

Comment

As noted, going through the 184 FY2019-2022 Tribal Plans that BPC had access to, BPC noticed that Tribal Lead Agencies were not submitting all the required information in part due to the lengthiness. BPC reviewed the FY2023-2025 Preprints with a critical eye for how to streamline the application process to make it easier for HHS to review while easing the administrative burden for tribes. For this reason, BPC recommends cutting these sections from the report, as they offer less useful information compared to the other questions and make the reporting process more burdensome for Tribal Lead Agencies.

Include a new section where Tribal Lead Agencies must submit basic demographic information to ensure accurate data is available on this

population. Specifically, HHS Tribal Plans should require Tribal Lead Agencies to submit:

- The total number of individuals living on or near the reservation or service area;
- The unemployment rate for individuals residing on or near the reservation or service area;
- The median household income for each tribe;
- The median household income for single-parent maternal led households for each tribe;
- The percentage of families at or below the federal poverty level for each tribe; and
- The percentage of single-parent households at or below the poverty level for each tribe.

Sections 1.4.2.6 and 1.4.3.1 both ask the Tribal Lead Agencies how they make the Plan available to the public, so BPC recommends combining these sections to shorten the Plan.

HHS should not approve the Tribal Plans unless the Tribal Lead Agencies check the box in section 1.6.2 affirming they have submitted child count data in the appendix and numerical child count information is submitted in Appendix 1-A. This is critical information that zero of the 184 tribes analyzed by BPC submitted with their FY2019-2022 Tribal Plans. This information informs topline funding levels for federal programs for tribes.

Amend the question to ask which stakeholders were consulted in developing the Child Care Disaster plan. This is a more straightforward, clear way of phrasing what the question is asking.

Include a new open-ended narrative question wherein Tribal Lead Agencies describe how they intend to improve coordination between their CCDF and Head Start programs and, if applicable, why they do not coordinate with Head Start. This is to encourage Tribal Lead Agencies to actively prioritize coordinating CCDF services with Head Start programming.

Include a new section in the Preprints requiring Tribal Lead Agencies to describe any on-going or planned tribal-state coordination efforts. Tribes should report the areas in which, and how, they coordinate with the state to effectively deliver services to families, including if the tribe is represented on state advisory committees, areas where further coordination with the state is desired, and if the state has contacted the Tribal Lead Agency regarding how to expand state services for AI/AN children/families. Since as many as 78% of AI/AN people live off tribal statistical areas, it is important for HHS to understand if tribes and the state are coordinating efforts to provide services to this population.

Move section 2.3 below 2.1 because 2.1 asks about health and safety standards for CCDF providers, and section 2.3 asks about exemptions to these standards for relative providers. In sections 2.1.4.1-2.1.4.3, remove the text boxes asking if relatives are exempt from those requirements and ask about relative exemption for these standards in section 2.3. This consolidates all information about relative exemptions in one spot.

Remove question i under question 1-3 in each section as it is duplicative. Questions 1-3 already ask if Tribal Lead Agencies use a tribal or state database/repository and asking them to describe adds an unnecessary burden.

Throughout the Preprints, it says that "Tribal Lead Agencies must justify any alternative approach in 2.3.7" for background checks but section 2.4.7 is where tribes justify their alternative approaches. Change the language in the Preprint accordingly.

Include a new question requiring Tribal Lead Agencies to describe the progress they have made on their quality improvement goals from the previous cycle. This information helps HHS assess how and if Tribal Lead Agencies are spending their money on quality improvement activities.

Cut this question, as it is duplicative of section 3.1.2 where Tribal Lead Agencies indicate all of their quality improvement activities.

Include a new open-ended narrative question requiring Tribal Lead Agencies to explain how provider training and curricula are culturally relevant to the AI/AN children served by their child care programs. This encourages tribes to think more critically about how to incorporate the unique cultural needs of AI/AN children and families into their early childhood programming.

Require small tribes to complete sections 5.3.1 and 5.3.2 in which they define children with special needs, define children experiencing homelessness, and explain how they prioritize services for these groups. This helps HHS understand which and how small tribes are serving vulnerable populations through CCDF and is consistent with requirements of medium/large tribes. Current regulations permit children with special needs to be included in any population as defined by the Tribal Lead Agency. Without defining children with special needs, it is unclear which children small tribes are prioritizing as such.

Require small tribes complete sections 5.2.1 and 5.2.2 in which they report how parents are informed of the availability of child care assistance by the Tribal CCDF program and how parents may apply for child care service. This is consistent with requirements of medium/large tribes and helps HHS understand tribal processes and ease with which eligible parents can access child care services.

Amend this question so Tribal Lead Agencies must respond to sections 4.4.2 through 4.4.6 instead of allowing them to describe their eligibility criteria open-endedly in the text box. By requiring tribes to answer specific questions instead of allowing them to broadly describe their eligibility requirements in an open-ended question, HHS standardizes the information collected from small tribes which makes it easier to analyze.

