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CHILD CARE AND DEVELOPMENT FUND ANNUAL REPORT ON SERVICES PROVIDED FROM OCTOBER 1, 20__ THROUGH SEPTEMBER 30, 20__	OMB Control Number: 0970-0430 Expiration Date: MM/DD/YYYY
<p>COMPLETE NAME OF TRIBAL LEAD AGENCY (TLA):</p> <p>ADDRESS:</p> <p>CONTACT PERSON:</p> <p>Phone:</p> <p>Email:</p>	

**INTRODUCTION: Program Characteristics**

1. Did your Tribal Lead Agency (TLA) supplement the CCDF grant with dollars from other sources during the last fiscal year? Check one.

- Yes
- No

1a. If yes, what other sources of funding were used? Check all that apply.

- Tribal funds
- Grant/Foundation funds
- Private donations
- State funds
- Other Federal funds
- Other (list) \_\_\_\_\_

1a (i). Describe the additional sources of funds and how they were used:

1a (ii) Do the numbers provided in Part 1: Administrative Data include (check one):

- CCDF funded children only [preferable]

- All children regardless of funding source [used if TLA is unable to only report CCDF funded children]
2. If you are a grantee with a small allocation, did your Tribal Lead Agency only provide quality activities and no direct child care services? [Note that Tribal grantees with large and medium allocations are required to report both Part 1: Administrative Data and Part 2: Tribal Narrative. Tribal grantees with small allocations are not required to report Part 1 if NO direct child care services are provided].
- Yes (skip to Part 2: Tribal Narrative)
  - No (complete Part 1: Administrative Data and Part 2: Tribal Narrative)

**PART 1: Administrative Data**

Provide the administrative data for the families and children you served during the fiscal year.

PART 1: ADMINISTRATIVE DATA QUESTIONS	NUMBER/RESPONSE
1. Total number of families that received child care services this fiscal year:	
2. Total number of children that received services this fiscal year:	
2a. Number of children served by a Relative in a Child’s Home	
2b. Number of children served by a Non-Relative in a Child’s Home	
2c. Number of children served by a Relative in a Family Child Care Home	
2d. Number of children served by a Non-Relative in a Family Child Care Home	
2e. Number of children served in a Center	
3. Total number of children receiving services that fall into each age category below:	
3a. 0 up to 1 year	
3b. 1 year up to 2 years	
3c. 2 years up to 3 years	
3d. 3 years up to 4 years	
3e. 4 years up to 5 years	
3f. 5 years up to 6 years	
3g. 6 years up to 13 years	
3h. 13 years and older	
4. Number of children who received child care services because:	
4a. Their parents worked	
4b. Their parents were in training or an educational program	
4c. Child received or needed protective services	
4d. Their parents worked AND were in training/educational program	
4e. Program has implemented categorical eligibility and employment or training status is not an eligibility criterion	
5. Average number of hours of child care services provided per child per month:	
6. Average monthly amount paid for child care service:	
6a. Average monthly CCDF program subsidy per child	
6b. Average monthly parent copayment per child	
7. Number of children served by payment type this fiscal year:	
7a. grant/contract with provider	
7b. certificate or voucher to parent and/or provider	
7c. cash payment to parent	
7d. CCDF funding to a tribally operated center for direct services	
Comments:	

**PART 2: Tribal Narrative**

Provide a brief description of the Tribal Lead Agency’s quality improvement activities during the last fiscal year by answering the questions below.

TRIBAL NARRATIVE QUESTIONS	RESPONSE/NARRATIVE
<p>1. What quality improvement efforts did the Tribal Lead Agency fund this fiscal year? Check all that apply. Tribal Lead Agencies must fund quality efforts in at least one of the following 10 activities (98.53(a)):</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Supporting the training and professional development of the child care workforce</li> <li><input type="checkbox"/> Improving on the development or implementation of early learning and developmental guidelines</li> <li><input type="checkbox"/> Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services</li> <li><input type="checkbox"/> Improving the supply and quality of child care programs and services for infants and toddlers</li> <li><input type="checkbox"/> Establishing or expanding a system of child care resource and referral services</li> <li><input type="checkbox"/> Supporting compliance with requirements for licensing, inspection, monitoring, training, and health and safety</li> <li><input type="checkbox"/> Evaluating the quality of child care programs, including evaluating how programs positively impact children</li> <li><input type="checkbox"/> Supporting providers in the voluntary pursuit of accreditation</li> <li><input type="checkbox"/> Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development</li> <li><input type="checkbox"/> Carrying out other activities determined by the Tribal Lead Agency to improve the quality of child care services provided, and for which measurement of preparedness, child safety, child well-being, or entry to kindergarten is possible. This can include activities and services related to tribal language, culture, and consumer education activities.</li> </ul>
<p>2a. What trainings did the Tribal Lead Agency provide for child care caregivers, teachers and directors? Check all that apply.</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Prevention and control of infectious diseases (including immunizations)</li> <li><input type="checkbox"/> Prevention of sudden infant death syndrome (SIDS) and use of safe sleeping practices</li> <li><input type="checkbox"/> Administration of medication, consistent with standards for parental consent</li> <li><input type="checkbox"/> Prevention of and response to emergencies due to food and allergic reactions</li> <li><input type="checkbox"/> Prevention of shaken baby syndrome and abusive head trauma</li> <li><input type="checkbox"/> Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility)</li> <li><input type="checkbox"/> Handling and storage of hazardous materials and the appropriate disposal of bio contaminants</li> <li><input type="checkbox"/> Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic</li> </ul>

TRIBAL NARRATIVE QUESTIONS	RESPONSE/NARRATIVE
	<ul style="list-style-type: none"> <li><input type="checkbox"/> Precautions in transporting children (if applicable)</li> <li><input type="checkbox"/> First aid and cardiopulmonary resuscitation (CPR) certification</li> <li><input type="checkbox"/> Family engagement</li> <li><input type="checkbox"/> Access to physical activity</li> <li><input type="checkbox"/> Nutrition</li> <li><input type="checkbox"/> Promotion of child development</li> <li><input type="checkbox"/> Language and literacy</li> <li><input type="checkbox"/> Caring for children with special needs</li> <li><input type="checkbox"/> Fiscal management</li> <li><input type="checkbox"/> Administration and program management</li> <li><input type="checkbox"/> Curriculum development and instruction</li> <li><input type="checkbox"/> Child care as a business</li> <li><input type="checkbox"/> Other topic(s) (List): _____</li> <li><input type="checkbox"/> None</li> </ul> <p>Describe the trainings the Tribal Lead Agency provided during the fiscal year. In your narrative, please also include the number of caregivers, teachers and directors trained during the fiscal year:</p>
<p>2b. Did the Tribal Lead Agency support child care caregivers, teachers, and directors in achieving any of the following along a career pathway?</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Credit towards required training hours</li> <li><input type="checkbox"/> Certificate</li> <li><input type="checkbox"/> Credential</li> <li><input type="checkbox"/> Degree</li> <li><input type="checkbox"/> Other (list) _____</li> <li><input type="checkbox"/> None</li> </ul> <p>Describe the support given to providers in achieving credits, credentials, or degrees. In your narrative, please also include the number of caregivers, teachers and directors who received support from the Tribal Lead Agency to obtain credits, credentials or degrees:</p>
<p>2c. How did the Tribal Lead Agency assist providers in meeting health and safety standards? Check all that</p>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Provide health and safety equipment/materials</li> <li><input type="checkbox"/> Grants/mini-grants for health and safety equipment/materials</li> <li><input type="checkbox"/> Classroom materials and resources</li> </ul>

TRIBAL NARRATIVE QUESTIONS	RESPONSE/NARRATIVE
apply.	<input type="checkbox"/> Financial assistance in meeting licensing requirements <input type="checkbox"/> Other (list) _____ <input type="checkbox"/> None  Describe how the Tribal Lead Agency assisted providers in meeting health and safety standards:
2d.How did the Tribal Lead Agency support and provide culturally appropriate activities to children, parents, and providers? Check all that apply.	<input type="checkbox"/> Incorporation of Tribal language into child care settings <input type="checkbox"/> Modified curriculum to reflect Tribal culture <input type="checkbox"/> Served traditional Tribal foods in facilities <input type="checkbox"/> Culturally-based training opportunities for parents and providers <input type="checkbox"/> Culturally-based training to non-Tribal providers <input type="checkbox"/> Other (list) _____ <input type="checkbox"/> None  Describe the Tribal Lead Agency's support and provision of culturally appropriate activities:
2e.How did the Tribal Lead Agency provide consumer education to parents and providers? Check all that apply.	<input type="checkbox"/> Written materials, including newsletters, brochures, booklets, checklists, or handbooks about child care topics <input type="checkbox"/> Local/Tribal media <input type="checkbox"/> Social media such as Facebook, Twitter, Instagram <input type="checkbox"/> Guidance and Education from Child Care Resource and Referral agencies <input type="checkbox"/> Internet, including electronic media, publications, and webcasts about child care topics <input type="checkbox"/> Postings on community bulletin boards <input type="checkbox"/> Other (list): _____ <input type="checkbox"/> None  Describe the consumer education the Tribal Lead Agency provided to parents and child care providers:
2f. Did any CCDF child care providers participate in the following? Check all that apply.	<input type="checkbox"/> State system of assessing and improving quality, such as Quality Rating and Improvement System (QRIS) <input type="checkbox"/> Tribal system of assessing and improving quality, such as QRIS <input type="checkbox"/> Nationally-recognized accreditation

TRIBAL NARRATIVE QUESTIONS	RESPONSE/NARRATIVE
	<input type="checkbox"/> Other (list) _____ <input type="checkbox"/> None  Describe the quality rating and improvement system used. If none was selected, please explain why no quality rating and improvement system is being used:
2g. Describe any other significant quality activities that occurred during the past fiscal year:	