Agency shares information with eligible families, the general public, and where applicable, child care providers, about the availability of child care services provided through the CCDF program and other programs for which the family may be eligible, such as state or Tribal PreK, and the availability of financial assistance to obtain child care services. Check only those that apply and describe what information is provided.

☒ Tribal newsletter

☒ Social media

☒ Website

☒ Intake process

☐ CCR&R organization

☐ Information sessions

☐ Tribal meetings

☒ Other. Describe: **When a parent inquires about our program, we make sure they qualify by checking their residence and income and that they have Tribal ID for the child. Once all of that is verified, we tell the family about their choices: Center-based care, Family Care, or In-home care. We provide all applications for child care services on the TLA website. The second page of the application is a check off list to make sure parents are submitting all necessary paperwork. Contact information is on the website for any questions the families may have. Families are linked to Child Care Aware through the Puyallup Tribe's website.**

7.4.2 Dissemination of Program Information

7.4.2.1 Dissemination of program information to families, the public and providers.

Describe how the Tribal Lead Agency provides the required information about the following programs and benefits to the parents/families of eligible children, the general public, and where applicable, child care providers. Within the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences, including parents/families, the public, and providers. Include any partners who assist in providing this information. Check only those that apply:

☒ Temporary Assistance for Needy Families program: **DCYF maintains a website that links families to services outside DCFY, including TANF. This link takes users where information on eligibility and how to apply for benefits is available. Services can be applied for on-line at <https://www.washingtonconnection.org/home/availablebenefits.gov>.**

Families are directed to the DCYF sites online and through policy manuals for the TLA.

☒ Head Start and Early Head Start programs: **DCYF maintains a website that links families to services outside DCFY, including Head Start and Early Head Start Programs. This link takes users where information on eligibility and how to apply for benefits is available. Services can be applied for on-line at <https://www.washingtonconnection.org/home/availablebenefits.gov>.**

Families are directed to the DCYF sites online and through policy manuals for the TLA.

[x] Low Income Home Energy Assistance Program (LIHEAP): DCYF maintains a website that links families to services outside DCFY, including LIHEAP. This link takes users where information on eligibility and how to apply for benefits is available. Services can be applied for on-line at <https://www.washingtonconnection.org/home/availablebenefits.gov>.

Families are directed to the DCYF sites online and through policy manuals for the TLA.

[x] Supplemental Nutrition Assistance Programs (SNAP): DCYF maintains a website that links families to services outside DCFY, including SNAP. This link takes users where information on eligibility and how to apply for benefits is available. Services can be applied for on-line at <https://www.washingtonconnection.org/home/availablebenefits.gov>.

Families are directed to the DCYF sites online and through policy manuals for the TLA.

[x] Women, Infants, and Children (WIC) Program: DCYF maintains a website that links families to services outside DCFY, including WIC. This link takes users where information on eligibility and how to apply for benefits is available. Services can be applied for on-line at <https://www.washingtonconnection.org/home/availablebenefits.gov>.

Families are directed to the DCYF sites online and through policy manuals for the TLA.

[x] Child and Adult Care Food Program (CACFP): DCYF maintains a page on its website linking providers to nutrition and physical activity resources, including CACFP. DCYF's site is presented in plain language to maximize accessibility. The link takes users to OSP's webpage devoted to CACFP where they can find information on CACFP-eligible programs, contact information for program staff, and other resources. OSPI's site includes a link to accessibility information on every page.

Families are directed to the DCYF sites online and through policy manuals for the TLA.

[x] Medicaid and Children's Health Insurance Program (CHIP): DCYF maintains a website that links families to services outside DCFY, including CHIP. This link takes users where information on eligibility and how to apply for benefits is available. Services can be applied for on-line at <https://www.washingtonconnection.org/home/availablebenefits.gov>.

Families are directed to the DCYF sites online and through policy manuals for the TLA.

[x] Programs carried out under Individuals with Disabilities Education Act (IDEA) Part B, Section 619, and Part C: DCYF is the lead agency for IDEA Part C, called in Washington Early Support for Infants and Toddlers, and maintains a section of its site devoted to the program, including information on services available and eligibility. DCYF's site is presented in plain language to maximize accessibility. ESIT program providers are informed about all requirements to have transition plans for children who age-out of Part C to Part B section 619 contained in the family's individualized Family Service Plan. Part C to B transition is described here. When a family applies for child care subsidy benefits on-line through Washington connections, the family can also search from this screen using Find Services:

<https://www.washingtonconnection.org/home/availablebenefits.gov>. A link to a page with

information about ESIT is available there.

