

COMMONWEALTH OF PUERTO RICO
DEPARTMENT OF FAMILY AFFAIRS
ADMINISTRATION FOR INTEGRAL CHILD CARE AND DEVELOPMENT
(ACUDEN)

Draft for Public Comment – January, 2016



Child Care and Development Fund (CCDF) Plan
FFY 2016-2018

This draft of the CCDF Plan describes the program to be administrated by the State/ Territory for the period 06/01/2016 – 09/30/2018.

Table of Contents

Table of Contents	2
Introduction and How to Approach Plan Development	4
1 Define CCDF Leadership and Coordination with Relevant Systems	1
1.1 CCDF Leadership.....	8
1.2 CCDF Policy Decision Authority.....	10
1.3 Consultation in the Development of the CCDF Plan.....	11
1.4 Coordination with Partners to Expand Accessibility and Continuity of Care.....	15
1.5 Optional Use of Combined Funds.....	17
1.6 Public-Private Partnerships	18
1.7 Coordination with Local or Regional Child Care Resource and Referral Systems	18
1.8 Disaster Preparedness and Response Plan	19
2 Promote Family Engagement through Outreach and Consumer Education	20
2.1 Information about Child Care Financial Assistance Program Availability and Application Process.....	21
2.2 Consumer and Provider Education Information.....	22
2.3 Website for Consumer Education	30
3 Provide Stable Child Care Financial Assistance to Families	32
3.1 Eligible Children and Families.....	33
3.2 Increasing Access for Vulnerable Children and Families.....	39
3.3 Protection for Working Parent.....	41
3.4 Family Contribution to Payment.....	44
4 Ensure Equal Access to High Quality Child Care for Low-Income Children	46
4.1 Parental Choice In Relation to Certificates, Grants or Contracts	47
4.2 Assessing Market Rates and Child Care Costs.....	49
4.3 Setting Payment Rates.....	52
4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access.....	54
4.5 Payment Practices and Timeliness of Payments.....	55
4.6 Supply Building Strategies to Meet the Needs of Certain Populations.....	57
5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings	59
5.1 Licensing Requirements and Standards.....	59
5.2 Monitoring and Enforcement Policies and Practices	66
5.3 Criminal Background Checks.....	71
6 Recruit and Retain a Qualified and Effective Child Care Workforce	74
6.1 Training and Professional Development Requirements.....	75

6.2	Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds.....	79
6.3	Early Learning and Developmental Guidelines	82
7	Support Continuous Quality Improvement.....	85
7.1	Activities to Improve the Quality of Child Care Services	86
7.2	Quality Rating and Improvement System.....	88
7.3	Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers.....	89
7.4	Child Care Resource & Referral	90
7.5	Facilitating Compliance with State Standards	91
7.6	Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services.....	91
7.7	Accreditation Support	92
7.8	Program Standards.....	92
7.9	Other Quality Improvement Activities.....	92
8	Ensure Grantee Program Integrity and Accountability	92
8.1	Program Integrity.....	93

Introduction and How to Approach Plan Development

Access to stable, high quality child care and early learning experiences improves the odds of success for two generations – parents and children - who rely on child care across the country. The Child Care and Development Fund (CCDF) provides resources to State, Territory, and Tribal grantees that enable low-income parents to work or pursue education and training so that they may better support their families while at the same time promoting the learning and development of their children. The CCDF also provides funding to enhance the quality of child care for all children.

On November 19, 2014, President Obama signed the bipartisan-supported Child Care and Development Block Grant (CCDBG) Act of 2014 into law (Pub. L. 113-186) (https://www.acf.hhs.gov/sites/default/files/occ/child_care_and_development_block_grant_markup.pdf). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for State and Territory grantees. The law establishes minimum child care assistance eligibility periods, health and safety standards and training requirements for providers, monitoring, consumer information and other components that when fully implemented will strengthen child care in this country and support child and family success.

States and Territories must comply with the provisions of the Child Care and Development Block Grant (CCDBG) Act, as revised by reauthorization. The Office of Child Care (OCC) has provided interpretive guidance on the new requirements of the law through Program Instructions or responses to Frequently Asked Questions, which are available at: <http://www.acf.hhs.gov/programs/occ/ccdf-reauthorization>. Pending the issuance of implementing regulations, States and Territories are to comply with the law based on their reasonable interpretation of the requirements in the revised CCDBG statute. Further Federal clarification through guidance and regulation is forthcoming. Once final rules are issued, any States and Territories that do not fully meet the requirements of the regulations will need to revise their policies and procedures to come into compliance, and file appropriate Plan amendments related to those changes.

CCDF Plan Overview. The Administration for Children and Families (ACF) re-designed the CCDF Plan to assist State and Territory grantees to plan for full implementation of the law. We recognize that the CCDBG Act of 2014 includes a significant number of changes, some of which are straightforward to implement, while others are complex and will be phased-in over several years. The level of effort needed for implementation will vary across the country depending on the number of changes a State or Territory needs to make. We encourage all States and Territories to take time to think systematically and consider large-scale changes to advance a coherent vision for their child care programs and achieve the goals of the reauthorization – that is, to improve the health, safety, and quality of child care and to improve low-income working families’ access to child care assistance and care that promotes child development. Some States and Territories will need time to enact changes through their legislatures or rulemaking processes. In addition, some requirements will take time to fully operationalize. ACF will work with States and Territories to ensure that adoption and

implementation of these important changes are done in a thoughtful and comprehensive manner.

The Plan process continues to be the primary mechanism by which ACF will determine State and Territory compliance with requirements in the new law. The CCDBG Act of 2014 changed the Plan cycle from a biennial to a triennial Plan period; thus, this Plan will cover a 3-year period. (658E(b)) States and Territories are required to submit their FY 2016-2018 CCDF Plans by March 1, 2016, and approved Plans will become effective June 1, 2016. This Pre-Print will provide a tool for States and Territories to describe to ACF their implementation plans to:

1. Define CCDF Leadership and Coordination with Relevant Systems
2. Promote Family Engagement through Outreach and Consumer Education
3. Provide Stable Child Care Financial Assistance to Families
4. Ensure Equal Access to High Quality Child Care for Low-Income Children
5. Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings
6. Recruit and Retain a Qualified and Effective Child Care Workforce
7. Support Continuous Quality Improvement
8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of high quality care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine need for technical assistance and CCDF Plan amendments, and ultimately determine compliance with specific requirements and deadlines.

For purposes of simplicity and clarity, the specific provisions of applicable laws printed herein are sometimes paraphrases of, or excerpts and incomplete quotations from, the full text. The State/Territory acknowledges its responsibility to adhere to them regardless of these modifications. The Plan contains definitions where provided by law. For terminology not defined in the law, some illustrative examples may be provided. These should only be considered examples, and not requirements, for purposes of responding. If no definitions are provided, States/Territories should respond based on their own definitions for those terms.

CCDBG Implementation Deadlines. In some cases, the CCDBG Act of 2014 specifies a particular date when a provision is effective. Where the law does not specify a date, the new requirements became effective upon the date of enactment and States/Territories have until September 30, 2016 to implement the new statutory requirement(s). ACF has determined that when a State or Territory cannot certify compliance with a specific requirement at the time of CCDF plan submission (March 1, 2016), the grantee must provide a State/Territory-specific implementation plan for achieving compliance with such provision(s).

The implementation plan must provide sufficient information to support approval of the Plan for funding.

Specifically, as part of its implementation plan, States/Territories will be asked to describe:

- Overall target completion date (no later than appropriate effective date deadline)
- Current overall status for this section (not yet started, partially implemented, substantially implemented, other) including describing progress to date for any requirements already implemented and listing any unmet requirements that are not yet fully implemented
- Specific steps (activities) you will take to complete implementation of the unmet requirement(s) (e.g., secure legislative or rule changes, modify agreements with coordinating agencies, etc.)
- Timeline for implementation including projected start date and end date for each step
- Agency/entity responsible for completing implementation of the goal/objective, and partners who will work with the responsible agency to complete implementation of the goal/objective.

We recognize that it will take multiple steps and interim activities toward complete implementation of the requirement. We have included spaces to allow respondents to outline those interim steps and associated timelines (projected start and end dates) for those interim steps to be outlined. A comprehensive summary of the topical implementation plans across sections will be generated electronically to facilitate monitoring of progress towards completion.

ACF will work with States and Territories to monitor progress towards achievement of these requirements and will conduct ongoing reviews of implementation plans until fulfillment of the requirement. Upon completion of the implementation plan, the State/Territory will submit a Plan amendment to certify fulfillment of the requirement(s). These updates and amendments can be submitted at any time prior to the effective date of the requirement. For example, States and Territories may, and are encouraged to, submit amendments to certify compliance with requirements upon completion, but no later than the effective date of the requirements (refer to the Program Instruction on Effective Dates for these deadlines <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02> and corresponding timeline of effective dates <https://www.acf.hhs.gov/programs/occ/resource/pi-2015-02-attachment-timeline-of-effective-dates-for-states-and-territories-cdbg-act-of-2014>).

Lead Agencies can access a variety of federal technical assistance resources to support implementation of the new requirements at: <https://childcareta.acf.hhs.gov/ccdf-reauthorization> In addition to these materials, States and Territories will continue to receive support through the Office of Child Care's Technical Assistance Network (CCTAN) to assist with implementation of the new law. ACF recommends reviewing these resources prior to starting and completing each section of the Plan.

CCDF Plan Submission. States and Territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions in the ACF-118 site may be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities (see <http://www.section508.gov/> for more information). Until the final draft is approved, States and Territories may use the draft CCDF Plan preprint templates as they work to implement the new law. In responding to questions, States and Territories are asked to provide brief, specific summary text and/or bullet points only. Do not use tables or copy and paste charts, attachments or manuals into the Plan.

All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing CCDBG compliance monitoring efforts. In cases where the CCDBG Act of 2014 did not change CCDF regulatory requirements (e.g., Public Hearing requirements), the CCDF regulations are still in effect and relevant questions are included in this Plan.

The CCDF Plan does not contain the Quality Performance Report (QPR) appendix included in previous Plans. The CCDBG Act of 2014 requires ongoing collection of some information that was included in the QPR. ACF will issue a separate information collection tool for public comment and approval linked to the CCDF Plan and updated based on the new requirements in the law.

1 Define CCDF Leadership and Coordination with Relevant Systems

Implementation of the requirements of the CCDBG Act of 2014 will require leadership and coordination between the child care assistance program and other child- and family-serving agencies, services, and supports at the state and local levels. ACF recognizes that each grantee must identify the most appropriate entities and individuals to lead and participate in implementation based on the context within that State or Territory. This will include those that manage various components of CCDF-funded activities and requirements (fiscal, subsidy, health and safety monitoring, and continuous quality improvement) as well as other public and private partners.

This section collects information to help ACF understand the stakeholders convened and consulted to develop the Plan, where authority lies to make policy decisions and program changes, and who is responsible for implementing the blueprint for action the Plan describes. For example, the law requires that, at the option of the Tribes, State/Territory Lead Agencies must collaborate and coordinate with Indian tribes or tribal organizations in the State in a timely manner in the development of the CCDF Plan. ACF expects that new requirements in the law will necessitate that grantees build partnerships with other agencies and organizations to better link the children and families receiving financial assistance to information, services and resources regarding other programs for which they may be eligible, including developmental screenings for children, and other resources (also in section 2). In addition, States and Territories must describe how public private partnerships are being used to increase the supply and quality of child care services.

1.1 CCDF Leadership

The Governor of a State or Territory shall designate an agency (which may be an appropriate collaborative agency), or establish a joint inter-agency office, to represent the State (or Territory) as the Lead Agency. The Lead Agency agrees to administer the program in accordance with applicable Federal laws and regulations and the provisions of this Plan, including the assurances and certifications appended hereto. (658D, 658E(c)(1)).

1.1.1 Which Lead Agency is designated to administer the CCDF program?

Identify the Lead Agency or joint inter-agency office designated by the State/Territory. ACF will send official grant correspondence such as grant awards, grant adjustments, Plan approvals, and disallowance notifications to the designated contact identified here. (658D(a))

- Name of Lead Agency: Administration for Integral Child Care and Development (herein referred as ACUDEN)
- Address of Lead Agency: PO Box 1501, San Juan, PR 00902-5091
- Name and Title of the Lead Agency Official: Laura I. Santa Sánchez
- Phone Number: (787) 724-7474, Ext. 3600, 3610
- E-Mail Address: lsanta@acuden.pr.gov
- Web Address for Lead Agency (if any): www.acuden.pr.gov

1.1.2 Who is the CCDF administrator?

Identify the CCDF administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the State/Territory's CCDF program. ACF will send programmatic communications such as program announcements, program instructions, and data collection instructions to the designated contact identified here. If there is more than one

designated contact with equal or shared responsibility for administering the CCDF program, please identify the co-administrator or entity with administrative responsibilities and include contact information.

a) Contact Information for CCDF Administrator:

Name of CCDF Administrator: Laura I. Santa-Sánchez
Title of CCDF Administrator: Administrator of ACUDEN
Address of CCDF Administrator: PO Box 1501, San Juan, PR 00902-5091
Phone Number: (787) 724-7474, Exts. 3600, 3610
E-Mail Address: www.acuden.pr.gov

b) Contact Information for CCDF Co-Administrator (if applicable):

Name of CCDF Co-Administrator: Sidnia J. Vélez González
Title of CCDF Co-Administrator: CCDF Director
Phone Number: (787) 724-7474, Exts. 3739, 3737
E-Mail Address: svelez@acuden.pr.gov
Description of the role of the Co-Administrator: Programmatic Director of the Child Care Development Fund Program in Puerto Rico. Duties: responsible for the development and implementation of program activities.

c) Primary Contact Information for the CCDF Program:

Phone Number for CCDF program information (for the public) (if any): (787) 724-7474, Ext. 2737
Web Address for CCDF program (for the public) (if any): www.acuden.pr.gov
Web Address for CCDF program policy manual (if any): www.acuden.pr.gov
Web Address for CCDF program administrative rules (if any): www.acuden.pr.gov

1.1.3 Identify the agency/department/entity that is responsible for each of the major parts of CCDF administration and the name of the lead contact responsible for managing this portion of the Plan.

- Outreach and Consumer Education (section 2):
 - Agency/Department/Entity: ACUDEN
 - Name of Lead Contact: Sidnia J. Vélez
- Subsidy/Financial Assistance (section 3 and section 4)
 - Agency/Department/Entity: ACUDEN
 - Name of Lead Contact: Sidnia J. Vélez
- Licensing/Monitoring (section 5):
 - Agency/Department/Entity: Department of the Family & ACUDEN
 - Name of Lead Contact: Raquel Rodríguez & Sidnia J. Vélez
- Child Care Workforce (section 6):
 - Agency/Department/Entity: ACUDEN
 - Name of Lead Contact: Sidnia J. Vélez / José Quiñones
- Quality Improvement (section 7):
 - Agency/Department/Entity: ACUDEN
 - Name of Lead Contact: Sidnia J. Vélez / Luis Ortiz
- Grantee Accountability/Program Integrity (section 8):
 - Agency/Department/Entity: ACUDEN
 - Name of Lead Contact: Laura I. Santa-Sánchez

1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or other public or private local agencies as long as it retains overall responsibility for the administration of the program. (658D(b))

1.2.1 Which of the following CCDF program rules and policies are set or established at the State/Territory versus the local level? In other words, identify whether CCDF program rules and policies are established by the State or Territory (even if administered or operated locally) or whether the CCDF policies or rules are established by local entities (such as counties or workforce boards) setting those policies. Check one.

- All program rules and policies are set or established at the State/Territory level.
- Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.
 - Eligibility rules and policies (e.g., income limits) are set by the:
 - State/Territory
 - County. If checked, describe the type of eligibility policies the county can set _
 - Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set ____
 - Other. Describe _____
 - Sliding fee scale is set by the:
 - State/Territory
 - County. If checked, describe the type of eligibility policies the county can set _
 - Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set ____
 - Other. Describe _____
 - Payment rates are set by the:
 - State/Territory
 - County. If checked, describe the type of eligibility policies the county can set _
 - Other local entity (e.g., workforce boards, early learning coalitions). If checked, identify the entity (e.g. workforce board) and describe the type of eligibility policies the local entity(ies) can set ____
 - Other. Describe _____
 - Other. List and describe (e.g., quality improvement systems, payment practices)

1.2.2 How is the CCDF program operated in your State/Territory? In other words, which agency(ies) implement or perform these CCDF services and activities and how will the State/Territory ensure that Federal CCDF requirements are fully implemented by other governmental or nongovernmental agencies. ACF recommends minimizing differences in eligibility or other policies across counties or other jurisdictions to ease family burden and confusion. Check all that apply and describe the services performed by the entity and how the State/Territory ensures

accountability that federal requirements are fully implemented by other agency(ies).

a) Who determines eligibility?

- CCDF Lead Agency
- TANF agency. Describe.
- Other State/Territory agency. Describe.
- Local government agencies such as county welfare or social services departments. Describe.
- Child care resource and referral agencies. Describe.
- Community-based organizations. Describe.
- Other. Describe.

b) Who assists parents in locating child care (consumer education)?

- CCDF Lead Agency
- TANF agency. Describe. TANF agency refers eligible families to the CCDF Program.
- Other State/Territory agency. Describe.
- Local government agencies such as county welfare or social services departments. Describe. The PR Administration of Children and Families refers to ACUDEN cases of children under the custody of the State for services.
- Child care resource and referral agencies. Describe. ACUDEN has Memorandums of Understanding (MOU) with Municipalities to operate Centers of Resource and Referral for Early Childhood (CENTRANA, for its acronym in Spanish). They assist parents locating child care through online, printed and telephone resources.
- Community-based organizations. Describe. ACUDEN has Memorandum of Understanding (MOU) with private entities to operate Resource and Referral Centers for Early Childhood (CENTRANA, for its acronym in Spanish). It also has MOU's with other community based institutions. They assist parents locating child care through online, printed and telephone resources.
- Other. Describe.

c) Who issues payments?

- CCDF Lead Agency
- TANF agency. Describe.
- Other State/Territory agency. Describe.
 - Local government agencies such as county welfare or social services departments. Describe.
- Child care resource and referral agencies. Describe.
- Community-based organizations. Describe.
- Other. Describe.

1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan which serves as the application for a three-year implementation period. In the development of the CCDF plan, the Lead Agency shall consult with appropriate representatives of units of general purpose local government.

(658D(b)(2)) General purpose local governments is defined by the U.S. Census at https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf

The CCDBG Act of 2014 added a requirement that States consult with the State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). 658E(c)(2)(R) In addition, States shall, at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan in a timely manner. (658D (b)(1)(E))

1.3.1 Check who and describe how the Lead Agency consulted with these entities in the development of the CCDF Plan (check all that apply). For example, did the entity participate in a drafting committee, review drafts, sign off on the final version, or develop a memorandum of understanding with the Lead Agency to meet requirements to share information or services for CCDF subsidy families, or other manner of participation? This list includes entities required by law along with a list of optional CCDF Plan consultation partners that Lead Agencies potentially would consult with in their developing their CCDF Plan.

- [REQUIRED] Appropriate representatives of general purpose local government, which can include counties, municipalities or townships/towns Describe: (1) Public hearings in 3 regional offices, and CCDF Central Office were held to discuss the new State Regulation Manual as part of the compliance with new legal requirements; (2) draft of the state plan published on ACUDEN's website on January 19, 2016; (3) Municipalities that are current CCDF providers were invited to participate in the development of the State Regulation Manual and the plan.
- [REQUIRED, IF APPLICABLE] State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act). Describe: The State Regulation Manual and the draft of the CCDF Plan were sent for review to the State Advisory Council (SAC).
 - If checked, does the Lead Agency have official representation and a decision-making role in the State Advisory Council?
 - Yes, The Administrator of ACUDEN
 - No.
 - If no State Advisory Council on Early Childhood Education and Care (pursuant to 642B(b)(1)(A)(i) of the Head Start Act) exists in your State/Territory, describe how you consulted with any other state- or state-designated cross-agency body such as an advisory council, cross-agency commission, or council or cabinet related to child and family planning and policy
- [REQUIRED] Indian tribe(s) and/or tribal organization(s), at the option of individual Tribes. Describe, including which Tribe(s) you consulted with . Check N/A if no Indian Tribes and/or Tribal organizations in the State N/A
- State/Territory agency responsible for public education. Describe The CCDF Plan was sent for review to the PR Department of Education.
- State/Territory agency/agencies responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and Section 619 for preschool). Describe: The CCDF Plan was sent for review to the PR Department of Health, who administers the Division of Mothers, Children, and Adolescents. Several meetings were held to discuss coordination of services.
- State/Territory institutions for higher education, including community colleges. Describe New law requirements and draft CCDF State Plan were discussed with the

- Department of Education of the University of Puerto Rico, Río Piedras Campus.
- State/Territory agency responsible for child care licensing. Describe: The new requirements and State Plan draft were discussed with the licensing office of the Department of the Family.
 - State/Territory office/director for Head Start State collaboration. Describe: ACUDEN is the mayor recipient of the Head Start funds and coordination of services between Child Care, Head Start, and Early Head Start Programs is achieved through the Auxiliary Administrator of Programs.
 - State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe: ACUDEN sent the State Plan with partners of the EHS-CCP for review and comments.
 - State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe: ACUDEN sent the State Plan with partners of the Child and Adult Care Food Program for review and comments.
 - State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe: The CCDF Plan was sent for review to the PR Department of Health, who administers the WIC Program.
 - Other Federal, State, local and/or private agencies providing early childhood and school age/youth serving developmental services. Describe
 - State/Territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe: This grant is administered by the Division of Mothers, Children, and Adolescents of the PR Department of Health and the plan was sent for comments.
 - Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe
 - McKinney-Vento State coordinators for Homeless Education. Describe: The plan was sent to the Multisectorial Council in Support to the Homeless Population for comments. Services available to homeless participants and referral process was discussed.
 - State/Territory agency responsible for public health. Describe: The CCDF Plan was sent for review to the PR Department of Health.
 - State/Territory agency responsible for mental health. Describe: The plan was sent for review to the PR Department of Health and the Mental Health and Addiction Services Administration for comments.
 - State/Territory agency responsible for child welfare. Describe: The plan was sent for review to the Administration for the Socioeconomic Development of the Family.
 - State/Territory liaison for military child care programs. Describe
 - State/Territory agency responsible for employment services/workforce development. Describe: The plan was sent for review and comments to the PR Department of Labor.
 - State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe: The plan was sent for review to the Administration for the Socioeconomic Development of the Family.
 - State/community agencies serving refugee or immigrant families. Describe
 - Child care resource and referral agencies. Describe:
 - Provider groups or associations. Describe
 - Worker organizations. Describe
 - Parent groups or organizations. Describe
 - Other. Describe

1.3.2 Describe the Statewide/Territory-wide public hearing process held to provide the public an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C)). Lead Agencies are required to hold at least one public hearing in the State/Territory with sufficient State/Territory-wide distribution of notice prior to such hearing to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date(s) of notice of public hearing Reminder - Must be at least 20 calendar days prior to the date of the public hearing.