Cut this question asking Tribal Lead Agencies to submit TMI and SMI web addresses. This information is not necessary as tribes must already submit their data source.

Move this section below 5.1.2, as they both relate to income and eligibility criteria. This helps organize the Preprints in a more cohesive way.

Combine 5.2.5.2 and 5.2.5.3 by including an "Other" option in 5.2.5.2, then cut 5.2.5.3. This streamlines the Preprints and cuts down the number of questions.

Cut the text box under "Yes" so it is just a yes/no question. This makes it easier for Tribal Lead Agencies to fill out while still collecting relevant information.

Amend this question so it just asks the length of the grace period. This makes it easier for Tribal Lead Agencies to fill out while still collecting relevant information.

Amend this section so that under each of the groups of children, there is a checklist of activities to choose from to increase the supply and improve the quality of child care services instead of keeping it as an open-ended question. This standardizes the responses from tribes, makes it easier for tribes to respond, and makes it easier for HHS to analyze the responses.

Move below 5.1.5, as both sections pertain to payments for child care services and the impact of a family's income level

Cut the text boxes asking Tribal Lead Agencies to describe and leave these sections as a checklist of options to choose from. This standardizes the responses from tribes, makes it easier for tribes to respond, and makes it easier for HHS to analyze the responses.

Combine sections 5.4.1.6 and 5.4.1.7 by including options in 5.4.1.6 that say the Tribal Lead Agency waives family contributions/co-payments, then cut question 5.4.1.7. This helps streamline and shorten the Tribal CCDF Plans.

Cut this question and just include Table 6A. Include a new column that says N/A if grants and contracts were not used. This helps streamline and shorten the Tribal CCDF Plans.

Amend these sections so they are a checklist of activities to choose from instead of keeping it as an open-ended question. This standardizes the responses from tribes, makes it easier for tribes to respond, and makes it easier for HHS to analyze the responses.

Cut this question as it is duplicative of sections 6.2 and 5.4. Section 6.2 asks about market rates and section 5.4 asks about family contributions to payment rates.

Move below 5.4 as they all ask about payments, setting payment rates, and tiered payment rates for providers.

Cut this question as it is duplicative of section 2.2.1.3. Section 2.2.1.3 references monitoring by other agencies.

The plans indicate that there is 7.2.1.3 through 7.2.1.7, but only 7.2.1.1 and 7.2.1.2 are listed. Update the plan to list all the questions.

Amend the question so it just asks Tribal Lead Agencies to fill in the minimum number of years reports are made available. This makes it easier for tribes to fill out while still collecting relevant information.

Move into section 7.5 as socio-emotional and behavioral issues largely are relate to developmental screenings.

Require small tribes complete section 7.4.5 in which they describe their policies for preventing suspensions and expulsions. This is consistent with requirements of medium/large tribes and helps HHS understand the ways in which small tribes work to ensure children aged birth to five remain enrolled in CCDF funded child care programs.

Require small tribes to report how information on available resources and services for conducting developmental screenings is circulated to parents and CCDF child care providers. This is consistent with requirements of medium/large tribes and helps HHS understand how communication is disseminated by Tribal Lead Agencies to parents, especially in informing parents of the services available to them.

Cut this question as it is duplicative of 7.5.1.1 and 7.5.1.3

Cut this question as it is duplicative of 3.1.2.1 and 3.2.1

Preprint Section Number
1.4.2.3
1.9.1.3
1.10.5
2.4.3.2
5.1.3
5.1.5.1
5.1.5.5
5.2.4
5.2.7.2
5.2.8
5.2.9.1
5.2.9.2
5.2.9.3
6.3.2
6.3.3
6.3.6
6.4.2
6.4.3
6.4.4
6.4.5
6.4.6
7.1.4
7.2.1.1
7.3.2.2
7.3.2.3
7.4.2
7.4.3.3

Section 1

1.4.2.6 and 1.4.3.1

1.6.2 and Appendix 1-A

1.10.1

1.8

1.8

2.1 and 2.3

2.4.1.1 and 2.4.1.3

2.4.7

Section 3

3.1.1

3.2

Section 4, 5.3.1.1, and 5.3.2

Sections 4, 5.2.1, and 5.2.2

4.4.1

5.1.2.3(3)

5.1.5

5.2.5.2 and 5.2.5.3

5.2.6.1

5.3.2.4
5.3.4
5.4
5.4.1.4; 5.4.1.5; 5.4.1.6; 6.1.1.2; 6.4.1; 7.3.2.4
5.4.1.6 and 5.4.1.7
6.1.1.4
6.3.1 and 7.1.1
6.3.4
6.3.1, 6.3.5, and 6.4.1
7.1.2
7.2.1
7.3.2.5
7.4.4
7.4.5

