

**SUPPORTING STATEMENT FOR OMB CLEARANCE  
FOR THE ACF-801**

**Department of Health and Human Services  
Administration for Children and Families  
Office of Child Care**

**CHILD CARE AND DEVELOPMENT FUND (CCDF)  
QUARTERLY CASE RECORD REPORT  
ACF-801**

**A. JUSTIFICATION**

**1. Information Collection:**

Pursuant to section 658K of the Child Care and Development Block Grant Act of 1990 as amended by the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 [PRWORA] (P.L.104-193), the Department of Health and Human Services (HHS) established uniform disaggregate reporting requirements, for which States and Territories must submit case-level reports on a monthly or quarterly basis (at grantee option). These reports are derived from administrative data collected by States and Territories in the course of providing services to families and children under the Child Care and Development Fund (CCDF). This data includes demographic information about families and children served, the type, cost, and hours of child care being used. The ACF-801 and its instructions specify the minimal set of data necessary for compliance with the Act. Consistent with the statute and regulations, ACF requests extension of the ACF-801, along with the addition of new data elements on the quality of child care providers.

**2. Use of Information:**

The case-level administrative information received through this collection provides the means to analyze and evaluate the CCDF program and the extent to which States and Territories are assisting families in addressing child care needs. This collection will provide ACF with the information necessary to make reports to Congress, address national child care needs, offer technical assistance to grantees, meet performance measures, and conduct research.

**3. Reporting Burden Reduction:**

ACF has made arrangements with the National Institutes of Health for secure electronic file transfer using either the CONNECT:DIRECT or CyberFusion data exchange systems, or by using secure FTP (File Transfer Protocol). These methods of transmission ensure that case identifiers remain secure in the transmission. States that cannot transmit the ACF-801 data via one of the above methods may submit using a diskette/CD via registered mail. ACF provides technical assistance to Grantees in the use of the electronic system toward improved data accuracy and reliability.

**4. Efforts to Identify Duplication:**

This data collection is required by section 658K of the statute and does not duplicate any

other reporting or record-keeping requirements. Additionally, in designing these changes OCC worked with the Race to the Top Early Learning Challenge to ensure that the proposed revisions are not duplicative of other data collection efforts and that the revised ACF-801 is part of HHS's integrated strategy to improve the quality of early childhood systems and are consistent with the interagency HHS and Department of Education early learning agenda.

**Similar Information:**

No similar information is being collected on CCDF program participants and related child care services that can be used to respond to the issues identified in section 658K. Collection of the information specified on the ACF-801 is necessary to comply with the Federal statute and regulations, and to ensure the availability of data to respond to inquiries regarding the progress of the CCDF program and related issues.

**5. Small Business Burden:**

This data collection effort does not involve small business or other small entities.

**6. Frequency of Information Collection:**

Section 658K of the statute requires States and Territories to transmit information collected on a quarterly basis (or monthly at State/Territory option). The data are submitted no later than 60 days after the end of each quarter and includes a minimum of 200 records for each of the three months of the quarter (October through December, January through March, April through May, and July through September, as appropriate). States and Territories have the option of submitting full population or sample data. To accommodate the subsequent systems adjustments required of the States and Territories, OCC has proposed a phased-in implementation timeline that will allow for the integration of the new data elements.

**7. Special Circumstances:**

The collection of this information is conducted in accordance with 5 CFR 1320.6.

**8. Consultations:**

A notice in the Federal Register (Volume 76, Number 144, page 44934) was posted on July 27, 2011. In this notice, ACF solicited public comment on the extension of this data collection while proposing several changes and clarifications to the reporting requirements and instructions. The proposed changes, i.e., seven new data elements to capture child care provider quality information, and clarifications are summarized below:

1) ACF proposed to add the new data element – “Provider Federal Employee Identification Number (FEIN)” or the alternative data element – Unique State Provider ID. One of these two new data elements will allow OCC to connect the child setting records (which include type of child care, provider payment, and hours of care) with the provider records (which include provider quality information). Note that the provider ID questions are repeated on the proposed form (once in the child setting record and once in the provider record) in order to link case-level child records with the proposed child care provider quality information.