Date of Notice: January 19, 2016- San Juan, Puerto Rico

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include website links if utilized to provide notice.

ACUDEN published the intention to adopt the State Plan in a Newspaper of general circulation on January 19, 2016, and in the Internet from that date to February 12, 2016. Four public hearings were held in the following regional offices: San Juan and Mayagüez.

c) Date(s) of public hearing(s) Reminder - Must be no earlier than September 1, 2015 which is 9 months prior to the June 1, 2016 effective date of the Plan.

Dates of Hearings: February 9, 2016
February 11, 2016

d) Hearing site(s) or method(s), including how geographic regions of the State/Territory were Addressed

Hearings:

January 9, 2016- San Juan, Puerto Rico, located in the northeaster part of the island.

January 11, 2016- Mayagüez, Puerto Rico, located in the western part of the island.

Other methods:

An email address was also available to submit written comments: planestatalcc@acuden.pr.gov. A form was created to facilitate the gathering of data submitted through the hearings and email.

e) Describe how the content of the Plan was made available to the public in advance of the public hearing(s)

The draft of the Plan is published on the webpage of ACUDEN, <http://www.acuden.pr.gov>.

f) How will the information provided by the public be taken into consideration in the provision of child care services under this Plan?

A representative of ACUDEN visited the regional offices and preside the public hearings, which were recorded. ACUDEN has a summary of the comments, the attendance sheet, and any other written comments submitted by the public. A web address was created to receive comments from the persons who wish to use the electronic means. Comments were considered in the final draft of the plan.

1.3.3 Describe the strategies used by the Lead Agency to make the CCDF Plan and Plan Amendments available to the public. Check all that apply and describe the strategies below, including any relevant links as examples.

- Working with advisory committees. Describe: A letter inviting a representative of the advisory committee (SAC) was sent. Communications were held to discuss the content of the Plan and State regulations modified to comply with the CCDF reauthorization act.
- Working with child care resource and referral agencies. Describe: An invitation to partners who have CENTRANA was sent to review the draft and submit their comments.
- Providing translation in other languages. Describe
- Making available on the Lead Agency website. List the website: <http://www.acuden.pr.gov>
- Sharing through social media (Twitter, Facebook, Instagram, email, etc.). Describe: The notice of intention to adopt the State Plan, the draft, the invitation to the public hearings and submission of comments were published in the Twitter, Facebook accounts of the Department of the Family of Puerto Rico and the website of ACUDEN.
- Providing notification to stakeholders (e.g., provider groups, parent groups). Describe
- Other. Describe

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

The CCDBG Act of 2014 added a requirement that the Plan describe how the State/Territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the Federal, State/Territory, and local levels for children in the programs listed below.

1.4.1 Check who and describe how your State/Territory coordinates or plans to efficiently coordinate child care services with the following programs to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services that meet the needs of working families. (658E(c)(2)(O)) Please describe the goals of this coordination, such as extending the day or year of services for families; smoothing transitions for children between programs or as they age into school, enhancing and aligning quality of services, linking comprehensive services to children in child care settings or developing supply of quality care for vulnerable populations. NOTE that this list appears similar to the list provided in 1.3.1 which focused on consultation for purposes of developing the CCDF Plan, however, this list includes entities required by law, along with a list of optional CCDF Plan coordination partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care, and assist children enrolled in early childhood programs to receive full-day services. Check and describe all that apply.

- [REQUIRED] Programs operating at the Federal, State and local levels for children in preschool programs (e.g., state-or locally-funded pre-k, Head Start, school-based programs, public and private preschools, programs serving preschool children receiving special education services, etc.). Describe: Pre-k children have access to the services before and after their care or school program through vouchers or some contracted CCDF providers through delegation of funds, with the objective of extending child care during the day.
- [REQUIRED, IF APPLICABLE] Tribal early childhood programs. Describe, including which Tribe(s) coordinating with

- Check N/A if no Indian Tribes and/or Tribal organizations or programs in the State.
- [REQUIRED] Other Federal, State, local early childhood programs serving infants and toddlers with disabilities. Describe: CCDF contract services through delegation of funds with community base entities that serve children with disabilities. MOUs with PR Department of Health and Department of Education will increase the access of eligible families and children with disabilities to quality care.
- [REQUIRED] Early childhood programs serving homeless children (as defined by the McKinney-Vento Homeless Education Assistance Act). Describe: The Department of the Family administers the Emergency Solutions Grant Program in Puerto Rico. It develops programs to prevent the loss of home and to aid persons who already lost their homes.
- [REQUIRED] Early childhood programs serving children in foster care. Describe: An Administrative directive of the PR Secretary of the Family to the Administration of Children and Families ensures referrals between administrations to provide child care services to different early childhood programs and give priority to children under the custody of the State. Foster parents who are eligible for services will be informed of the availability of care and they may choose the provider for the care of their children.
- State/Territory agency responsible for child care licensing. Describe: An Administrative directive of the PR Secretary of the Family to the licensing division promotes effective communication between agencies and providers, ensuring compliance with state requirements and ACUDEN will certify that eligible CCDF providers meet the health and safety requirements.
- State/Territory agency with Head Start State collaboration grant. Describe
- State Advisory Council authorized by the Head Start Act. Describe: SAC collaborates with the Lead Agency in the development of agreements with public and private entities to enhance quality of services, promote early childhood guidelines.
- State/Territory/local agencies with Early Head Start-Child Care Partnerships grants. Describe: Agreements were made between the Lead Agency and recipients of the EHS-CCP to partner the efforts in ____ Child Care providers to enhance quality services to infant and toddlers.
- McKinney-Vento State coordinators for Homeless Education or local educational agency McKinney-Vento liaisons. Describe
- Child care resource and referral agencies. Describe: ACUDEN has written agreements with child care resource and referral agencies (CENTRANA).
- State/Territory agency responsible for public education. Describe
- State/Territory institutions for higher education, including community colleges. Describe
- State/Territory agency responsible for Child and Adult Care Food Program (CACFP). Describe
- State/Territory agency responsible for WIC, nutrition (including breast-feeding support), and childhood obesity prevention. Describe
- Other Federal, State, local and/or private agencies providing early childhood and school age/youth serving developmental services. Describe
- State/Territory agency responsible for implementing the Maternal and Childhood Home Visitation programs grant. Describe
- Agency responsible for Medicaid/Early and Periodic Screening, Diagnostic and Treatment (EPSDT). Describe
- State/Territory agency responsible for public health. Describe
- State/Territory agency responsible for mental health. Describe
- State/Territory agency responsible for child welfare. Describe

- State/Territory liaison for military child care programs. Describe
- State/Territory agency responsible for employment services/workforce development. Describe
- State/Territory agency responsible for Temporary Assistance for Needy Families (TANF). Describe: An Administrative directive of the PR Secretary of the Family to the Administration for the Socioeconomic Development of the Family will help the link of comprehensive services to children in child care settings and the referral of cases of eligible families and children to the Child Care Program.
- State/Territory community agencies serving refugee or immigrant families. Describe
- Provider groups or associations. Describe
- Worker organizations. Describe
- Parent groups or organizations. Describe
- Other. Describe

1.5 Optional Use of Combined Funds

The CCDBG Act of 2014 added a provision that States and Territories have the option to combine funding for CCDF child care services with funding for any of the required programs listed in 1.4.1. These include programs operating at the Federal, State and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, homeless children, and children in foster care. (658E(c)(2)(O))(ii) Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams in an effort to expand and/or enhance services for children and families to allow for delivery of comprehensive high quality care that meets the needs of children and families. For example, State/Territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a State/Territory may allow county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start or State/Territory pre-kindergarten requirements in addition to State/Territory child care licensing requirements. As a reminder, per the OMB Compliance Supplement governing audits (https://www.whitehouse.gov/omb/circulars/a133_compliance_supplement_2014), CCDF funds may be used in collaborative efforts with Head Start (CFDA 93.600) programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and the CCDF is mandated by sections 640(g)(2)(D) and (E), and 642(c) of the Head Start Act (42 USC 9835(g)(2)(D) and (E); 42 USC 9837(c)) in the provision of full working day, full calendar year comprehensive services (42 USC 9835(a)(5)(v)). In order to implement such collaborative programs, which share, for example, space, equipment or materials, grantees may blend several funding streams so that seamless services are provided.

1.5.1 Will you combine CCDF funds with the funds for any program with which you coordinate (described in 1.4.1)?

- Yes. If yes, describe at a minimum:
 - o How do you define “combine”
 - o Which funds will you combine
 - o Goal(s) of combining funds (why?) and expected outcomes, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care

- for vulnerable populations
- Method of fund allocation (how you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?)
- How are the funds tracked and method of oversight
 - No

1.6 Public-Private Partnerships

The CCDBG Act of 2014 adds a new provision that requires States and Territories to describe in the Plan how the State/Territory encourages partnerships among State/Territory and public agencies, tribal organizations, private entities, faith based organizations and/or community based organizations to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services for children through age 12, such as by implementing voluntary shared services alliance models (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation). (658E(c)(2)(P)) ACF expects these types of partnerships to leverage public and private resources to further the goals of reauthorization.

1.6.1 Describe the entities with whom and the levels at which the State/Territory is partnering (level – State/Territory, county/local, and/or programs), the goals of the partnerships, method of partnering. Include in your description examples of activities that have resulted from partnerships with other State/Territory and public agencies, tribal organizations, private entities, faith based organizations or community-based organizations, and how the partnerships are expected to leverage existing service delivery systems for child care and development services and to increase the supply and quality of child care services.

The Lead Agency has memorandums of understanding (MOU) with municipalities and private parties to leverage existing services through the provision of facilities, equipment, materials, and technical assistance to promote the development of children. Educational activities are developed through CENTRANA, which impacts families and children in the community. Partnership with community based providers to extent the use of the Quality Rating System developed for the Child Care Program.

1.7 Coordination with Local or Regional Child Care Resource and Referral Systems States and Territories may use funds to establish or support a system of local or regional child care resource and referral organizations (CCR&R) that is coordinated, to the extent determined by the State/Territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (also see section 7.4). If they do, the law identifies specific requirements for that entity or system receiving CCDF funds. (658E(c)(3)(B)(iii)) These include:

- Provide families with information on a full range of child care options (including faith-based, community-based child care centers and family child care homes, nontraditional hours and emergency child care centers) in their local area or region
- To the extent practicable, work directly with families who receive child care assistance to offer the families support and assistance in making an informed decision about child care options in an effort to ensure families are enrolling their children in the most appropriate child care setting to suit their needs and that is of high quality as determined by the State/Territory
- Collect data and provide information on the coordination of services and supports, including services provided through the Individuals with Disabilities Education Act for children with disabilities
- Collect data and provide information on the supply of and demand for child care services

in local areas or regions of the State/Territory and submit such information to the State/Territory

- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care centers and family child care homes providers, to increase the supply and quality of child care services in the State/Territory
- As appropriate, coordinate their activities with the activities of the Lead Agency and/or local agencies that administer CCDF.

Nothing in statute prohibits States from using CCR&R agencies to conduct or provide additional services beyond those required by statute above.

1.7.1 Does the State/Territory fund a system of local or regional CCR&R organizations?

- Yes. The State/Territory funds a CCR&R system. See also related follow-up questions in Section 7.1 and 7.4. If yes,
Describe the State/Territory's written agreement or contract with the CCR&R, what services are provided through the CCR&R, and any other activities for which the State partners with the CCR&Rs.
- No. The State/Territory does not fund a CCR&R system and has no plans to establish. Use section 7.4 to describe plans, if any, to establish a CCR&R system.

1.8 Disaster Preparedness and Response Plan

The CCDBG Act of 2014 added a requirement that States and Territories must include a Statewide Child Care Disaster Plan for coordination of activities with the State/Territory human services agency, emergency management agency, child care licensing agency, State/Territory local resource and referral agencies, and the State Advisory Council (SAC) or other state designated cross-agency body if there is no SAC. (658E(c)(2)(U)) The Statewide Child Care

Disaster Plan must include:

- Guidelines for continuing CCDF assistance and child care services after a disaster, which may include provision of temporary child care, and temporary operating standards for child care after a disaster.
- Requirements that child care providers receiving CCDF have in place procedures for evacuation, relocation, shelter-in-place, lock-down, communication and reunification with families, continuity of operations, accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions.
- Requirements that child care providers receiving CCDF have in place procedures for staff and volunteer emergency preparedness training and practice drills.

1.8.1 Describe the status of State/Territory's Statewide Child Care Disaster Plan.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. If applicable, describe additional ways the State/Territory addresses the needs of children receiving CCDF before, during and after a disaster or emergency, not already incorporated into the Statewide Child Care Disaster Plan. If available, please provide a link to the disaster plan
- Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses here will

be consolidated electronically into an Implementation Plan summary report.

The CC State Disaster Preparedness and Response Plan is under review to be updated in order to ensure compliance with the new requirements. The Department of the Family and their Administrations have completed the first draft for the State Emergency Plan which will ensure the coordination of services of social assistance, child care temporary services and support to families through the island. The plan includes state and municipalities agencies coordination to serve families in needs. The plan has been presented to the PR State Emergency Management Agency to be review and for their recommendations.

Child Care Program developed a CCDF Emergency Plan Guidelines for the CCDF Providers. This manual includes our policies, procedures, and specific instructions to prepare for, protect against, respond to, recover from, and mitigate the potential effects of natural disasters and emergencies in Puerto Rico. The CCDF Health and Safety Area will coordinate trainings to providers based on these guidelines which will be starting on March, 2016. Each provider must have their plan according to our requirements and obtain approval of the PR Emergency Management Agency.

2 Promote Family Engagement through Outreach and Consumer Education

Parents are their children's most important teacher and advocate. State and Territory child care systems interact with parents in multiple ways, therefore presenting many opportunities to engage and inform families. Child care providers can serve as convenient and trusted sources of information for parents and family members on child development and community supports and services. State/Territory and local child care assistance systems should be designed to promote seamless linkages to useful information and other child- and family-services, such as during subsidy intake and redetermination processes and when parents utilize child care resource and referral or QRIS agencies. Outreach and consumer education is an ongoing process and is expected to cover the entire age span covered by CCDF from birth through age 12. The CCDBG Act of 2014 includes key purposes that address the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A new purpose of CCDBG is to "promote involvement by parents and family members in the development of their children in child care settings." States and Territories have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care sites that will support their role as their children's teacher and advocate. Key new provisions include:

1. The plan must certify that States and Territories will collect and disseminate consumer and provider education information to CCDF parents, providers, and the general public, including information about:
 - a) The availability of child care assistance,
 - b) The quality of child care providers (if available),
 - c) Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children's Health Insurance Program (SCHIP)) for which families may also qualify.
 - d) Individuals with Disabilities Education Act (IDEA) programs and services,
 - e) Research and best practices in child development, and
 - f) State/Territory policies regarding social- emotional/behavioral and early childhood

mental health of young children, which may include positive behavioral intervention and support models, and policies on the expulsion of preschool-aged children (children from birth to five for purposes of this requirement) from early childhood programs receiving CCDF.

2. Information related to the health and safety of children in child care settings. The plan must certify that the State/Territory will make public certain information about the results of health and safety monitoring (described in section 5) using a website that is consumer-friendly and in an easily accessible format, including:
 - a) Provider-specific information: 1) results of monitoring and inspection reports, including those due to major substantiated complaints; 2) last date of inspection; and 3) information on corrective actions taken (if applicable).
 - b) Information about: 1) the annual number of deaths; 2) the annual number of serious injuries; and 3) annual number of incidences of substantiated child abuse in child care settings.
 - c) State/Territory processes for: 1) licensing child care providers; 2) conducting background checks and the offenses that would keep a provider from being allowed to care for children; and 3) conducting monitoring and inspections of child care providers.

2.1 Information about Child Care Financial Assistance Program Availability and Application Process

Lead Agencies must inform parents of eligible children and the general public of the process by which they can apply for and potentially receive child care assistance services. (658E(c)(2)(E)(i)(1))

2.1.1 Describe how the State/Territory informs families of availability of services.

- a) How does the State/Territory identify populations and areas of potentially eligible families (e.g., using available federal, State/Territory and local needs assessments to identify potentially eligible families?)

A community assessment was made on April 2014, as part of the Strategic Plan of the Department of the Family, to identify population and geographical areas with greater need for child care subsidy. The Lead Agency has 10 regional offices within the island and at this moment waiting lists exists on the regions, which serve as an indicator of the demand for services. Also, TANF Program shares information about the potential population that requires childcare services.

- b) What partners help with outreach? For example, child care resource and referral agencies, home visitors, pediatricians, faith-based services, State/Territory or local agencies and organizations or other familiar and safe access points serving vulnerable or low-income populations.

Child Care Resource and Referral agencies, TANF, Head Start and Early Head Start, as well as other welfare state programs.

- c) What outreach strategies does the Lead Agency use (e.g., media campaigns, State/Territory website, or other electronic outreach?)

Information of services is available through the webpage of the Lead Agency and the Department of the Family, use of promotional and educational materials as part of the media campaign named "*Seremos Grandes*", and general community activities.

2.1.2 How can parents apply for services? Check all that apply.

- Electronically via online application, mobile app or email. Provide link

- In-person interview or orientation. Describe agencies where these may occur: the application for services can be made at the regional offices of the Lead Agency, distributed within the island or contracted providers at several municipalities, who make an initial assessment and refer to the regional offices for final eligibility determination.
- Phone
- Mail
- At the child care site: parents or legal guardians may visit facilities of CCDF funded providers, to request services.
- At a child care resource and referral agency
- Through kiosks or online portals at related State/Territory/local agency or organization serving low-income populations. Describe
- Through a coordinated application process (e.g., application is linked to other benefits program to allow parents to apply for several programs at one time). Describe
- Other strategies. Describe

2.2 Consumer and Provider Education Information

The CCDBG Act of 2014 added a purpose of the child care program “to promote involvement by parents and family members in the development of their children in child care settings.” (658A(b)(3)) The consumer education requirements address multiple topics that parents and family members need in order to make informed choices and act as their most important teacher and advocate. Lead agencies must certify that they will collect and disseminate the following information through resource and referral agencies or other means. (658E(c)(2)(E))

2.2.1 The State/Territory certifies that it collects and disseminates the following information to parents, providers and the general public:

- Information about the availability of the full diversity of child care services that will promote informed child care choices,
- Availability of child care assistance,
- Quality of child care providers (if available),
- Other programs (specifically Temporary Assistance for Needy Families (TANF), Head Start and Early Head Start, Low-Income Home Energy Assistance Program (LIHEAP), Supplemental Nutrition Assistance Program (SNAP), Women, Infants and Children (WIC) program, Child and Adult Care Food Program (CACFP), Medicaid and State Children’s Health Insurance Program (SCHIP)) for which families may also qualify,
- Individuals with Disabilities Education Act (IDEA) programs and services,
- Research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement,
- State/Territory policies regarding the social-emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool-aged children (children from birth to five for purposes of this requirement)) in early childhood programs receiving CCDF.

- Yes. The State/Territory certifies as of March 1, 2016 that it collects and disseminates the above information to parents, providers and the general public. Describe using 2.2.2 through 2.2.7 below.

- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s)– Identify any requirement(s) implemented to day if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

2.2.2 Describe how the State/Territory makes information available about the full diversity of child care services that will promote informed child care choices, including consumer-friendly strategies such as materials that are culturally responsive and in multiple languages as needed that reflect the literacy levels of consumers, and are easy to access, including accessible to persons with disabilities.

a) Describe how the State/Territory makes information about the full diversity of child care services available to 1) parents of eligible children, 2) providers and 3) the general public

The Lead Agency implemented different strategies to inform the public about the full diversity of child care services available through: (1) the webpage of the Lead Agency; (2) outreach activities at different geographical areas to impact the potential public; (3) resource and referral entities (CENTRANA); (4) webpage of partners; and (5) media campaign called “*Seremos Grandes*”.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Written and promotional materials, conferences, educational fairs, and other community activities.

c) Describe who you partner with to make information about the full diversity of child care choices available

State and Municipal agencies; community and faith-based organizations.