Families are directed to the DCYF sites online and through policy manuals for the TLA.

7.4.3 Information on Child Development Research and Best Practices

Describe how the Tribal Lead Agency makes information available to families, providers, and the general public on research and best practices concerning children’s development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared.

7.4.3.1 Describe what information (content) is provided: Information is available for families, the providers and general public on research and best practices concerning children’s development via the TLA website. Those who attend the TOC information is available through Tadpoles and Teaching Strategies GOLD. It is an on-line access tool for parents to see the age development of their child and a way for parents and teachers to assess child’s development and progress.

Our partnership with the Puyallup Tribe’s Birth to Six program allows us to utilize ChildReach of Pierce County, Childreach screens each child’s development. They come to the TOC and screen children to identify any concerns. Birth to Six follows up with resource and referrals including school districts and medical professionals.

The TOC also has a resource manual, that helps provide information to the community about child development.

Content of Website and resource manual include areas of development:

Social and emotional development

Language and literacy

Cognition

Perception, motor, and physical development

Culture and language program: Cultural and linguistic sustaining curriculum

Socioemotional skills using Conscious Discipline curriculum.

Partner with families through daily family engagement including; family’s culture, language, values, and home-life connection.

Fostering relationships with affectionate care that is essential to healthy child development.

Traditional Foods, health information, “Farm to Kitchen” curriculum

7.4.3.2 Describe how the information is provided. Check only those that apply:

☒ Verbally

☒ Newsletter

☒ Website

☒ Classes or training

☒ Brochure

☐ Other:

7.4.3.3 Information to audiences, including parents, families, providers, and the general public.

Certify and describe that the information is tailored to a variety of audiences, including parents, families providers, and the general public. **Information is available for families, the providers and general public on research and best practices concerning children’s development via the TLA website. Those who are enrolled at the TOC receive information through Tadpoles and Teaching Strategies GOLD. It is an on-line access tool for parents to see the age development of their child and a way for parents and teachers to assess child’s development and progress. Our partnership with the Puyallup Tribe’s Birth to Six program allows us to utilize ChildReach of Pierce County, Childreach screens each child’s development. They come to the TOC and screen children to identify any concerns. Birth to Six follows up with resource and referrals including school districts and medical professionals.**

The TOC also has a resource manual, that helps provide information to the community about child development.

Content of Website and resource manual include areas of development:

1. Social and emotional development
2. Language and literacy
3. Cognition
4. Perception, motor, and physical development
5. Culture and language program: Cultural and linguistic sustaining curriculum
6. Socioemotional skills using Conscious Discipline curriculum.
7. Partner with families through daily family engagement including; family’s culture, language, values, and home-life connection.
8. Fostering relationships with affectionate care that is essential to healthy child development.
9. Traditional Foods, health information, “Farm to Kitchen” curriculum

7.4.3.4 Identify any partners in providing this information. Check only those that apply:

☒ Other Tribal department

☐ Indian Health Services

☐ State

☐ Head Start and Early Head Start programs

☐ SNAP

☐ WIC program

☐ CACFP

☒ Other: Partnerships between Children’s Services, Birth to Six, and Protective Services have been formed with the TLA. These entities communicate the availability of child care assistance to their clients and then request services from the TLA. Puyallup Tribal families also have the option of applying for services through the Puyallup Tribal Child Care Assistance Program.

7.4.4 Information on Policies Regarding Social-Emotional and Behavioral Issues and Early Childhood Mental Health

7.4.4.1 Providing information on early childhood mental health.

Describe how information is shared on the Tribal Lead Agency's policies regarding social-emotional and behavioral issues and early childhood mental health. Include how the Tribal Lead Agency shares information on positive behavioral intervention and supports models, based on research and best practices for those from birth to school-age. Describe what and how information is provided and tailored to a variety of audiences and include any partners in providing this information. Tribal Lead Agencies that rely on states to provide this information may include the website provided to families instead of a full description of the content: **The TOC policies regarding social-emotional and behavioral issues and early childhood mental health are shared with families in the Parent Manual. These policies are also discussed during parent meetings, and can be found on the website, <http://www.puyallup-tribe.com/gelc/>. Information is provided on social-emotional and behavior issues and early childhood mental health from the Birth to Six partnership with the TLA. They have developed a mental health promotion team who offers behavior plans and oversees meetings with concerned parents. During these meetings, strategies and plans are developed to tailor to the individual needs of the child. The Birth to Six Program will share information on referral services.**