7.5.1
7.5.1.2
7.5.1.5

Response
This is now section 1.5.2.3 and has been revised to include virtual locations. OCC believes it is necessary to collect information on hearings.
This is now section 1.10.1.3. OCC believes it is necessary to understand how TLAs recover improper payments.
This is now section 1.11.5.1. Section includes legal citation, so legally required to ask for this information.
This is now section 2.5.3.3. Section includes legal citation, so legally required to ask for this information.
Section includes legal citation, so legally required to ask for this information
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Section includes legal citation, so legally required to ask for this information
OCC believes this section is essential to ensure eligibility is determined in a timely manner.
Section includes legal citation, so legally required to ask for this information
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Section includes legal citation, so legally required to ask for this information
Section includes legal citation, so legally required to ask for this information
Section includes legal citation, so legally required to ask for this information
OCC believes this section is essential to ensure base payment rates are sufficient to cover costs.
OCC believes this section is essential to ensure base payment rates are sufficient to cover quality costs.
Section includes legal citation, so legally required to ask for this information
OCC believes it is important to have respondents describe delinking provider payments from occasional absences.
OCC believes it is important to have respondents describe payment practices.
OCC believes it is important to have respondents describe payment disputes.
OCC believes it is important to have respondents describe how notice is shared with providers on families' eligibility.
OCC believes it is important to have respondents describe payment appeal and resolution processes.
OCC believes it is important to have respondents describe providing public access to substantiated parental complaints.
OCC believes it is important to have respondents describe how they ensure information is consumer friendly and accessible.
OCC believes it is important to have respondents describe their definition of plain language.
OCC believes it is important to have respondents describe how monitoring and inspection reports are written in plain language.
OCC believes it is important to have respondents describe dissemination.
OCC believes it is important to have respondents describe how information is tailored to a variety of audiences.

Given the amount of information currently requested from TLAs, OCC has decided not to add any additional questions that are not required by statute.

These are now sections 1.5.2.6 and 1.5.3. These are not duplicative as the first question asks how plans are made available prior to the public hearing and the second asks generally how it is made available to the public.

This comment appears to be a misunderstanding of the 2019-2022 Tribal Plan Data. In 2019, the child count information was submitted several months prior to the plan preprint. Therefore the zeros observed in the plan data do not represent what was actually submitted at a different time.

Comment section cited does not match section discussed in text of 30-day version. Unable to respond to suggestion.

Given the amount of information currently requested from TLAs, OCC has decided not to add any additional questions that are not required by statute.

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This comment was already addressed in the version submitted to OMB and available for comment during the 30-day comment period. Not edits made.

OCC does not believe this is duplicative since the question is only asked if the respondent answers in the affirmative.

This comment was already addressed in the version submitted to OMB and available for comment during the 30-day comment period. Not edits made.

Given the amount of information currently requested from TLAs, OCC has decided not to add any additional questions that are not required by statute.

OCC agrees and will cut this question.

Given the amount of information currently requested from TLAs, OCC has decided not to add any additional questions that are not required by statute.

Given the amount of information currently requested from small TLAs, OCC has decided not to add any additional questions that are not required by statute.

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This question is not required by statute so OCC will not make it required. With an open ended response respondents can fill it out how it works for them.

Respondents are not required to include web addresses. The automated system respondents use to submit responses will clarify this.

Respondents will use an automated system to fill out these questions that will help with skip patterns and organize the questions in an organized way.

OCC believes that each of these questions asks for different and distinct information and should be separate.

OCC believes it is important to have respondents describe policies and procedures rather than just checking an item.

OCC believes that both of these questions need to be asked so respondents discuss both grace periods. If this is combined, they may not discuss both.

Including only a checklist would not provide OCC with appropriate information.

OCC does not agree that this reorganization is necessary.

OCC is concerned that a checklist would not cover the universe of possible responses, therefore will keep the description box.

Prior plan submissions have shown OCC that separating the questions provides more accurate data.

The referenced table does not exist in version submitted to OMB and available for comment during the 30-day comment period. Not edits made.

OCC is concerned that a checklist would not cover the universe of possible responses, therefore will keep the description box. OCC will consider this for the next plan cycle.

OCC does not believe these are duplicative.

OCC believes these are different topics. Family contribution (co-payment) is not the same as payment rates to providers.

OCC does not believe these are duplicative.

This was listed in error and was deleted from the version submitted during the 30-day comment period.

Section includes legal citation, so legally required to ask for this information

OCC believes these are different topics. Screenings are different from referrals.

Given the amount of information currently requested from TLAs, OCC has decided not to add any additional questions that are not required by statute.

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OCC does not believe these are duplicative.

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