2.2.3 Describe how the State/Territory makes information about the quality (such as through a quality rating and improvement system, if available, nationally-recognized accreditation, or other means) of child care services available to the public, including consumer-friendly

strategies such as messages that are designed to engage intended audiences and are easy to understand

a) Describe how the State/Territory makes information about child care quality available to 1) parents of eligible children, 2) providers and 3) the general public

The Lead Agency implemented different strategies to inform the public about the full diversity of child care services available through: (1) the webpage of the Agency; (2) activities in different geographical areas to impact the potential public; (3) resource and referral entities (CENTRANA); (4) webpage of partners; and (5) media campaign called “*Seremos Grandes*”.

b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.)

Written materials, conferences, promotional products, and activities in the community.

c) Describe who you partner with to make information about child care quality available State and Municipal agencies; community and faith-based organizations.

2.2.4 Describe how the State/Territory shares information with eligible parents about other available human service programs. For example, does the State/Territory share information about these other programs through linkages from the online application, universal applications, through intake process/front line workers, providers, child care resource and referral agencies or other trusted advisors such as home visitors, pediatricians, faith-based services, etc.? At a minimum, include in your description how you provide information to eligible parents, what you provide and by what methods, and which partners you work with to provide information about other available service programs.

a) Temporary Assistance for Needy Families (TANF): webpage of the Administration for the Socioeconomic Development of the Family (ADSEF): www.adsef.gobierno.pr

b) Head Start and Early Head Start Programs: webpage of ACUDEN: www.acuden.pr.gov. ACUDEN is the biggest Head Start/Early Head Start recipient (grantee) in Puerto Rico. Funds are distributed among 19 delegate agencies in 59 municipalities. The CCDF staff located in central and regional offices share information about the available services, as well as the philosophy of each program. Potential participants are referred for orientation and evaluation of eligibility by Head Start/Early Head Start providers.

c) Low Income Home Energy Assistance Program (LIHEAP): webpage of ADSEF

d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps): webpage of ADSEF: www.adsef.gobierno.pr

e) Women, Infants, and Children Program (WIC): webpage of the PR Department of Health: www.salud.gov.pr / www.maximofighting.com/wicpuertorico/

f) Child and Adult Care Food Program (CACFP): webpage of ADSEF: www.adsef.gobierno.pr

g) Medicaid: webpage of the PR Department of Health: www.salud.gov.pr

h) Children's Health Insurance Program (CHIP): webpage of the PR Department of Health: www.salud.gov.pr

i) Individuals with Disabilities Education Act (IDEA): webpage of the PR Department of Health: www.salud.gov.pr, PR Department of Education: www.de.gobierno.pr; and the Office of the Puerto Rico Ombudsman for Persons with Disabilities: www.ombudsmanpr.com

j) Other State/Federally Funded Child Care Programs (e.g., state pre-kindergarten): webpage of the PR Department of Education: www.de.gobierno.pr

k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program): webpage of the PR Department of Health: www.salud.gov.pr

2.2.5 Describe how the State/Territory shares information with providers (where applicable) to link families to these other available human service programs. For example, does the State/Territory provide information to providers through CCR&R outreach, as a condition of their contract or voucher agreement, through community-based hub agencies that partner with subsidy providers, county/local collaboration, through quality rating and improvements systems, etc.?

- a) Temporary Assistance for Needy Families (TANF): webpage of ADSEF: www.adsef.gobierno.pr
- b) Head Start and Early Head Start Programs
- c) Low Income Home Energy Assistance Program (LIHEAP): webpage of ADSEF: www.adsef.gobierno.pr
- d) Supplemental Nutrition Assistance Programs (SNAP- formerly known as Food Stamps): webpage of ADSEF: www.adsef.gobierno.pr
- e) Women, Infants, and Children Program (WIC): webpage of the PR Department of Health: www.salud.gov.pr
- f) Child and Adult Care Food Program (CACFP): webpage of ADSEF: www.adsef.gobierno.pr
- g) Medicaid: webpage of the PR Department of Health: www.salud.gov.pr
- h) Children's Health Insurance Program (CHIP): webpage of the PR Department of Health: www.salud.pr.gov
- i) Individuals with Disabilities Education Act (IDEA): webpage of the PR Department of Health: www.salud.gov.pr, PR Department of Education: www.de.gobierno.pr; and the Office of the Puerto Rico Ombudsman for Persons with Disabilities: www.ombudsmanpr.com
- j) Other State/Federally Funded Child Care Programs (example-State Pre-K): webpage of the PR Department of Education: www.de.gobierno.pr
- k) Other early childhood programs (e.g., Maternal, Infant, and Early Childhood Home Visiting program): webpage of the PR Department of Health: www.salud.gov.pr

2.2.6 Describe how the State/Territory makes available information to parents of eligible children, the general public, and where applicable, providers (see also section 6) about research and best practices in child development, including all domains of early childhood development, including social and emotional development, cognitive, and physical health and development (particularly healthy eating and physical activity), and meaningful parent and family engagement. (658E(c)(2)(E)(VI))

- a) Describe how the State/Territory makes information about research and best practices in child development available to 1) parents of eligible children, 2) providers and 3) the general public: information is available through links on the webpage of the Lead Agency (ACUDEN). The links are to the PR Department of Education, PR Department of Health who review and update best practices in child development, including cognitive and physical health development. Also a link to the University of Puerto Rico.
- b) Describe what you provide and how (i.e., methods such as written materials, direct communication, etc.): Information is available through the website of the State agencies, and printed materials are available on the corresponding agency.
- c) Describe who you partner with to make information about research and best practices in child development available: PR Department of Education, Department of Health, and the University of Puerto Rico.

- 2.2.7 Describe how information on the State/Territory’s policies regarding the social emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention and support models, and policies on expulsion of preschool aged children (from birth to five for purposes of this requirement), in early childhood programs receiving CCDF is collected and disseminated to parents, providers and the general public. (658E(c)(2)(E)(i)(VII))
- a) Describe how the State/Territory makes information regarding social emotional/behavioral and early childhood mental health of young children, which may include positive behavioral intervention support models, available to parents of eligible children, providers and the general public. At minimum, describe **what** you provide (e.g., early childhood mental health consultation services to child care programs) and **how** (i.e., methods such as written materials, direct communication, etc.) for each group:
 - i. Parents: Information available in the webpage of ACUDEN, trainings, and conferences through partners and entities that receive delegation of CCDF funds to provide childcare. ACUDEN published two manuals that are available to parents: (1) socio-emotional development for families: positive options for families; (2) educational activities at home and development of state standards by group category.
 - ii. Providers: Information available in the webpage of ACUDEN, trainings, and conferences through partners. ACUDEN published two manuals that are available to parents: (1) socio-emotional development for families: positive options for families; (2) educational activities at home and development of state standards by group category.
 - iii. General public: Information available in the webpage of ACUDEN, trainings, and conferences through CENTRANA. ACUDEN published two manuals that are available through partners (United Ways and CENTRANA centers): (1) socio-emotional development for families: positive options for families; (2) educational activities at home and development of state standards by group category.
 - b) Describe any partners used to make information regarding social-emotional/behavioral and early childhood mental health of young children available: Partnerships made through Memorandums of Understanding and administrative directives were made with: ADFAN; “*Redes de Apoyo Familiar y Convivencia Comunitaria*”- Program of the PR Department of the Family that establishes family support networks and community life in high risk communities; Head Start/Early Head Start Programs; United Ways, CENTRANA, faith and community based entities.
 - c) Does the State have a written policy regarding preventing expulsion of:
 - Preschool-aged children (from birth to five) in early childhood programs receiving child care assistance?
 - Yes. If yes, describe how the State/Territory makes information about that policy available to parents, providers and the general public (what you provide, how you provide and any partners used) and provide a link: Information is available at the website of the Lead Agency: www.acuden.pr.gov; written materials and brochures are available at the Lead Agency and partners providing child care services and the resource and referral entities (CENTRANA).
 - No.
 - School-age children from programs receiving child care assistance?
 - Yes. If yes, describe how the State/Territory makes information about that

policy available to 1) parents, 2) providers and 3) the general public (what you provide, how you provide and any partners used) and provide a link: Information is available at the website of the Lead Agency: www.acuden.pr.gov; written materials and brochures are available at the Lead Agency and partners providing child care services and the resource and referral entities (CENTRANA).

No.

2.2.8 Coordination with Other Partners to Increase Access to Developmental Screenings

The State/Territory must develop and describe procedures for providing information on and referring families to existing developmental screening resources and services. (658E(c)(2)E(ii)) At a minimum, the State/Territory must establish procedures to provide information to families

and child care providers on: (1) Early and Periodic Screening, Diagnosis, and Treatment program

under the Medicaid program carried out under Title XIX of the Social Security Act (42 U.S.C. 1396

et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and (2) a description of

how a family or child care provider receiving CCDF may utilize the resources and services to obtain developmental screenings for children receiving CCDF who may be at risk for cognitive or

other developmental delays, which may include social, emotional, physical, or linguistic delays.

Describe the status of the State/Territory's procedures for providing information on and referring families to existing developmental screening services.

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency policy citation(s)_____ and:

a) Describe procedures, including timelines for when infants, toddlers and preschoolers should be screened:

Adaptation Phase: Children begin services and the adaptation phase may take up to eight (8) weeks. Educational staff begins the administration of the Ages & Stages Questionnaires® (ASQ-3 and ASQSE-2 (which takes approximately 45 working days), the Portage Guideline, and the implementation of the Pyramid Model. The ASQ measures important developmental areas of the child, including: speech, physical aptitude, social ability, and ability to solve problems. The ASQSE-2 allows teachers to monitor the behavior and socio-emotional development of the children. Results are documented in the record of each child. The staff assesses results and discusses them with family to provide information, recommendations to aid the developmental process of the child. Referrals are made, if needed, to the Coordinator of Early Childhood and external resources.

b) Describe how CCDF families or child care providers receiving CCDF may utilize the resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays

The Lead Agency provides families and providers the list of resources and services available in their geographical area. They may choose to use their

primary physician to identify the best resource for evaluation and diagnosis, which in most cases is covered by the Territory if they participate in the public health system or use the public services. Services are primarily provided through programs sponsored by the Department of Health and the Department of Education. The Lead Agency follows the referral, through regional coordinators who may help in the referring and scheduling process, as needed.

- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)

- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) not yet started, partially implemented, substantially implemented, other)

- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable.
 - Unmet requirement - Identify the requirement(s) to be implemented

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)

- Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

2.2.9 Describe how the State/Territory meets the requirement to maintain a record of substantiated parental complaints. (658E(c)(2)(C))

- a) How does the State/Territory define substantiated parental complaint?

The Institutional Maltreatment Unit (IMU) of the Administration of the Families and Children, Department of the Family, investigate all complaints received from the Child Care Program, other agencies and community. Substantiated complaints are those that after been investigated the IMU have sufficient evidence to conclude that a child has been victim of maltreatment or negligence, or that is at the risk of being.

- b) How does the State/Territory maintain a record of substantiated parental complaints about providers (e.g., how long are records maintained and in what format)

The IMU Policy Manual established that the records of substantiated complaints are include in the Central Registry of the Administration of Families and Children. The complaint will be eliminated in a period of five (5) years after the case investigation is closed. A closed case is one that have been

investigated, substantiated and have receive assistance, training and follow-up in order to reduce the risk of another abuse or neglect situation. In the event that the Agency received another complaint of the same Institution (provider) IMU will be keep the complaint in the Central registry for another five (5) years. It is excluded from this policy all confirmed sexual abuse cases which will be maintained in the Registry.

Records are keep in two ways, by electronic records containing all the facts of the investigation and files that are keep at the Administration of the Families and Children which contain all the original evidence, documents and the proofs of the investigation.

- c) How does the State/Territory make substantiated parental complaints available to the public on request

PR State Law established that all records related to maltreatment or neglect of children are confidential and details of the investigation and evidence is not available to the public. The law requires that no one, official, employee or agency, will have access to the records unless is for compliance with the purposes directly related to the administration of this law or under a court order. In exceptional circumstances the Administration for the Families and Children can give access to review the records (without taking out copies):

- (a)** The employee of the Department of the Families and the Agency that give the direct services when is to comply with the functions that are assign by the Law.
- (b)** The attorney in families matters, the attorney in child matters, the Prosecutor and the Police Department that work in the special unit of sexual offenses, child abuse, domestic violence, in the cases that are under investigation in relation to the crimes described in the state law.
- (c)** A License Psychologist, Psychiatrist, Counselor, or Health Specialist that provide direct services to a child participating of the State Protection Services as defines by the State law.
- (d)** The court, if it determined that the access to the records is necessary to make a decision in a controversy related to the wellness of a child, in that cases, the access will be limited to the inspection in the judge office.

Any of the persons authorized to obtain confidential information cannot share or make it public. In that prohibition is not included, the Attorney in Families Matters, Prosecutors, Police Officers, Attorney in Child Matters, when the information is going to be use in a judicial or administrative procedure.

Parents that make complains about maltreated or neglect in the Child Care Center can access information about the conclusion and typology of the case. They cannot have details of the investigation.

- d) Describe how the State/Territory defines and maintains complaints from others about providers

State Regulations does not make a complaints categories or treated different. All records are manage and keep by the same rules. Answer on 2.2.9(b) apply to this section.

2.2.10 How will the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language?

Check the strategies, if any, that your State/Territory has chosen to implement.

- Application in other languages (application document, brochures, provider notices)
- Informational materials in non-English languages
- Training and technical assistance in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Bilingual outreach workers
- Partnerships with community-based organizations
- Other
- None

2.2.11 If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State/Territory has the ability to have translation/interpretation in all primary and secondary languages: Spanish

2.2.12 Describe how the Lead Agency or partners provide outreach and services to eligible persons with disabilities

2.3 Website for Consumer Education

The CCDBG Act of 2014 added a requirement that States and Territories have a website describing the State/Territory processes for licensing and monitoring child care providers, processes for conducting criminal background checks as required by law (see section 5.3), and offenses that prevent individuals from being child care providers, and aggregate information on the number of deaths, serious injuries and child abuse in child care settings.

The State/Territory also must make public certain information about the results of such monitoring as required by law for both licensed and unlicensed providers receiving CCDF (see section 5.2) on a website in a way that is consumer-friendly and in an easily accessible format.

(658E(c)(2)(D)) In order for a website to be a useful tool for parents, it should be easy to navigate, with a minimum number of clicks, and in plain language. States and Territories must post the results of the monitoring and inspection reports on the website no later than

November 19, 2017. All other components of the website must be completed no later than September 30, 2016.

2.3.1 Describe the status of State/Territory's consumer education website.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Provide the link to the website and describe how the consumer

education website meets the requirements to:

- a) Share provider-specific information about health and safety, licensing or regulatory requirements met by the provider (including the last date of inspection, and any history of violations). Describe:

Through the agency web page, www.acuden.pr.gov, we post all the information regarding the Health and Safety Area. That includes manuals, facts sheets, CCDF Policy and other documents in a consumer friendly way to guide the providers in the certification process.

A provider's directory has been created with all the information regarding inspections and monitories results. The information will be updated frequently by the Health and Safety Area. The directory highlights those providers with findings and their progress to comply.

- b) Include a description of health and safety requirements and licensing or regulatory requirements for child care providers

Department of the Family Licensing Office Manual is posted in our web page to be access by CCDF providers.

- c) Include a description of the processes for licensing, background checks, monitoring, and offenses that prevent individuals from being providers

The background checks procedures use by the Health and Safety Area are posted in our web page. Also an information sheet about the offenses that prevent individuals from being providers is available

- d) Provide information about the number of deaths, number of serious injuries as defined by the State/Territory and the number of incidences of substantiated child abuse in child care settings

The Institutional Maltreatment Unit of the Administration of Families and Children provide us with the information about the numbers of deaths, serious injuries and substantiated child abuse in CCDF providers. That information is be available to the public in our web page.

- e) Describe how the website is consumer-friendly, for example, allowing multiple ways to search for providers, defining terms such as exempt care and corrective action plans, presents the results of monitoring inspections in plain language, providing frequently asked questions, is accessible in multiple languages upon request and to persons with disabilities through multiple formats, differentiating between violations based on risk to children, and easy to locate and navigate ____

ACUDEN's web page have an area designated only to Child Care Program to ensure easy access. The information is publish on a consumer friendly way to facilitate the understanding of all providers, parents and community. Definition of terms are included by pointing the word. Inspections are presented in a way that guaranties the confidentiality of investigations but brings enough information for consumer education purpose.

- Not implemented. If not implemented, the State/Territory must provide a

State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date. Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016 for all components of the website except posting the results of the monitoring on the website which is November 19, 2017)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, in progress, partially completed, substantially completed, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet Requirement(s) – Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.):
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity:
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

3 Provide Stable Child Care Financial Assistance to Families

The expanded purposes of CCDBG highlight the opportunities States and Territories have to “deliver high-quality, coordinated early childhood care and education services to maximize parents’ options and support parents trying to achieve independence from public assistance”; and “to improve child care and development of participating children.” (658A(b)) Young children learn in the context of their relationships with adults, including their child care teacher or provider. The unintentional consequence of child care assistance that is linked to adult work and school obligation is that child care arrangements – and the opportunity for children to form trusting relationships with teachers – are often interrupted and unstable. Child care financial assistance policies that make it easier to get and keep assistance support continuity of care and relationships between the child and child care provider and enable parents to stay employed or complete training/education. Child care support that extends until families are able to pay the full cost of care themselves promotes longer lasting economic stability for families. CCDF funds may support families until they reach 85% of State Median Income (SMI).

The CCDBG Act of 2014 included requirements to establish minimum 12-month eligibility and redetermination periods, requiring that States and Territories have a process to account for irregular fluctuations in earnings, a policy ensuring that families’ work schedules are not disrupted by program requirements, policies to provide for job search of not less than three (3) months, and to describe policies for graduated phase- out of assistance. The definition of an eligible child

includes that a family’s assets may not exceed \$1,000,000 (as certified by a member of such family). Procedures for enrollment of homeless children and children in foster care if served

pending completion of documentation are also now required. There is nothing in statute to prohibit States from establishing policies that extend eligibility beyond 12 months or establish other similar policies to align program requirements that allow children enrolled in Head Start, Early Head Start, state or local prekindergarten and other collaborative programs to finish the program year and to promote continuity for families receiving services through multiple benefits programs.

3.1 Eligible Children and Families

At the point in time when eligibility is determined, children must (1) be under the age of 13, (2) reside with a family whose income does not exceed 85 percent of the State's median income for a family of the same size, and whose family assets do not exceed \$1,000,000 (as certified by a member of such family); and who (3)(a) resides with a parent or parents who are working or attending a job training or educational program; or (b) is receiving, or needs to receive, protective services and resides with a parent or parents not described in (3a). (658P(4))

3.1.1 Eligibility Criteria Based upon Child's Age

- a) The CCDF program serves children from (0 weeks/months/years) to 12 years (through age 12).
- b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care? (658E(c)(3)(B)), 658P(3))
 - Yes, and the upper age is 18 years and 11 months (may not equal or exceed age 19). Provide the Lead Agency definition of physical or mental incapacity – Individual who has been diagnosed with physical, mental or sensory impairment that substantially limits one or more major life activities in their daily lives.
 - No.
- c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))
 - Yes, and the upper age is 18 years and 11 months (may not equal or exceed age 19)
 - No.

3.1.2 How does the Lead Agency define the following eligibility terms?

- a) residing with – child that is physically residing with his/her parents by blood or legal guardians
- b) in loco parentis – legal guardian assigned by a court or the Department of the Family for the custody of the minor's daily activities

3.1.3 Eligibility Criteria Based on Reason for Care

- a) How does the Lead Agency define “working, attending job training and education” for the purposes of eligibility at the point of determination? Provide a brief description below, including allowable activities and if a minimum number of hours is required by State/Territory (not a federal requirement).
 - Working- Permitted activity performed in exchange of a salary. It must be verifiable and paid as established by state and federal laws and the Department of Labor. The minimum time required per week to consider the activity permitted is 20 hours.
 - attending job training- Permitted activity consisting of any educational, vocational or occupational oriented course aimed to acquire more knowledge to develop necessary skills for employment. The minimum time required per week to consider the activity permitted is 20 hours.

- attending education- Permitted activity consisting of participation in a program aimed to develop knowledge and skills for obtaining and retaining employment. This program may be online. It should consist of at least a minimum enrollment of twelve (12) credits in an institution accredited by the Council on Higher Education of Puerto Rico. Likewise, it refers to participation in courses not counted in credits, with an engagement of at least twelve (12) hours per week; such as practices, internships and laboratories. Includes graduates enrolled college students in master's or doctoral courses with an academic engagement of six (6) credits or six (6) hours per week.
- b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?
- Yes.
 - No. If no, describe additional requirements
- c) Does the Lead Agency provide child care to children in protective services?
- Yes. If yes, how does the Lead Agency define “protective services” for the purposes of eligibility? Provide a brief description below.
 - 1) Definition of protective services – Children are at risk of abuse, neglect and exploitation. Are in the custody of the State, represented by the Department of the Family, and are located in approved homes or a family resources.
 - 2) Does the Lead Agency waive the co-payment and income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis? (658E(c)(5))
 - Yes.
 - No.

Note – If the Lead Agency elects to provide CCDF-funded child care to children in foster care whose foster care parents are not working, or who are not in education/training activities for purposes of CCDF these children are considered to be in protective services and should be included in the protective services definition above.
 - No

3.1.4 Eligibility Criteria Based on Family Income

- a) How does the Lead Agency define “income” for the purposes of eligibility at the point of determination?
- Definition of income – Salary earned as result of the employment of parents or guardians and their respective spouses.

c) Provide the CCDF income eligibility limits in the table below.

