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Child Care and Development Fund (CCDF) Plan

for

Tribe: **Quechan Indian Tribe**

Federal Fiscal Years 2026–2028

Plan Status: Certified as of 2025-07-01 19:01:19 GMT

This Plan describes the Child Care and Development Fund (CCDF) program to be administered by the CCDF Tribal Lead Agency for the period from 10/01/2025 to 9/30/2028. As provided for in the applicable statutes and regulations, the Tribal Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described herein.

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

Introduction and How to Approach Plan Development

PART I: ALL TRIBAL LEAD AGENCIES

1 CCDF Program Administration

- 1.1 Definition of Indian Child (Direct Funded Lead Agencies Only)
- 1.2 Definition of Service Area (Direct Funded Lead Agencies Only)
- 1.3 Child Count (Direct Funded and P.L. 102-477 Lead Agencies)
- 1.4 CCDF Leadership
- 1.5 Designated Tribal Lead Agency
- 1.6 Administration through Contracts or Agreements
- 1.7 Consultation in the Development of the Tribal CCDF Plan
- 1.8 Categories of Care
- 1.9 Coordination of Services
- 1.10 Program Integrity and Accountability
- 1.11 Disaster Preparedness and Response Plan

2 Health and Safety of Child Care Settings

- 2.1 Relative Providers
- 2.2 Overview of Health and Safety Standards, Training, and Inspections
- 2.3 Health and Safety Standards and Pre-Service/Orientation Training
- 2.4 Ongoing Training
- 2.5 Staff/Child Ratios and Group Sizes
- 2.6 Provider Qualifications
- 2.7 Monitoring and Enforcement of Health and Safety Requirements
- 2.8 Monitoring Inspectors
- 2.9 Comprehensive Background Checks
- 2.10 Comprehensive Background Checks for Household Members in Family Child Care
- 2.11 Disqualifying Crimes for Employment Eligibility
- 2.12 Fees
- 2.13 Timeliness in Returning Employment Determination Results
- 2.14 Provisional Hire
- 2.15 Privacy of Comprehensive Background Check Results
- 2.16 Appeals for Child Care Staff
- 2.17 Justification for Alternative Approaches

3 Quality Improvement

- 3.1 Quality Activities Needs Assessment Methodology
- 3.2 Quality Improvement Goals and Activities

PART II: TRIBAL LEAD AGENCIES WITH SMALL ALLOCATIONS

4 Direct Services

- 4.1 Direct Child Care Services
- 4.2 Direct Child Care Funding Methods
- 4.3 Eligibility Criteria
- 4.4 Payment Rates

Appendix 2: Tribal Early Learning Initiative (TELI)

Introduction and How to Approach Plan Development

Overview

The Child Care and Development Block Grant Act (CCDBG) (42 U.S.C. 9857 et seq.), together with Section 418 of the Social Security Act (42 U.S.C. 618), authorize the Child Care and Development Fund (CCDF), the primary federal funding source devoted to supporting families with low incomes afford child care and to increasing the quality of child care for all children. The CCDF program is administered by the Office of Child Care (OCC) within the Administration for Children and Families (ACF) at the U.S. Department of Health and Human Services (HHS) and provides resources to state, territory, and Tribal governments via their designated CCDF Lead Agency.

CCDF plays a vital role in supporting family well-being and child development. It facilitates parental employment, training, and education, improving the economic stability and well-being of participating families. It also supports child development, promoting safe high-quality care and learning environments for children when child care is needed.

As required by the CCDBG Act, this Tribal CCDF Plan serves as the Tribal Lead Agency's application for a three-year cycle of CCDF funds and is the primary mechanism OCC uses to determine Tribal Lead Agency compliance with the requirements of the statute and regulations. Tribal CCDF Lead Agencies must comply with the rules set forth in the CCDBG Act and corresponding ACF-issued rules and regulations found at 45 CFR Part 98, which are cited throughout the Plan. For example, the citation for immunization requirements is noted as §98.41(a)(1)(i). The CCDF Plan is a fundamental part of OCC's oversight of CCDF and is designed to align with and complement other oversight mechanisms, including administrative and financial data reporting, audits, and the ACF-700 Tribal Annual Report.

The Tribal CCDF program includes flexibilities specifically to address a broad range of Tribal needs and population sizes, including tiered program requirements based on the size of the Tribal Lead Agency's CCDF allocation. CCDF categorizes a Tribal Lead Agency as receiving a small, medium, or large allocation based on its allocation in federal fiscal year (FFY) 2016. A Tribal Lead Agency designated as "small allocation" received less than \$250,000 in FFY 2016. A Tribal Lead Agency designated as "medium allocation" received between \$250,000 and \$1 million in FFY 2016. A Tribal Lead Agency designated as "large allocation" received over \$1 million in FFY 2016. A Tribal Lead Agency with a small allocation has the most flexibility in spending CCDF funds, though they must spend all their CCDF program funds in alignment with the goals and purposes of the CCDF program and comply with health and safety, monitoring, background checks, and quality spending requirements. To align with these more limited CCDF program requirements, a Tribal Lead Agency with a small allocation completes an abbreviated CCDF Plan.

Organization of Plan

In its Tribal CCDF Plan, a Tribal Lead Agency must describe how it implements the Tribal CCDF program. The Plan is organized into the following parts and sections:

Part I (all Tribal Lead Agencies): Three sections on program administration, the triennial child count, health and safety, and quality improvement.

Part II (only for Tribal Lead Agencies with small allocations): One section on direct services.

Part III (only for Tribal Lead Agencies with medium and large allocations): Three sections on child and family eligibility, enrollment and continuity of care, equal access, and family outreach and consumer education.

Appendix 1: Triennial Child Count Declaration/Demonstration: Relevant for Consortia Tribal Lead Agencies of all allocation sizes. Consortia Tribal Lead Agencies must submit a child count declaration/demonstration for each member Tribe for the Tribal Lead Agency to act on its behalf. The template (or a similar document) must be completed and signed by an individual authorized to act for the participating member Tribe/Village. The Consortia Lead Agency must upload the declaration/demonstration as part of their child count submission for each member Tribe/Village.

Appendix 2: Tribal Early Learning Initiative (TELI): Relevant for all Tribal Lead Agencies of all allocation sizes. A Tribal Lead Agency has the **option** to submit Appendix 2, which will serve as a notification to OCC that it plans to join the TELI Network and receive universal technical assistance on developing and strengthening Tribal early childhood systems building. This initiative is voluntary, and Tribal Lead Agencies are not required to complete this appendix.

Completing the Plan

This Plan aims to capture the most accurate and up-to-date information about how a Tribal Lead Agency is implementing its Tribal CCDF program in compliance with the requirements of CCDF. In responding to Plan questions, Tribal Lead Agencies should provide concise and specific summaries and/or may use bullet points as appropriate to the question.

Tribal CCDF Plan Submission

A Tribal Lead Agency will submit its Plan to OCC electronically through the Child Care Automated Reporting System (CARS). CARS will include all language and questions included in the final Tribal CCDF Plan template approved by the Office of Management and Budget (OMB).

A Tribal Lead Agency must submit its FFY 2026 – 2028 CCDF Plan to OCC no later than July 1, 2025.

Note: The format of the questions in CARS could be modified from the pdf version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities.

Plan Review

OCC will review submitted Tribal CCDF Plans for completeness and compliance with federal policies. Each Tribal Lead Agency will receive a letter approximately 90 days after the Plan is due to inform the Tribal Lead Agency that its Plan has been approved or approved with conditions.

Amendment Process

OCC recognizes that a Tribal Lead Agency may wish to modify and adapt its CCDF program to address evolving needs and priorities. A Tribal Lead Agency must submit amendments to its Plan as it makes substantial policy and program changes during the three-year Plan cycle, including when addressing areas of non-compliance.

PART I: ALL TRIBAL LEAD AGENCIES

1 CCDF Program Administration

1.1 Definition of Indian Child (Direct Funded Lead Agencies Only)

For the purposes of determining eligibility, Tribal Lead Agencies must define Indian child (§98.81(b)(2)(i)). This definition must be limited to children from federally recognized Indian Tribes, consistent with the CCDBG Act's definition of Indian Tribe (§98.2).

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

1.1.1 Indian Child

For the purposes of determining CCDF eligibility, the Tribal Lead Agency defines an Indian child as: **The Tribal Lead Agency defines Indian child as: 1/4 Native American Blood Quantum and enrolled in a Federally Recognized Indian Tribe or child of a Parent Legal Guardian who is 1/4 Native American Blood Quantum and an enrolled member of a Federally Recognized Tribe and is able to provide a descendant letter.**

1.2 Definition of Service Area (Direct Funded Lead Agencies Only)

Programs and activities must be carried out for the benefit of Indian children living on or near the Indian reservation, which is called the service area. A Tribal Lead Agency must define its service area in the Tribal CCDF Plan (§98.83(b)). The service area must be within reasonably close geographic proximity to the borders of a Tribe's reservation (except for Tribes in Alaska, California, and Oklahoma). Tribes that do not have reservations must establish service areas within reasonably close geographic proximity to the area where the Tribe's population resides.

Tribal Lead Agencies are expected to be able to provide services to eligible families throughout the service area. ACF will not approve an entire state as a Tribe's service area.

1.2.1 Service Area

- a. The Tribal Lead Agency defines the service area as: **Winterhaven CA, or the surrounding service areas (Bard CA, Yuma AZ)**
- b. **Optional:** In addition to the description above, a clearly labeled map of the service area is attached. Attachment: **Document was not provided by TLA**

1.2.2 Neighboring and/or Overlapping Service Areas

Is the service area (as defined in 1.2.1) neighboring and/or overlapping with the service area(s) of any other Tribal Lead Agencies?

No.

Yes. If yes, answer the following questions:

- a. Identify those other Tribal Lead Agencies with neighboring and/or overlapping service areas. Describe:
- b. Describe the Tribal Lead Agency's process for ensuring unduplicated child counts for neighboring and/or overlapping service area(s):

1.3 Child Count (Direct Funded and P.L. 102-477 Lead Agencies)

For the purposes of determining a Tribe/Tribal organization’s annual CCDF program funding level, the Tribal Lead Agency is required to conduct and submit a triennial child count of children younger than age 13, (§98.80). The child count submitted is not reflective of the number of children who receive direct child care services. Instead, the child count gives the number of children younger than 13 who meet the Tribal Lead Agency’s definition of Indian child and who reside in the designated service area.

The Tribal child count will be effective from October 1, 2025, to September 30, 2028, and will be valid for three years. If a consortium gains or loses a member organization(s), then the adjustments will be made accordingly.

Note: A consortium must also submit a declaration/demonstration for each participating member Tribe/Village. (See Appendix 1: Triennial Child Count Declaration/Demonstration for a template).

A Tribal Lead Agency may not count any children who are included in the child count of another CCDF Tribal Lead Agency. The Tribal Lead Agency is required to confer with all other CCDF Tribal Lead Agencies that have neighboring and/or overlapping service areas.

1.3.1 Child Count

(If the Tribal Lead Agency is not a consortium, it is required to answer this question.)

The Tribal Lead Agency certifies that the number of Indian children younger than age 13 (as defined in 1.1.1 or the approved P.L. 102-477 Plan) who reside in the service area (as defined in 1.2.1 or in the approved P.L. 102-477 Plan) for the Tribal Lead Agency is: **536**

1.3.2 Consortium Child Count

(If the Tribal Lead Agency is a consortium, it is required to answer this question.)

The Tribal Lead Agency certifies that the number of Indian children younger than age 13 (as defined in 1.1.1 or in the approved P.L. 102-477 Plan) who reside in the service area (as defined in 1.2.1 or in the approved P.L. 102-477 Plan) for the consortium Tribal Lead Agency and consortium members are:

Consortium Tribal Lead Agency	Mandatory Count of Children Less than 13 Years Old	Discretionary Count of Children Less than 13 Years Old
TOTAL		

Consortium Member	Mandatory Count of Children Less than 13 Years Old	Discretionary Count of Children Less than 13 Years Old	Signed Declaration/Demonstration for Each Consortium Member (upload letter) <i>Example in Appendix 1</i>

1.3.3 102-477 Reallotted Tribal Discretionary Funds

(If a Tribe has a P.L. 102-477 consolidated plan, it is required to answer this question.)