7.4.5 Preventing the Suspension and Expulsion of Children from Birth to Age 5

7.4.5.1 Policies to prevent suspension/expulsion of children from birth to age 5.

Describe the Tribal Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF program funds (98.16(ee)), including how those policies are shared with families, providers, and the general public: **TOC Parent Handbook details how we do not suspend children for behavior issues unless there is an immediate danger to others. In the case of unacceptable behavior, the Birth to Six Behavior Guidance Support coordinator will enter the classroom and observe, support and offer a behavior plan and strategies. Family meeting will follow describing the steps taken to correct the behavior. All children under the age of 5 have access to the Birth to Six Behavior Guidance Support Coordinator located at the TOC to assist with behavior problems to ensure the child can remain in care. Parents who chose to have child care outside of the TOC are notified of this program upon enrollment with applications for services attached to the applications for screenings.**

An ECE intervention support plan may be necessary to assure that each child's developmental, behavioral, socio-emotional, and mental health needs are being addressed. Those supports will be implemented in collaboration of each stakeholder and classroom teacher caring for the child.

An ECE intervention will include a support plan that will address the classroom supports necessary for the individual's needs. The director and mental health supports will collaborate with all necessary stakeholders to assure that all children's needs are being addressed. Team members will use the following information to determine who will be referred to additional assessment:

If the ASQ and ASQ-SE screening tool identifies infants and young children, whose development and/or social emotional development requires further evaluation to determine if referral for

intervention services is necessary.

If classroom observations raise concern about a child's social, emotional, developmental, or behavioral health.

The process for Pre-referral will include:

1. An initial concern about the child's development or behavior will be put in writing and documented by the teachers using the internal referral form (See Appendix K).
2. The team will gather information about the child and meet with the classroom teacher and necessary stakeholders, to communicate possible strategies to support child.
3. The team and other possible team members will gather to discuss the progress, any existing behaviors, or additional needs of the child.
4. Observations and documentation will be collected and shared with team regularly.
5. The mental health support team and all stakeholders will schedule a parent/guardian consultation meeting with all necessary stakeholders.
6. An update meeting will be held bi-weekly periodically to discuss child's progress.

Consultation with Parents/Guardians

14. Parents/Guardians will be invited to:

- a. Participate in discussions of the results of their child's initial screening/assessment.
- b. Discuss reasons for a health, developmental, or social/emotional behavioral assessment.
- c. Give alternative perspectives.
- d. Share their expectations and goals for their child and have these expectations and goals integrated with any plan for their child.
- e. Explore community resources and supports that might assist in meeting any identified needs that child care centers and family child care homes can provide.
- f. Get parent/guardian's written permission to share health information with primary health care professionals and other professionals as appropriate.

15. If the parents/guardians do not attend the screening meetings, the team will inform the parents/guardians of the results in writing and offer an opportunity for discussion.

B. Intervention

1. The intervention process will include:

- a. The GELC director and stakeholders will convene and document regular meetings to monitor progress of children identified to need further support.
- b. The stakeholders will collaborate and meet with parents/guardians.
- c. GELC director and stakeholders will write a support plan to support teachers, children and families.
- d. The GELC team will train the teachers how to use the strategies listed in the support plan.
- e. Upon adequate implementation and documentation of child's support plan with little to no progress made over time, it may become necessary to refer the child to other services.