Family size	(a) 100% of State Median Income (SMI) (\$/month)	(b) 85% of State Median Income (SMI) (\$/month) [Multiply (a) by 0.85]
1	981	834
2	1328	1128
3	1674	1423
4	2021	1718
5	2368	2012
6	2714	2307
7	3061	2602
8	3408	2896
9	3754	3191
10	4101	3486
11	4448	3780
12	4794	4075

Reminder - Income limits must be provided in terms of current State Median Income (SMI) (or Territory Median Income) even if federal poverty level is used in implementing the program. Federal

poverty guidelines are available at <http://aspe.hhs.gov/poverty/index.cfm> .

- c) SMI Source and year
- d) These eligibility limits in column (c) became or will become effective on
- e) Provide the link to the income eligibility limits

3.1.5 Graduated Phase-Out of Assistance

The CCDBG Act of 2014 added a provision that requires States and Territories to provide for a graduated phase-out of assistance for families whose income has increased at the time of redetermination, but remains below the federal threshold of 85% of State median income. Providing a graduated phase-out supports long-term family economic stability by allowing for wage growth and a tapered transition out of the child care subsidy program. (658E (c)(2)(N)(iv)) This might be achieved through policies such as establishing a second income eligibility threshold at redetermination (e.g., establishing a different eligibility threshold for families first applying for assistance and those already receiving assistances, sometimes called and "exit threshold") or by granting a sustained period of continued assistance to the family before termination.

Describe the status of the State/Territory's policy regarding graduated phase-out of assistance.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the policies and procedures for graduated phase-out- Article 2.4 of the PR Child Care Regulation. The

Lead Agency monitors the family contribution, based on the sliding fee scale (SFS). The SFS requires the family to contribute with the monthly payment of childcare services, according to their income. As the income rises, their contribution for the childcare rises until they prove to be economically prepared to assume 100% of the cost. Once the family exceeds 85% of the State median income, the Lead Agency provides a transition period of 3 months of service before the termination of the subvention.

- Not implemented. The State must provide a State-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste tables here. Your responses here will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirements – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

3.1.6 Fluctuation in Earnings

The CCDBG Act of 2014 added a requirement that the Plan shall demonstrate how the State/Territory’s (or designated local entity) processes for initial determination and redetermination take into account irregular fluctuations in earnings. (658E(c)(2)(N)(i)(II)) Note – this change requires that States and Territories have policies to account for the fact that some parents with seasonal or other types of work schedules may have irregular earnings over the course of a year, including changes that temporarily exceed 85% of SMI. States and Territories should have procedures to guide how eligibility and copayments are set in a manner to take such circumstances into account. For example, averaging family income over a period of time to broaden the scope of income verification to be more reflective of annual income rather than tied to a limited time frame that may have seasonal irregularities.

Describe the status of the State/Territory’s policy related to the fluctuation in earnings requirement.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) and describe the circumstances that cover irregular fluctuations of earnings pursuant to this requirement- Article 2.0, Chapter 2 of the PR Child Care Regulation states that when income is the result of self-employment or seasonal work, in which may arise irregular fluctuations of earnings, the eligibility technician will make a mean of the last six months to assess

their compliance with this eligibility criteria.

- Not implemented. If not implemented, the State/Territory must provide a State/Territory specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

3.1.7 Describe how the Lead Agency documents, verifies and maintains applicant information. Check the information that the Lead Agency documents and include in the description what information is required and how often. There are no federal requirements for specific documentation or verification procedures.

- Applicant identity. Describe: verification of a valid drivers license or passport.
- Applicant’s relationship to the child. Describe: birth certificate
- Child’s information for determining eligibility (e.g., identity, age, etc.). Describe: birth certificate
- Work. Describe: job certification, payroll stub or tax return
- Job training or Educational program. Describe: student certification
- Family income. Describe: job certification, payroll stub or tax return
- Household composition. Describe
- Applicant residence. Describe: utilities bill
- Other. Describe

Each applicant has a record with the required information to evaluate eligibility, including evidence of family composition, identity of applicant and children, authorized activity (work, training, education), income, and any other supporting documents that the Lead Agency may deem appropriate. The Lead Agency has a protocol to assure confidentiality, custody, and disposition of the records in compliance with state law and regulation.

Reminder – Lead Agencies are reminded that, for purposes of implementing the citizenship verification requirements mandated by title IV of Personal Responsibility and Work Opportunity Reconciliation Act, only the citizenship and immigration status

of the child, who is the primary beneficiary of the child care benefit, is relevant for eligibility purposes (ACYF-PICC-98-08). States may not deny child care benefits to an eligible child because the parent(s), legal guardians, persons standing in loco parentis, or other household members have not provided information regarding their immigration status. In addition, verification of child citizen status is not required when the child is served in a program meeting Early Head Start/Head Start standards, such as in Early Head Start – Child Care Partnerships, or public educational standards which may include pre-k settings (<http://www.acf.hhs.gov/programs/occ/resource/pi-2008-01>).

3.1.8 Which strategies, if any, will the Lead Agency use to assure the timeliness of eligibility determinations upon receipt of applications?

- Time limit for making eligibility determinations. Describe length of time: Once the application is complete, determination should be made within 30 days. In the case of providers under delegation of funds, the length of time to analyze and notify the determination will begin when the application is received by the CCDF technician.
- Track and monitor the eligibility determination process
- Other. Describe
- None

3.1.9 Informing parents who receive TANF benefits about the exception to the individual penalties associated with the TANF work requirement

Per CCDF regulations, 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 under 6 years of age (98.16(9) and 98.33(b)). This requirement did not change under the reauthorization, however Lead Agencies may wish to re-examine those definitions in light of new purposes articulated in Reauthorization and to promote alignment across programs. Lead Agencies must coordinate with TANF programs to ensure, pursuant that TANF families with young children will be informed of their right not to be sanctioned if they meet the criteria set forth by the State/Territory TANF agency in accordance with section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care. **NOTE:** The TANF agency, not the 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.

- a) Identify the TANF agency that established these criteria or definitions:
State/Territory TANF Agency: ADSEF
- b) Provide the following definitions established by the TANF agency. TANF in Puerto Rico does not include in their regulation or State Plan a formal definition for the following terms:
 - "appropriate child care"
 - "reasonable distance"
 - "unsuitability of informal child care"
 - "affordable child care arrangements"
- c) How are parents who receive TANF benefits informed about the exception to individual penalties associated with the TANF work requirements?

- In writing
- Verbally
- Other. Describe
- List the citation to this TANF policy

3.1.10 The Lead Agency certifies that it will require a family member to certify that the family assets do not exceed \$1,000,000. A check-off on the application is sufficient.

- Yes. The Lead Agency certifies that it will require families to certify that the family assets do not exceed \$1,000,000 no later than September 30, 2016.

3.2 Increasing Access for Vulnerable Children and Families

At a minimum, CCDF requires Lead Agencies to give priority for child care assistance to children with special needs, or in families with very low incomes. This did not change under reauthorization. Prioritization of CCDF assistance services is not limited to eligibility determination (i.e., establishment of a waiting list or ranking of eligible families in priority order to be served). Lead Agencies may fulfill priority requirements in other ways such as higher payment rates for providers caring for children with special needs or waiving co-payments for families with very low incomes (at or below the federal poverty level). (658E(c)(3)(B))

3.2.1 Describe how the Lead Agency will prioritize or target child care services for the following children and families (658E(c)(3)(B)), including definitions, any time limits, grace periods or priority rules in the description:

- a. Provide definition of “Children with special needs” and describe how services are prioritized: Children from 0 to 18 years and 11 months who has been diagnosed with a physical, mental or sensorial impairment that substantially limits one or more of their daily life activities. This population has the third priority in services, after placement of TANF eligible participants, and families under the protection of the territory (PR).
- b. Provide definition of “Families with very low incomes” and describe how services are prioritized: Families with earnings equal or less than 50% of the mean of income, when compare with a same size family. This participants are exempt of the required family contribution and copayment.
- c. Describe how services for families receiving Temporary Assistance for Needy Families (TANF), those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF are prioritized (Section 418(b)(2) of the Social Security Act): Families that are in transition off TANF are identified by the case worker who refer them to the Lead Agency for childcare services. These participants are automatically eligible to receive CCDF subvention.

3.2.2 Improving Access for Homeless Children and Families.

The CCDBG Act of 2014 places greater emphasis on serving homeless children and families. Stable access to high-quality child care provides tremendous benefits to all children, especially our most vulnerable children. Children and families who experience homelessness face many challenges. Improving access to child care can buffer children and families from the challenges and risks associated with homelessness by supporting children’s learning and development in safe, stable and nurturing environments. Under the new law, States and Territories are required to use CCDF funds to 1) allow homeless children to receive CCDF assistance after an initial eligibility determination but before

providing required documentation (including documentation related to immunizations); 2) providing training and technical assistance to child care providers on identifying and serving homeless children and families (addressed in Section 6); and 3) conduct specific outreach to homeless families. (658E(c)(3))

States and Territories also must establish a grace period that allows homeless children and children in foster care (if served by the Lead Agency) to receive CCDF assistance while their families are taking the necessary actions to comply with immunization and other health and safety requirements as described in Section 5. This flexibility will make it significantly easier for these vulnerable families to access child care services. This language is consistent with current requirements established through CCDF regulations in 1998, which required a grace period in which children can receive services while families take the necessary actions to comply with the immunization requirements. (658E(c)(2)I)(i)(I)) ACF recommends States and Territories consult the definition of homeless in the McKinney-Vento Act (section 725 of subtitle VII-B) as you implement the requirements of this section as that definition is consistent with the required CCDF administrative data reporting requirements. Describe the status of the State/Territory's procedures to enroll and provide outreach to homeless families and establish a grace period for children in foster care, if served, for meeting immunization requirements

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe the following:

- a. Procedures to increase access to CCDF subsidies for homeless children and families, including the grace period to comply with immunization and health and safety requirements: Within 30 days of enrollment, families must submit immunization records.
- b. Procedures to conduct outreach to homeless families to improve access to child care services: The outreach is made by the Multisectorial Council in Support to the Homeless Population, Department of the Family. They work with actual and potential homeless families to provide prevention and information, during placement for services, which includes childcare.
- c. Procedures to provide a grace period to comply with immunization and other health and safety requirements to expedite enrollment for children who are in foster care if served by the Lead Agency to improve access to child care services: Families are given 30 day grace period after enrollment to provide immunization records, if not available at initial screening.

Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirements – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented

- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

3.3 Protection for Working Parents

3.3.1 Twelve-Month Eligibility

The CCDBG Act of 2014 establishes a minimum 12-month eligibility and redetermination period for CCDF families. States and Territories are required to demonstrate in the Plan that no later than September 30, 2016 each child who receives assistance will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for a minimum of 12 months before the State/Territory redetermines the eligibility of the child, regardless of changes in income (as long as income does not exceed the federal threshold of 85% of State median income) or temporary changes in participation in work, training, or education activities. (658E(c)(2)(N)(i) & (ii))

Note that this change means a State/Territory may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the State’s income eligibility threshold, but not the federal threshold of 85% SMI.

In addition, this change means the State/Territory may not terminate assistance prior to the end of the 12-month period if family experiences a temporary job loss or temporary change in participation in a training or education activity. Examples of temporary changes include but are not limited to: absence from employment due to maternity or extended medical leave, changes in seasonal work schedule, or if a parent enrolled in training or educational program is temporarily not attending class between semesters.

Describe the status of the State/Territory’s establishment of 12-month eligibility and redetermination periods for CCDF families.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s) and describe circumstances considered temporary changes in work, education or training that are not subject to termination: Article 2.5 of the CCDF Regulation in Puerto Rico provide up to three month of transition to participants who loss work or interrupt education or training to engage in a qualified activity.
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

- Implemented requirement(s) – Identify any requirement(s) implemented to date__
- Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

3.3.2 State and Territory option to terminate assistance prior to 12 months

The CCDBG Act of 2014 provides States and Territories the option – but does not require them – to terminate assistance prior to re-determination at 12 months if a parent loses employment or if he or she stops attending a job training or education program (i.e., if the parent experiences a non-temporary change in their status as working, or participating in a training or education program). However, prior to terminating the subsidy, the State/Territory must provide a period of continued child care assistance of at least 3 months to allow parents to engage in job search, resume work, or to attend an education or training program as soon as possible. (658E(c)(2)(N)(iii)) Nothing in the statute prohibits the State/Territory from starting a new 12-month eligibility and redetermination period if families are eligible at the end of their job search, training or education attendance period.

Note that unless the State allows a minimum 3-month job search period – the State/Territory may not exercise the option to terminate assistance based on a parent’s non-temporary job loss or cessation of attendance at a job training or educational program prior to the end of the minimum 12-month eligibility and re-determination period. The statute does not specify any documentation that States/Territories must require parents to submit regarding activities during periods of job search or finding training or education program requirements for this period.

Does the State/Territory terminate assistance prior to 12 months due to a parent’s non-temporary loss of work or cessation of attendance at a job training or education program?

- Yes, the State/Territory terminates assistance prior to 12 months due to parent’s loss of work or cessation of attendance at a job training or education program ONLY. List the Lead Agency’s policy citation(s) and describe the circumstances considered to be non temporary job, education or training loss and provide the duration allowed for job search or resuming attendance in training or education programs: Termination of CCDF assistance after 3 months of unsuccessful job search or interruption of education or training if not resumed after that period. A change of activity (for example job placement after training or education) is allowed during eligibility period, but loss of activity for more than 90 days will lead to termination of assistance.
- No, the State/Territory does not allow this option.

3.3.3 Prevent Disruption of Work

The CCDBG Act of 2014 added a requirement that States and Territories must describe in the

Plan the procedures and policies in place to ensure that parents (especially parents in families receiving assistance under TANF) are not required to unduly disrupt their employment,

education or job training activities in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility for assistance. (658E(c)(2)(N)(ii))

Examples include implementing re-determination strategies to verify income and employment electronically as opposed to more onerous practices such as asking parents and families to come to the subsidy office for an in-person visit, or aligning eligibility with other early care and education or public benefits programs to collect information centrally. The process by which States and Territories collect eligibility documentation represents a potential barrier to services, particularly when documentation can only be provided in-person during standard work hours. States and Territories can offer a variety of family-friendly mechanisms for submitting documentation for eligibility determinations and/or re-determination.

Describe the status of the State/Territory's redetermination procedures and policies to ensure that parents (especially parents receiving TANF) do not have their employment, education or job training unduly disrupted in order to comply with the State/Territory's or designated local entity's requirements for redetermination of eligibility.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency's policy citation(s) and describe the policies and procedures for not unduly disrupting employment: Article 2.13 of the CCDF Regulation in Puerto Rico states that the eligibility assessment will be valid for period no less than 12 months. The results of the assessment will be notified by written, with the notice of their right to appeal and adverse determination.
- Not implemented. If not implemented, the State/Territory must provide a State/Territory specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete

implementation of this activity

3.4 Family Contribution to Payment

The statute requires Lead Agencies to establish a sliding fee scale that varies based on income and the size of the family to be used in determining each family's contribution (i.e., co-payment) to the cost of child care that is not a barrier to families receiving CCDF. (658E(c)(5) In addition to income and size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. The sliding fee scale is subject to review by ACF as part of ongoing monitoring efforts to CCDBG compliance.

3.4.1 Provide the CCDF copayments in the chart below according to family size for one child in care. Note – If the sliding fee scale is not statewide, check here . Describe how many jurisdictions set their own sliding fee scale _____. Fill in the chart based on the most populous area of the State.

HOMES - INFANTS/TODDLERS					
		Part-time Monthly Rates		Full-time Monthly Rates	
		Family		Family	
		Copayment	ACUDEN	Copayment	ACUDEN
00% -	50%	0.00	191.00	0.00	270.00
51% -	55%	9.55	181.45	13.50	256.50
56% -	60%	19.10	171.90	27.00	243.00
61% -	65%	28.65	162.35	40.50	229.50
66% -	70%	38.20	152.80	54.00	216.00
71% -	75%	47.75	143.25	67.50	202.50
76% -	80%	57.30	133.70	81.00	189.00
81% -	85%	66.85	124.15	94.50	175.50

CENTERS - INFANTS/TODDLERS					
		Part-time Monthly Rates		Full-time Monthly Rates	
		Family		Family	
		Copayment	ACUDEN	Copayment	ACUDEN
00% -	50%	0.00	325.00	0.00	351.00
51% -	55%	16.25	308.75	17.55	333.45
56% -	60%	32.50	292.50	35.10	315.90
61% -	65%	48.75	276.25	52.65	298.35
66% -	70%	65.00	260.00	70.20	280.80
71% -	75%	81.25	243.75	87.75	263.25
76% -	80%	97.50	227.50	105.30	245.70
81% -	85%	113.75	211.25	122.85	228.15

CENTERS - PRESCHOOLERS					
		Part-time Monthly Rates		Full-time Monthly Rates	
		Family		Family	
		Copayment	ACUDEN	Copayment	ACUDEN
00% -	50%	0.00	325.00	0.00	338.00
51% -	55%	16.25	308.75	16.90	321.10
56% -	60%	32.50	292.50	33.80	304.20
61% -	65%	48.75	276.25	50.70	287.30
66% -	70%	65.00	260.00	67.60	270.40
71% -	75%	81.25	243.75	84.50	253.50
76% -	80%	97.50	227.50	101.40	236.60
81% -	85%	113.75	211.25	118.30	219.70

HOMES - PRESCHOOLERS						
			Part-time Monthly Rates		Full-time Monthly Rates	
			Family		Family	
			Copayment	ACUDEN	Copayment	ACUDEN
00% - 50%			0.00	182.00	0.00	264.00
51% - 55%			9.10	172.90	13.20	250.80
56% - 60%			18.20	163.80	26.40	237.60
61% - 65%			27.30	154.70	39.60	224.40
66% - 70%			36.40	145.60	52.80	211.20
71% - 75%			45.50	136.50	66.00	198.00
76% - 80%			54.60	127.40	79.20	184.80
81% - 85%			63.70	118.30	92.40	171.60

CENTERS - SCHOOL-AGE			
Part-time Monthly Rates			
Family			
		Copayment	ACUDEN
00% - 50%		0.00	258.00
51% - 55%		12.90	245.10
56% - 60%		25.80	232.20
61% - 65%		38.70	219.30
66% - 70%		51.60	206.40
71% - 75%		64.50	193.50
76% - 80%		77.40	180.60
81% - 85%		90.30	167.70

HOMES - SCHOOL-AGE			
Part-time Monthly Rates			
Family			
		Copayment	ACUDEN
00% - 50%		0.00	220.00
51% - 55%		11.00	209.00
56% - 60%		22.00	198.00
61% - 65%		33.00	187.00
66% - 70%		44.00	176.00
71% - 75%		55.00	165.00
76% - 80%		66.00	154.00
81% - 85%		77.00	143.00

CENTERS - SPECIAL NEEDS						
			Part-time Monthly Rates		Full-time Monthly Rates	
			Family		Family	
			Copayment	ACUDEN	Copayment	ACUDEN
00% - 50%			0.00	216.00	0.00	351.00
51% - 55%			10.80	205.20	17.55	333.45
56% - 60%			21.60	194.40	35.10	315.90
61% - 65%			32.40	183.60	52.65	298.35
66% - 70%			43.20	172.80	70.20	280.80
71% - 75%			54.00	162.00	87.75	263.25
76% - 80%			64.80	151.20	105.30	245.70
81% - 85%			75.60	140.40	122.85	228.15

HOMES - SPECIAL NEEDS						
			Part-time Monthly Rates		Full-time Monthly Rates	
			Family		Family	
			Copayment	ACUDEN	Copayment	ACUDEN
00% - 50%			0.00	164.00	0.00	260.00
51% - 55%			8.20	155.80	13.00	247.00
56% - 60%			16.40	147.60	26.00	234.00
61% - 65%			24.60	139.40	39.00	221.00
66% - 70%			32.80	131.20	52.00	208.00
71% - 75%			41.00	123.00	65.00	195.00
76% - 80%			49.20	114.80	78.00	182.00
81% - 85%			57.40	106.60	91.00	169.00

3.4.5 How will the Lead Agency ensure the family contribution/co-payment, based on a sliding fee scale, is affordable and not a barrier to families receiving CCDF? Check all that apply.

- Limits the maximum co-payment per family. Describe: A table with maximum co-payment was adopted and it considers the family size, reducing the co-payment as the family grows.
- Limits combined amount of copayment for all children to a percentage of family income. List the percentage of the copayment limit and describe
- Minimizes 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 discussed in 3.1.5. Describe: A transition period of 3 months of service is extended to families that loss eligibility. The sliding fee scale is designed to require higher family contributions as the family income increases. When the family reaches the family income mean the process will allow them to phase out the subsidy as they gradually increase the family contribution, according with their earnings.
- Does not allow providers to charge families the difference between the maximum payment rate (addressed in section 4) and their private pay rate in addition to the copayment they are paying. Describe
- Covers all fees (such as registration, supplies, field trips) to minimize the additional fees charged to the families by the provider. Describe
- Other. Describe

4 Ensure Equal Access to High Quality Child Care for Low-Income Children

The 2014 reauthorization of the CCDBG Act is designed to help States and Territories advance improvements to the quality of child care in order to promote the healthy social-emotional, cognitive and physical development of participating children. Ensuring that low-income and vulnerable children can access high-quality care (and remain enrolled to school entry and beyond) is an equally important purpose of CCDBG. Payment levels and policies have a major impact on access.