Reallotted Discretionary funds are unobligated current grant year Discretionary funds re-awarded into the same originating grant year by ACF to other Tribal Lead Agencies (thus retaining original obligation and liquidation requirements). To be eligible to receive reallotted funds, the Tribal Lead Agency must indicate their interest below.

Does the Tribal Lead Agency request discretionary funds should they be available through the reallocation process?

1.4 CCDF Leadership

This section identifies the Tribal Nation or participating member Tribes/Villages of a Tribal consortium leadership of the CCDF program, including the designated Tribal Lead Agency. It also addresses who was consulted in the development of the Tribal CCDF Plan and how the Tribal Lead Agency plans to coordinate CCDF services with other entities.

1.4.1 Program Compliance

By submitting this Plan, the Tribal Lead Agency assures that it will have in effect a program that complies with the provisions of the CCDF Plan, and that it is administered in accordance with the Child Care and Development Block Grant (CCDBG) Act (42 U.S.C. § 9857 et seq.), as amended by the CCDBG Act of 2014 (Pub. L. 113-186); section 418 of the Social Security Act (42 U.S.C. § 618); and all other applicable federal laws and regulations.

Check this box to provide assurance.

1.4.2 Tribe or Tribal Consortium Information

- a. Official name of the federally recognized Tribe as listed in the Federal Register or Tribal consortium: **Quechan Indian Tribe**
- b. Name of Tribal Chair, President, or Leader: **Jonathan E. Koteen**
- c. Title: **President**
- d. Address: **350 Picacho Rd.**
- e. City, state, ZIP code: **Winterhaven, CA 92283**
- f. Telephone number: **7609193600**
- g. Email address: **president@quechantribe.com**

1.4.3 Tribal Consortium

(If the Tribal Lead Agency is a consortium, it is required to answer this question.)

A Tribal consortium refers to a partnership between two or more Tribal governments authorized by the governing bodies of those Tribes/Alaska Native Villages to allow the Tribal consortium to apply for and receive CCDF funding on behalf of the participating member Tribes/Villages. A Tribal consortium must describe how it coordinates services on behalf of each of its participating member Tribes/Villages (§98.81(b)(8)(ii)).

Describe how the consortium coordinates with each participating member Tribe/Village on child care services:

1.5 Designated Tribal Lead Agency

The Tribe or Tribal consortium must designate an agency to represent the Tribe/consortium as the Tribal Lead Agency. This designated agency agrees to administer the Tribal CCDF program in accordance with applicable federal laws and regulations and the provisions of this Plan (§98.10; §98.16(a); §98.83(a)).

The Tribal Lead Agency can be a department or sub-agency, such as the CCDF department, human services department, or workforce development department. In some cases, the Tribe itself may be the Tribal Lead Agency.

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

1.5.1 Designated Agency by the Tribe or Tribal Consortium

Which agency has been designated by the Tribe or Tribal consortium to administer the CCDF program?
Name of Tribal Lead Agency: **Quechan Indian Tribe**

1.5.2 Contact Information for the Tribal CCDF Administrator

Identify the CCDF Administrator designated by the Tribal Lead Agency. The CCDF Administrator serves as the day-to-day contact person responsible for administering the Tribal CCDF program. If there is more than one designated contact person with shared responsibility for administering the CCDF program, please identify the Co-Administrator/Assistant Administrator and include relevant contact information for the Co-Administrator in 1.5.3.

- a. Name of Tribal CCDF Administrator: **Claudia Sanchez**
- b. Title: **Child Care Program Manager**
- c. Mailing address: **PO Box 1899 Yuma AZ 85366-1899**
- d. Physical address (if different than mailing address): **628 Picacho Rd. Winterhaven, CA 92283**
- e. Phone number: **9289772668**
- f. Cell phone number: **9285101564**
- g. Email address: **childcareprogrammgr@quechantribe.com**

1.5.3 Contact Information for the Tribal CCDF Co-Administrator/Assistant Administrator

- a. Name of Tribal CCDF Co-Administrator/Assistant Administrator: **Cryselle Uribe**
- b. Title: **Grants & Contracts Coordinator**
- c. Mailing address (if different from above): **PO Box 1899 Yuma, AZ 85366-1899**
- d. Physical address (if different than mailing address): **350 Picacho Rd. Winterhaven, CA 92283**
- e. Phone number: **7609193600**
- f. Cell phone number:
- g. Email address: **contractsgrantscoord@quechantribe.com**

1.5.4 Contact Information for the Tribal Fiscal Contact

Identify the fiscal contact designated by the Tribal Lead Agency. The fiscal contact serves as the person who will answer questions related to the annual Financial Reporting Form for Tribal CCDF Lead Agencies (ACF-696T), and other related CCDF fiscal topics. If there is more than one designated contact person with shared responsibility for fiscal management, please identify the person in 1.5.5 and include relevant contact information:

- a. Name of Tribal fiscal contact: **Barbara Cachora**
- b. Title: **Grant & Contract Account QIT Finance**
- c. Mailing address: **PO Box 1899 Yuma, AZ 85366-1899**
- d. Physical address (if different than mailing address): **350 Picacho Rd. Winterhaven, CA 92283**
- e. Phone number: **7609193600**
- f. Cell phone number:
- g. Email address **grantaccountant@quechantribe.com**

1.5.5 *Optional:* Contact Information for Any Other Needed Tribal Contact

Identify any additional contacts that OCC should include in correspondence with the Tribe or Tribal Lead Agency:

- a. Name of the other Tribal contact: **Danell Pastores**
- b. Title: **Tribal Administrator**
- c. Mailing address: **PO Box 1899 Yuma, AZ 85366-1899**
- d. Physical address (if different than mailing address): **350 Picacho Rd. Winterhaven, CA 92283**
- e. Phone number: **7609193600**
- f. Cell phone number:
- g. Email address: **tribaladministrator@quechantribe.com**

1.6 Administration through Contracts or Agreements

The Tribal Lead Agency has broad authority to administer the CCDF program through contracts or agreements with other governmental, non-governmental, or other public or private local agencies. The Tribal Lead Agency remains the single point of contact and retains overall responsibility for the administration of the CCDF program (§98.11(a)(3)).

1.6.1 Direct Administration and Operation

Will the Tribal Lead Agency directly administer and operate the CCDF program?

Yes, the Tribal Lead Agency will directly administer and operate all aspects of the CCDF program.

No, the Tribal Lead Agency will not directly administer and implement all aspects of the CCDF program and certifies that there is a written agreement between the Tribal Lead Agency and other agencies.

1.7 Consultation in the Development of the Tribal CCDF Plan

In the development of the Tribal CCDF Plan, the Tribal Lead Agency is required to consult with appropriate representatives of the local government of the Tribal Nation (§98.14(b)). Tribal Lead Agencies are also

required to conduct a public hearing to provide an opportunity for the general public to comment on the provision of the child care services under the CCDF Plan (§98.14(c)). For the purposes of developing this CCDF Plan, consultation involves meeting with or obtaining input from appropriate representatives of the Tribal community.

1.7.1 Consultation and Representation

Does the Tribal Lead Agency certify that it consulted with appropriate representatives of the local government of the Tribal Nation in the development of this Plan, as practicable (§98.14(b))?

Yes.

No.

1.7.2 Public Hearings

Tribal Lead Agencies are required to conduct a public hearing to provide those interested with an opportunity to comment on the provision of child care services under the CCDF Plan (§98.14(c)). The Tribal Lead Agency must conduct at least one public hearing prior to the submission of the Tribal CCDF Plan but no earlier than January 1, 2025. The Tribal Lead Agency must provide notice of the hearing throughout the Tribe's service area. This notice must be provided no later than 20 days prior to the date of the hearing. Tribal Lead Agencies must make the contents of the draft Plan available to the public in advance of the hearing.

Does the Tribal Lead Agency certify that it held at least one hearing after at least 20 days of public notice to provide the public an opportunity to comment on the provision of child care services under the CCDF Plan before the Plan is submitted to ACF, but no earlier than nine months before the Plan becomes effective, and it made the contents of the draft Plan available to the public in advance of the hearing?

Yes.

No.

1.7.3 Plan Availability to the Public

A Tribal Lead Agency must make its submitted and final Plan, any Plan amendments, and any waivers publicly available (§98.14(d)).

Does the Tribal Lead Agency certify that it makes the final Plan, any subsequent Plan amendments, and waivers available to the public?

Yes.

No.

1.8 Categories of Care

Tribal Lead Agencies with small allocations are not required to offer direct services. Tribal Lead Agencies with medium and large allocations must provide direct services. Tribal Lead Agencies offering direct services must identify the categories of care CCDF eligible families may choose from, including those current or planned during the three-year Plan period.

Note: Choices in 1.8.1-1.8.3 will affect skip patterns throughout the Plan.

1.8.1 Center-Based Child Care (Including Tribally Operated Centers)

Does the Tribal Lead Agency offer center-based child care providers, including Tribally operated centers, which are providers licensed or otherwise authorized to provide child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of work of a child's parent(s)?

Yes.

No.

1.8.2 Family Child Care

Does the Tribal Lead Agency offer family child care providers, which are individuals who provide child care services for fewer than 24 hours per day per child in a private residence other than the child's residence, unless care in excess of 24 hours is due to the nature of the work of a child's parent(s)?

Yes.

No.

1.8.3 In-Home Child Care

Does the Tribal Lead Agency offer in-home child care providers, which are individuals who provide child care services in the child's own home?

Yes.

No.

1.9 Coordination of Services

The Tribal Lead Agency is required, as practicable, to coordinate services with other Tribal, federal, state, and/or local child care and early childhood development programs and agencies, such as:

- Public health
- Employment services/workforce development
- Temporary Assistance for Needy Families (TANF)
- Child care licensing
- Head Start and/or Early Head Start
- State Advisory Council on Early Childhood Education and Care
- Statewide afterschool network
- Emergency management and response
- Child and Adult Care Food Program (CACFP)
- McKinney-Vento state coordinates for homeless education
- Agencies responsible for Medicaid and state children's health insurance program
- Mental health services
- Child care resource and referral agencies

A Tribal Lead Agency must demonstrate in the Plan how it encourages partnerships, if applicable and to the extent practicable, among Tribal agencies, other public agencies, other Tribes and Tribal organizations, private entities, and community-based organizations to leverage existing service delivery systems and to increase the supply and quality of services (§98.14(a)).

1.9.1 Coordination of Services

Briefly describe the ways coordination occurs and the results of those coordination efforts: **Public Health-**

Coordination: Biannual meetings with Indian Health Services and the county health department.
Result: Delivery of mobile health screenings at the child care center; continuous access to healthcare through the Ft. Yuma Indian Health Services partnership.

Employment Services / Workforce Development-

Coordination: Collaboration with WIOA/DOL, Quechan General Assistance, and TERO to support employed or learning parents.

Result: Reliable child care for working/learning families; employment referrals strengthen workforce readiness within the tribe.

Head Start-

Coordination: Partnership with Quechan Head Start; development of Memorandum of Understanding (MOUs).

Result: Prepares children academically before Head Start enrollment and ensures smooth child care transitions with no service gaps.

Quechan Social Services-

Coordination: Close collaboration with ICWA-administering program; annual trainings with the National Indian Child Welfare Association.

Result: Improved ICWA compliance and deeper understanding among stakeholders supporting child welfare.

1.10 Program Integrity and Accountability

The Tribal Lead Agency is responsible for making sure that policies and procedures are in place to monitor programs and services, ensure compliance with the rules of the program, and provide oversight in the expenditure of all funds, including identifying improper expenditures and undertaking fraud prevention and recovery efforts.

1.10.1 Identifying Improper Payments

Tribal Lead Agencies are required to describe effective internal controls to identify improper payments.