2) ACF proposed to add the new data elements – “QRIS Participation”, “QRIS Rating”, “Accreditation Status”, “Provider Subject to State or Local Pre-K Standards”, and “Provider Meets Other State-defined Quality Measure”. These new data elements will provide OCC with key indicators toward the goal of helping more children in low-income families access high quality care. Note on the use of data: While the new data elements will provide valuable quality information, the variability between QRIS systems and other quality measures will limit the ability to make comparisons across States or to generalize at a national level. The data, however, can be used to track the overall quality of providers within a State over time, and can be used by a State to inform its quality improvement and subsidy management efforts. Furthermore, questions are designed to allow for multiple negative/NA responses so all Lead Agencies will be able to use the new format regardless of the status of their quality system. The intent is to offer a broad enough range of responses so that all States will be able to report.

3) ACF proposed to improve or refine current data elements by adding a new data element, i.e., total number of providers, in the Header Record. With respect to the new data element, full-population States only need to provide a total count based on information already contained in their case level report. However, given that States are allowed to submit sample data in lieu of full-population data, OCC needs to know the total number of providers for sample States in order to estimate/extrapolate State totals.

4) ACF proposed to clarify the definition of Licensed/Regulated care by including the provision that “In order to be counted as a regulated provider, the provider must meet State-established health and safety standards and be subject to monitoring (i.e., self-certification by the provider without documentation or verification is not sufficient)”. This clarification was made to ensure that providers listed as regulated are meeting minimum standards.

5) In addition to the proposed revisions outlined above, feedback from States indicates that current data element 28 – Total Hours of Care Provided in Month, is not being uniformly reported. Some States report authorized hours, others report actual hours, and some report a combination of the two. For the time being, OCC will allow States to continue reporting as they have been, but will now require a footnote indicating the type of hours being reported. OCC recognizes that this approach will result in non-uniform data across States, so we will consider the pros and cons of moving toward a more uniform approach in the future.

We realize that these proposed changes may require States and Territories to modify their data reporting systems and processes. Therefore, we proposed a phased-in approach for the implementation of these revisions. Beginning on October 1<sup>st</sup>, 2012, submission of new data elements will be optional (during which time OCC will accept both the current report format as well as the proposed/new report format). Beginning on October 1<sup>st</sup>, 2013, submission of new data elements will be mandatory (at which time OCC will only accept the proposed/new format).

OCC enlisted the help of CCDF grantees to develop/identify new data elements that would provide key indicators of quality by scheduling and facilitating two conference calls and making a presentation at an Early Childhood Collaboration Meeting. The first conference call took place on January 7<sup>th</sup>, 2011. A presentation was given on April 27<sup>th</sup>, 2011. Another conference call was held on August 10<sup>th</sup>, 2011. Although there is

considerable variation in the States' ability to provide quality information, all participants recognized the importance of gathering this information. Some suggestions were provided regarding the design of the proposed/new data elements as well as the timeline for implementation (which are both discussed farther below).

Comment was to be received within 60 days of the publication date of the notice. Four States, i.e., Minnesota, Montana, New Jersey, and Utah, and the American Public Human Services Association provided written comments. MN, MT, and APHSA commented on the response categories for the new data element #33 – “QRIS Participation”. (NJ also commented on QRIS participation for different reasons discussed farther below.) Specifically, they commented that an additional answer category would provide greater clarity. In response to these comments, the proposed/new format that was published under the 60 day notice was changed from:

QRIS Participation: Indicate one of the following codes.

- 0- No: Provider is eligible, but does not participate in the QRIS
- 1- Yes: Provider does participate in the QRIS
- 7- NA: The Provider is not eligible to participate in the QRIS
- 8: NA: The State does not have an operating QRIS
- 9- NA: The State has an operating QRIS, but information is currently unavailable at the provider level

to:

QRIS Participation: Indicate one of the following codes.

- 0- No: Provider is eligible, but does not participate in the QRIS
- 1- Yes: Provider does participate in the QRIS
- 7- The State has an operating QRIS in the provider's area, but the provider is not eligible to participate
- 8: The State does not have an operating QRIS in the provider's area
- 9- The State has an operating QRIS in the provider's area, but information is currently unavailable at the provider level

MN also commented on the new data element #36 – “Provider Subject to State or Local Pre-K Standards”. They asked if OCC expects States to identify a child's participation in quality settings which are unrelated to CCDF funding. OCC is not asking States to identify a child's participation in quality settings which are unrelated to CCDF. And MN also commented on OCC encouraging States to use a unique identifier that could be used to link with other early care and education programs such as Early/Head Start and Pre-K for the purposes of integrated data and service coordination. While it is not required, OCC does encourage as a best practice that States develop unique identifiers that could be used to link with other early care and education programs for the purposes of integrated data and service coordination.