7.5 Procedures for Providing Information on Developmental Screenings

Tribal Lead Agencies are required to provide information and referrals on developmental screenings. This information should include resources and services that the Tribe can deploy, such as Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services under Medicaid, carried out under Title XIX of the Social Security Act, and developmental screening services available through the IDEA Part B, Section 619, and Part C. Tribal Lead Agencies must also include a description of how a family or child care provider can use these resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, including social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Tribal Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

7.5.1 Certify by Describing Developmental Screenings:

7.5.1.1 Collection of information on resources for developmental screenings.

How the Tribal Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF families, the general public, and where applicable, child care providers (98.16(j), 98.33(c), and 98.83(d)(1)(i)): **The Puyallup Tribe Birth to Six Program coordinates with their contracted service provider, Pierce County's ChildReach Program, to conduct monthly developmental screening clinics. Families are notified through flyers posted in classrooms and parent message boards throughout the TOC of upcoming dates of the clinics. Families also have access to both Tribal and non-tribal community resources through the Birth to Six Program.**

Referral Services

1. Referral services may be initiated:
 - b. Parent must consent for further assessment.
 - c. Once consent form is signed, the Birth-to-Six program will refer child for appropriate services.
 - d. If necessary, the director and all stakeholders will collaborate with service providers to write a formal IFSP/IEP.
 - e. The team will meet bi-weekly to discuss with stakeholders, the child's growth, new skills, update information or observational records.
 - f. The behavioral health team will update parent/guardian regularly and check-in with them periodically.

The Referral process will include:

- a. After behavioral health intervention, consultation, and signed consent forms from the parents/guardians, the child will be referred to the appropriate agency.
 - i. A consent from the parent will be obtained for further assessment beyond initial screening.
 - ii. The Birth-to-Six program will refer child to the appropriate agency provider or district for further assessment or evaluation.
 - iii. If the child needs a social/emotional behavioral assessment the child will be referred to the Birth to Six Behavior intervention team. If appropriate the child will then be referred for mental health services.
 - iv. If the child needs a developmental assessment the child will be referred to the Birth to Six

program for a developmental assessment. If appropriate the child will then be referred for Early Childhood Special Education Services (ECSE).

v. The Birth-to-Six program partners with the child reach program to provide other supported therapies.

7.5.1.2 Procedures for families and child care providers to the EPSDT program.

The procedures for providing information on and referring families and child care providers to the EPSDT program under Medicaid and developmental screening services available under Part B and Part C of the IDEA: **The procedure for providing information to families is that Birth to Six program information and consents for developmental screenings is attached to CCDF applications. The permission form is filled out by the parent's and forwarded to Birth to Six staff and a developmental screening is scheduled/completed in a timely fashion. Tribal Birth to Six staff provide follow-up services to families after the screening to include but is not limited to. Medical referrals, school district referrals and rescreens, if necessary. This program also is able to provide assistive technology to families once a family plan is written as needs are identified.**

7.5.1.3 Providing families information on developmental screenings.

How does the Tribal Lead Agency provide information on developmental screenings to families receiving a subsidy as part of the intake process?

1. Describe what information is provided: **Families being served by TLA receiving a subsidy also receive developmental screening information along with their childcare application and through community events that TLA and Tribal Birth to Six program participate in. Families are encouraged to access the same services as center-based families who attend on a daily basis.**
2. Describe how it is provided. Check only those that apply:
 - ☒ Verbally during the intake process
 - ☐ Brochure or other written information given during the intake process
 - ☐ Other:
3. Identify any partners involved:
 - ☐ EPSDT program available under Medicaid
 - ☒ Part B and Part C IDEA programs
 - ☐ Head Start and/or Early Head Start programs
 - ☐ Other:

7.5.1.4 Resources and services to obtain developmental screenings.

How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays: **The families or child care providers can utilize the Tribal Birth to Six resources/services available located at the TLA child care center at any time.**

7.5.1.5 Information through training and professional development.

How child care providers receive this information through training and professional development: **Developmental screenings information training is available from the Tribal Birth to Six program staff upon employment at the TOC and through informational letters attached to the applications for child care services.**

7.6 Consumer Statement for Families Receiving CCDF Program Funds

Tribal Lead Agencies must provide CCDF families with a consumer statement, in hard copy or electronically, if the Tribal Lead Agency has chosen to post information to a consumer education website, that contains specific information about the child care provider they select. This information should include:

- Health and safety requirements met by the provider
- Any licensing or regulatory requirements met by the provider
- The date the provider was last inspected
- Any history of violations of these requirements
- Any voluntary quality standards met by the provider

It must also describe:

- How CCDF subsidies are designed to promote equal access
- How to submit a complaint through a hotline
- How to contact local resource and referral agencies or other community-based supports that assist families in finding and enrolling in a quality child care (98.33(d)) program

Note: If the consumer statement is provided electronically, Tribal Lead Agencies should consider how to ensure that the statement is accessible to families and that families have a way to contact someone to address questions they have.