- a. Briefly describe how the Tribal Lead Agency’s effective internal controls ensure integrity and accountability, including processes to ensure sound fiscal management (§98.68(a)). Describe: **The Tribal Lead Agency (TLA) implements robust internal controls to uphold integrity, accountability, and sound fiscal management while preventing improper payments. These measures include:**
- **Staff Training & Compliance Education:** Employees receive ongoing training on Child Care and Development Fund (CCDF) regulations, financial accountability, and fraud prevention to ensure adherence to federal guidelines.
 - **Supervisory Oversight & Quality Assurance Reviews:** Regular staff supervision and quality assurance checks help detect discrepancies in payment processing and improve fiscal accuracy.
 - **Automated System Monitoring:** The TLA uses system-generated reports that flag potential errors, allowing timely corrective action.
 - **Cross-Agency Data Sharing:** Collaboration with state CCDF programs, Tribal/state TANF programs, Head Start, CACFP, and other Tribal offices enhances oversight and financial transparency.
 - **Enrollment & Billing Verification:** Routine reviews of enrollment documents, attendance records, and billing statements ensure services are properly documented and funds are appropriately allocated.
 - **Provider Accountability Checks:** Provider records are consistently reviewed to verify compliance and prevent fraudulent claims.
 - **Ongoing Monitoring & Policy Assessments:** Internal audits, policy reviews, and assessment of fiscal procedures enable the TLA to refine practices and address vulnerabilities.
- b. How does the Tribal Lead Agency prevent and identify improper payments (§98.68(b))? Check those that are included in the Tribe’s policies and procedures:
- i. Train staff on CCDF policies and regulations.
 - ii. Conduct supervisory staff reviews or quality assurance reviews.
 - iii. Share data with other programs (e.g., state CCDF program, Tribal or state TANF program, Head Start, CACFP, other Tribal offices).
 - iv. Run system reports that flag errors.
 - v. Review enrollment documents and attendance or billing records.
 - vi. Review provider records.
 - vii. Perform ongoing monitoring and assessment of policy implementation.
 - viii. Train staff on Tribal procurement procedures.
 - ix. Inform families on allowable uses of Tribal CCDF funds.
 - x. Create a timeline for review of a family’s presumptive eligibility determinations.
 - xi. Other. Briefly describe:

1.10.2 Investigating and Collecting Improper Payments

The Tribal Lead Agency is required to recover improper payments that are the result of fraud (§98.68(b)(2)). How does the Tribal Lead Agency investigate and collect improper payments resulting from fraud (intentional errors or program violations)? Check those that apply:

- a. Coordinate with and refer to other Tribal, state, or federal agencies (e.g., Tribal Council, law enforcement).

- b. Require recovery if the improper payment exceeds a specific dollar amount. Identify the minimum dollar amount: \$
- c. Recover through repayment plans.
- d. Reduce payments in subsequent months.
- e. Recover through payroll deductions (i.e., for CCDF clients, providers, and staff employed by the Tribe).
- f. Other. Briefly describe:

1.11 Disaster Preparedness and Response Plan

(If the Tribal Lead Agency has a medium or large allocation, it is required to answer 1.11.1-1.11.3. Tribal Lead Agencies with small allocations are only required to answer 1.11.3 and 1.11.1 and 1.11.2 are optional to answer.)

Tribal Lead Agencies with medium and large allocations are required to establish a Child Care Disaster Plan for the Tribal service area. The plan must be developed in consultation with relevant agencies and partners and must describe how it will address the needs of children, including the need for safe child care before, during, and after a state of emergency declared by the Governor or Tribal Chief Executive for a major disaster or emergency (§98.16(dd) and as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122).

Tribal Lead Agencies with small allocations are not required to establish a Child Care Disaster Plan, but are required to include in its policies and procedures standards for disaster procedures including evacuation, relocation; shelter-in-place; lockdown; communication and reunification with families; continuity of operations; accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions; and conducting emergency preparedness training and practice drills for staff and volunteers.

1.11.1 Child Care Disaster Plan Collaboration

Did the Tribal Lead Agency collaborate with other agencies to develop the Child Care Disaster Plan, which may include other programs within the Tribal Lead Agency’s governance structure, or any other partners identified by the Tribal Lead Agency (§98.16(dd)(1))? (e.g., Tribal or state emergency management agency, child care licensing agency, or health department):

Yes.

No. Briefly describe:

1.11.2 Child Care Disaster Plan Components

Does the Child Care Disaster Plan include the following required components (§98.16(dd)(2)):

a. Guidelines for the continuation of child care subsidies?

Yes.

No.

b. Guidelines for the continuation of child care services?

Yes.

No.

c. Procedures for the coordination of post-disaster recovery of child care services?

Yes.

No.

1.11.3 Child Care Disaster Plan Disaster Procedures

Does the Tribal Lead Agency certify it has included in its Tribal CCDF Disaster Plan (or for small allocations, in its policies and procedures) standards for disaster procedures including evacuation; relocation; shelter-in-place; lockdown; communication and reunification with families; continuity of operations; accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions; and conducting emergency preparedness training and practice drills for staff and volunteers (§98.41(a)(1)(vii))?

Yes.

No.

2 Health and Safety of Child Care Settings

Child care health and safety standards and enforcement practices are essential to protect the health and safety of children while out of their parents' care. CCDF provides a minimum threshold for child care health and safety policies and practices but leaves authority to Tribal Lead Agencies to design, adapt, or adopt standards that appropriately protect children's safety and promote nurturing environments that support their healthy growth and development. Tribal Lead Agencies should implement standards for ratios, group size limits, and provider qualifications that help ensure that the child care environment is conducive to safety and learning and enable caregivers to promote all domains of children's development. Health and safety standards should set clear and enforceable expectations for providers, set the foundation for health and safety training, and establish the baseline for monitoring and inspection.

In this section, a Tribal Lead Agency will describe its health and safety standards, pre-service or orientation training on health and safety, monitoring system(s), and its comprehensive background checks approach. Tribal Lead Agencies may adopt state health and safety standards, training, monitoring, and comprehensive background checks, or they may set their own. Tribal Lead Agencies have the flexibility to describe alternative monitoring and background check approaches and to provide justification(s) for the approach(es). Tribal Lead Agencies will be skipped out of questions if they are adopting state standards or practices.

2.1 Relative Providers

Tribal Lead Agencies can use relative providers in either family child care or in-home settings. If the Tribal Lead Agency utilizes relative providers in its CCDF program (defined in the Child Care and Development Block Grant Act [42 U.S.C. 9857 et seq.] as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles age 18 and over), the Tribal Lead Agency has the flexibility to determine exemptions for relative providers for health and safety standards, training, monitoring, and comprehensive background checks if the individual cares only for relative children.

Check the exemptions the Tribal Lead Agency has for eligible relative providers age 18 and over for the following health and safety requirements.

2.1.1 Relative Providers

Does the Tribal Lead Agency allow for relative providers?

No, the Tribal Lead Agency does not have relative providers. **(If checked, skip 2.1.2-2.1.6.)**

Yes. If Yes, please check the category of care the Tribal Lead Agency allows

Family child care: Care is provided by relative in a private residence other than the child's residence.

In-home child care: Care is provided by relative in the child's home.

2.1.2 Relative Providers Only

Does the Tribal Lead Agency *only* provide child care services utilizing relative providers?

Yes. **(If checked, skip 2.2-2.8.)**

No. **(If checked, skip 2.1.3-2.1.6.)**

2.1.3 Health and Safety Standards for Relative Providers

Tribal Lead Agencies that only have relative providers will complete information on standards in this question and will skip 2.2-2.3.

Select one of the two options:

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

Select the topical standards **required** for relative providers:

- a. The prevention and control of infectious diseases (including immunizations). Describe:
- b. Prevention of sudden infant death syndrome (SIDS) and use of safe sleeping practices. Describe:
- c. Administration of medication, consistent with standards for parental consent. Describe:
- d. Prevention and response to emergencies due to food and allergic reactions. Describe:
- e. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic. Describe:
- f. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment. Describe:
- g. Emergency preparedness and response planning. Describe:
- h. Handling and storage of hazardous materials and the appropriate disposal of biocontaminants. Describe:
- i. Appropriate precautions in transporting children. Describe:
- j. Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR). Describe:
- k. Recognition and reporting of child abuse and neglect. Describe:
- l. Other. Describe:

2.1.4 Health and Safety Training for Relative Providers

Tribal Lead Agencies that only have relative providers will complete information on training in this question and will skip 2.4-2.6.

Select one of the two options:

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

Select the topical trainings **required** for relative providers in a pre-service training or within a 90-day orientation period:

- a. The prevention and control of infectious diseases (including immunizations)
- b. Prevention of sudden infant death syndrome (SIDS) and use of safe sleeping practices
- c. Administration of medication, consistent with standards for parental consent
- d. Prevention and response to emergencies due to food and allergic reactions
- e. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic
- f. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment
- g. Emergency preparedness and response planning
- h. Handling and storage of hazardous materials and the appropriate disposal of biocontaminants
- i. Appropriate precautions in transporting children
- j. Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR)
- k. Recognition and reporting of child abuse and neglect
- l. Other: *Click or tap here to enter text.*

2.1.5 Monitoring and Enforcement for Relative Providers

Tribal Lead Agencies that only have relative providers will complete information on monitoring in this question and will skip 2.7-2.8.

Select one of the two options:

- Relative providers are exempt from all monitoring and enforcement requirements.
- Relative providers are not exempt from all monitoring and enforcement requirements. Describe:

2.1.6 Comprehensive Background Checks for Relative Providers

Select one of the two options:

- Relative providers are exempt from all CCDF background check requirements. **(If checked, skip 2.9 and 2.11-2.17.)**
- Relative providers are not exempt from all CCDF background check requirements.

2.2 Overview of Health and Safety Standards, Training, and Inspections

Use the check boxes below to indicate the health and safety standards (§98.41(a)), monitoring systems (§98.42(a); §98.42(b)), and comprehensive background check processes (§98.43(a)(1)) used by the Tribal Lead Agency for each category of care.

Note: For Tribal Lead Agencies that utilize both relative providers and nonrelative providers, Sections 2.2 through 2.11 questions apply to non-relative providers only. If multiple boxes are checked in a category of care, describe the combination.

2.2.1 Health and Safety Standards

- a. Check the health and safety standards that apply for center-based care, including Tribally operated centers:
 - i. Tribal health and safety standards
 - ii. State health and safety standards. State(s):
 - iii. If both Tribal and state standards are checked, briefly describe how each type of standard is applied:
- b. Check the health and safety standards that apply for family child care (check all that apply):
 - i. Tribal health and safety standards
 - ii. State health and safety standards. State(s):
 - iii. If both Tribal and state standards are checked, briefly describe how each type of standard is applied:
- c. Check the health and safety standards that apply for in-home care (check all that apply):
 - i. Tribal health and safety standards
 - ii. State health and safety standards. State(s):
 - iii. If both Tribal and state standards are checked, briefly describe how each type of standard is applied:

(If only 2.2.1a.ii, 2.2.1b.ii, and 2.2.1c.ii are checked, skip 2.3.1-2.6.3.)

2.2.2 Monitoring Systems

- a. Check the monitoring systems that apply for center-based care, including Tribally operated centers:
 - i. Tribal monitoring. List entity(ies): **QUECHAN TRIBAL EMPLOYMENT RESOURCE OFFICE (TERO) AND SAFETY**
 - ii. State monitoring. List entity(ies):
 - iii. If both Tribal and state monitoring are checked, briefly describe how each type of monitoring is applied:
- b. Check the monitoring systems that apply for family child care (check all that apply):
 - i. Tribal monitoring. List monitoring entity(ies):
 - ii. State monitoring. List monitoring entity(ies):
 - iii. If both Tribal and state monitoring are checked, briefly describe how each type of monitoring is applied:
- c. Check the monitoring systems that apply for in-home care:
 - i. Tribal monitoring. List monitoring entity(ies):
 - ii. State monitoring. List monitoring entity(ies):
 - iii. If both Tribal and state monitoring are checked, briefly describe how each type of monitoring is applied:

(If only 2.2.2a.ii, 2.2.2b.ii, and 2.2.2c.ii are checked, skip 2.7.1-2.8.3.)