UT commented that they are in favor of allowing States to report the anticipated or authorized hours of care instead of the actual hours of care. OCC supports this strategy (which is addressed above). UT also commented that the proposed revisions to the ACF-801 seem to duplicate what is being asked for in the State Plan (ACF-118). OCC is proposing to collect quality information on both the ACF-801 and the ACF-118. However, the ACF-801 data is case specific data whereas the ACF-118 data is State systems-level data (which does not allow case-specific analyses). And UT also commented that they do not collect information on child care providers since they pay child care subsidies directly to the parents. The ACF-801 report currently requires States to identify what kind of child care provider is being used by each child. Given that such data are already being collected, OCC does not believe that UT would incur a substantially greater reporting burden by collecting quality information on those same providers already contained in their ACF-801 reports.

NJ commented that in their current environment they (1) do not have a single or unique provider identifier, (2) have not developed a QRIS, and (3) cannot systematically link providers to a State or Pre-K standard at the present time. NJ also commented that they are currently developing a statewide Consolidated Assistance Support System (CASS) that will consolidate programs through one comprehensive electronic service system and is projected to become operational in the Spring of 2013. However, given that CASS has already been designed based on current specifications, modifications required to include and capture new ACF-801 revisions may not be operational by October of 2013.

OCC understands NJ's constraints around providing a single or unique provider identifier at the current time. And OCC fully supports the development of CASS (including the potential opportunity to refine current specifications) that will eventually allow NJ to provide a single or unique identifier by, or close to, the October 2013 mandatory deadline. With respect to NJ not having developed a QRIS, the new ACF-801 reporting requirements are designed to collect both participation and non-participation. With respect to linking providers to a State or Pre-K standard, please see response to MN (above).

APHSA repeated most of the comments made by MN, MT, NJ, and UT. An additional comment revolved around the "Unique Provider ID". Specifically, APHSA noted that in some States, several providers are limited to the same provider number. OCC believes that every provider can be assigned a unique provider number. For example, if the issue involves a provider having more than one facility and using the same provider number for multiple locations, the State must establish a provider number that is specific to each facility/location. APHSA also emphasized the expense associated with the proposed revisions as well as the need for more time, i.e., five years, to implement the revisions. OCC is sensitive to the expense associated with the proposed revisions but does not feel that the expense will be prohibitive or uniformly shared by all States given that some/many States are farther along than others in implementing QRIS or other quality indicators. Finally, OCC feels that the phased-in approach for implementation is generous and realistic. In light of the limited number of comments received and the nature of the comments, the Office of Child Care expects that the costs of implementing the proposed changes will be manageable for most States. Additionally, the Office of Child Care anticipates that the proposed changes and clarifications will benefit both the States and the Federal government by improving data collection quality and utility.

In addition, ACF continues to obtain input on this collection on an ongoing basis from States and Territories through regular regional and national meetings with Grantees. During the original development of this collection, ACF consulted with the American Public Human Services Association (APHSA) which shared comments from its member States. Notice regarding the ACF-801 was also posted on the "CC admin listserv" electronic mailing list for child care administrators. Additionally, ACF convened a Child Care Information System Technical Assistance Group (TAG) to assist States and Territories in developing their reporting systems. The TAG, which included representatives from 10 States and national child care organizations, reviewed the data elements on the ACF-801 form and instructions, and recommended changes to streamline, simplify, and clarify the data elements. Many of the TAG recommendations were included in a technical amendment to the statute and are now incorporated in the current version of the ACF-801.

**9. Payment to Respondents:**

Not applicable.

**10. Confidentiality:**

We will protect the information to extent allowed by Federal law. The information submitted by States and Territories involves case-level administrative data regarding the families and children being served through CCDF funds. Typically, States and Territories use an "optional" Social Security number or a Unique State Identifier (required in the absence of a Social Security number) to ensure compliance with the statutory requirement that they provide "the total number (without duplication) of children and families served". To ensure confidentiality, ACF has made arrangements with the National Institutes of Health for secure electronic file transfer using either the CONNECT:DIRECT or CyberFusion data exchange systems, or by using secure FTP (File Transfer Protocol). These methods of transmission ensure that case identifiers remain secure in the transmission. States that cannot transmit the ACF-801 data via one of the above methods may submit using a diskette/CD via registered mail. ACF provides technical assistance to Grantees in the use of the electronic system toward improved data accuracy and reliability.

**11. Sensitive Nature:**

This data collection does not involve asking questions of a sensitive nature.

**12. Estimate of Data Collection Burden:**

All States and Territories are required to participate and report on the CCDF program on a quarterly basis, a mandatory requirement effective April 1998. The burden of collecting the information is estimated as follows:

Number of Respondents:	56
Number of Responses per Respondent:	4
Average Burden Hours per Response:	25
Total Burden Hours per Year:	5,600

**13. Estimated Respondent Cost:**

We estimate that the time required to assemble and transmit the data file will take approximately 25 hours per transmission at an estimated \$23 per hour which totals \$2,300 per State and Territory. Operational cost for systems software computer time will average about \$4,500 a year per State and Territory. The estimated yearly cost for all States and Territories is \$380,800.

**14. Estimated Federal Cost:**

The estimated annual Federal cost is \$513,600. This includes staff costs of program analysts who review the information to ensure consistency and contact grantees as necessary when information is incomplete or questionable. It also includes systems costs, including data base maintenance, associated with the electronic system that performs audit checks and provides feedback to the States and Territories.

**15. Change in Burden:**

As a result of the addition of new data elements on the quality of child care providers, the estimated burden for States and Territories to collect the new information will rise from 20 hours per response to 25 hours per response. The estimated cost for all States and Territories will increase from \$313,600 to \$380,800 annually. The estimated federal cost has been increased from about \$423,000 to \$513,600 for systems and maintenance along with the associated increase from approximately \$1.3 million to \$2.1 million for technical assistance regarding data collection for CCDF grantees. It is important to note that the increase in Federal costs is not entirely attributable to the proposed ACF-801 revisions. Rather, the ACF-801 is one of several federally mandated reports being supported by ACF/OCC systems, maintenance, and technical assistance.

**16. Publications:**

Fiscal Year 1998 through 2009 data from the ACF-801 has been processed and reported in a variety of places. Specifically, data has been incorporated into the Office of Child Care (OCC) Report to Congress, used by ACF to respond to requests from Congress, track ACF's performance under the Government Performance and Results Act, and respond to inquiries regarding the progress and effectiveness of the CCDF program as well as posted on the OCC website.

**17. Expiration Date:**

The expiration date is currently displayed at the top right corner of the Form ACF-801.

**18. Exception to Item #19 on the Form 83-I:**

There are no exceptions to this form.

**B. COLLECTION OF INFORMATION EMPLOYING STATISTICAL METHODS**

**1. Respondent Universe and Sampling:**

The information reported by States and Territories via the ACF-801 is derived primarily from administrative data that is collected in the course of providing CCDF services to

families and children. These administrative data systems include information about the full population of families and children being served. Since full population information is being collected by States and Territories in the course of doing business, the issue of sampling is not relevant. However, as described in ACYF-PI-CC-98-01, issued on January 22, 1998, States and Territories have the option of submitting a sample of their records for the ACF-801 report. This issuance indicates that States choosing to submit sample data must develop a methodology that conforms to the principles of probability sampling, i.e., each family in the population of interest must have a known, non-zero probability of selection. A sample frame must be constructed for each month in the annual sample period and include approximately one-twelfth of the required minimum annual sample. States that sample are required to have their sampling plan approved by the Office of Child Care. The first sampling plan was due February 28, 1998. State and Territories that submit their entire caseload were not required to submit a sampling plan. Instead they were required to submit a statement indicating their intention to submit data for the entire population.

**2. Collection Procedures:**

Not Applicable.

**3. Response Rates:**

Not Applicable.

**4. Tests of Procedures or Methods:**

Not Applicable.

**5. Contact Information for Statistical Design, Data Collection, and Analysis:**

Joseph Gagnier	OCC Statistician	(202)	205-8455
Andrew Williams	Policy Division Director	(202)	401-4795
Helen Papadopoulos	OCC Data Contractor	(301)	795-0586