7.6.1 Certify by describing Consumer Statement contents and how received by families

7.6.1.1 Provision of Consumer statement for families.

How the Tribal Lead Agency provides families receiving CCDF program funds with a consumer statement. Check only those that apply:

☐ Hard copy

☐ Referral to a website(s), including state website

☒ Combination of hard copy and a website(s)

☐ Other. Describe:

7.6.1.2 Consumer statement elements.

What is included in the consumer statement? Check those that apply or provide a sample in the describe box below. Tribal Lead Agencies that disseminate a state’s consumer statement may select “other” and include a sample or a link to the state consumer statement in the describe box.

(*Note:* The consumer statement must include the eight requirements listed below.)

☒ Health and safety requirements met by the provider

☒ Licensing or regulatory requirements met by the provider

☒ Date the provider was last inspected

☒ Any history of violations of these requirements

☒ Any voluntary quality standards met by the provider

☒ How CCDF subsidies are designed to promote equal access

☒ How to submit a complaint about a provider

☒ How to contact a local resource and referral agency or other community-based organization to receive assistance in finding and enrolling in a quality child care program

☐ Other. Describe:

7.6.1.3 Consumer statement provided to families.

When is the consumer statement provided to families receiving CCDF program funds? **The consumer statement will be given to families upon request and at the time of enrollment into the program.**

Appendix 1

Triennial Child Count Declaration

If the **Tribal Lead Agency is not a Consortium**, complete the information below.

Name of Tribe/Tribal Lead Agency: **Puyallup Tribe of Indians**

This certifies that the number of Indian children younger than age 13 (as defined in CCDF Plan) who reside on or near the reservation or service area (as defined in CCDF Plan) is: **8861** (number).

The Tribal Lead Agency may not count any children who are included in the child count of another CCDF Tribal Lead Agency. To ensure unduplicated child counts, a Tribal Lead Agency is required to confer with all other CCDF Tribal Lead Agencies that have overlapping or neighboring service areas.

The counts above show the number of Indian children younger than age 13 as of **6/1/2022** (date).

Tribal Lead Agencies are advised that ACF will not accept Child Count Declarations based on child counts that were conducted before July 1 of the year prior to the Child Count Declaration.

If the **Tribal Lead Agency is a Consortium**, complete the information below.

Name of Tribe/Tribal Lead Agency: **Puyallup Tribe of Indians**

The Tribal Lead Agency may not count any children who are included in the child count of another CCDF Tribal Lead Agency. To ensure unduplicated child counts, a Tribal Lead Agency is required to confer with all other CCDF Tribal Lead Agency that have overlapping or neighboring service areas.

The counts below show the number of Indian children younger than age 13 as of (date).

This certifies that the number of Indian children (as defined in CCDF Plan) who reside on or near the reservation or service area (as defined in CCDF Plan) for the Consortium Lead Agency and each Consortium Member are:

Consortium Member	Mandatory Count of Children Less than 13 Years Old	Discretionary Count of Children Less than 13 Years Old	Declaration Letter for Each Consortium Member (attach letter)
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Indian Child Definition

Identify which Indian child(ren) are counted in the Tribal Lead Agency’s child count (98.81(b)(2)(i)).

Programs and activities are to be carried out for the benefit of Indian children. Although Tribal Lead Agencies have some flexibility in defining “Indian Child,” the definition must be limited to children from federally recognized Indian Tribes, consistent with the CCDBG Act’s definition of Indian Tribe (98.2). This information could include children who are Tribal members, whose membership is pending, who are eligible for membership, and/or are children/descendants of members and could also include adopted children, foster children, step-children, etc.

The Tribal Lead Agency defines an “Indian child” as: **An Alaskan Native child or a native American child who is enrolled in a federally recognized Tribe and can provide Tribal ID. A child with pending enrollment documentation from a federally recognized Tribe.**

Indian Reservation or Service Area

Programs and activities are to be carried out for the benefit of Indian children living on or near the Indian reservation or service area. The service area must be within reasonably close geographic proximity to the borders of a Tribe’s reservation (except for Tribes in Alaska, California, and Oklahoma). Tribes that do not have reservations must establish service areas within reasonably close geographic proximity to the area where the Tribe’s population resides. There is an expectation that the Tribal Lead Agency will be able to provide services to families throughout the service area. ACF will not approve an entire state as a Tribe’s service area. Tribal Lead Agencies can limit services within the reservation boundaries or go beyond the reservation boundaries.