2.2.3 Comprehensive Background Check Processes

- a. Does a state agency conduct all comprehensive background checks on behalf of the Tribal Lead Agency for all center-based care, including Tribally operated centers?
 Yes. List the state(s): **CALIFORNIA**
 No.
- b. Does a state agency conduct all comprehensive background checks on behalf of the Tribal Lead Agency for all family child care?
 Yes. List the state(s):
 No.
- c. Does a state agency conduct all comprehensive background checks on behalf of the Tribal Lead Agency for all in-home child care?
 Yes. List the state(s):
 No.

(If only 2.2.3a, 2.2.3b, and 2.2.3c are "Yes," skip 2.9 and 2.11-2.17.)

2.3 Health and Safety Standards and Pre-Service/Orientation Training

Tribal Lead Agencies are required to establish health and safety standards for all providers receiving CCDF funds relating to the topics listed below, as appropriate to the provider setting and age of the children served (§98.41(a)). This requirement is applicable to all providers receiving CCDF program funds except for certain relatives, which may be exempted by the Tribal Lead Agency. Additionally, Tribal Lead Agencies must ensure caregivers, teachers, and directors are trained on health and safety standards either in pre-service training or within a three-month orientation period. Training must cover each of the required standards that address the health and safety requirements described in §98.41(a) and be appropriate to the provider setting and the age of children served.

In this section, the Tribal Lead Agency will describe health and safety standards that apply to all providers. A standard describes the actions that must be taken by child care providers to ensure the health and safety of children in care.

- In the first part of each health and safety topic, Tribal Lead Agencies must provide a brief summary or list of components for each standard and any variations based on the category of care and the ages of children served.
- In the second part of each health and safety topic, Tribal Lead Agencies must certify that the training topic is to be completed by providers either in a pre-service training or within a 90-day orientation period.

2.3.1 Prevention and Control of Infectious Diseases (Including Immunizations)

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(i)): **The Tribal Lead Agency (TLA) follows comprehensive health and safety standards to prevent and control infectious diseases, including immunizations, across all child care settings. These standards ensure a safe and healthy environment for children while considering variations based on care categories and age groups.**

General Standards

- **Routine Immunization Requirements:** Children must be up-to-date on age-appropriate vaccinations as recommended by the Centers for Disease Control and Prevention (CDC) and Tribal health authorities.
- **Health Screenings:** Regular medical check-ups and immunization verification are conducted before enrollment and periodically during care.
- **Infection Control Measures:** Implementation of proper hygiene practices, including handwashing protocols, sanitation of toys and surfaces, and guidelines for handling illness outbreaks.
- **Staff Training:** Caregivers receive ongoing training on infection prevention, recognizing symptoms, and responding to potential health concerns.

Variations Based on Care Category & Age

- **Infants & Toddlers (0-2 years):**
 - **Strict protocols for diapering, feeding, and sanitizing to minimize infection risks.**
 - **Mandatory immunization tracking for early childhood vaccines, including Hepatitis B, DTaP, Hib, and Rotavirus.**
 - **Limited exposure to large groups to reduce susceptibility to respiratory illnesses.**
- **Preschool-Aged Children (3-5 years):**
 - **Focus on reinforcing hygiene habits, including self-care skills like handwashing and covering coughs.**
 - **Immunization verification for MMR, Varicella, and annual flu shots.**
 - **Structured health screenings, including vision and hearing checks.**
- **School-Aged Children (6+ years):**
 - **Monitoring booster vaccines, including Tdap and annual flu shots.**
 - **Education on personal hygiene, nutrition, and disease prevention through interactive activities.**
 - **Collaboration with local health providers to support vaccination programs.**

Response to Outbreaks

- **Immediate isolation protocols for symptomatic children.**
- **Notification and coordination with Tribal health officials and parents.**
- **Enhanced sanitation procedures during high-risk periods (e.g., flu season).**

These measures ensure compliance with federal and Tribal health regulations, safeguarding children in care while adapting guidelines to their developmental needs. Would you like to include additional details specific to a care program?

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period? (§98.41(a)(2))?

Yes.

No.

- c. Does the Tribal Lead Agency certify that it established a grace period (in consultation with the state or Tribal health agency (§98.41(a)(1)(i)(C))) that allows children experiencing homelessness to receive CCDF assistance while providing families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements?

Yes.

No.

- d. Does the Tribal Lead Agency certify that it established a grace period (in consultation with the state or Tribal health agency (§98.41(a)(1)(i)(C))) that allows children in foster care to receive CCDF assistance while providing families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements?

Yes.

No.

2.3.2 Prevention of SIDS and the Use of Safe Sleeping Practices

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(ii)): **The Tribal Lead Agency (TLA) follows strict safe sleep practices to prevent Sudden Infant Death Syndrome (SIDS) and other sleep-related risks for infants. These standards align with guidelines from the American Academy of Pediatrics (AAP) and Tribal health authorities, ensuring the safety of children in all care settings.**

General Safe Sleep Standards

- **Back-to-Sleep Policy:** Infants must always be placed on their backs for sleep in a firm crib or bassinet with a tightly fitted sheet.
- **Approved Sleep Environments:** Cribs must meet Consumer Product Safety Commission (CPSC) standards and be free from pillows, blankets, stuffed toys, and bumpers to minimize suffocation risks.
- **Room Temperature & Ventilation:** Sleep areas are kept at comfortable temperatures to prevent overheating, which is a known SIDS risk factor.
- **Supervised Sleep Checks:** Caregivers conduct regular visual checks to monitor infants while they sleep, ensuring their face remains uncovered and they show no signs of distress.
- **Safe Pacifier Use:** Pacifiers may be offered during sleep without attachments like clips or strings, as research suggests they may reduce SIDS risk.

Variations Based on Age & Care Setting

- **Infants (0-12 months):**
 - **Strict crib-only policy** with no soft bedding or plush items.
 - **No co-sleeping or bed-sharing** allowed in child care settings.
 - **Routine training** for caregivers on SIDS prevention and sleep safety.
- **Toddlers (12+ months):**
 - **Transition from cribs** to approved toddler beds once developmentally appropriate.
 - **Soft bedding** only introduced gradually, ensuring continued safety.
 - **Self-soothing techniques** encouraged to promote healthy sleep habits.
- **Nap Time Policies for Older Children:**
 - **Children** are encouraged to rest in a supervised setting with age-appropriate sleeping arrangements.
 - **Health and safety training** includes information on proper sleep positions and environmental safety.

Education & Parental Engagement

- **Parents** are informed about safe sleep guidelines and encouraged to follow the same standards at home.
- **Caregivers** receive ongoing professional training on SIDS prevention and updated health recommendations.
- **Collaboration** with Tribal health organizations ensures consistent education and access to resources for families.

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.3 Administration of Medication, Consistent with Standards for Parental Consent

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(iii)): **Under no circumstances will child care center staff distribute or administer any medication to a child.**

Parents are solely responsible for administering prescribed medications to their children. Any medication brought to the center must be securely stored in a locked medication box in the director's office or, if necessary, in the refrigerator.

Diaper rash creams may be kept in the child's designated diapering cubby, ensuring they remain out of reach of children.

In the event of a severe allergic reaction or emergency, trained staff will administer an EpiPen as needed.

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.4 Prevention of and Response to Emergencies Due to Food and Allergic Reactions

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(iv)): **The prevention and response to children with food allergies includes identification between food allergies and food sensitivities, documentation of dietary modifications, and a posted plan of care for individuals who experience an allergic reaction. Staff will minimize exposure to allergens and document any allergic reaction incidents.**

Parents are responsible for informing the provider of any food allergies the child may have. Documentation of the allergy and possible reaction will be maintained in the child's file.

Response to Emergencies Due to Food and Allergic Reactions

- 1. The program will notify the parents/guardians immediately of any suspected allergic reactions, as well as the ingestion of or contact with the problem food even if a reaction did not occur.**
- 2. The program will contact the emergency medical services system immediately whenever epinephrine has been administered.**

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.5 Safety of Building and Physical Premises

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(v)): **Child care facility is required to ensure the inaccessibility of pools, including swimming pools (in ground and above ground), ponds or similar bodies of water. Center playgrounds should be enclosed by a fence to protect children. Fireplaces or heaters should be inaccessible to children. All accessible electrical outlets should be tamper-resistant electrical outlets.**

Child Care Centers and Relative Care Provider homes shall contain a fire extinguisher and smoke detector device which meets standards established by Otoe Missouria Emergency Management..

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.6 Prevention of Shaken Baby Syndrome, Abusive Head Trauma, and Child Maltreatment

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(vi)): **1. Commitment to Health and Safety Standards**

Our program is deeply committed to upholding health and safety standards and has adopted the Caring for Our Children guidelines. These standards apply across all care settings and age groups within our program. We have established comprehensive procedures for the prevention of Shaken Baby Syndrome (SBS)/Abusive Head Trauma (AHT). These procedures include:

- A summary of SBS/AHT and its signs and symptoms
- Strategies for injury prevention
- Protocols for appropriate emergency response

Additionally, we maintain a formal policy on the prevention and identification of SBS/AHT. This policy requires all staff who interact directly with children to complete training on SBS/AHT prevention.

2. Reporting Procedures at Our Tribally Operated Center

Our center uses a designated SBS/AHT reporting form. If a Tribal Child Care staff member suspects a child may be a victim of SBS/AHT, they must immediately notify the Program Manager. The Program Manager is responsible for contacting:

- Tribal Police
- Tribal Social Services Department, which will forward the report to an Indian Child Welfare Act (ICWA) worker
- The CCDF Project Director

3. Tribal Lead Agency Policies on Child Maltreatment

The Tribal Lead Agency strictly prohibits all forms of child maltreatment, including physical, sexual, and emotional harm. These prohibitions are clearly outlined in the provider policy manual, which is distributed to all approved CCDF-funded providers.

Key requirements include:

- Prohibition of any behavior that could cause harm to infants, toddlers, or children
- Mandatory staff education on the dangers of shaking or striking children
- Implementation of strategies to help staff manage frustration in a safe and constructive manner
- Completion of positive guidance training by all staff

4. Training Requirements

Training on SBS/AHT and related health and safety topics is provided during orientation through the State of California Registry and the Indian Health Service (IHS). Ongoing training is offered annually by IHS and supplemented as needed by the State of California.

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.7 Emergency Preparedness and Response Planning

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(vii)): **Our program maintains a comprehensive emergency preparedness and response plan that addresses evacuation, relocation, shelter-in-place, lockdown, communication with families, and continuity of operations. Our procedures are regularly reviewed and practiced to ensure staff readiness and child safety.**

Variations based on category of care and ages served include:

- Infants and toddlers: We provide additional supplies (e.g., formula, diapers) in emergency kits and ensure low staff-to-child ratios are maintained during evacuations. Cribs equipped with wheels are available to safely transport non-ambulatory children.

- Preschoolers: Drills are practiced monthly using age-appropriate language to reduce anxiety.

Educators use visual aids and storytelling to teach basic safety procedures.

- School-age children: Older children receive guided participation in emergency drills and are encouraged to take age-appropriate responsibilities, such as helping younger peers.

- Children with disabilities or chronic health needs: Individualized Emergency Action Plans (EAPs) are created in collaboration with families and medical professionals to ensure appropriate support during emergencies.

By aligning with federal requirements while tailoring procedures to meet the developmental needs of the children we serve, we promote a safe and responsive environment in times of crisis.

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.8 Handling/Storage of Hazardous Materials and Appropriate Disposal of Biocontaminants

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(viii)): **All toxic substances will be placed in a location that is inaccessible to children and should not be used when children are present. Toxic substances should be used as recommended by the manufacturer and stored in the original labeled containers. The telephone number for the poison control center should be posted and readily accessible in emergency situations. Toxic chemicals such as concentrated bleach are stored properly and used appropriately. You may also include how and when to use the Material Safety Data sheets for any chemicals used in a child care setting. Biocontaminants, including body fluids or biological matter, sharps waste, and materials used to clean waste, such as used gloves or towels, should be disposed of in a safe way that minimizes exposure and risk to the environment, children, and staff.**

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.9 Precautions in Transporting Children

Does the Tribal Lead Agency permit providers to transport children?

No.

Yes. If yes, answer the following questions:

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(ix)):
- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?
- Yes.
- No.

2.3.10 Pediatric First Aid and Pediatric Cardiopulmonary Resuscitation (CPR)

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(x)): **Standard Pediatric CPR Guidelines**
- **Infants (Under 1 Year Old):** CPR involves gentle chest compressions using two fingers, with a compression depth of about 1.5 inches. Rescue breaths should cover both the infant’s mouth and nose.
 - **Children (1-8 Years Old):** Chest compressions are performed with one hand, pressing about 2 inches deep. Rescue breaths should be given using the mouth-to-mouth technique.
 - **Older Children (8+ Years Old):** CPR follows adult guidelines, using two hands for chest compressions at a depth of at least 2 inches.
- Variations Based on Care Category**
- **Basic Life Support (BLS) vs. Advanced Life Support (ALS):** BLS focuses on chest compressions and rescue breaths, while ALS includes airway management, medication administration, and defibrillation.
 - **Childcare Settings:** Pediatric first aid training for caregivers emphasizes injury prevention, choking response, and CPR tailored to infants and young children.
 - **Medical Professionals vs. Lay Rescuers:** Healthcare providers are trained in advanced airway techniques, while lay rescuers focus on hands-only CPR or basic rescue breaths.
- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?
- Yes.
- No.

2.3.11 Recognition and Reporting of Child Abuse and Neglect

- a. Describe the standard and any variations based on category of care and/or ages of children served (§98.41(a)(1)(xi)): **All staff at the Quechan Child Care Center are mandated reporters under Tribal, State, and Federal law. They are legally required to report any suspected child abuse or neglect immediately.**

Annual Training:

All staff receive annual training on mandated reporting procedures and responsibilities.

Types of Reportable Abuse & Indicators

1. Physical Abuse

Visible Injuries: Bruises, burns, welts, cuts, fractures (e.g., handprint bruises, belt marks).

Inconsistent Explanations: Child's account doesn't match injury type or severity.

2. Sexual Abuse

Physical Indicators: Genital pain/bleeding, STDs (especially under age 14), sexual assault injuries.

Behavioral Indicators: Age-inappropriate sexual knowledge or behavior, disclosure of sexual touching.

Parental Red Flags: Inappropriate sexual comments or behavior toward the child.

3. Emotional Abuse

Behavioral Indicators: Aggressive, withdrawn, passive, or emotionless behavior.

Psychological Indicators: Mental injury affecting mood, thoughts, or behavior.

4. Neglect

Basic Needs: Inadequate food, clothing, shelter, or hygiene.

Medical Neglect: Lack of necessary medical or dental care.

Educational Neglect: Failure to ensure school attendance or appropriate education.

Reporting Procedures

When to Report:

Immediately upon reasonable suspicion that a child:

Has been abused or neglected

Is at risk of abuse or neglect

How to Report:

Notify the Program Manager or next in the chain of command.

Contact the appropriate authority:

Imperial County Child Abuse and Prevention

563 W. Main Street, El Centro, CA 92243

(760) 353-8300

Child Welfare Services

(760) 337-7750 or Toll-Free 1-866-858-7750

Local Law Enforcement or Sheriff's Department for immediate danger

Submit a Written Report within 36 hours:

Use State Form 8572

Download Form SS 8572 at : http://og.ca.gov/childabuse/pdf/ss_8572.pdf

- b. Is this standard addressed in a pre-service training or within a 90-day orientation period (§98.41(a)(2))?

Yes.

No.

2.3.12 Child Development

(If the Tribal Lead Agency has a small allocation, it is not required to answer this question.)

Certify that the Tribal Lead Agency requires providers to be trained on child development, the major domains of cognitive, social, emotional, and physical development, approaches to learning, and any variations based on category of care and/or ages of children served in a pre-service training or within a 90-day orientation period (§98.44 (b)(1)(iii))?

Yes.

No.

2.3.13 Additional Standards

In addition to the CCDF required health and safety standards, Tribal Lead Agencies may require providers to comply with additional standards such as those related to nutrition, access to physical activity, care for children with special needs, and any other topic determined to be relevant by the Tribal Lead Agency (§98.41(a)(1)(xii)).

Does the Tribal Lead Agency require providers to follow any health and safety standards in addition to the CCDF-required health and safety topics?

Yes. Briefly describe (e.g., nutrition, access to physical activity, caring for children with special needs, or any other areas the Tribal Lead Agency requires providers to follow to promote child development or to protect children's health and safety):

No.

2.4 Ongoing Training

Tribal Lead Agencies must have ongoing training requirements on health and safety for caregivers, teachers, and directors of programs receiving CCDF funds (§98.44(b)(2)).

2.4.1 Ongoing Training

Does the Tribal Lead Agency certify that it has ongoing training requirements on health and safety for caregivers, teachers, and directors for all providers serving children participating in CCDF?

Yes.

No.

2.5 Staff/Child Ratios and Group Sizes

Tribal Lead Agencies must have standards for appropriate ratios between staff and children and appropriate group size limits for specific age populations. Tribal Lead Agencies must set requirements for qualifications for providers (§98.41(d)).

2.5.1 Age Classifications

Briefly describe how the Tribal Lead Agency defines the following age classifications:

- a. Infant. Briefly describe: **Based on Caring for Our Children a National Health and Safety Performance Standards Guidelines for Early Care and Education Programs: Page 4 (1.1.1.2 Ratios for Large Family Child Care Homes, and Centers**
Ages :
< 12 Months Maximum of Child :Staff Ratio 3:1 Maximum Group Size 6
13-23 Months Maximum of Child :Staff Ratio 3:1 Maximum Group Size 8
- b. Toddler. Briefly describe: **Based on Caring for Our Children a National Health and Safety Performance Standards Guidelines for Early Care and Education Programs: Page 4 (1.1.1.2 Ratios for Large Family Child Care Homes, and Centers**
Ages :
24-35 Months Maximum of Child :Staff Ratio 4:1 Maximum Group Size 8
- c. Preschool. Briefly describe: **Based on Caring for Our Children a National Health and Safety Performance Standards Guidelines for Early Care and Education Programs: Page 4 (1.1.1.2 Ratios for Large Family Child Care Homes, and Centers**
Ages :
3-year- old's Maximum of Child :Staff Ratio 7:1 Maximum Group Size 14
4- to 5- year- old's Maximum of Child :Staff Ratio 8:1 Maximum Group Size 16
- d. School-Age. Briefly describe: **Based on Caring for Our Children a National Health and Safety Performance Standards Guidelines for Early Care and Education Programs: Page 4 (1.1.1.2 Ratios for Large Family Child Care Homes, and Centers**
Ages :
6- to 8- year- old's Maximum of Child :Staff Ratio 10:1 Maximum Group Size 20

2.5.2 Center-Based Care Staff/Child Ratios and Group Sizes

For center-based care, including Tribally operated centers, provide the maximum staff/child ratio and group size for the settings and age groups below (§98.41(d)(1-2)):

- a. Infant
 - i. Ratio: **3:1**
 - ii. Group Size: **6**
- b. Toddler
 - i. Ratio: **4: 1**
 - ii. Group Size: **8**
- c. Preschool
 - i. Ratio: **7:1**
 - ii. Group Size: **14**
- d. School-Age
 - i. Ratio: **10:1**

- ii. Group Size: **20**
- e. Mixed-Age Groups
 - i. Ratio: **8:1**
 - ii. Group Size: **16**

2.5.3 Family Child Care Staff/Child Ratios and Group Sizes

For family child care, provide the maximum staff/child ratio and group size for the settings and age groups below (§98.41(d)(1-2)):

- a. Infant
 - i. Ratio:
 - ii. Group Size:
- b. Toddler
 - i. Ratio:
 - ii. Group Size:
- c. Preschool
 - i. Ratio:
 - ii. Group Size:
- d. School-Age
 - i. Ratio:
 - ii. Group Size:
- e. Mixed-Age Groups
 - i. Ratio:
 - ii. Group Size:

2.5.4 In-Home Care Staff/Child Ratios and Group Sizes

For in-home care, provide the maximum staff/child ratio and group size for the settings and age groups below (§98.41(d)(1-2)):

- a. Infant
 - i. Ratio:
 - ii. Group Size:
- b. Toddler
 - i. Ratio:
 - ii. Group Size:
- c. Preschool
 - i. Ratio:
 - ii. Group Size:

- d. School-Age
 - i. Ratio:
 - ii. Group Size:
- e. Mixed-Age Groups
 - i. Ratio:
 - ii. Group Size:

2.6 Provider Qualifications

Describe the provider qualifications for each of the Tribal Lead Agency’s categories of care (§98.41(d)(3)).

2.6.1 Center-Based Care (including Tribally Operated Centers)

Briefly describe provider (caregiver, teacher, etc.) minimum qualifications: **For the Infant and Toddler Teacher:**

1. Must be 21 years of age.
2. High School Diploma or Equivalent.
3. Must have an Infant/Toddler Child Development Associate (CDA).
Or A.A.S. in Child Development Education at an accredited or approved college or university.
4. Experience in an Infant/Toddler classroom setting preferred.
5. Must complete a fingerprint/background check and pass the pre-employment drug test.
6. Must have an updated yearly physical, pass a pre-employment TB skin test, and update yearly.
7. Must possess a CPR/First Aid and Food Handlers card or be willing to obtain them.
8. Must possess a valid Arizona or California Driver's License.
9. Must have dependable/reliable transportation.
10. Will work additional hours as needed, this may include some evening and weekend hours.

For the Preschool Teacher:

1. Must be 21 years of age.
2. High School Diploma or Equivalent.
3. Must have an Preschool Child Development Associate (CDA).
Or A.A.S. in Child Development Education at an accredited or approved college or university.
4. Experience in an Preschool (age 3-5) classroom setting preferred.
5. Must complete a fingerprint/background check and pass the pre-employment drug test.
6. Must have an updated yearly physical, pass a pre-employment TB skin test, and update yearly.
7. Must possess a CPR/First Aid and Food Handlers card or be willing to obtain them.
8. Must possess a valid Arizona or California Driver's License.
9. Must have dependable/reliable transportation.
10. Will work additional hours as needed, this may include some evening and weekend hours.

For the Child Care Program Manager :

- Must be 18 Years of age.
- High School Diploma or GED Equivalent.
- AA Degree required or equivalent credits from a four-year college in Early Childhood Education (ECE) or related field in Social Services, Human Development, etc.
- Two years of experience in working with children ages birth to 18.
- Two years of experience in working with Native American clientele, especially those in low-to-moderate income households.
- Must pass a pre-employment alcohol/drug screening.

- Must possess a current valid Driver License.
- Ability to observe safety and security procedures and to comply with policies.
- Ability to read and interpret written information; ability to write clear statements; ability to communicate orally.
- Current Food Handlers Card (or obtain one within 30 days of hire) and maintain such certification while employed within the Quechan Daycare Program.
- Must have or be able to obtain CPR, First Aid, and AED certification within 3 months of hire and maintain such certification while employed within the Quechan Child Care Program.
- Completion of FEMA National Incident Management System (NIMS) IS-100, IS-200, IS-700, and IS-800 within (3) months of hire.
- While performing the duties of this job, the employee is regularly required to stand, walk, sit, and talk or hear. The employee is occasionally required to reach with hands and arms and stoop, kneel, or crawl.
- Good organizational skills.
- Dependable and reliable with good time management.
- Must be able to obtain a Level-I Fingerprint Clearance Card.
- Must be able to establish a working relationship with the public, staff, students, and community members, representatives of agencies, organizations, and groups.
- Applicant must have the ability to understand and adhere to written and oral instructions.
- Must be knowledgeable in Early childhood development and appropriate practices for infants, toddlers, and young children; nurturing, care giving and education of young children; concepts of integrated curriculum development and implementation; principles of observation and assessment of young children; solid foundation in other aspects of child development; principles of parent communication and support.
- Must pass fingerprint clearance test for all appropriate agencies (such as FBI, Department of Justice, and Child Abuse Index Services).
- Must submit to pre-employment and random drug testing throughout employment.
- Must have excellent communication skills both verbally and written.
- Must comply with and have knowledge of all safety practices and procedures related to DHS regulations.
- Ability to be courteous, tactful, and cooperative throughout the workday.
- Ability to maintain confidentiality with regard to all phases of the job duties.

The Child Care Program Manager has the primary responsibility for the daily operations and management of the Tribally Operated Center

2.6.2 Family Child Care

Briefly describe provider (director, caregiver, teacher, etc.) minimum qualifications:

2.6.3 In-Home Care

Briefly describe provider (caregiver, teacher, etc.) minimum qualifications:

2.7 Monitoring and Enforcement of Health and Safety Requirements

Tribal Lead Agencies must certify that procedures are in effect to ensure that child care providers caring for children receiving CCDF services comply with all applicable CCDF and Tribal health and safety requirements.

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

Note: All relative provider information is entered in Section 2.1.

2.7.1 Annual Inspections

Briefly describe the Tribal Lead Agency's policies for annual inspections of CCDF providers for compliance with 1) health and safety and 2) fire safety requirements for the following categories of care (§98.42(b)(2)(ii)):

- a. Center-based child care, including Tribally operated centers. Briefly describe: **Annual Inspections are to be conducted by the Quechan Tribal Safety and TERO officer. The TLA will follow the State of California Department of Social Service guidelines as a foundation to policies and practices. The TLA will also work with Quechan TERO/Safety Department and Ft. Yuma IHS**
- b. Family child care. Briefly describe:
- c. In-home care. Briefly describe:

2.7.2 Alternative Approach to Inspection Requirements

Does the Tribal Lead Agency use an optional alternative approach to the inspection requirements (§98.83(d))?

Yes. Briefly describe the alternative monitoring approach to the inspections requirements and how it is comprehensive and protects the health and safety of children in care:

No.

2.8 Monitoring Inspectors

Tribal Lead Agencies must ensure individuals who are hired as inspectors or monitors are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in §98.41(a)(1) and all aspects of the requirements detailed in Sections 2.3 and 2.4. Tribal Lead Agencies must also ensure the ratio of inspectors or monitors to child care providers and facilities is maintained at a level sufficient to conduct effective inspections of child care providers and facilities on a timely basis in accordance with Tribal, federal, state, and local laws.

2.8.1 Qualifications for Inspectors or Monitors to Inspect Facilities and Providers

Does the Tribal Lead Agency have policies that ensure individuals who inspect child care facilities have the expertise, experience, or education, as determined by the Tribal Lead Agency, to comprehensively conduct inspections to protect the health and safety of children in care (§98.42(b)(1))?

Yes.

No.

2.8.2 Inspectors or Monitors Training on Health and Safety Requirements

Does the Tribal Lead Agency train inspectors or monitors on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (§98.42(b)(1))?

Yes.

No.

2.8.3 Ratio of Inspectors or Monitors to Child Care Providers

Does the Tribal Lead Agency have policies to ensure the ratio of inspectors to child care providers and facilities is maintained at a level sufficient to enable the Tribe to conduct effective inspections on a timely basis (§98.42(b)(3))?

Yes.

No.

2.9 Comprehensive Background Checks

All Tribal Lead Agencies are required to conduct comprehensive background checks for employed and prospective staff members of all child care programs eligible to deliver CCDF services.

Comprehensive background checks must include three in-state checks, two national checks, and three interstate checks if the individual lived in another state or territory in the preceding five years. The background check components must be completed at least once every five years.

A Tribal Lead Agency may choose to conduct comprehensive background checks itself, partner with one or more states to complete the checks, or use alternative approaches.

Tribes may propose an alternative approach for assessing criminal history, sex offender status, and child abuse and neglect history. The alternative approach is subject to ACF approval, and ACF will not approve approaches with blanket exemptions that bypass the intent of protecting children's safety.

For the following categories of care, select the methods the Tribal Lead Agency uses to meet the comprehensive background check requirements. If using alternative approaches, the Tribal Lead Agency must describe how the alternative approaches selected are comprehensive and ensure the health and safety of children in child care in 2.17.

Note: Relative provider background check methods are described in Section 2.1 (§98.16(o); §98.43(b); §98.83(d)(3); §98.83(f)(3)).

2.9.1 Comprehensive Background Checks for Center-Based Care

Choose the method for conducting each of the eight components the Tribal Lead Agency uses for center-based care, including Tribally operated centers.

- a. Criminal registry or repository using fingerprints in the current state of residency (§98.43(b)(3)(i)):
 - i. State agency conducts a criminal history check on behalf of the Tribal Lead Agency
 - ii. Tribal Lead Agency uses access to a state criminal registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, briefly describe how each method is utilized:
- b. Sex offender registry or repository check in the current state of residency (§98.43(b)(3)(ii)):
 - i. State agency conducts a sex offender registry check on behalf of the Tribal Lead Agency
 - ii. Tribal Lead Agency uses access to a state sex offender registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized
- c. Child abuse and neglect registry and database check in the current state of residency (§98.43(b)(3)(iii)):
 - i. State agency conducts a child abuse and neglect registry check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state child abuse and neglect registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- d. Federal Bureau of Investigation (FBI) fingerprint check (§98.43(b)(1)):
 - i. State agency conducts an FBI fingerprint check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses a state's access to the FBI NGI System (a P.L. 92-544 state statute or a state's discretion under the NCPA/VCA)
 - iii. U.S. Department of Justice (DOJ) Tribal Access Program (TAP)
 - iv. FBI-approved channeler

- v. Hard copy fingerprint cards mailed to the FBI
 - vi. Alternative approach: Third-party vendor
 - vii. Alternative approach: Other. Describe:
- e. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search (§98.43(b)(2)):
- i. State agency conducts an NCIC NSOR check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses a state's access to the NCIC NSOR name-based records
 - iii. Alternative approach: FBI fingerprint check (which includes an automatic check the of the NCIC NSOR fingerprint records)
 - iv. Alternative approach: Third-party vendor
 - v. Alternative approach: Private or public sex offender registry. Describe:
 - vi. Alternative approach: Other. Describe:
- f. Criminal registry or repository in the previous state of residency (in the past five years) (§98.43(b)(3)(i)):
- i. State agency conducts criminal history check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state criminal registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- g. Sex offender registry or repository check in the previous state of residency (in the past five years) (§98.43(b)(3)(ii)):
- i. State agency conducts a sex offender registry check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state sex offender registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- h. Child abuse and neglect registry and database check in the previous state of registry (in the past five years) (§98.43(b)(3)(iii)):
- i. State agency conducts child abuse and neglect registry check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state child abuse and neglect registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:

- v. Alternative approach: Other. Describe:
- vi. If two or more methods are checked, describe how each method is utilized:

2.9.2 Comprehensive Background Checks for Family Child Care

Choose the method the Tribal Lead Agency uses for conducting each of the eight components for family child care:

The Tribal Lead Agency uses the same approach for comprehensive background checks as listed for center-based care as listed in 2.9.1. **(If checked, skip 2.9.2a-h.)**

The Tribal Lead Agency uses a different approach for comprehensive background checks for family child care as listed in 2.9.1.

- a. Criminal registry or repository using fingerprints in the current state of residency (§98.43(b)(3)(i)):
 - i. State agency conducts a criminal history check on behalf of the Tribal Lead Agency
 - ii. Tribal Lead Agency uses access to a state criminal registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- b. Sex offender registry or repository check in the current state of residency (§98.43(b)(3)(ii)):
 - i. State agency conducts a sex offender registry check on behalf of the Tribal Lead Agency
 - ii. Tribal Lead Agency uses access to a state sex offender registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- c. Child abuse and neglect registry and database check in the current state of residency (§98.43(b)(3)(iii)):
 - i. State agency conducts a child abuse and neglect registry check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state child abuse and neglect registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- d. Federal Bureau of Investigation (FBI) fingerprint check (§98.43(b)(1)):

- i. State agency conducts an FBI fingerprint check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses a state's access to the FBI NGI System (a P.L. 92-544 state statute or a state's discretion under the NCPA/VCA)
 - iii. U.S. Department of Justice (DOJ) Tribal Access Program (TAP)
 - iv. FBI-approved channeler
 - v. Hard copy fingerprint cards mailed to the FBI
 - vi. Alternative approach: Third-party vendor
 - vii. Alternative approach: Other. Describe:
- e. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search (§98.43(b)(2)):
- i. State agency conducts an NCIC NSOR check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses a state's access to the NCIC NSOR name-based records
 - iii. Alternative approach: FBI fingerprint check (which includes an automatic check the of the NCIC NSOR fingerprint records)
 - iv. Alternative approach: Third-party vendor
 - v. Alternative approach: Private or public sex offender registry. Describe:
 - vi. Alternative approach: Other. Describe:
- f. Criminal registry or repository in the previous state of residency (in the past five years) (§98.43(b)(3)(i)):
- i. State agency conducts a criminal history check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state criminal registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- g. Sex offender registry or repository check in the previous state of residency (in the past five years) (§98.43(b)(3)(ii)):
- i. State agency conducts a sex offender registry check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state sex offender registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- h. Child abuse and neglect registry and database check in the previous state of registry (in the past five years) (§98.43(b)(3)(iii)):

- i. State agency conducts a child abuse and neglect registry check on behalf of the Tribal Lead Agency
- ii. The Tribal Lead Agency uses access to a state child abuse and neglect registry or repository. It submits and receives information. List the state(s):
- iii. Alternative approach: Third-party vendor
- iv. Alternative approach: Tribal database or repository. Briefly describe:
- v. Alternative approach: Other. Describe:
- vi. If two or more methods are checked, describe how each method is utilized:

2.9.3 Comprehensive Background Checks for In-Home Care

Choose the method for conducting each of the eight components the Tribal Lead Agency uses for in-home child care:

The Tribal Lead Agency uses the same approach for comprehensive background checks for in-home care as listed in 2.9.1 or 2.9.2: **(If checked, skip 2.9.3a-h.)**

Center-based care

Family child care

The Tribal Lead Agency uses a different approach for comprehensive background checks for in-home care as listed in 2.9.1 or 2.9.2.

- a. Criminal registry or repository using fingerprints in the current state of residency (§98.43(b)(3)(i)):
 - i. State agency conducts a criminal history check on behalf of the Tribal Lead Agency
 - ii. Tribal Lead Agency uses access to a state criminal registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- b. Sex offender registry or repository check in the current state of residency (§98.43(b)(3)(ii)):
 - i. State agency conducts a sex offender registry check on behalf of the Tribal Lead Agency
 - ii. Tribal Lead Agency uses access to a state sex offender registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- c. Child abuse and neglect registry and database check in the current state of residency (§98.43(b)(3)(iii)):
 - i. State agency conducts a child abuse and neglect registry check on behalf of the Tribal Lead Agency

- ii. The Tribal Lead Agency uses access to a state child abuse and neglect registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- d. Federal Bureau of Investigation (FBI) fingerprint check (§98.43(b)(1)):
- i. State agency conducts an FBI fingerprint check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses a state's access to the FBI NGI System (a P.L. 92-544 state statute or a state's discretion under the NCPA/VCA)
 - iii. U.S. Department of Justice (DOJ) Tribal Access Program (TAP)
 - iv. FBI-approved channeler
 - v. Hard copy fingerprint cards mailed to the FBI
 - vi. Alternative approach: Third-party vendor
 - vii. Alternative approach: Other. Describe:
- e. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search (§98.43(b)(2)):
- i. State agency conducts an NCIC NSOR check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses a state's access to the NCIC NSOR name-based records
 - iii. Alternative approach: FBI fingerprint check (which includes an automatic check the of the NCIC NSOR fingerprint records)
 - iv. Alternative approach: Third-party vendor
 - v. Alternative approach: Private or public sex offender registry. Describe:
 - vi. Alternative approach: Other. Describe:
- f. Criminal registry or repository in the previous state of residency (in the past five years) (§98.43(b)(3)(i)):
- i. State agency conducts a criminal history check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state criminal registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- g. Sex offender registry or repository check in the previous state of residency (in the past five years) (§98.43(b)(3)(ii)):
- i. State agency conducts a sex offender registry check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state sex offender registry or repository. It submits and receives information. List the state(s):

- iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:
- h. Child abuse and neglect registry and database check in the previous state of registry (in the past five years) (§98.43(b)(3)(iii)):
- i. State agency conducts a child abuse and neglect registry check on behalf of the Tribal Lead Agency
 - ii. The Tribal Lead Agency uses access to a state child abuse and neglect registry or repository. It submits and receives information. List the state(s):
 - iii. Alternative approach: Third-party vendor
 - iv. Alternative approach: Tribal database or repository. Briefly describe:
 - v. Alternative approach: Other. Describe:
 - vi. If two or more methods are checked, describe how each method is utilized:

2.10 Comprehensive Background Checks for Household Members in Family Child Care

(If the Tribal Lead Agency offers family child care, it is required to complete this section.)

For family child care, the comprehensive background check requirement includes the caregiver and household members (i.e., any other adults residing in the family home child care who are age 18 or older). ACF recognizes that completing all eight comprehensive background checks for household members may be burdensome for Tribes and will consider an alternative approach of at least one background check or completing some of the required checks. Tribal Lead Agencies who use this alternative approach must indicate which background checks apply to household members and must justify the alternative approach in section 2.17 (§98.43(a)(2)(ii)(C)).

2.10.1 Comprehensive Background Checks for Household Members

What comprehensive background check components are required for family child care household members over 18 years of age?

All eight required components are required using the methods listed in 2.9.2 for family child care.

An alternative approach to what is listed in 2.9.2 that includes a combination of the following components. Check those that apply:

- a. Criminal registry or repository using fingerprints in the current state of residency
- b. Sex offender registry or repository check in the current state of residency
- c. Child abuse and neglect registry and database check in the current state of residency
- d. Federal Bureau of Investigation (FBI) fingerprint check
- e. National Crime Information Center National Sex Offender Registry (NCIC NSOR) name-based search
- f. Criminal registry or repository in the previous state of residency (in the past five years)
- g. Sex offender registry or repository check in the previous state of residency (in the past five years)
- h. Child abuse and neglect registry and database check in the previous state of residency (in the past five years)

2.11 Disqualifying Crimes for Employment Eligibility

The Tribal Lead Agency must determine child care staff members (including prospective child care staff members) ineligible for employment or to deliver services if convicted of a felony for any of the following crimes specified in §98.43(c)(1)(iv): murder, child abuse or neglect, a crime against children, including child pornography, spousal abuse, a crime involving rape or sexual assault, kidnapping, arson, physical assault or battery, a drug-related offense committed during the preceding five years, or has been convicted of a violent misdemeanor committed as an adult against a child, including the following crimes: child abuse, child endangerment, and sexual assault, or of any misdemeanor involving child pornography.

The Tribal Lead Agency must also determine a child care staff member or prospective child care staff member **ineligible** for employment for any components in §98.43(c)(1)(i) through §98.43(c)(1)(iii):

- refuses to consent to a background check,
- knowingly makes materially false statements in connection with the background check, or
- is registered, or is required to be registered, on the state/territory sex offender registry or repository or the National Sex Offender Registry (NSOR).

(If the Tribal Lead Agency only uses state systems for comprehensive background checks, it is not required to complete this section.)

2.11.1 Disqualifying Crimes for Employment Eligibility

- a. Does the Tribal Lead Agency determine child care staff members or prospective child care staff members **ineligible** for child care employment or to deliver services based on conviction for crimes and other factors listed in §98.43(c)(1)?

Yes.

No.

- b. Does the Tribal Lead Agency have additional crimes for which it determines individuals **ineligible** for child care employment or to deliver services?

Yes. List additional disqualifying crimes:

No.

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

Yes. Briefly describe the alternative approach:

No.

2.11.2 Felony Drug Offense Review Process

Does the Tribal Lead Agency have a review process for a felony drug offense committed within the preceding five years to determine if that individual is still eligible for employment (§98.43(e)(4))?

Yes. Briefly describe:

No.

2.12 Fees

The Tribal Lead Agency may not charge fees that exceed the actual costs of processing applications and administering a comprehensive background check, regardless of whether the checks are conducted by the Tribe, a state, or a third-party vendor or contractor.

(If the Tribal Lead Agency only uses state systems for comprehensive background checks, it is not required to answer this section.)

2.12.1 Fees

Does the Tribal Lead Agency ensure that fees charged for completing the background check reflect the actual cost of processing and administration (§98.43(f))?

Yes.

No. If no, briefly describe the cost to the Tribal Lead Agency of processing and administering the background check and the amount charged to the applicant:

Not applicable. The Tribal Lead Agency does not charge fees for background checks.

2.13 Timeliness in Returning Employment Determination Results

The Tribal Lead Agency must conduct comprehensive background checks as quickly as possible and provide employment determination results to the provider and to the current or prospective staff member within 45 days after the provider submitted the request. The request must be submitted prior to when the individual becomes a staff member and must be completed at least once every five years (§98.43(d)(2)(ii)).

Tribal Lead Agencies have the flexibility to make employment determination decisions for provisional hires if not all background check components are completed within 45 days.

(If the Tribal Lead Agency only uses state systems for comprehensive background checks, it is not required to answer this section.)

2.13.1 Timeliness in Returning Employment Determination Results

Does the Tribal Lead Agency provide employment determination results to the provider and current or prospective staff member within 45 days (§98.43(e)(1))?

Yes.

No, there are barriers in providing employment determination results within 45 days. Describe the barriers:

No, the Tribal Lead Agency proposes an alternative approach to providing employment determination results within 45 days. Describe the alternative approach:

2.13.2 Renewal of the Comprehensive Background Check

Does the Tribal Lead Agency conduct the comprehensive background check at least every five years for all required components for all applicable categories of care (§98.43(d)(2)(ii))?

Yes.

No.

2.14 Provisional Hire

Before prospective staff members may provide services or be near children, Tribal Lead Agencies must receive a qualifying result for either the FBI criminal background check or a fingerprint-based in-state criminal background check where the individual lives. Until all the background check components have been completed, the prospective staff member must be supervised at all times by someone who has already received a qualifying result on a background check within the past five years.

2.14.1 Provisional Hire

Does the Tribal Lead Agency allow a provisional hire to begin work before a qualifying result from an FBI fingerprint criminal check or an in-state fingerprint-based criminal history check (§98.43(d)(4))?

No.

Yes. If yes, answer the following questions:

- a. Does the Tribal Lead Agency require a qualifying result from the FBI fingerprint check or state/Tribal criminal checks before a provisional hire begins work with children?

Yes.

No.

No, proposing an alternative approach. Describe the alternative approach:

- b. Does the Tribal Lead Agency require a provisional hire to be supervised by staff with a qualifying result for the comprehensive background check while awaiting results from all components of the comprehensive background check?

Yes.

No.

No, proposing an alternative approach. Describe the alternative approach: .

2.15 Privacy of Comprehensive Background Check Results

Tribal Lead Agencies must ensure privacy by providing the results of the background check to the child care provider (i.e., employer) in a statement that only indicates whether a child care staff member (including staff member, prospective staff member, or household member) is eligible or ineligible for employment, without revealing any detailed information of criminal history, disqualifying crimes, or other related information regarding the individual. The Tribal Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data does not include personally identifiable information (§98.43(e)(2)(iii)). ACF will consider alternative approaches that allow some information to be shared with the child care provider.

Note: This provision is subject to limitations in FBI policy and state or Tribal privacy requirements, which may prevent the release of information. Tribal Lead Agencies must justify any alternative approach.

(If the Tribal Lead Agency only uses state systems for comprehensive background checks, it is not required to answer this section.)

2.15.1 Privacy of Comprehensive Background Check Results

Does the Tribal Lead Agency certify it provides employment determination results to the provider without revealing any specific/detailed criminal history about the child care staff member (including staff member, prospective staff member, or household member) (§98.43(e)(2)(i))?

Yes.

No. Describe the alternative approach:

2.16 Appeals for Child Care Staff

Tribal Lead Agencies must have a process that allows an individual (including staff member, child care staff member, prospective staff member, or household member) to appeal the results of a background check to challenge the accuracy or completeness of the information contained in the individual's background check report.

(If the Tribal Lead Agency only uses state systems for comprehensive background checks, it is not required to answer this section.)

2.16.1 Appeals Process

Does the appeals process:

- a. Provide the affected individual with information in writing related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal (§98.43(e)(2)(ii))?
 Yes.
 No.
- b. Provide the affected individual with clear instructions about how to complete the appeals process for each background check component if the individual wishes to challenge the accuracy or completeness of the information contained in such individual's background check report (§98.43(e)(3)(ii))?
 Yes.
 No.
- c. Ensure the Tribal Lead Agency attempts to verify the accuracy of the information challenged by the individual, including making an effort to locate any missing disposition information related to the disqualifying crime (§98.43(e)(3)(iii))?
 Yes.
 No.
- d. Get completed in a timely manner (§98.43(e)(3)(iv))?
 Yes.
 No.
- e. Ensure the affected individual receives written notice of the decision (§98.43(e)(3)(v))?
 Yes.
 No.
- f. In the case of a negative determination, the decision must indicate (1) the Tribal Lead Agency's efforts to verify the accuracy of information challenged by the individual, (2) any additional appeals rights available to the individual, and (3) information on how the individual can correct records at issue in the case (§98.43(e)(3)(v))?
 Yes.
 No.

2.17 Justification for Alternative Approaches

(If the Tribal Lead Agency only checks preapproved methods in 2.9-2.15, it is not required to answer 2.17.1-2.17.2.)

Tribal Lead Agencies may use alternative approaches to complete all eight of the comprehensive background checks (Plan question 2.9); the implementation of less than lifetime bans for offenses that are not crimes against children (2.11); the policies that allow longer than 45 days to conduct comprehensive background checks (2.13); provisional hire (2.14); or any private information shared with the child care provider (i.e., employer) (2.15), as applicable.

OCC will consider alternative approaches in cases where the Tribe does not have authority or access to conduct a particular component of the check, particularly in cases where staff are not Tribal employees (e.g., staff of family child care providers or center-based providers receiving vouchers/certificates).

In the question below, describe how the alternative approach(es) selected in Plan questions 2.9-2.16 are comprehensive and ensure the health and safety of children in child care, as applicable.

2.17.1 Barriers in Completing CCDF Background Checks

What are the issues or barriers in completing the required CCDF background checks using approved methods? Check those that apply:

- Does not have the authority under the CCDF statute to conduct a NCIC NSOR name-based search.
- No direct authority under the CCDF statute to conduct an FBI fingerprint check.
- No existing formal or informal MOU or MOA with a state to access criminal or child abuse databases for CCDF purposes.
- Other. Describe:

2.17.2 Justification for Alternative Approaches

Describe how the alternative approach(es) in Plan questions 2.10-2.15 are comprehensive and ensure the health and safety of children in child care:

3 Quality Improvement

The quality of child care affects children’s safety and healthy development while in care settings, and high-quality child care can be foundational across the lifespan of a child. Tribal CCDF quality funds can be used in a broad variety of ways to improve the quality of child care for all children in care, including for culturally relevant activities, to meet the unique needs of Tribal children, families, and communities. Tribal Lead Agencies may use CCDF for quality improvement activities for all Indian children in care in the defined service area, not just those receiving child care subsidies.

Required Minimum for Quality Spending		
	Tribal Lead Agencies with Small Allocations	Tribal Lead Agencies with Medium and Large Allocations
Quality Set-Aside*	9%	9%
Infant-Toddler*	NA	3%
Total Quality*	9%	12%

**Does not apply to discretionary base amount.*

3.1 Quality Activities Needs Assessment Methodology

3.1.1 Quality Activities Needs Assessment Methodology

How did the Tribal Lead Agency assess needs to identify goals and activities to improve quality? Check those that apply:

- a. Parent, family, community, or Tribal meetings
- b. Self-assessments
- c. Surveys to families, providers, and Tribal leadership
- d. Site visits and/or monitoring inspection visits
- e. Community assessments
- f. Other. Describe:

3.2 Quality Improvement Goals and Activities

CCDF quality set-aside funds must be used on *at least one of ten quality improvement activities* described in CCDF regulations and may include supporting preservation and revitalization of Indigenous language and culture in child care programs. The quality activities must be aligned with the Tribal Lead Agency's assessment of the service area's need to carry out such services and care. The Tribal Lead Agency may describe activities currently underway, planned, or expected during the three-year Plan period (§98.53(a)).

3.2.1 Quality Improvement Activities

Identify the Tribal Lead Agency's plans to spend CCDF funds for selected quality improvement activities. Check at least one quality activity:

- a. **Training and Professional Development:** This category supports the training and professional development of the child care workforce. For example, the Tribal Lead Agency could fund training for required health and safety training topics, language and literacy, promotion of child development, family engagement, implementation of developmentally appropriate and culturally and linguistically responsive instruction, or more.

Briefly describe: **The Training and Professional Development category is essential for equipping child care staff with the knowledge and skills necessary to support children's growth and well-being. The Tribal Lead Agency may allocate funding to training programs that cover critical health and safety topics, promote language and literacy development, encourage family engagement, and support culturally and linguistically responsive instruction. Additionally, professional development initiatives may focus on implementing developmentally appropriate practices to enhance the overall quality of child care services.**

- b. **Early Learning and Developmental Guidelines:** This category supports developing, maintaining, or implementing early learning and developmental guidelines. For example, the Tribal Lead Agency could fund staff trainings on child development and early learning guidelines, use of the state's early learning guidelines, development or implementation of the Tribal Lead Agency's own Tribally specific guidelines, or more.

Briefly describe: **The Tribal Lead Agency supports the development, maintenance, and implementation of early learning and developmental guidelines by funding staff trainings on child development and early learning principles. This includes utilizing the state's established guidelines and creating or refining Tribally specific early learning frameworks that align with cultural values and traditions. The agency ensures that educators and caregivers are equipped with the necessary tools and knowledge to provide high-quality early childhood education that fosters the holistic development of young children.**

- c. **Quality Rating and Improvement Systems (QRIS):** This category supports developing, implementing, or enhancing a quality improvement system. For example, the Tribal Lead Agency could fund participation in a state QRIS, collaboration with other Tribes to implement a QRIS or similar rating system, development of a Tribal QRIS or similar rating system, or more.

Briefly describe:

- d. **[x] Supply and Quality of Services for Infants and Toddlers:** This category supports improving the supply and quality of child care services for infants and toddlers. For example, the Tribal Lead Agency could fund training and professional development to enhance child care providers' abilities to provide developmentally appropriate services for infants and toddlers, Indigenous language and culturally responsive practices for infants and toddlers, transparent and easy-to-understand consumer information about high-quality infant-toddler care that includes information on infant-toddler language, social-emotional, and early literacy and numeracy cognitive development, or more.

Briefly describe: **The Tribal Lead Agency supports efforts to enhance the supply and quality of child care services for infants and toddlers by funding professional development opportunities for child care staff. These initiatives focus on delivering developmentally appropriate care, incorporating Indigenous language and culturally responsive practices, and ensuring families have access to transparent and user-friendly information about high-quality infant-toddler care. Through these efforts, the agency promotes infant-toddler language, social-emotional growth, and early literacy and numeracy development, fostering a strong foundation for lifelong learning.**

- e. **[] Child Care Resource and Referral (CCR&R) Services:** This category supports establishing or expanding a system of CCR&R services. For example, the Tribal Lead Agency could fund partnerships with other Tribes to offer CCR&R services, incorporation of CCR&R services into the family intake process, use of a state CCR&R, or more.

Briefly describe:

- f. **[x] Licensing, Inspection, Monitoring, Training, Health, and Safety:** This category supports facilitating compliance with Tribal child care licensing, monitoring, inspection, and health and safety standards. For example, the Tribal Lead Agency could fund health and safety materials/equipment (e.g., carbon monoxide detectors, fencing, personal protective equipment), classroom materials and resources, conducting monitoring visits of child care providers, or more.

Briefly describe: **The Tribal Lead Agency can allocate funds to support essential health and safety measures, including carbon monoxide detectors, fencing, and personal protective equipment. Additionally, investments can be made in classroom materials, staff training, and routine monitoring visits to ensure child care staff adhere to established regulations. Regular inspections help uphold safe environments for children by enforcing fire safety, sanitation, and emergency preparedness protocols. These efforts collectively contribute to the well-being and security of children in Tribal child care settings.**

- g. **[] Evaluating the Quality of Child Care Programs:** This category supports evaluating the quality of child care programs, including how programs positively impact children. For example, the Tribal Lead Agency could purchase quality assessment tools, implement surveys to collect provider or family input, conduct internal training on the use of quality evaluations, or more.

Briefly describe:

- h. **[] Supporting Providers in the Voluntary Pursuit of Accreditation:** This category supports accreditation by an accrediting body with demonstrated, valid, and reliable program standards of high quality. For example, the Tribal Lead Agency could use accreditation guidelines as a quality measure, fund any aspect of national accreditation (e.g., accreditation from the National Association for the Education of Young Children or National Association for Family Child Care, or accreditation developed by a Tribal association), pay annual accreditation fees, or more.

Briefly describe:

- i. **[x] High-Quality Program Standards:** This category supports Tribal or local efforts to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. For example, the Tribal Lead Agency could use Minimum Health and Safety Standards: A Guide for American Indian and Alaska Native CCDF Grantees, Caring for Our Children, Head Start Program Performance Standards, or more to develop or adopt high-quality program standards.

Briefly describe: **The Tribal Lead Agency can utilize established guidelines, including the Minimum Health and Safety Standards: A Guide for American Indian and Alaska Native CCDF Grantees, Caring for Our Children, and Head Start Program Performance Standards, to shape comprehensive standards that promote child well-being. These efforts ensure that child care programs provide safe, nurturing, and developmentally appropriate environments that support holistic growth.**

- j. **[] Other Measurable Quality Improvement Activities:** This category supports other activities the Tribal Lead Agency will engage in to improve the quality of child care services and the measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry, including culturally relevant quality activities. For example, the Tribal Lead Agency could incorporate Tribal language into child care settings, offer culturally based training opportunities for families and providers, serve traditional Indigenous foods in child care programs, fund written materials, including newsletters, brochures, and checklists on child care topics, develop or participate in the Tribal Early Learning Initiative (TELI), or more. For more information about TELI, see Appendix 2.

Briefly describe:

PART II: TRIBAL LEAD AGENCIES WITH SMALL ALLOCATIONS

4 Direct Services

Tribal Lead Agencies with small allocations do not have to offer direct services to children, but CCDF funds must be used in alignment with the goals and purpose of CCDF (§98.1). If the Tribal Lead Agency chooses to offer direct services, it is exempt from requirements listed in Section 5: Child and Family Eligibility, Enrollment, and Continuity of Care, Section 6: Equal Access, and Section 7: Family Outreach and Consumer Education, but not from the requirements listed in §98.83(f).

4.1 Direct Child Care Services

4.1.1 Direct Child Care Services

Indicate if the Tribal Lead Agency will offer direct child care services.
Check the appropriate box below:

Yes. The Tribal Lead Agency will offer direct child care services.

No. The Tribal Lead Agency will not offer direct child care services. If no, this concludes the abbreviated CCDF Plan for Tribal Lead Agencies with small allocations.

(If “No” is checked, skip 4.2.1-4.4.1. The application is complete.)

4.2 Direct Child Care Funding Methods

4.2.1 Funding Methods

How does the Tribal Lead Agency provide direct child care services? Check those that apply:

- a. Certificates and vouchers
- b. Grants or contracts with approved child care providers (e.g., the Tribal Lead Agency uses grants or contracts for child care slots to increase the supply and prioritize children in underserved areas, infants and toddlers, children with disabilities [as defined by the Tribal Lead Agency], and children who receive care during nontraditional hours and/or to improve quality of child care programs)
- c. Operational costs for a Tribally operated center. *Note: A Tribally operated center is a center owned and operated by a Tribe that delivers all or part of the Tribe’s child care services funded by CCDF.* Does the Tribal Lead Agency provide child care services exclusively through one or more Tribally operated centers?

Yes.

No.

4.3 Eligibility Criteria

Tribal Lead Agencies with small allocations who choose to provide direct child care services must at a minimum, limit eligibility to Indian children (as defined in Plan question 1.1.1) residing in the defined service area (as defined in Plan question 1.2.1). If the Tribal Lead Agencies have additional eligibility criteria, please describe below.

4.3.1 Eligibility Criteria

Describe the Tribal Lead Agency’s eligibility criteria: **TO BE ELIGIBLE FOR SERVICES, PARENTS AND/OR CHILDREN MUST BE:**

- 1) ENROLLED TRIBAL MEMBER(S), OR IN A FEDERALLY RECOGNIZED INDIAN TRIBE
- 2) MUST RESIDE ON THE FORT YUMA QUECHAN INDIAN RESERVATION OR THE SURROUNDING SERVICES AREA (YUMA, AZ AND WINTERHAVEN CA)
- 3) MEET THE FINANCIAL CRITERIA FOR ADMISSION

CCDF FAMILY INCOME ELIGIBILITY LEVELS BY STATE

Table 1. Initial Income eligibility limit in dollars and as percentage of State Median Income (SMI):

State:

ARIZONA

Eligibility as percentage of SMI Family of 3:

85%

Income Eligibility Threshold (monthly) Family of 3:

\$3,419

Eligibility as percentage of SMI Family of 4 :

54%

Income Eligibility Threshold (monthly) Family of 4:

\$4,125

State:

California

Eligibility as percentage of SMI Family of 3:

85%

Income Eligibility Threshold (monthly) Family of 3:

\$7,472

Eligibility as percentage of SMI Family of 4 :

85%

Income Eligibility Threshold (monthly) Family of 4:

\$8,712

4.4 Payment Rates

(If “Yes” is checked in 4.2.1c, the Tribal Lead Agency is not required to answer this question.)

4.4.1 Provider Payments

Describe how the Tribal Lead Agency sets payment rates for each provider type:

The abbreviated CCDF plan for Tribal Lead Agencies with small allocations ends here.

(CARS ends the application.)

Appendix 2: Tribal Early Learning Initiative (TELI)

Tribal Lead Agencies are not required to complete this appendix.

One way for Tribal Lead Agencies to coordinate the delivery of CCDF with other early childhood partners is through the Tribal Early Learning Initiative (TELI) as a Collaborative or Network participant. The TELI Collaborative is an **optional** intensive technical assistance opportunity for up to eight Tribal Lead Agencies. Information on participating in the TELI Collaborative can be found on the [Tribal Early Learning Initiative](#) website.

The TELI Network is an **optional** opportunity for all Tribal Lead Agencies to receive universal technical assistance in developing and strengthening Tribal early childhood systems. Network participants will have access to the resources developed for, by, and shared with TELI Collaborative Teams. **This Appendix provides an opportunity to indicate interest in participation in the TELI Network.**

TELI Network

Are you interested in participating in the TELI Network?

Yes.

No.