The CCDBG Act of 2014 revises the requirement for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the cost of child care services by geographic area, type of provider, and age of child. Also, a State/Territory may develop and conduct an alternative methodology for setting payment rates, such as a cost estimation model, to take into account the cost of meeting quality requirements.

To provide stability of funding and encourage more child care providers to participate in the subsidy program, the State/Territory’s payment practices for CCDF child care providers must reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory, such as paying for supplies, field trips, registration fees. In addition, to the extent practicable, the State/Territory must implement enrollment and eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child’s occasional absence due to holidays or unforeseen circumstances such as illness or closures due to emergency.

The CCDBG Act of 2014 added a provision that the State/Territory must also develop and implement strategies to increase the supply and improve the quality of child care services for: (1) children in underserved areas; (2) infants and toddlers; (3) children with disabilities (the CCDBG Act of 2014 added a new definition of child with disability (658(P)(3)); and (4) children who receive care during nontraditional hours. With respect to investments to increase access to

programs providing high-quality child care and development services, the State/Territory must give priority to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs. (658 E(c)(2)(M))

4.1 Parental Choice In Relation to Certificates, Grants or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either enrolling such child with a provider that has a grant or contract for the provision of service or receiving a child care certificate. (658E(c)(2)(A)) This did not change under the CCDBG Act of 2014.

4.1.1 Describe how the parent of each eligible child is advised that the Lead Agency offers the option of selecting a provider that has a grant or contract or receiving a child care certificate (658E(c)(2)(A)(i), 658P(2)). Initial interview for eligibility advice is provided on their right to choose the provider of childcare and a list of eligible providers is available at all regional offices and the website.

4.1.2 Describe how the parent is informed of the option to choose from a variety of child care categories – such as private, not-for-profit, faith-based providers (if using a certificate), centers, family child care homes, or in-home providers. (658E(c)(2)(A)(i), 658P(2), 658Q) Check all that apply.

- Certificate form provides information about the choice of providers, including high quality providers
- Certificate is not linked to a specific provider so parents can choose provider of choice
- Consumer education materials on choosing child care
- Referral to child care resource and referral agencies
- Co-located resource and referral in eligibility offices
- Verbal communication at the time of application
- Community outreach, workshops or other in-person activities
- Other. Describe

4.1.3 Child Care Services Available through Grants or Contracts

a) In addition to offering certificates, does the Lead Agency provide child care services through grants or contracts for child care slots? (658A(b)(1))) **Note:** Do not check “yes” if every provider is simply required to sign an agreement in order to be paid in the certificate program.

- Yes. If yes, **describe:**
 - the type(s) of child care services available through grants or contracts: center-based providers and family child care networks.
 - the entities who receive contracts (e.g., shared services alliances, child care resource and referral agencies, family child care networks, community based agencies, child care providers, etc.): family child care networks, faith and community based agencies, and child care providers.
 - the process for accessing grants or contracts: apply in person or through referrals
 - the range of providers available through grants or contracts: Between 85-90.
 - how rates for contracted slots are set through grants and contracts: annually a request for proposal is presented to increase the supply of services in the community. The rate is based on the needs and availability of services in the community and the activities to improve quality proposed by the provider.
 - how the State/Territory determines which entities to contract with for

- increasing supply and/or improving quality: Selection of proponents is competitive and is based on the demand of services and availability of funds.
- if contracts are offered statewide and/or locally: territory-wide.

No. If no, skip to 4.1.4.

b) Will the Lead Agency use grants or contracts for child care services to achieve any of the following (check all that apply):

- Increase the supply of specific types of care with grants or contracts for:
 - Programs to serve children with disabilities
 - Programs to serve infants and toddlers
 - Programs to serve school-age children
 - Programs to serve children needing non-traditional hour care
 - Programs to serve homeless children
 - Programs to serve children in underserved areas
 - Programs that serve children with diverse linguistic or cultural backgrounds
 - Programs that serve specific geographic areas
 - Urban
 - Rural

Other. Describe

Improve the quality of child care programs with grants or contracts for:

- Programs providing comprehensive services, such as integrated child care in Head Start, Early Head Start, summer or other programs
- Programs meeting higher quality standards, such as higher rated QRIS programs, accreditation or state pre-k programs that meet higher quality standards
- Programs that provide financial incentives to teaching staff linked to higher education and qualifications link increased education requirements to higher compensation
- Programs to serve children with disabilities or special needs
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve homeless children
- Programs to serve children in underserved areas
- Programs that serve children with diverse linguistic or cultural backgrounds
- Programs that serve specific geographic areas
 - Urban
 - Rural

Other. Describe

4.1.4 The Lead Agency certifies policies and procedures are in place that afford parents unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds. (658E(c)(2)(B)) This requirement did not change under the CCDBG Act of 2014. Describe the policies and procedures for unlimited access: Article 3.1 (B)(5) of the PR Child Care Regulation states that providers shall allow parents or guardian free access to facilities at all times the children are participating in the childcare.

4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use. Will the Lead Agency limit the use of in-home care in any way?

- Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check

all that apply.

- Restricted based on minimum number of children in the care of the provider to meet minimum wage law or Fair Labor Standards Act. Describe: The State licensing office establishes a maximum of six (6) children.
 - Restricted based on provider meeting a minimum age requirement. Describe: Provider shall have no less than eighteen (18) years old.
 - Restricted based on hours of care (certain number of hours, non-traditional work hours). Describe
 - Restricted to care by relatives. Describe
 - Restricted to care for children with special needs or medical condition. Describe: when children have special conditions that impair his/her mobility.
 - Restricted to in-home providers that meet some basic health and safety requirements. Describe:
 - Other. Describe
- No

4.2 Assessing Market Rates and Child Care Costs

The new law revises the provisions for a market rate survey (MRS) so that: (1) it must be statistically valid and reliable; and (2) it must reflect variations in the price to parents of child care services by geographic area, type of provider, and age of child (658E(c)(4)(B)). A State/Territory has the option to develop and use a statistically valid and reliable alternative methodology for setting payment rates, such as a cost estimation model. Any payment rates established using an alternative methodology or market rate survey must be reviewed and approved by ACF as part of the CCDF Plan review process. Because the alternative methodology is a new basis for setting payment rates, we highly recommend any State or Territory considering an alternative methodology to submit a description of its proposed approach to the ACF Regional Office in advance of the Plan submittal in order to avoid delays with Plan approval.

The MRS or alternative methodology must be developed and conducted no earlier than two years before the date of submission of the Plan (instead of two years before the effective date of the Plan, as previously required for the MRS).

The State must consult with the State Advisory Council (SAC) or other state- or state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities prior to developing and conducting the MRS or alternative methodology.

The State/Territory must prepare a detailed report containing the results of the MRS or alternative methodology. The State must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Internet in an easily interpretable and understandable form.

The State/Territory must set CCDF subsidy payment rates in accordance with the results of the current MRS or alternative methodology. When setting payment rates, the law requires States and Territories to take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered reimbursement or other methods) and without, **to the extent practicable**, reducing the number of families receiving CCDF relative to the number served as of November 2014. In taking the cost of providing quality into consideration, it is important to consider such key factors as what it takes to support increased stability and reduced provider turnover when setting payment rates.

4.2.1 Developing and Conducting a Market Rate Survey (MRS) and/or an Alternative Methodology. Did the State/Territory conduct a statistically and valid and reliable MRS, alternative methodology or both between July 1, 2013 and March 1, 2016?

- MRS
- Alternative Methodology. Describe
- Both. Describe
- Other. Describe

4.2.2 Describe how the State consulted with the State Advisory Council (SAC) or other state- or state designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities which could include worker organizations prior to developing and conducting the MRS or alternative methodology. The Lead Agency did not consult SAC or other state designated cross-agency before the development of the methodology or data gathering for the MRS, since the study began before the draft of the State Plan. Nonetheless, results and methodology were discussed with SAC representative after the completion of the study. The MRS data was collected by ACUDEN. The MRS was performed according to how it has been done during prior years. However, it build upon previous experience to avoid, whenever possible, limitations encountered before. MRS was planned according to what was established in MRS reports from the years 2001, 2006, 2009, and 2013. External contractors did MRS from 2001, 2006, and 2009, while the one performed in 2013 was done by ACUDEN.

4.2.3 Describe how the market rate survey or alternative methodology is statistically valid and reliable. To be considered valid and reliable, the MRS or alternative methodology must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variation, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data such as child care resource and referral data if they are representative of the market. If an alternative methodology such as cost modeling is used, demonstrate that the methodology used reliable models that estimated the cost of delivering services in center- and home-based settings at each level of quality defined by the State/Territory. Child Care providers were identified using information from two sources: a list of licensed care providers from the Department of Family Licensing Office, and the Department of Family Regional Offices provided a list of registered care providers within their region. The two lists were compared and combined to produce an updated list. This process was necessary as new care provider sites open, while others close due to fluctuation in registration rates. Once the list was developed, a letter was sent to care providers informing them about the research effort and its importance.

Following recommendations established in previous MRS, data was collected using phone interviews. An interview protocol was developed in order to guide the data collection process. The interview protocol contained two documents: instructions on how to conduct the phone interview and a data collection sheet. The instructions included information on how to approach care providers and the information that needed to be given to them in order to describe the survey research process and its importance (phone call's purpose, data needed, and the importance of the data and their cooperation).

Child Care personnel within the Administration for the Integral Child Care and Development (ACUDEN, for its Spanish Acronym) was recruited and trained to conduct the phone interviews. Staff was supervised in order to address their concerns and provide answers to questions that emerged during the process.

In some cases, it took several calls from the staff in order to collect the information from care providers. Up to five calls were made before stating that a care provider cannot be reached or that the care provider was not really willing to participate. All available contact phone numbers for each care provider were called in multiple occasions.

It is noteworthy that even when the principal data collection technique was by means of a phone interview, multiple intents and ways of collecting the data were used. First, as described above, child care providers were called in multiple occasions at different days and times. When they informed that they were not able to provide the data when called, the survey staff personnel inquired about the best day and time to call back and both parts agreed on a day and time to call back. Furthermore, child care providers were also given the choice of receiving and returning the survey using other means (e.g., e-mail, fax).

Data coding and verification

The data collection sheet was paramount in assuring that all the data needed for the study was collected. The personnel that developed the data coding sheet were also in charge of coding, verifying, and entering the data into a database. Therefore, there were no major concerns in understanding what each field in the data coding sheet meant. However, the staff that conducted the interviews occasionally made notes in the data collection sheets that needed to be clarified. In these cases, the personnel in charge of entering the data into the database interviewed the staff to clarify these notes. They also interviewed the staff in order to corroborate and better understand the reasons for not collecting the data from a particular care provider.

The process described above served as a step towards a quality control process. A second step taken in verifying the data (another quality control check) was to call 10% of the care providers. This process had two purposes: to make sure that care providers were contacted and to verify the data collected by the staff. It is noteworthy that selecting 10% of the cases within a database for verification purposes is consistent with Kent's recommendation regarding survey research data verification (Kent, 2001).

Once all data was coded and entered into a database, a final step was taken for quality control purposes. An external researcher was contracted to verify the data collection procedures and the data coded into the database. The researcher was given access to the database and to all documents used during the data collection process. The researcher verified all documents to understand the process and the coding scheme used, and interviewed key personnel. Then, the researcher verified each case in the database vis-à-vis the data contained in the documents and in the coding sheets. The researcher developed a document explaining the data collection process, and data coding and verification process. This document was submitted to key personnel for them to verify and certify that the narrative was consistent with the tasks performed.

4.2.4 Describe how the market rate survey reflects variations in the price of child care services by:

a) Geographic area (e.g., statewide or local markets)

The MRS includes statewide data. This is evidenced by the fact that data was collected from service providers within all 10 Regions in which the Department of Family groups townships in Puerto Rico. The data included in the MRS is also divided according to zone (urban and rural), type of provider (Child Care Centers and Child Care Homes) and according to the ages of the children: Infants and Toddlers, preschoolers, and school-age children.

b) Type of provider: No significant variations were found in the study.

c) Age of child: No significant variations were found in the study.

d) Describe any other key variations examined by the market rate survey, such as quality level: No significant variations were found in the study.

4.2.5 Describe the process used by the State/Territory to prepare a detailed report containing the results and make the report widely available to the public.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2013 and no later than March 1, 2016): The MRS was completed on January ____, 2016.

b) Date report containing results was made widely available, no later than 30 days after the completion of the report: The notice was published in a newspaper of general circulation on January 19, 2016 with the State Plan 2016-2018 and through the internet: www.acuden.pr.gov and media links of the Department of the Family (Twitter and Facebook).

c) How the report containing results was made widely available and provide the link where the report is posted if available: www.acuden.pr.gov

4.3 Setting Payment Rates

4.3.1 Provide the base payment rates and percentiles (based on current MRS or alternative methodology) for the following categories. The ages and types of care listed below are meant to provide a snapshot of categories on which rates may be based and are not intended to be comprehensive of all categories that may exist in your State/Territory or reflective of the terms that your State/Territory may use for particular ages. Please use the most populous geographic region (serving highest number of children). Note – If the payment rates are not set by the State/Territory, check here . Describe how many jurisdictions set their own payment rates .

a) Infant (6 months), full-time licensed center care in most populous geographic region

- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$351 monthly
- Percentile: 75%

b) Infant (6 months), full-time licensed FCC care in most populous geographic region

- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$270 monthly
- Percentile: 75%

c) Toddler (18 months), full-time licensed center care in most populous geographic region

- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$351 monthly
- Percentile: 75%

d) Toddler (18 months), full-time licensed FCC care in most populous geographic region

- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$270 monthly
- Percentile: 75%

e) Preschooler (4 years), full-time licensed center care in most populous geographic region

- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$338 monthly
 - Percentile: 75%
- f) Preschooler (4 years), full-time licensed FCC care in most populous geographic region
- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$264 monthly
 - Percentile: 75%
- g) School-age child (6 years), full-time licensed center care in most populous geographic region
- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$258 monthly
 - Percentile: 75%
- h) School-age child (6 years), full-time licensed FCC care in most populous geographic region
- Rate \$ per unit of time (e.g., hourly, daily, weekly, monthly, etc.): \$220 monthly
 - Percentile: 75%
- i) Describe the calculation/definition of full-time care
 For centers and homes that provide care to Infants, Toddlers, and preschoolers, full-time care is based on 30 hours or more per week (i.e., 6 hours or more per day within a 5 five day week). On the other hand, School-age children centers and homes provide services based on extended care which is a maximum of 5.5 hours per day.
- j) Provide the effective date of the payment rates: June 1, 2016.
- k) Provide the link to the payment rates: www.acuden.pr.gov

4.3.2 States and Territories may choose to set base payment rates that differ because they take into consideration such factors as 1) geographic location, 2) age of child, 3) needs of children (special needs, protective services, etc.), 4) non-traditional hours of care, or 5) quality of care. In other words, base rates for infants may be set at a higher level than for school-age care because the cost of providing infant care tends to be higher than school-age care. In addition to these rates that differ tied to market variations in prices, States and Territories can choose to establish tiered rates or add-ons on top of these variable base rates as a way to increase payment rates for targeted needs (i.e., higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children). Check which types of tiered payment or rate add-on, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, indicate the process and basis used for determining the tiered rates, amount or percentage of the tiered rate/add-on, and indicate if the rates were set based on the MRS or another process.

- Tiered rate/rate add-on for non-traditional hours. Describe
- Tiered rate/rate add-on for children with special needs as defined by the State/Territory. Describe
- Tiered rate/rate add-on for infants and toddlers (do not check if you have a different base rate for infants/toddlers with no separate bonus or add-on). Describe
- Tiered rate/rate add-on for programs meeting higher quality as defined by the State/Territory. Describe
- Tiered rate/rate add-on for programs serving homeless children. Describe
- Other tiered rate/rate add-on beyond the base rate. Describe
- None.

4.3.3 Describe how the State/Territory set payment rates for child care services in accordance with the results of the most recent market rate survey or alternative methodology
Three payment rates were compared: unadjusted (as informed by centers and homes), adjusted to full-time care (10 hours for Infants, Toddlers, and Preschoolers; 5.5 hours for School-age children) and adjusted to full-time care with a tenth of the registration costs. Adjusted payment rates were selected for they consider the time it takes a parent to travel from work to the center and registration costs. Using adjusted rates will allow parents to seek child care facilities that meet their needs in terms of proximity to their work and/or home and in terms of services. Also, the 75th percentile was selected in order to be able to provide benefits to more families.

4.3.4 In setting payment rates, how did the State/Territory take into consideration the cost of providing higher quality child care services than were provided prior to November 2014 (e.g., tiered payment or other methods) and without, to the extent practicable, reducing the number of families receiving CCDF relative to the number of families served as of November 2014. For example, providing tiered payment with a sufficient differential to support higher quality, considering the cost of quality using a cost estimation model or other method, or examining the participation rate of high-quality providers in the subsidy system (e.g., using indicators from a quality rating system, accreditation or other state-defined indicators of quality) and adjusting payment rates if necessary.

MRS results were analyzed in accordance to how it has been done in past MRS in order to enable comparisons and examine trends. Results showed that child care cost in Puerto Rico have remained fairly constant. When asked about their payment rates, Child Care Providers explained that they have not change payment rates or have not increase them too much due to the economic status of Puerto Rico. By staying fairly stable, they aim to stay marketable and not lose their clientele.

Payment rates stability can be seen in the MRS performed during 2009, 2013, and the current MRS (2015). Since payment rates have become fairly stable during the past years, it is fair to say that the number of families served and the services they currently receive will not be affected by payment rates.

4.4 Summary of Facts Used to Determine that Payments Rates Are Sufficient to Ensure Equal Access

The CCDF plan shall provide a summary of data and facts relied on by the State/Territory to certify that payment rates are sufficient to ensure equal access. (658E (c)(4)(A)) Equal access is not limited to a single percentile alone but is inclusive of various metrics or benchmarks that would offer children receiving CCDF access to the same services (type of care, quality of care) as children not receiving CCDF.

4.4.1 What data and facts did the State use to determine equal access (i.e., what is your metric or benchmark of equal access – such as percentile that rates cover or proportion of costs covered)?

Check all that apply and describe.

- Payment rates are set at the 75th percentile or higher of the most recent survey.
Describe: Payment rates are set between 50-85% of the percentile. Below 50% are exempt of payment and above 85% does not qualify for the CCDF subsidy.

- Using tiered rates/differential rates as described in 4.3.3 to increase access for targeted needs.
- Rates based on data on the cost to the provider of providing care meeting certain standards. Describe
- Data on the size of the difference (in terms of dollars) between payment rates and the 75th percentile in the most recent survey, if rates are below the 75th percentile. Describe
- Data on the proportion of children receiving subsidy being served by high-quality providers. Describe
- Data on where children are being served showing access to the full range of providers. Describe
- Feedback from parents, including parent survey or parent complaints. Describe
- Other. Describe: Family size is also considered.

4.4.2 Does the State/Territory certify that payment rates are sufficient to ensure equal access either based on the current MRS or alternative methodology?

- Yes. The State/Territory certifies that payment rates are sufficient to ensure equal access by March 1, 2016. Provide the State/Territory definition of how its payment rates are sufficient to ensure equal access: Payment rates were determined based on the market.
- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirements – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

4.5 Payment Practices and Timeliness of Payments

The CCDBG Act of 2014 added a provision that requires States and Territories to describe in the Plan how the State/Territory’s payment practices for CCDF child care providers reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory —so as to provide stability of funding and encourage more child care providers to participate in the subsidy program. To the extent practicable, the State/Territory must implement enrollment and

eligibility policies that support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences due to holidays or unforeseen circumstances such as illness. (658E(c)(2)(S))

4.5.1 Describe the status of State/Territory's payment practices for CCDF child care providers that reflect generally accepted payment practices of non-CCDF child care providers in the State/Territory.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 4.5.2 through 4.5.3 below.
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirements – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

4.5.2 Describe how the payment practices to child care providers who serve CCDF-assisted children reflect generally accepted payment practices of other child care providers in the State/Territory to ensure stability of funding to encourage more child care providers to serve children who receive CCDF assistance. Check all that apply and describe. The Lead Agency ...

- Pays prospectively prior to the delivery of services. Describe: Only providers under delegation of funds are paid in advance to cover quarterly payroll expenses and other obligations. Subsidy for vouchers are paid once the attendance certification is processed.
- Pays within no more than 21 days of billing for services. Describe
- Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by paying based on enrollment instead of attendance. Describe including the State/Territory's definition of occasional absences: absences to services that will not exceed 20% of the authorized services per month.

- Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child attends at least a certain percent of authorized time. Specify percent and describe: services shall be rendered for a minimum of 80% of the authorized attendance per month in order to receive full payment.
- Supports fixed costs of providing child care services by delinking provider payments from a child's occasional absences by providing full payment if a child is absent for a certain number of days in a month. Specify the number of absence days allowed and paid for and described
- Pays on a full-time or part-time basis (rather than smaller increments such as hourly)
- Pays for standard and customary fees that the provider charges private-paying parents (e.g., registration fees, deposits, supplies, field trips, etc.)
- Provides prompt notice to providers regarding any changes to the family's eligibility status that may impact payment
- Has a timely appeal and resolution process for payment inaccuracies and disputes. Describe: Article 6 of the PR CCDF Regulation contains the appeal process available for participants. Providers may use the process established by the Department of the Family and file the process before the Board of Appeals of the Department of the Family, Regulation No. 7757 adopted on October 5, 2009.
- Other. Describe
- For those options not checked above, explain why these options are not generally accepted payment practices in your State/Territory__

4.5.3 Check and describe the strategies the State/Territory will use to ensure the timeliness of payments.

- Policy on length of time for making payments. Describe length of time
- Track and monitor the payment process
- Use of electronic tools (e.g., automated billing, direct deposit, etc.) Describe
- Other. Describe

4.6 Supply Building Strategies to Meet the Needs of Certain Populations

The CCDBG Act of 2014 added a provision that the State/Territory will develop and implement strategies to increase the supply and improve the quality of child care services for children in underserved areas, infants and toddlers, children with disabilities, and children who receive care during non-traditional hours. (658 E(c)(2)(M))

4.6.1 Has the State/Territory conducted data analysis of existing and growing supply needs?

- Yes. Describe data sources: Community assessment finished on 2014.
- No. If no, how does the State/Territory determine most critical supply needs?

4.6.2 Describe what method(s) is used to increase supply and improve quality for:

- a) Infants and toddlers (check all that apply)
 - Grants and contracts (as discussed in 4.1.3)
 - Family child care networks
 - Start-up funding
 - Technical assistance support
 - Recruitment of providers
 - Tiered payment rates (as discussed in 4.4.1)
 - Other. Describe

- b) Children with disabilities (check all that apply)
 - Grants and contracts (as discussed in 4.1.3)
 - Family child care networks
 - Start-up funding
 - Technical assistance support
 - Recruitment of providers
 - Tiered payment rates (as discussed in 4.4.1)
 - Other. Describe
- c) Children who receive care during non-traditional hours (check all that apply)
 - Grants and contracts (as discussed in 4.1.3)
 - Family child care networks
 - Start-up funding
 - Technical assistance support
 - Recruitment of providers
 - Tiered payment rates (as discussed in 4.4.1)
 - Other. Describe
- d) Homeless children (check all that apply)
 - Grants and contracts (as discussed in 4.1.3)
 - Family child care networks
 - Start-up funding
 - Technical assistance support
 - Recruitment of providers
 - Tiered payment rates (as discussed in 4.4.1)
 - Other. Describe

4.6.3 The CCDBG Act of 2014 requires States to describe the procedures and process it uses, in terms of the investments made to increase access to programs providing high quality child care and development services, to give priority for those investments to children in families in areas that have significant concentrations of poverty and unemployment and that do not have such high quality programs. (658E(c)(2)(Q)) Describe the status of State/Territory's process and procedures to give priority for investments to children and families from areas with high concentrations of poverty and unemployment that do not have high-quality programs.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe: The Lead Agency requests once a year proposals for the provision of childcare services through delegation of funds to providers. In the proposals they include community needs and available services within their geographic areas. Waiting lists are considered as an indicator of the demand of childcare services by geographic area. Allocation of funds to increase supply of high quality services is made according to the demand of services.
- Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

5 Establish Standards and Monitoring Processes to Ensure the Health and Safety of Child Care Settings

The CCDBG Act of 2014 makes child care safer by defining minimum health and safety requirements for child care providers. This includes both the standards that must be established and the preservice/orientation and ongoing minimum training required. States and Territories must also explain why exemptions to any of the licensing standards do not endanger the health and safety of CCDF children in license-exempt care. States and Territories are required to have standards for CCDF providers regarding group size limits and appropriate child-to-provider ratios based on the age of children in child care.

Pre-licensure and annual unannounced inspections of licensed CCDF providers and annual inspections of license-exempt CCDF providers are now required. The CCDBG Act of 2014 requires States and Territories to establish qualifications and training for licensing inspectors and appropriate inspector-to-provider ratios. It also requires States and Territories to conduct criminal background checks for all child care staff members, including staff members who don’t care directly for children but have unsupervised access to children and lists specific disqualifying crimes. States and Territories must certify that all child care providers comply with child abuse reporting requirements of Child Abuse Prevention and Treatment Act (CAPTA), mandatory reporting of known and suspected instances of child abuse and neglect).

5.1 Licensing Requirements and Standards

Each State/Territory is required to certify it has in effect licensing requirements applicable to all child care services provided within the State/Territory (not restricted to providers receiving CCDF), and to provide a detailed description of such requirements and how such requirements are effectively enforced. (658E(c)(2)(F) Nothing in the statute prohibits the State/Territory from exempting child care providers from licensing requirements. But, if the State/Territory exempts any child care providers from State/Territory licensing requirements, the CCDBG Act of 2014 requires States and Territories to describe how such licensing exemptions do not endanger the health, safety, and development of children receiving CCDF who are cared for by the license-exempt providers. (658E(c)(2)(F)(ii))

5.1.1 The State/Territory certifies that it has licensing requirements applicable to all child care services provided within the State. (658(c)(2)(F)) This requirement did not change under

the CCDBG Act of 2014. List the categories of care that your State/Territory licenses and provide your definition of each licensed category of care

5.1.2 Does your State/Territory exempt any child care providers that can receive CCDF from its licensing requirements?

Yes. Describe which types of providers that can receive CCDF are exempt from licensing and how such exemptions do not endanger children who receive CCDF services from license-exempt providers: Family related providers, within the third grade of bloodline or affinity, are exempted from licensing requirements.

No.

5.1.3 Describe the status of the State/Territory's development and implementation of child care standards for providers receiving CCDF that address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 5.1.4 and 5.1.5 below.

Not implemented. If not implemented, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirements – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.1.4 Describe how the State/Territory child care standards for providers receiving CCDF address appropriate ratios between the number of children and the number of providers and group size, in terms of the age of the children for each type of setting. (658E(c)(2)(H))

a) Licensed Center-Based Care: for centers with more than 6 children. Licensing Regulation No. 4758, Department of the Family.

1. Infant

- State/Territory age definition 0-18 months
- Ratio 8:1
- Group size No maximum established

2. Toddler
 - State/Territory age definition 19-35 months
 - Ratio 8:1
 - Group size No maximum established
3. Preschool
 - State/Territory age definition 36-59 months
 - Ratio 8:1
 - Group size No maximum established
4. School-Age
 - State/Territory age definition 5 years to 12 years and 11 months
 - Ratio 8:1
 - Group size No maximum established
5. If any of the responses above are different for exempt child care centers, describe:
6. Describe, if applicable, ratios and group sizes for centers with mixed age groups

b) Licensed Group Child Care Homes: the State licensing regulation does not establish quantity of individuals who provide childcare in a private residence other than the child's residence for fewer than 24 hours per day per child. Group Child Care Homes are treated equal to Licensed Family Child Care for state licensing purposes.

1. Infant
 - State/Territory age definition 0-18 months
 - Ratio 6:1
 - Group size 6 children
2. Toddler
 - State/Territory age definition 19-35 months
 - Ratio 6:1
 - Group size 6 children
3. Preschool
 - State/Territory age definition 36-59 months
 - Ratio 6:1
 - Group size 6 children
4. School-Age
 - State/Territory age definition 5 years to 12 years and 11 months
 - Ratio 6:1
 - Group size 6 children
5. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day: The Territory requires related children under 12 years old to be included in the Child-to-provider ratio or group size at any one time.
6. If any of the responses above are different for exempt group child care homes, describe

N/A. State/Territory does not have group child care homes.

c) Licensed Family Child Care:

1. Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the Child-to-Provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day:

a. Infant

- State/Territory age definition 0-18 months
- Ratio 6:1
- Group size 6 children

b. Toddler

- State/Territory age definition 19-35 months
- Ratio 6:1
- Group size 6 children

c. Preschool

- State/Territory age definition 36-59 months
- Ratio 6:1
- Group size 6 children

d. School-Age

- State/Territory age definition 5 years to 12 years and 11 months
- Ratio 6:1
- Group size 6 children

e. Describe the maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day: The Territory requires related children under 12 years old to be included in the Child-to-provider ratio or group size at any one time.

2. If any of the responses above are different for exempt family child care home providers, describe

d) Any other eligible CCDF provider categories:

Describe the ratios, group size, the threshold for when licensing is required, maximum number of children that are allowed in the home at any one time, if the State/Territory requires related children to be included in the child-to-provider ratio or group size, or the limits on infants and toddlers or additional school-age children that are allowed for part of the day

5.1.5 Describe how the State/Territory child care standards address required qualifications for providers appropriate to each type of setting, including the minimum age allowed, minimum education level, any specific content required related to the age of children. (658E(c)(2)(H))

a) Licensed Center-Based Care:

1. Infant lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.

2. Toddler lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 3. Preschool lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 4. School-Age lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 5. Director qualifications: One year of higher education (College) or Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
- b) Licensed Group Child Care Homes:
1. Infant lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 2. Toddler lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 3. Preschool lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 4. School-Age lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 5. Director qualifications: One year of higher education (College) or Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
- N/A. State/Territory does not have group child care homes.
- c) Licensed Family Child Care home provider qualifications
1. Infant lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 2. Toddler lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 3. Preschool lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 4. School-Age lead teacher and assistant teacher qualifications: Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
 5. Director qualifications: One year of higher education (College) or Child Care Associate (CDA) or three years of experience as teacher or assistant teacher in a facility dedicated to childcare.
- N/A. State/Territory does not have group child care homes.

d) Other eligible CCDF provider qualifications:

5.1.6 The CCDBG Act of 2014 added a new provision specifying that States and Territories must 1) establish health and safety requirements for providers serving children receiving CCDF assistance relating to matters included in the topics listed below, and 2) have pre-service or orientation training requirements, appropriate to the provider setting, that address these health and safety topics. (658E(c)(2)(I)(i)) This requirement is applicable to all child care providers receiving CCDF regardless of licensing status (licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives, as States have the option of exempting relatives from some or all CCDF health and safety requirements. When establishing these requirements, States are encouraged to consider the age of children and type of child care setting to ensure that they are appropriate to the health and safety needs of the children from birth through age 12 and the providers who care for them.

a) The State/Territory certifies that it has health and safety requirements for providers receiving CCDF in the following areas:

- Prevention and control of infectious diseases (including immunization)
- Prevention of sudden infant death syndrome and use of safe sleeping practices
- Administration of medication, consistent with standards for parental consent
- Prevention of and response to emergencies due to food and allergic reactions
- Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic
- Prevention of shaken baby syndrome and abusive head trauma
- Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a) (1) of the Robert T.
- Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1))
- Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
- Precautions in transporting children (if applicable)
- First aid and cardiopulmonary resuscitation (CPR) certification

Yes. The State/Territory certifies that it has health and safety requirements for CCDF providers in these areas as of March 1, 2016. Provide a citation and a link if available.

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirements – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with

coordinating agencies, etc.)

- Projected start date for each activity
- Projected end date for each activity
- Agency – Who is responsible for complete implementation of this activity
- Partners – Who is the responsible agency partnering with to complete implementation of this activity

b) The State/Territory certifies that it has pre-service (prior to initial service) or orientation (period from when service started) and ongoing training requirements, appropriate to the provider setting that address each of the requirements relating to the topic areas listed above. ACF expects these trainings will be part of a broader systematic approach and progression of professional development (as described in Section 6) within a State/Territory that will result in opportunities for child care providers to accumulate knowledge, competencies and credits toward eventual completion of a professional certification or higher education. The law does not specify a specific number of training or education hours but States and Territories are encouraged to consult with *Caring for our Children Basics* for best practices and recommended time needed to address these training requirements.

Yes. The State/Territory certifies that it has pre-service or orientation and ongoing training requirements appropriate to the provider setting that address each of the requirements relating to the topics listed above as of March 1, 2016.

Describe, including at a minimum 1) how the state/territory defines preservice or orientation period, 2) the minimum number of annual preservice or orientation hours required to meet these health, and safety requirements, and 3) ongoing training or education hours required to meet these health and safety requirements

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than September 30, 2016)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other) o
 - Implemented requirements – Identify any requirement(s) partially or substantially implemented
 - Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.1.7 Does the State/Territory have health and safety requirements for any of the following optional areas?

- Nutrition. (Including age appropriate feeding). Describe
- Access to physical activity. Describe
- Screen time. Describe: Only applicable to CCDF providers under delegation of funds.
- Caring for children with special needs. Describe
- Recognition and reporting of child abuse and neglect. Describe
- Other subject areas determined by the State/Territory to be necessary to promote child development or to protect children's health and safety. Describe

5.1.8 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from CCDF health and safety training requirements. Does the State/Territory exempt relatives from the requirement to receive pre-service or orientation health and safety training on any or all of the listed topics? Note this exception applies if the individual cares ONLY for relative children.

- Yes, all relatives are exempt from all health and safety training requirements. If the State/Territory exempts all relatives from the CCDF health and safety training requirements, describe how the State ensures the health and safety of children in relative care.
- Yes, some relatives are exempt from health and safety training requirements. If the State/Territory exempts some relatives from the CCDF health and safety training requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. Only relatives up to the third grade of bloodline or related by law are exempt from health and safety training requirements. The Lead Agency provide written materials, conferences, information on the website and guidance to persons that apply to be providers of their relatives.
- No, relatives are not exempt from CCDF health and safety training requirements.

5.2 Monitoring and Enforcement Policies and Practices

5.2.1 The State/Territory certifies that the State/Territory has in effect policies and practices to ensure that providers for children receiving assistance and their facilities comply with applicable State or local licensing and health and safety requirements. (658E(c)(2)(J))

- Yes. The State/Territory certifies that it has policies and practices to ensure compliance with applicable licensing and health and safety requirements for providers receiving CCDF and their facilities as of March 1, 2016. List the policy citation: Chapter 4 of the Child Care State Regulation; Office of Licensing: Regulation No. 4758 adopted on August 19, 2002, and Regulation No. 6474 of June 13, 2002.
- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirements – Identify any requirement(s) implemented

to date if applicable

- Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.2.2 The CCDBG Act of 2014 added the following provisions for enforcement of licensing which must be in effect no later than November 19, 2016 for all providers who serve children receiving CCDF (with the option to exempt relatives). While the law does not specify strategies to meet these requirements, States and Territories could consider implementing a differential monitoring approach as long as the full complement of licensing and CCDF health and safety standards was representative and the frequency was at least annually.

a) **Licensing Inspectors** - It will have policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. (658E(c)(2)(K)(i)(I))

Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices that ensure that individuals who are hired as licensing inspectors in the State/Territory are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, and are trained in all aspects of the State's licensure requirements. List the policy citation and describe the qualifications, including at a minimum how inspector qualifications address training related to the language and cultural diversity of the providers, and how qualifications address being appropriate to the age of children in care and type of provider setting: The Licensing Office of the Department of the Family requires all state licensing inspectors to have a bachelors degree and they are required to be fluent in English and Spanish. Child Care Monitors (CCM) evaluates on an ongoing basis the compliance of CCDF providers with federal regulation. The CCM are required a bachelors degree and they are required to be fluent in English and Spanish.

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)
- Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)

- Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity
- b) **Inspections for Licensed CCDF Providers** - It will require licensing inspectors to perform inspections, with not less than one pre-licensure inspection, for compliance with health, safety, and fire standards, of each such child care provider and facility in the State/Territory. It will require licensing inspectors to perform not less than annually, one unannounced inspection of licensed CCDF providers for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (inspectors may inspect for compliance with all 3 standards at the same time. (658E(c)(2)(K)(i)(II))
- Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for licensed CCDF providers. List the policy citation and describe the inspection requirements including the frequency of announced and unannounced visits: Chapter 4 of the Child Care State Regulation. Pre-licensing visits are conducted to prospective CCDF providers to issue a certification of eligibility that will complement the state license. One annual unannounced visit will be performed to all CCDF providers to review compliance.
 - No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than November 19, 2016)
 - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

- c) **Inspections for License-Exempt CCDF Providers (except those serving relatives)** – It will have policies and practices that require licensing inspectors (or qualified monitors designated by the lead agency) of child care providers and facilities to perform an annual monitoring visit of each license-exempt CCDF provider (unless the provider is described in section (658P(6)(B)). (658E(c)(2)(K)(ii)(IV))
- Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding inspections for license-exempt CCDF providers. List the policy citation and describe the annual monitoring visit requirements: Chapter 4 of the Child Care State Regulation. Pre-licensing visits are conducted to prospective CCDF providers to issue a certification of eligibility that will complement the state license. One annual unannounced visit will be performed to all CCDF providers to review compliance.
- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than November 19, 2016)
 - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity
- d) **Ratio of Licensing Inspectors** – It will have policies and practices that require the ratio of licensing inspectors to such child care providers and facilities in the State/Territory to be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal, State, and local law. (658E(c)(2)(K)(i)(III))
- Yes. The State/Territory certifies that as of March 1, 2016 it has policies and practices regarding the ratio of licensing inspectors to such child care providers and facilities in the State/Territory. List the policy citation and list the State/Territory ratio of licensing inspectors: Child Care provider inspectors have an approximate caseload of 75 each.
- No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary

report.

- Overall Target Completion Date (no later than November 19, 2016)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

e) **Child Abuse and Neglect Reporting** – That child abuse reporting requirements are in place and comply with section of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)) (658E(c)(2)(L))

Yes. Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the Lead Agency’s policy citation(s): Act 246-2011, Law for the Security, Wellbeing, and Protection of Minors.

No. If no, the State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than November 19, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.

- Overall Target Completion Date (no later than November 19, 2016)
- Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
- Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.2.3 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from inspection requirements. Note this exception only applies if

the individual cares ONLY for relative children. Does the State/Territory exempt relatives from inspection requirements listed in 5.2.2?

- Yes, all relatives are exempt from all inspection requirements. If the State/Territory exempts all relatives from the inspection requirements, describe how the State ensures the health and safety of children in relative care.
- Yes, some relatives are exempt from inspection requirements. If the State/Territory exempts some relatives from the inspection requirements, describe which relatives are exempt from which requirements (all or some) and include how the State/Territory ensures the health and safety of children in relative care. Relatives within the third grade of bloodline, or by law, are exempted from licensing and inspection requirements. The Lead Agency will provide trainings on health and safety areas.
- No, relatives are not exempt from inspection requirements.

5.3 Criminal Background Checks

The CCDBG Act of 2014 added new requirements for States and Territories receiving CCDF funds to conduct criminal background checks on child care staff members and prospective staff members of child care providers. States and Territories must have requirements, policies, and procedures in place to conduct criminal background checks for staff members of child care providers (other than relatives) that are licensed, regulated or registered under State/Territory law or receive CCDF funds. Background check requirements apply to any staff member who is employed by a child care provider for compensation or whose activities involve the care or supervision of children or unsupervised access to children. For family child care homes, this includes the caregiver requesting a check of him/herself, as well as other adults in the household that may have unsupervised access to children. These provisions must be in place no later than September 30, 2017.

The CCDBG Act of 2014 specifies what a comprehensive criminal background check includes and a child care provider must submit a request to the appropriate State/Territory agency for a criminal background check for each child care staff member, including prospective child care staff members at least once every 5 years. A criminal background check must include a search of: State criminal and sex offender registry in the State where the staff member resides and each State where the staff member has resided over the past 5 years; State child abuse and neglect registry in the State where the staff member resides and each State where the staff

member has resided over the past 5 years, National Crime Information Center (run by the FBI); FBI fingerprint check using Next Generation Identification ; and National Sex Offender Registry.

Child care staff members cannot be employed by a provider receiving CCDF if they refuse a background check; make materially false statements in connection with the background check; are registered or required to be registered on the State or National Sex Offender Registry; have been convicted of a felony consisting of: murder, child abuse or neglect, crimes against children, spousal abuse, crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, or subject to an individual review, at the State's option, a drug-related offense committed during the preceding 5 years; or have been convicted of a violent misdemeanor committed as an adult against a child.

Timeliness of background checks - The State/Territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider

submitted the request. The State/Territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the State/Territory will provide information about each disqualifying crime to the staff member.

Fees for background checks – Fees that a State/Territory may charge for the costs of processing applications and administering a criminal background check may not exceed actual costs to the State/Territory for processing and administration.

Transparency – The State/Territory must ensure that policies and procedures for conducting criminal background checks are published on the State/Territory’s consumer education website (also see section 2.3) or other publicly available venue.

Appeals process – The State/Territory shall have a process for a child care staff member to appeal the results of their background check to challenge the accuracy and completeness. Privacy considerations - Lead Agency may not publicly release the results of individual background checks. They may release aggregated data by crime as long as the data does not include personally identifiable information.

5.3.1 Describe the status of the State/Territory’s requirements, policies, and procedures for criminal background checks for child care staff members and child care providers.

- Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. List the policy citation within the Lead Agency’s rules and describe the policies and procedures for criminal background checks using 5.3.2 through 5.3.9 below. Articles 4.5, 4.6, Chapter 4 of the Child Care State Regulation establishes background check requirements to CCDF providers.
- Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2017). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2017)
 - Overall Status – Describe the State/Territory’s overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s) – Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

5.3.2 Describe the process and procedures for conducting background checks in a timely manner, including which agency/entity is responsible and how the Lead Agency ensures that background checks performed by a 3rd party meet the requirements, protecting the privacy of child care staff members, and providing opportunities for applicants to appeal the results of background checks.

All adults in facilities that receive CCDF for childcare, that may be alone with children without supervision, are required to submit an application for background check. The potential employee or provider shall do this process before they begin services. The process should take less than 60 days and a third-party provider should be used to take fingerprint impressions and send them to the federal authorities for evaluation and certification. The application shall have a local background check issued by the PR Police Department and any other state or territory in which the individual lived for the past five years; clearance from the registry of sex offenders issued by the PR Police Department and any other state or territory in which the individual lived for the past five years; a child abuse clearance issued by the PR Department of Family and any other state or territory in which the individual lived for the past five years; verification from the National Crime Information Center issued by the PR Department of Justice and any other state or territory in which the individual lived for the past five years. The background check clearance will be valid for five years from the date of issuance.

5.3.3 Describe how the State/Territory is assisting other States process background checks, including any agencies/entities responsible for responding to requests from other states: No written agreements for background checks process with other states are in place.

5.3.4 Does the State/Territory have a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment?

Yes. Describe.

No

5.3.5 Does the State/Territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 5.3?

Yes. Describe. If they have convictions listed on Act 300-1999, they cannot provide childcare services. Listed crimes are: Murder in any of its degrees or modalities; Homicide in any of its degrees or modalities; Incitement to suicide; Aggravated in any of its degrees or modalities; Mutilation; Attack a person with acids; Violation in all its forms; Seduction; Sodomy; Bestiality; Indecent exposure; Proposals obscene; pandering, pimping or trafficking persons; Incest; Restriction of freedom in any of its degrees or modalities; Kidnapping in all its forms; Abandonment of minors; Theft of minors; Unlawful deprivation of custody; Adoption in exchange for money; Corruption of minors; Make minors beg in public; Theft; Extortion; Abuse in detriment children and incapable; Imposture; Fire in any of its degrees or modalities; or Havoc.

No

5.3.6 States and Territories have the option to exempt relatives (as defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles, (98.41(A)(ii)(A)) from background check requirements. Note this exception only applies if the individual cares ONLY for relative children. Does your State State/Territory exempt relatives from background checks?

- Yes, all relatives are exempt from all background check requirements.
- Yes, some relatives are exempt from the background check requirements. If the State/Territory exempts some relatives from background check requirements, describe which relatives are exempt from which requirements (some or all). Bloodline relatives and relatives in law within the third degree.
- No, relatives are not exempt from background checks.

5.3.7 Describe how the State/Territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether conducted by the State/Territory or a 3rd party vendor or contractor, Lead Agencies can report that no fees are charged if applicable. Individuals who are required to complete the background check may use the services of the PR Police Department to complete the fingerprint process and cover processing and administrative fees related to the analysis. No additional fees are charged by the Territory.

5.3.8 Describe how background check policies and procedures are published on the State/Territory consumer education website or made publicly available on another venue: Information is available through the Lead Agency website: www.acuden.pr.gov.

5.3.9 Does the Lead Agency release aggregated data by crime?

- Yes. List types of crime included in the aggregated data
- No

6 **Recruit and Retain a Qualified and Effective Child Care Workforce**

Teacher-child interactions and relationships, intentional strategies to engage children and their parents, and use of curriculum and assessment to inform practices with children are key components of high quality child care. These require a competent, skilled, and stable workforce. Research has shown that specialized training and education, positive and well-organized work environments and adequate compensation promote teacher recruitment, stability, diversity of the early childhood workforce, and effectiveness with young children in child care. In addition, professional development strategies that emphasize on-site mentoring and coaching of teachers have emerged as promising to change practices with children and families. Professional development, whether training, on-site coaching and mentoring, registered apprenticeship, or higher education coursework, should reflect the research and best practices of child development in all domains and cultural competence.

The CCDBG Act of 2014 requires States and Territories to establish professional development and training requirements in key areas such as health and safety, early learning guidelines, responding to challenging behavior and engaging families. States and Territories are required to offer ongoing annual training and to establish a progression of professional development opportunities to improve knowledge and skills of CCDF providers. (658E(c)(2)(G)) An example of how a State/Territory might address this is to establish a system or framework of professional development that includes professional standards, a “career ladder” that allows an individual to build knowledge and skills in a cumulative manner from introductory training to advance level education, including obtaining credentials and post-secondary degrees. Professional development should be designed in a manner that aligns to competencies and qualifications that reflect working with children of different ages, English language learners, children with disabilities and the differentiated roles in all settings, such as teachers, teacher assistants, and directors. Training and education supporting professional development is also one of the options States and Territories have for investing their CCDF quality funds. (658G(b)(1)) ACF

encourages States and Territories to collaborate and coordinate with other early childhood educator professional development resources, such as Race to the Top Early Learning Challenge grants, quality funds available through the Preschool Development grants, and funds available through Head Start and Early Head Start, to the extent practicable. Responsive, well-qualified adult caregivers are one of the most important factors in children’s development and learning in child care settings. ACF strongly encourages States and Territories to link CCDF health and safety trainings (see Section 5) and child development trainings and education to this broader professional development framework as the foundation for building a knowledgeable early childhood education workforce. Questions related to requirements for recruiting and retaining a qualified and effective child care workforce have been consolidated into Section 6.

6.1 Training and Professional Development Requirements

The CCDBG Act of 2014 added a requirement that the State/Territory develop training and professional development 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 across the entire age span from birth through age 12. (658E(c)(2)(G)) Training and professional development should be accessible and appropriate across settings and types of providers, including family child care home providers and child care center staff.

The State/Territory also must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and improve the quality of child care services. (658E(c)(2)(V))

For purposes of this section, the term professional development is inclusive of credit bearing coursework, postsecondary degree programs, and technical assistance (targeted assistance such as mentoring, coaching or consultation) activities. Health and safety topics that require renewal of a credential or certification should be considered continuing education unit trainings.

- 6.1.1 Describe the status of the State/Territory’s professional development system or framework, including training and professional development requirements 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.

The Lead Agency assures that the State/Territory’s training and professional development requirements:

- a) Provide ongoing training and professional development that is accessible for the diversity of providers in the State/Territory; provide for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool, and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities); and improve the quality and stability of the child care workforce (such as supports an individual to build on entry- and midlevel training and education (which may include higher education) to attain a higher level credential or professional certification and retention in the child care program).

- b) Are developed in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care or other state or state-designated cross-agency body if there is no SAC that addresses training, professional development and education of child care providers and staff.
 - b) Incorporate knowledge and application of the State/Territory's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporate social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2)
 - d) Are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF
 - e) Appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups, English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians.
 - Fully implemented and meeting all Federal requirements outlined above by March 1, 2016. Describe using 6.1.2 through 6.1.6 below.
 - Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s)– Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity
- 6.1.2 Describe how the State/Territory provides ongoing training and professional development that is accessible for the diversity of providers in the State/Territory, provides for a progression of professional development reflecting research and best practice to meet the developmental needs of participating infants, toddlers, preschool and school-age children and that is aligned to foundational and specialized competencies (including different ages of children, English language learners, and children with disabilities) and improves the

quality and stability of the child care workforce. Use the checkboxes below to identify and describe the elements of the progression of professional development. Check all that apply.

- State/Territory professional standards and competencies. Describe
- Career ladder or lattice. Describe
- Articulation agreements between two- and four-year postsecondary early childhood education or degree programs. Describe: The Lead Agency has an agreement with the University of Puerto Rico, higher education institution with a 4 year program in early childhood, to provide professional development courses to educational staff of providers. This program is sponsored with a special delegation of state funds, and the continuity will depend on future state fundings.
- Community-based training approved by a state regulatory body to meet licensing or regulatory requirements. Describe
- Workforce data, including recruitment, retention, registries or other documentation, and compensation information. Describe
- Advisory structure that provides recommendations for the development, revision, and implementation of the professional development system or framework. Describe
- Continuing education unit trainings and credit-bearing professional development. Describe
- State-approved trainings. Describe
- Inclusion in state and/or regional workforce and economic development plans. Describe
- Other. Describe: The Child Care Program defined professional standards and competencies that will be required to CCDF providers.

6.1.3 Describe how the State/Territory developed its training and professional development requirements in consultation with the State Advisory Council (SAC) on Early Childhood Education and Care (if applicable) or other state or state-designated cross-agency body if there is no SAC: Lead Agency participated with an effort with SAC and Department of Education in the development of the territory's early learning guideless that will be part of the training to professionals working with children.

6.1.4 Describe how the State/Territory incorporates knowledge and application of the State's early learning and developmental guidelines (where applicable), the State/Territory's health and safety standards (as described in section 5), and incorporates social-emotional/behavioral and early childhood mental health intervention models, which may include positive behavior intervention and support models (as described in Section 2) into its training and professional development requirements (see Information Memorandum on Children's Social Emotional and Behavioral Health <http://www.acf.hhs.gov/programs/occ/resource/im-2015-01>): The training and professional development requirement established by the Lead Agency is divided in seven areas: (1) early learning and developmental guidelines, (2) health and safety; (3) curriculum; (4) assessment; (5) parent involvement in child developmental process; (6) ethics of the workforce; (7) social-emotional behavioral intervention models.

6.1.5 Describe how the State's training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF (as applicable): N/A.

- 6.1.6 Describe how the State/Territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers caring for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children), English language learners, children with disabilities, and Native Americans, including Indians and Native Hawaiians. Training and professional development are based on national standards and have specific requirements based on the age of children.
- 6.1.7 Describe the strategies the State/Territory uses to recruit and retain providers who will serve eligible children. Check all that apply and describe.
- Financial assistance for attaining credentials and post-secondary degrees. Describe
 - Financial incentives linked to education attainment and retention. Describe
 - Registered apprenticeship programs. Describe
 - Outreach to high school (including career and technical) students. Describe
 - Policies for paid sick leave. Describe: Contract with providers under delegation of funds, require compliance with state and federal law regarding paid sick leave.
 - Policies for paid annual leave. Describe: Contract with providers under delegation of funds, require compliance with state and federal law regarding paid annual leave.
 - Policies for health care benefits. Describe
 - Policies for retirement benefits. Describe
 - Support for providers' mental health (such as training in reflective practices and stress reduction techniques, health and mental health consultation services). Describe
 - Other. Describe
- 6.1.8 Describe how the State/Territory will recruit providers for whom English is not their first language, or who will serve and be available for families for whom English is not their first language. The first language in Puerto Rico is Spanish and most of providers are bilingual or at least have bilingual staff (English-Spanish).
- 6.1.9 How will the Lead Agency overcome language barriers to serve providers for whom English is not their first language? Check the strategies, if any, that your State/Territory has chosen to implement.
- Informational materials in non-English languages
 - Training and technical assistance in non-English languages
 - CCDF health and safety requirements in non-English languages
 - Provider contracts or agreements in non-English languages
 - Website in non-English languages
 - Bilingual caseworkers or translators available
 - Collect information to evaluate on-going need, recruit, or train a culturally or linguistically diverse workforce
 - Other
 - None

If the Lead Agency checked any option above related to providing information or services in other non-English languages, please list the primary languages offered (top 3) or specify that the State has the ability to have translation/interpretation in all primary and secondary languages

6.1.10 The State/Territory must use CCDF for activities to improve the quality or availability of child care, including training and technical assistance to providers on identifying and serving homeless children and families. (658E(c)(3)(B)(i) Describe the status of the State/Territory's training and technical assistance to providers on identifying and serving homeless children and their families (connects to Section 3.2.2).

- Yes. The State certifies that no later than March 1, 2016 it will provide training and technical assistance to providers on identifying and serving homeless children and their families. Describe that training and technical assistance for providers: Training and professional development plan of the Lead Agency includes information about homeless children and families. An administrative directive signed by the Secretary of the Family assures support from Multisectorial Council in Support to the Homeless Population in the provision of technical assistance.
- No. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s)– Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

6.2 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

States and Territories may use the quality set-aside discussed in detail in section 7 to support the training and professional development of the child care workforce.

6.2.1 Does the State/Territory fund the training and professional development of the child care workforce?

- Yes. If yes,
 - a) Describe the measures relevant to this use of funds that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. The Lead Agency uses a tailor made QRIS (PASITOS) to collect data related to quality improvement and assess effectiveness. Priority in the appointment of resources for professional development will be related to the QRIS assessment and the results of the educational activities will be measured thereafter.

- b) Indicate which funds will be used for this activity (check all that apply)
- CCDF funds. Describe
 - Other funds. Describe: State funds have been assigned to sponsor grants for professional development through the University of Puerto Rico (pilot program).
- c) Check which content is included in training and professional development activities. Check all that apply.
- Promoting the social, emotional, physical, and cognitive development of children, including those related to nutrition and physical activity, using scientifically-based, developmentally-appropriate and age-appropriate strategies as required in 6.1.1c. Describe: The training and professional development requirement established by the Lead Agency is divided in seven areas: (1) early learning and developmental guidelines, (2) health and safety; (3) curriculum; (4) assessment; (5) parent involvement in child developmental process; (6) ethics of the workforce; (7) social-emotional behavioral intervention models.
 - Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social -emotional development and early childhood mental health and reduce challenging behaviors, including reducing expulsions of preschool-aged children from birth to five for such behaviors (see also Section 2). Describe: The training and professional development requirement established by the Lead Agency is divided in seven areas: (1) early learning and developmental guidelines, (2) health and safety; (3) curriculum; (4) assessment; (5) parent involvement in child developmental process; (6) ethics of the workforce; (7) social-emotional behavioral intervention models.
 - Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development. Describe: The training and professional development requirement established by the Lead Agency is divided in seven areas: (1) early learning and developmental guidelines, (2) health and safety; (3) curriculum; (4) assessment; (5) parent involvement in child developmental process; (6) ethics of the workforce; (7) social-emotional behavioral intervention models.
 - Developmentally appropriate, culturally and linguistically responsive instruction and evidence-based curricula, and learning environments that are aligned with the State/Territory Early Learning and Development Standards. Describe: The training and professional development requirement established by the Lead Agency is divided in seven areas: (1) early learning and developmental guidelines, (2) health and safety; (3) curriculum; (4) assessment; (5) parent involvement in child developmental process; (6) ethics of the workforce; (7) social-emotional behavioral intervention models.
 - On-site or accessible comprehensive services for children and community partnerships that promote families' access to services that support their children's learning and development. Describe
 - Using data to guide program evaluation to ensure continuous improvement. Describe
 - Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe: Mobile library is used

to visit remote geographic areas or those with high concentration of poverty and unemployment that impair participants to access other distant resources.

- Caring for and supporting the development of children with disabilities and developmental delays. Describe: The training and professional development requirement established by the Lead Agency is divided in seven areas: (1) early learning and developmental guidelines, (2) health and safety; (3) curriculum; (4) assessment; (5) parent involvement in child developmental process; (6) ethics of the workforce; (7) social-emotional behavioral intervention models.
- Supporting positive development of school-age children. Describe: The training and professional development requirement established by the Lead Agency is divided in seven areas: (1) early learning and developmental guidelines, (2) health and safety; (3) curriculum; (4) assessment; (5) parent involvement in child developmental process; (6) ethics of the workforce; (7) social-emotional behavioral intervention models.
- Other. Describe

d) Check how the State/Territory connects child care providers with available Federal and State/Territory financial aid, or other resources for pursuing postsecondary education relevant for the early childhood and school-age workforce. Check all that apply.

- Coaches, mentors, consultants, or other specialists available to support access to postsecondary training including financial aid and academic counseling
- State/Territory-wide, coordinated, and easily accessible clearinghouse (i.e. online calendar or listing of opportunities) of relevant postsecondary education opportunities
- Financial awards (such as scholarships, grants, loans, reimbursement for expenses) from State/Territory for completion of postsecondary education
- Other. Describe: Providers that does not comply with minimum educational requirements, based on the CCDF standards, are directed to higher education institutions who may use federal funds and other financial aid to promote the completion of early childhood education.

No

6.2.2 Does the State/Territory require a specific number of annual training hours for child care providers caring for children receiving CCDF subsidies and in particular content areas? States and Territories are encouraged to consult with *Caring for our Children* for best practices and recommended time needed to address training hour requirements.

Yes. If yes, describe:

a) Licensed Center-Based Care

- 1) Number of pre-service or orientation hours and any required areas/content
- 2) Number of on-going hours and any required areas/content

b) Licensed Group Child Care Homes

- 1) Number of pre-service or orientation hours and any required areas/content
- 2) Number of on-going hours and any required areas/content

c) Licensed Family Child Care Provider

- 1) Number of pre-service or orientation hours and any required areas/content
- 2) Number of on-going hours and any required areas/content

d) Any other eligible CCDF provider

- 1) Number of pre-service or orientation hours and any required areas/content
- 2) Number of on-going hours and any required areas/content

No

6.2.3 Describe the status of the State/Territory's policies and practices to strengthen provider's business practices.

- Fully implemented as of March 1, 2016. Describe the State strategies including training, education, and technical assistance to strengthen provider's business practices. This may include, but is not limited to, such practices related to fiscal management, budgeting, record-keeping, hiring, developing, and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications, including who delivers the training, education and/or technical assistance: Resources available are published through the Lead Agency website: www.acuden.pr.gov, and referrals are made to specialized agencies in the Commonwealth (PR Departments of Labor, Workers Compensation, Ombudsman, etc.) as well as private entities that may provide guidance in the planning, management and execution of fiscal practices, management of personnel, community relationships, marketing and public relations. The professional development plan includes trainings on CCDF fiscal requirements.
- Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
 - Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s)– Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implementation of this activity

6.3 Early Learning and Developmental Guidelines

The CCDBG Act of 2014 added a requirement that the State/Territory will develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, or birth-to-five), describing what such children should know and be able to do, and covering the essential domains of early childhood development for use State/Territory wide by child care providers. (658E(c)(2)(T)) At the option of the State/Territory, early learning and development guidelines for out-of-school time may be developed. States and Territories may use the quality set-aside as discussed in section 7 to improve on the development or implementation of early learning and development guidelines.

6.3.1 Describe the status of the State/Territory's early learning and development guidelines appropriate for children from birth to kindergarten entry.

- The State/Territory assures that the early learning and development guidelines are:
- Research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with entry to kindergarten
 - Implemented in consultation with the State educational agency and the State Advisory Council (SAC) or other state or state-designated cross-agency body if there is no SAC
 - Updated as determined by the State. List the date or frequency
 - Fully implemented and meeting all Federal requirements outlined above as of March 1, 2016. List the Lead Agency's policy citation(s) and describe using 6.3.2 through 6.3.4 below

The Lead Agency participates in the discussion and update of the Territory's early learning and development guidelines of 2010. The agency that leads this effort is the PR Department of Education.

- Not implemented. The State/Territory must provide a State/Territory-specific implementation plan for achieving compliance with this requirement, including planned activities, necessary legislative or regulatory steps to complete, and target completion date (no later than September 30, 2016). Please provide brief text responses and descriptions only. Do not cut and paste charts or tables here. Your responses will be consolidated electronically into an Implementation Plan summary report.
- Overall Target Completion Date (no later than September 30, 2016)
 - Overall Status – Describe the State/Territory's overall status toward complete implementation for this requirement(s) (not yet started, partially implemented, substantially implemented, other)
 - Implemented requirement(s)– Identify any requirement(s) implemented to date if applicable
 - Unmet requirement - Identify the requirement(s) to be implemented
 - Tasks/Activities – What specific steps will you take to implement the unmet requirement (e.g., legislative or rule changes, modify agreements with coordinating agencies, etc.)
 - Projected start date for each activity
 - Projected end date for each activity
 - Agency – Who is responsible for complete implementation of this activity
 - Partners – Who is the responsible agency partnering with to complete implement this activity

6.3.2 Check for which age group(s) the State/Territory has established early learning and development guidelines:

- Birth-to-three. Provide a link: 2010 Guidelines published at the website of the Department of Education: www.de.gobierno.pr. The Department of Education will begin the update of this guideline on January 2016.
- Three-to-Five. Provide a link: 2010 Guidelines published in the website of the Department of Education: www.de.gobierno.pr. The Department of Education updated this guideline and is expected to be published on 2016.

- Birth-to-Five. Provide a link
- Five and older (check if State/Territory has standards for five and older that complement academic but cover child development areas not covered by k-12 academic standards). Describe and provide a link: Guidelines were updated and published on July 2014, they are available at the website of the Department of Education: www.de.gobierno.pr.
- Other. Describe

6.3.3 Does the State/Territory use CCDF quality funds to improve on the development or implementation of early learning and development guidelines by providing technical assistance to child care providers to enhance children’s cognitive, physical, social and emotional development and support children’s overall well-being?

- Yes, the State/Territory has a system of technical assistance operating State/Territory wide
- Yes, the State/Territory has a system of technical assistance operating as a pilot or in a few localities but not State/Territory-wide
- No, but the State/Territory is in the development phase
- No, the State/Territory has no plans for development
 - a) If yes, check all that apply to the technical assistance and describe.
 - Child care providers are supported in developing and implementing curriculum/learning activities based on the State’s/Territory’s early learning and development guidelines. Describe
 - The technical assistance is linked to the State’s/Territory’s quality rating and improvement system. Describe
 - Child care providers working with infants and/or toddlers have access to the technical assistance for implementing early learning and development guidelines. Describe
 - Child care providers working with preschool-age children have access to the technical assistance for implementing early learning and development guidelines. Describe
 - Child care providers working with school-age children have access to the technical assistance for implementing early learning and development guidelines. Describe
 - b) Indicate which funds are used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)

6.3.4 Check here to demonstrate that State/Territory assures that CCDF funds will not be used to develop or implement an assessment for children that: (658E(c)(2)(T)(ii)(I))

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF program
- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider
- Will be used as the primary or sole method for assessing effectiveness of child care programs
- Will be used to deny children eligibility to participate in the CCDF program

7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development

Block Grant funds for activities designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care. Support for continuous quality improvement is expected to cover the entire age span of children supported by CCDF, from birth through age 12. States/Territories may provide these quality improvement activities directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities. The activities should be in alignment with a State/Territory-wide assessment of the State's/Territory's needs to carry out such services and care. These quality investments can align with, support and help sustain additional quality efforts developed under Race to the Top Early Learning Challenge grants, Early Head Start/Head Start partnerships and other funding efforts.

States and Territories will report on these quality improvement investments through CCDF in three ways: 1) ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696); 2) In the Plan, States and Territories will describe the types of activities supported by quality investments over the three-year period; and 3) For each three-year Plan period, States and Territories will submit a separate annual report that will show the measures used by the State/Territory to evaluate its progress in improving the quality of child care programs and services in the State/Territory.

The CCDBG Act of 2014 requires States and Territories to use the quality set-aside to fund at least one of the following 10 activities:

- 1) Supporting the training and professional development of the child care workforce (as described in Section 6)
- 2) Improving on the development or implementation of early learning and development guidelines (as described in Section 6)
- 3) Developing, implementing, or enhancing a tiered quality rating system for child care providers and services
- 4) Improving the supply and quality of child care programs and services for infants and toddlers
- 5) Establishing or expanding a Statewide system of child care resource and referral services (as described Section 1)
- 6) Supporting compliance with State/Territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in Section 5)
- 7) Evaluating the quality of child care programs in the State/Territory, including evaluating how programs positively impact children
- 8) Supporting providers in the voluntary pursuit of accreditation
- 9) Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- 10) Other activities to improve the quality of child care services as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten-entry are possible.

Throughout this Plan, States and Territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, the quality set aside funds. We recognize that for some areas, States and Territories may leverage other funds to support the quality improvement goals, which we encourage and support. For example, activities related to early learning and development guidelines may be

supported by a combination of CCDF and education funding. States and Territories continue to have such flexibility.

7.1 Activities to Improve the Quality of Child Care Services

7.1.1 What are your overarching goals for quality improvement? Please describe how the State/Territory selected these goals, including any data or the State/Territory-wide assessment of needs that identified the needs for quality improvement services

Goals for quality improvement were developed after concluding the Community Assessment of 2014 and developing the strategic plan of the Department of the Family. Goals are: Increase the supply of childcare services in low-income communities located in rural and urban areas through the partnership with municipalities; Development of the Quality Rating and Improvement System (PASITOS, for its acronym in Spanish). It is actually funded 100% with non-federal funds, but will be expanded to more providers by using CCDF funds; Financial support to state licensing division to assure timely evaluation of providers and a joint effort to provide trainings in the health and safety area; expand CCR&R efforts, by promoting CENTRANA, providing technical assistance to partners, and using other strategies as the mobile training center to target CCDF providers, specially those in licensed family child care environments; increase of access to information through the Lead Agency website.

7.1.2 Check and describe which of the following specified quality improvement activities the State/Territory is investing in:

- Developing, implementing or enhancing a tiered quality rating system. If checked, respond to 7.2.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.). State funds will be used to increase access to QRIS.
- Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.3.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside,, including whether designated infant- and toddler set aside, etc.) funds are being used along with other CCDF funds: Increase supply of services by delegating CCDF funds to private and public parties located in communities that are not accessible and have high rate of low-income families.
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
- Establishing or expanding a statewide system of CCR&R services as discussed in 1.7. If checked, respond to 7.4.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.): Investment in a mobile training center to reach informal providers (licensed family child care), parents and guardians to promote early learning and developmental subjects.

- Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) The Lead Agency uses non-federal funds that come from the territory general fund and the municipalities in a collaborative effort to fund the Resource and Referral Centers (CENTRANA) in communities with high rate of poverty.
- Facilitating compliance with State/Territory requirements for inspection, monitoring, training, and health and safety standards (as described in Section 5). If checked, respond to 7.5.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.): Financial support to state licensing division to assure timely evaluation of providers and a joint effort to provide trainings in the health and safety area.
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.) State funds are assigned to sponsor licensing activities associated with the Office of Licensing of the Department of the Family.
- Evaluating and assessing the quality and effectiveness of child care services within the State/Territory. If checked, respond to 7.6.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.): State funds to support QRIS (PASITOS); Head Start/Early Head Start providers who receive CCDF funds to expand services in non-traditional hours use their own funds to assess and promote quality.
- Supporting accreditation. If checked, respond to 7.7.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
- Supporting State/Territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.8.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.)
- Other activities determined by the State/Territory to improve the quality of child care services, and for which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or entry into kindergarten is possible. If checked, respond to 7.9.
 - Indicate which funds will be used for this activity (check all that apply)
 - CCDF funds. Describe CCDF funds (e.g., quality set-aside, infant-toddler set aside, etc.)
 - Other funds. Describe other funding sources (e.g., Race to the Top Early Learning Challenge, state or local funds, etc.): Head Start/Early Head Start providers who receive CCDF funds to expand services in non-traditional hours use their own funds to assess and promote quality.

7.2 Quality Rating and Improvement System

7.2.1 Does your State/Territory have a quality rating and improvement system (QRIS)?

- Yes, the State/Territory has a QRIS operating State/Territory-wide. Describe how the QRIS is administered (e.g., state or locally administered such as through CCR&Rs) and provide a link, if available
 - Yes, the State/Territory has a QRIS operating as a pilot, in a few localities, or only a few levels but not fully operating State/Territory-wide. Provide a link, if available: PASITOS is a quality rating and improvement system tailor made for CCDF providers by the University of Puerto Rico with the participation of researchers and experts in early development and learning. A few phases has been made to increase the use among CCDF providers, but at this time the participation is voluntary and initial intervention is funded by the Lead Agency with non-federal funds. Standards were reviewed on 2015 to adjust requirements with CCDF reauthorization act of 2014, PR licensing requirements, and NAYEC standards.
 - No, but the State/Territory is in the development phase
 - No, the State/Territory has no plans for development
- a) If yes, check all that apply to your QRIS.
- Participation is voluntary
 - Participation is mandatory for providers serving children receiving subsidy. If checked, describe the relationship between QRIS participation and subsidy (minimum rating required, participation at any level, etc.)
 - Participation is required for all providers
 - Includes nationally-recognized accreditation as a way to meet/achieve QRIS rating levels
 - Supports and assesses the quality of child care providers in the State/Territory
 - Builds on State/Territory licensing standards and other State/Territory regulatory standards for such providers
 - Embeds licensing into the QRIS. Describe
 - Designed to improve the quality of different types of child care providers and services
 - Describes the safety of child care facilities
 - Addresses the business practices of programs
 - Builds the capacity of State/Territory early childhood programs and communities to promote parents' and families' understanding of the State/Territory's early childhood system and the ratings of the programs in which the child is enrolled
 - Provides, to the maximum extent practicable, financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services. If checked, please describe how these financial options link to responses in Section 4.3 related to higher payment rates tied to quality
 - Can be used to track trends in whether children receiving subsidy are utilizing rated care settings and level of rating
- b) If yes, which types of settings or distinctive approaches to early childhood education and care participate in the State's/Territory's QRIS? Check all that apply.
- Licensed child care centers
 - Licensed family child care homes
 - License-exempt providers

- Early Head Start programs
- Head Start programs
- State pre-kindergarten or preschool program
- Local district supported pre-kindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Other. Describe.

7.2.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory. The program (PASITOS) uses a self-assessment approach to identify strengths and needs, based on 10 areas: positive relations, daily planned activities to stimulate development, teaching, children assessment, health & safety, teachers, families, community relations, physical environment, and leadership & administration. A mentor works closely with the CCDF provider and after the initial assessment three areas of priority are identified and activities are set to improve them. The instrument allows the CCDF provider to measure their improvement, with the help of the mentor.

7.3 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

The CCDBG Act of 2014 included changes targeted at improving the supply and quality of infant-toddler care. Lead Agencies are encouraged to systematically assess and improve the overall quality of care infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers and the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care.

7.3.1 What activities are being implemented by the State/Territory to improve the supply (see also section 4) and quality of child care programs and services for infants and toddlers? Check all that apply and describe.

- Establishing or expanding high-quality community or neighborhood-based family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families. Describe: Delegation of funds is made to faith and community based organizations as well as municipalities to develop high-quality services.
- Establishing or expanding the operation of community or neighborhood-based family child care networks. Describe: Child care networks are promoted by delegating funds to municipalities who are well aware of the needs of their residents and identify providers within rural and other areas with lack of proper access to quality services.
- Providing training and professional development to promote and expand child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe: Regional and central staff give on-site technical assistance to infants and toddlers caregivers and childcare providers. The Lead Agency give trainings based on the Early Learning Guidelines to providers.
- Providing financial incentives (including the use of grants and contracts as discussed in section 4) to increase the supply and quality of infant-toddler care. Describe: Delegation

- of CCDF funds to faith and community based organizations and municipalities to develop high-quality child care to infants and toddlers.
- Providing coaching and/or technical assistance on this age group’s unique needs from Statewide networks of qualified infant-toddler specialists. Describe
- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.) Describe: Memorandum of Understanding with the Department of Health to exchange information and services to infants and toddlers.
- Developing infant and toddler components within the State’s/Territory’s QRIS. Describe
- Developing infant and toddler components within the State/Territory’s child care licensing regulations. Describe
- Developing infant and toddler components within the early learning and development guidelines. Describe
- Improving the ability of parents to access transparent and easy to understand consumer information about high-quality infant and toddler care. Describe
- Carrying out other activities determined by the State/Territory to improve the quality of infant and toddler care provided in the State/Territory, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler cognitive and physical development, or infant and toddler well-being. Describe
- Other. Describe

7.3.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State’s progress in improving the quality of child care programs and services in the State/Territory: Lead Agency uses the resources of the University of Puerto Rico to assess progress of improving quality of child care programs through the QRIS.

7.4 Child Care Resource & Referral

7.4.1 Describe the status of the child care resource and referral system (as discussed in Section 1.7)

- State/Territory has a CCR&R system operating State/Territory-wide. Describe how the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated and if it is voluntary
- State/Territory has a CCR&R system operating in a few localities but not fully operating State/Territory-wide. Describe: There are ___ sites in which CCR&R are in place in coordination with municipalities and community-based organizations. Memorandum of Understandings were signed with public agencies to increase the availability of services to eligible participants.
- State/Territory is in the development phase

7.4.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory’s progress in improving the quality of child care programs and services in the State/Territory: Lead Agency requires partners with CENTRANA to provide evidence of participation and results of satisfaction surveys to assess the effectiveness of the program in each location. Technical assistance is developed based on results of the feedback received from participants. Statistics of the referrals and demand of services are considered to improve quality of services and modify procedures.

7.5 Facilitating Compliance with State Standards

- 7.5.1 What strategies does your State/Territory fund with CCDF quality funds to facilitate child care providers' compliance with State/Territory requirements for inspection, monitoring, training, and health and safety, and with State/Territory licensing standards? Describe: All providers are required to meet state licensing requirements. The Lead Agency delegates funds to the licensing division to assure timely intervention with potential and actual CCDF providers, which includes trainings and community interventions through the regional offices. Close communication between state licensing inspectors and CCDF inspectors to assure exchange of knowledge and information. Provide trainings to potential and actual CCDF providers in health and safety areas.
- 7.5.2 Describe the measures relevant to this activity that the State will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: Measure of CCDF providers with health and safety checklist, based on the standard established by the reauthorization law; measure results of the QRIS; and analysis of licensing reports.

7.6 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

- 7.6.1 One of the purposes of the CCDBG Act of 2014 is to increase the number and percentage of low-income children in high-quality child care settings. Describe how the State/Territory measures the quality and effectiveness of child care programs and services offered in the State/Territory, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the State/Territory evaluates that such programs positively impact children: The minimum quality requirements are established by the office of licensing of the Department of the Family, which is the standard in the childcare settings in the market and participants through vouchers. To increase the supply of quality services in communities with higher concentration of low-income families the Lead Agency delegate funds to public and private providers that use quality strategies that are continually assessed. Among quality strategies used are: training and professional development to teachers, orientation to parents, sponsor educational materials and equipment. The effectiveness of all these strategies is measured by the progress in the development of children. The progress of children is assessed through the use of the Ages & Stages Questionnaires® (ASQ-3 and ASQSE-2) and the implementation of the Pyramid Model, Portage Guide, and Creative Curriculum, documented in the record of each child. The Lead Agency monitors the improvement of providers through the parameters set in the contract of delegation of funds and the health and safety checklist. Compliance with regulatory and contractual standards is measured and a general classification based on risk is determined for each provider. Changes in status are monitored for quality purposes.
- 7.6.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: The effectiveness of the QRIS, the ASQ, and the Pyramid Model, Portage Guide, and Creative Curriculum are measured by: the number of participating programs and providers; health and safety checklists; pre and post knowledge evaluations at training and self-assessment exercises. Follow-up visits or meetings to providers with corrective action plans also are considered to determine improvement.

7.7 Accreditation Support

7.7.1 Does the State/Territory 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?

- Yes, the State/Territory has supports operating State/Territory-wide. Describe the supports for all types of accreditation the State/Territory provides to child care centers and family child care homes to achieve accreditation
- Yes, the State/Territory has supports operating as a pilot or in a few localities but not State/Territory-wide. Describe
- No, but the State/Territory is in the development phase
- No, the State/Territory has no plans for development

7.7.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory: N/A

7.8 Program Standards

7.8.1 What other State/Territory or local efforts, if any, is the State/Territory supporting to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development? Please describe

7.8.2 Describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving the quality of child care programs and services in the State/Territory

7.9 Other Quality Improvement Activities

7.9.1 List and describe any other activities the State/Territory provides to improve the quality of child care services and describe the measures relevant to this activity that the State/Territory will use to evaluate the State/Territory's progress in improving provider preparedness, child safety, child well-being, or entry into kindergarten.

8 Ensure Grantee Program Integrity and Accountability

Under CCDF, program integrity and accountability activities are grounded in the State/Territory's policies for implementing the CCDF program. For error rate activities, reviews are based on the State/Territory's own CCDF policies. The CCDBG Act of 2014 made sweeping changes to the program requirements. With these changes, the State/Territory has an opportunity to change their own policies to reduce the burden for participants and staff as they build in safeguards to maintain program integrity. For example, the new law focuses on eligibility requirements at the time of eligibility determination and allows for a minimum 12-month period of eligibility before redetermination, which lessens the need for participants to continually provide documentation. This, in turn, relieves the State/Territory from the burden of constantly "checking" on participants which can open the door for miscalculations, lost paperwork, and other errors.

Lead Agencies are required to have accountability measures in place to ensure integrity and to identify fraud or other program violations. These accountability measures should address administrative error, including unintentional agency error, as well as program violations, both unintentional and intentional. Violations may or may not result in further action by the Lead Agency, including those cases suspected of and/or prosecuted for fraud.

8.1 Program Integrity

- 8.1.1 Describe how the State/Territory ensures that their definitions for violations have been modified, and program integrity procedures revised to reflect new requirements. This process is under evaluation and discussion with the ACUDEN Fiscal Division and Monitor's Office.
- 8.1.2 Describe how the State/Territory ensures that all staff are informed and trained regarding changes made to its policies and procedures to reflect new CCDF requirements. Check all that apply.
- Issue policy change notices
 - Issue new policy manual
 - Staff training
 - Orientations
 - Onsite training
 - Online training: Child Care Integrated Management System
 - Regular check-ins to monitor implementation of the new policies. Describe
 - Other. Describe
- 8.1.3 Describe the processes the Lead Agency will use to monitor all sub-recipients, including those described in Section 1, such as licensing agencies, child care resource and referral agencies, and others with a role in administering CCDF. The Lead Agency is responsible for ensuring effective internal controls over the administration of CCDF funds. Lead Agencies that use other governmental or non-governmental sub-recipients to administer the program must have written agreements in place outlining roles and responsibilities for meeting CCDF requirements.

Definition: "Sub recipient means a non-Federal entity that receives a sub award from a pass-through entity to carry out part of a Federal program; but does not include an individual that is a beneficiary of such program. A sub recipient may also be a recipient of other Federal awards directly from a Federal awarding agency (2 CFR 200.93). Two CFR Part 200, Subpart A provides additional information on contractors (which may be referred to as "vendors"). The description of monitoring must include, but is not limited to, a description of the written agreements used, a schedule for completing the tasks, a budget which itemizes categorical expenditures consistent with CCDF requirements and indicators or measures to assess performance. Additional items for discussion may include: fiscal management, review of policies and procedures to ensure compliance with CCDF regulations, and monitoring/auditing contractors or grantees to ensure that eligible children are served and eligibility documentation is verified."

Lead Agency has monitors that analyze compliance of providers with the written agreements for the development of the CCDF Program. The office works by referral of cases and reviews all fiscal aspects of the use of funds, according with the Uniform Administrative Requirements, codified in 2 CFR 200. The Offices of Budget and Finance have a recently reviewed Manual to manage federal funded activities, and more personnel was hired to enhance the evaluation of reports and accounting requirements to providers under delegation of funds. A written report follows the evaluation and findings are included. Depending on the sensitivity of the findings a corrective action plan is requested to provider and/or a referral is made to produce an invoice to collect questionable costs. If provider does not comply the case is referred to the Department of Justice.

8.1.4 Describe the activities the Lead Agency has in place to identify program violations and administrative error to ensure program integrity using the series of questions below. Program violations may include intentional and unintentional client and/or provider violations as defined by the Lead Agency. Administrative error refers to areas identified through the Error Rate Review process. Lead Agencies are required to have processes in place to identify fraud or other program violations.

a) Check which activities the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

Share/match data from other programs (e.g., TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

Run system reports that flag errors (include types). Describe

Review of enrollment documents, attendance or billing records

Conduct supervisory staff reviews or quality assurance reviews

Audit provider records

Train staff on policy and/or audits

Other. Describe: The Lead Agency uses the application Child Care Integrated Management System who has been tailored to include security restrictions and authorization levels to assure the transparency of the process of eligibility and payment of vouchers.

None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines

b) Check which activities the Lead Agency has chosen to conduct to identify administrative error.

Share/match data from other programs (e.g. TANF, Child and Adult Care Food Program (CACFP), Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS))

Run system reports that flag errors (include types). Describe

Review of enrollment documents, attendance or billing records

Conduct supervisory staff reviews or quality assurance reviews

Audit provider records

Train staff on policy and/or audits

Other. Describe

None. Describe what measures the Lead Agency plans to put in place to address program integrity along with action steps and completion timelines

8.1.5 Which activities (or describe under "Other") the Lead Agency will use to investigate and collect improper payments due to program violations or administrative error as defined in your State/Territory? The Lead Agency has the flexibility to recover misspent funds as a result of errors. The Lead Agency is required to recover misspent funds as a result of fraud.

a) Check which activities (or describe under "Other") the Lead Agency will use for unintentional program violations?

Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount

Coordinate with and refer to other State/Territory agency (e.g., State/Territory collection agency, law enforcement)

Recover through repayment plans

- Reduce payments in subsequent months
 - Recover through State/Territory tax intercepts
 - Recover through other means
 - Establish a unit to investigate and collect improper payments. Describe: The CCDF Program reviews compliance of providers with enrollment and compliance with attendance. If needed, a referral is made to the office of the Monitor, who conducts an on-site evaluation of records and CCDF disbursements. If an improper payment was made, an adjustment in the delegation of funds or an invoice (if it is related to a provider of services through vouchers, and/or the facts are related to a concluded program year) is issued. If provider does not pay timely or present an appeal, the case is referred to the Department of Justice after exhausting the regulatory requirements established by the PR Treasury Department.
 - Other. Describe
 - None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to unintentional program violations, including action steps and completion timelines
- b) Check which activities the Lead Agency will use for intentional program violations or fraud?
- Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount
 - Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
 - Recover through repayment plans
 - Reduce payments in subsequent months
 - Recover through State/Territory tax intercepts
 - Recover through other means
 - Establish a unit to investigate and collect improper payments. Describe composition of unit below
 - Other. Describe
 - None. Describe what measures the Lead Agency plans to put in place to address the investigation and recovery of misspent funds due to fraud, including action steps and completion timelines
- c) Check which activities the Lead Agency will use for administrative error?
- Require recovery after a minimum dollar amount in improper payment. Identify the minimum dollar amount
 - Coordinate with and refer to other State/Territory agency (e.g. State/Territory collection agency, law enforcement)
 - Recover through repayment plans
 - Reduce payments in subsequent months
 - Recover through State/Territory tax intercepts
 - Recover through other means
 - Establish a unit to investigate and collect improper payments. Describe composition of unit below: The office of the Monitor conducts Initial investigation and if an intentional program violation or fraud is detected, the case is referred to the PR Department of Justice and an invoice is sent to provider. According to the recommendations of the Monitor, the Lead Agency may require a Correction Action Plan to provider or terminate funds immediately.
 - Other. Describe
 - None. Describe what measures the Lead Agency plans to put in place to address the

investigation and recovery of misspent funds due to administrative error, including action steps and completion timelines

8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? The Lead Agency is required to impose sanctions on clients and providers in response to fraud.

- Disqualify client. If checked, please describe, including a description of the appeal process for clients who are disqualified. A written notice follow the findings of the office of the Monitor. The letter states the facts and violations, the right to appeal the decision of the Lead Agency, time and forum in which the process shall be placed (Board of Appeals of the Department of the Family).
- Disqualify provider. If checked, please describe, including a description of the appeal process for providers who are disqualified. A written notice follow the findings of the office of the Monitor. The letter states the facts and violations, the right to appeal the decision of the Lead Agency, time and forum in which the process shall be placed (Board of Appeals of the Department of the Family).
- Prosecute criminally: If fraud is detected, the case is referred to the Department of Justice for assessment of potential criminal prosecution.
- Other. Describe