If a Tribal Lead Agency establishes a different service area than the borders of the Tribe’s reservation or existing service area for CCDF purposes, it must be within reasonably close geographic proximity (658O(c)(2)(B); 98.80(e); 98.81(b)(2)(ii); 98.81(b)(3)(ii); 98.83(b)); for example, “Permanent residence is within the reservation boundaries; however, the participant is temporarily attending school outside of the reservation area,” or “[the participant] resides within 20 miles of the reservation boundaries.”

The Tribal Lead Agency defines the Reservation/Service Area as: **Pierce County and Federal Way, Washington.**

Official Signature of Individual Authorized to Act for the Tribe

Date:

Print Name

Print Title

Appendix 2

The Tribal Lead Agency is applying for participation in the Tribal Early Learning Initiative.

☐ Yes ☒ No

Tribal Early Learning Initiative

This appendix offers interested Tribal CCDF lead agencies the opportunity to describe how the Tribal CCDF program funds will be used, particularly quality funds, to support applicable child care services for Tribal Early Learning Initiative (TELI) efforts in the community. This initiative is voluntary, and Tribal CCDF lead agencies are not required to complete this section if they are not interested in pursuing TELI efforts. The TELI activities must be allowable under the use of CCDF program funds.

A Tribal Early Learning Initiative (TELI) effort in a Tribal community is designed to:

- Better coordinate Tribal early learning and development programs, including child care, Head Start, preschool, home visiting, and other services
- Create and support seamless, high-quality early childhood systems
- Raise the quality of services to children and families across the prenatal-to-kindergarten-entry continuum
- Identify and break down barriers to collaboration and systems improvement

To submit a request to support applicable TELI efforts, complete the questions below.

1. Describe which early childhood program partners will collaborate on the TELI effort (e.g., Head Start/Early Head Start, Tribally run early childhood program, home visiting program, Bureau of Indian Education FACE program) and what the existing level of collaboration is across these early childhood partners at the start of the TELI effort. Are there other programs you intend to partner with (e.g., child welfare, health, mental health, nutrition, family support, housing)?
2. Check and describe the activities for which you will use Tribal CCDF program funds to support the TELI effort:

☐ Hiring a TELI Coordinator (part time or full time) to provide coordination, facilitation, and administrative support to the TELI effort.

- What will be the qualifications of this individual?

Describe:

- What will the coordinator's responsibilities be?

Describe:

- [] Convening an early childhood council or advisory group to guide the TELI effort and develop the community’s vision for an early childhood system that meets the needs of young children and their families.

- Who do you intend to involve in the TELI advisory group? Is it a new group or an existing group? How will the group be used?

Describe:

- [] Conducting a needs assessment examining the need for early childhood services (ages 0 to 5), the ways that early childhood services are delivered, and barriers to the coordination and integration of services.

- What will the Tribal Lead Agency look at in the TELI needs assessment?

Describe:

- How will the Tribal Lead Agency carry out the needs assessment? Who will be involved?

Describe:

- [] Developing a vision and strategic plan for supporting and strengthening early childhood services and systems in the community.

- What will be the process for developing the strategic plan?

Describe:

- [] Investing in a coordinated data system to allow for the collection, housing, and sharing of data across early childhood programs to support improved services to families.

- Are you developing a new system or modifying an existing system?

Describe:

- Who will be involved in developing the data system?

Describe:

- [] Conducting professional development activities that support the range of early childhood providers in the community.

- What types of activities will be held?

Describe:

- Which programs and providers will be involved?

Describe:

- [] Developing coordinated application, referral, and intake systems across programs that make it less burdensome for families to access early childhood services.
- Which programs will be involved?
Describe:
 - What will be the process for developing a coordinated application, referral, and intake system?
Describe:
- [] Implementing family engagement and leadership activities in the community.
- What types of activities will be implemented?
Describe:
 - Which programs will be involved?
Describe: