

# Child Care and Development Fund (CCDF) Plan For Puerto Rico FFY 2019-2021

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## 1 Define CCDF Leadership and Coordination with Relevant Systems

This section identifies the leadership for the CCDF program in each Lead Agency and the entities and individuals who will participate in the implementation of the program. It also identifies the stakeholders that were consulted to develop the Plan and who the Lead Agency collaborates with to implement services. In this section respondents are asked to identify how match and maintenance-of-effort (MOE) funds are identified. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems, and outline the work they have done on their disaster preparedness and response plans.

### 1.1 CCDF Leadership

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

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

Identify the Lead Agency or joint interagency office designated by the state or territory. ACF will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here (658D(a)).

a) Lead Agency or Joint Interagency Office Information:

**Name of Lead Agency:** Administration for the Integral Child Care and Development

**Street Address:** Avenida de la Constitucion, Pda. #2

**City:** San Juan

**State:** Puerto Rico

**ZIP Code:** 00902-5091

**Web Address for Lead Agency:** [www.acuden.pr.gov](http://www.acuden.pr.gov)

**b) Lead Agency or Joint Interagency Official Contact Information:**

**Lead Agency Official First Name:** José Javier

**Lead Agency Official Last Name:** Fuentes Díaz

**Title:** Acting Administrator

**Phone Number:** 787-724-7474 ext 3600, 3612

**Email Address:** [jose.fuentes@familia.pr.gov](mailto:jose.fuentes@familia.pr.gov)

**1.1.2 Who is the CCDF Administrator?**

Identify the CCDF Administrator designated by the Lead Agency, the day-to-day contact, or the person with responsibility for administering the state's or territory's CCDF program. ACF will send programmatic communications, such as program announcements, program instructions, and data collection instructions, to the designated contact identified here. If there is more than one designated contact with equal or shared responsibility for administering the CCDF program, please identify the Co-Administrator or the person with administrative responsibilities and include his or her contact information.

**a) CCDF Administrator Contact Information:**

**CCDF Administrator First Name:** José Javier

**CCDF Administrator Last Name:** Fuentes Díaz

Title of the CCDF Administrator: Acting Administrator

Phone Number: 787-724-7474 Extension 3600

Email Address: jose.fuentes@familia.pr.gov

Address for the CCDF Administrator (if different from the Lead Agency):

Street Address:

City:

State:

ZIP Code:

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

CCDF Co-Administrator First Name: Maritza

CCDF Co-Administrator Last Name: Maldonado Rivera

Title of the CCDF Co-Administrator: Auxiliary Administrator of Programs, Head Start/Early Head Start & Child Care

Description of the role of the Co-Administrator: The Co - Administrator has the responsibility to plan, coordinate, organize, direct, supervise and evaluate the administrative work program the activities concerning the office in operational matters. It's also actively involved in the formulation and implementation of public policy corresponding to its area of competence. And collaborates and advises the Administrator, Deputy Administrator, and other officials of the Agency on matters related to the office in charge

Phone Number: 787-724-7474 Extensión 3612

Email Address: maritzam@familia.pr.gov

Address for the CCDF Co-Administrator (if different from the Lead Agency):

Street Address: N/A

City:

State:

ZIP Code:

## 1.2 CCDF Policy Decision Authority

The Lead Agency has broad authority to administer (i.e., establish rules) and operate (i.e., implement activities) the CCDF program through other governmental, non-governmental, or public or private local agencies as long as it retains overall responsibility for the administration of the program (658D(b)). Administrative and implementation responsibilities undertaken by agencies other than the Lead Agency must be governed by written agreements that specify the mutual roles and responsibilities of the Lead Agency and other agencies in meeting the program requirements.

**1.2.1 Which of the following CCDF program rules and policies are administered (i.e., set or established) at the state or territory level or local level? Identify whether CCDF program rules and policies are established by the state or territory (even if operated locally) or whether the CCDF policies or rules are established by local entities, such as counties or workforce boards (98.16(i)(3)). Check one.**

- All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.
- Some or all program rules and policies are set or established by local entities. If checked, indicate which entities establish the following policies. Check all that apply.

1. Eligibility rules and policies (e.g., income limits) are set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

Other.

Describe:

2. Sliding-fee scale is set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

Other.

Describe:

3. Payment rates are set by the:

- State or territory
- Local entity (e.g., counties, workforce boards, early learning coalitions).

If checked, identify the entity and describe the type of eligibility policies the local entity(ies) can set.

Other.

Describe:

4. Other. List and describe other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):

**1.2.2 How is the CCDF program operated? In other words, which entity(ies) implement or perform these CCDF services? Check all that apply**

a) Who conducts eligibility determinations?

- CCDF Lead Agency
- Temporary Assistance for Needy Families (TANF) agency
- Other state or territory agency

- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

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

- CCDF Lead Agency
- TANF agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

Describe

Child Care main office maintains a CENTRANA center as a source of referrals. However, the municipalities of Villalba and Vega Baja maintain their own centers of CENTRANA, in this cases CC program only provides the necessary materials and each municipality is responsible for the facilities and management of the centers.

In addition there are collaborative agreements with Fondos Unidos (United Ways), for the realization of resources and referrals concerning to the CC centers.

c) Who issues payments?

- CCDF Lead Agency
- TANF agency
- Other state or territory agency
- Local government agencies, such as county welfare or social services departments
- Child care resource and referral agencies
- Community-based organizations
- Other.

## Describe

**1.2.3 Describe the processes the Lead Agency uses to monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.2, including written agreements, monitoring and auditing procedures, and indicators or measures to assess performance of those agencies (98.16(b)). Note : The contents of the written agreement may vary based on the role the agency is asked to assume or type of project, but must include at a minimum, tasks to be performed, schedule for completing tasks, budget which itemizes categorical expenditures in accordance with CCDF requirements, and indicators or measures to assess performance (98.11(a)(3)).**

The Lead Agency does not delegate the determination of eligibility to any other agency or entity. The determination of eligibility is the sole responsibility of the Lead Agency being performed by ACUDEN's regional level staff. The final determination is verified and granted by the eligibility technician and approved by the Assistant Coordinator of the regional office.

Once (1) a year the Centers received a follow up visit. This follow-up visit will not be announced. At the time of the visit, the Health and Safety Monitor will apply the Child Care Program's Licensed Center/Home Assessment Plan (CCSS-18-16). Continuity of Eligible Provider Certification (CCSS-14-16) will be conditional on the same conditions prevailing on this visit as on the initial visit. If the service provider deny access to the Monitor at the time of the follow-up visit the eligible supplier certification (CCSS-14-16) will be revoke , which will lead to the immediate suspension of the delegation of funds and disable the center to continue serving children subsidized by the Program. If it is a service provider through the modality of voucher systems, the parent or guardian will be notified immediately of the need to change to a new service provider.

Meanwhile the Finance Division of the ACUDEN, receive and verify the following reports to ensure compliance with the contract of delegation of funds and with federal and State regulations:

- overview of expenditure by categories-this report prevents that a service provider make disbursements for a category or non-authorized costs.
- List of obligations - this details all the accounts to pay for the project.
- Bank statements, bank reconciliations and canceled checks - these documents can identify if an expense is allowed and if authorized in the list of obligations. Also can identify if the payment to the supplier was within the terms required in federal regulation and check balances of cash at "cash on hand".

Certified Payrolls - it identify that expenditure of payroll does not exceed the approved

proposal, whenever there is a change in the registration affect the proportion child/adult.

**1.2.4 Lead Agencies must assure that, to the extent practicable and appropriate, any code or software for child care information systems or information technology for which a Lead Agency or other agency expends CCDF funds to develop must be made available on request to other public agencies, including public agencies in other States, for their use in administering child care or related programs (98.15(a)(11)).**

**Assure by describing how the Lead Agency makes child care information systems available to public agencies in other states to the extent practicable and appropriate.**  
The Agency has established a procedure to manage the information of participating families. The information is collected in an electronic system that has the necessary security guarantees to preserve confidentiality. The information is available to other government agencies when requested in writing with due justification. The request must be addressed to the Administrator of the agency who evaluates and approves it as necessary.

**1.2.5 Lead Agencies must have in effect policies to govern the use and disclosure of confidential and personally identifiable information about children and families receiving CCDF assistance and child care providers receiving CCDF funds (98.15(b)(13)).**

**Certify by describing the Lead Agency's policies related to the use and disclosure of confidential and personally identifiable information.**

Article 1.7 of the Child Care Program Regulation, Regulation # 8687 (page 3) states that all records related to employees, candidates for employment, applicants and participants of the Child Care Program will be confidential and their information will not be shared unless there is written authorization of the person with an expectation of confidentiality, court order or subpoena. This provision will be applicable to the ACUDEN in its internal functioning.

In addition, there is a document (CCEG-10-18), in which it is established that every participant has to authorize the agency in order to share their confidential information with others. If the participant chooses to do so the ACUDEN is obligated to protect this right.

Therefore in the same document, the participant certifies that the information that he or she gives to the ACUDEN is true and accurate.

### 1.3 Consultation in the Development of the CCDF Plan

The Lead Agency is responsible for developing the CCDF plan, which serves as the application for a 3-year implementation period. As part of the Plan development process, Lead Agencies must consult with the following:

(1) Appropriate representatives of units of general purpose local government-(658D(b)(2); 98.10(c); 98.12(b); 98.14(b)). General purpose local governments are defined by the U.S. Census at [https://www.census.gov/newsroom/cspan/govts/20120301\\_cspan\\_govts\\_def\\_3.pdf](https://www.census.gov/newsroom/cspan/govts/20120301_cspan_govts_def_3.pdf).

(2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to 642B(b)(I)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).

(3) Indian tribe(s) or tribal organization(s) within the state. This consultation should be done in a timely manner and at the option of the Indian tribe(s) or tribal organization(s) (658D(b)(1)(E)).

#### Consultation

involves meeting with or otherwise obtaining input from an appropriate agency in the development of the state or territory CCDF Plan. Describe the partners engaged to provide services under the CCDF program in question 1.4.1.

#### **1.3.1 Describe the Lead Agency's consultation in the development of the CCDF plan.**

- a) Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments.

The Lead Agency consulted the development of the State Plan with appropriate representatives of the general purpose local government through posting the announcement about the document availability in one of the major newspapers with island-wide coverage, and hosting of a public hearing in the Lead Agency headquarters. The pre-print State Plan copy was presented in the public hearing, published on ACUDEN website and also was made available in hard copy in each one of the five regions of the Department of Family.

During the process of public hearings, CCDF providers made recommendations regarding aspects related to the eligibility criteria of the program, the participant service accessibility, resources and referrals. Other participants are interested in participating as program providers, requesting additional information to receive funds from the CCDF.

The Lead Agency has also discussed and consulted the state plan with the Licensing Office obtaining information and recommendations from it, to establish clear processes to be carried out on its part when licensing the care centers. Among the issues discussed are the revisions to the Licensing Regulation # 8860, which restricts access to childcare services. Also the CDA and/or enforcement of Bill # 173, which establishes the minimum standards required by each staff in order to provide services, that are subsidized with funds of the CCDF child care services and temper the definitions of the licensing regulation with the definitions of Regulation # 8687, similarly temper the form of visits to the centers.

**b) Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body.**

The Lead Agency consulted the development of the CCDF plan with a similar coordinating body in replacement to the State Advisory Council. It was shared with the grantee's Head Start Program Government Board, who are appointed by the Office of the Governor of Puerto Rico. The consulting process consisted of the presentation of the CCDF draft document on site in one of their monthly meetings and the provision of feedback from such governing body.

**c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for States to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many States and Tribes have consultation policies and procedures in place.**

N/A

**d) Describe any other entities, agencies, or organizations consulted on the development of the CCDF plan.**

The Lead Agency consulted its CCDF draft plan with the following entities: Head Start Directors Association, Institute of Developmental Deficiencies-Medical Sciences Campus, Child Care Association (COSIANI), University of Puerto Rico, Department of Health and Department of Education.

Some of the efforts are listed below:

- three (3) meetings among COSIANI and CC personnel related modification of accessibility of service, market rate, the CDA and the payment by non-covered spaces.
- Held consultations with the Institute of Developmental Deficiencies-Medical Sciences Campus, concerning referral and follow-up for children with special needs.
- The Assistant Administrator of Programs and the Assistant Administrator of CC met with the University of Puerto Rico - Rio Piedras campus staff in relation to the quality of services regarding Pasitos program.
- Meeting with Member of the Head Start Board of Government in which compared programs and recommended expanding the partnership between EHS and CC, in order to expand the quality of the services.
- The Department of Education and the Agency decided to continue with the processes of referrals for special needs children.

**1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)).**

Reminder:

Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a) Date of the public hearing. 05/31/2018

Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g. the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b) Date of notice of public hearing (date for the notice of public hearing identified in (a)).  
05/10/2018

*Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g. the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).*

c) How was the public notified about the public hearing? Please include specific website links if used to provide notice.

The Public Notice was published both in English and Spanish in the newspaper with the largest circulation in the country on Thursday, May 10, 2018. A written copy of the edict Public Notice was posted on each one of ACUDEN's five (5) regional offices bulletin boards and in the central office.

d) Hearing site or method, including how geographic regions of the state or territory were addressed. The Lead Agency strategically determined its Central Office for the Hearing site to ensure all interested parties knew how to access the location and were able to identify transportation modes to reach it. Located at the major avenue in the exit of Old San Juan, the central office was considered an adequate place to receive the interested parties, and the Lead Agency performed two Hearings (one in the morning and one in the afternoon). The place was easy to identify and reach to promote attendance of all participants through different modes of transportation, including public transportation central station adjacent to the building.

e) How the content of the Plan was made available to the public in advance of the public hearing. (e.g. the Plan was made available in other languages, in multiple formats, etc.) The availability of the content of the plan was made available to the public in advance of the public hearing through an announcement in the newspaper with the major distribution island wide and on the agency's website: [www.acuden.pr.gov](http://www.acuden.pr.gov)

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? The Lead Agency received all information provided by the attendees through recording audio to ensure fidelity of the content provided by the deponents. Those participants who had written depositions were invited to provide them as evidence of the information received from the public and invited attendees. After the hearings, all gathered comments were discussed and analyzed by the Acting Administrator and key management staff. After the process ended, all the recommendations were included in the draft.

**1.3.3 Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found here: <https://www.acf.hhs.gov/occ/resource/pi->**

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a) Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed.

The website link to access the State Plan and any Plan amendments is <https://childcare.familia.pr.gov> .

b) Describe any other strategies that the Lead Agency uses to make the CCDF Plan and Plan amendments available to the public (98.14(d)). Check all that apply and describe the strategies below, including any relevant website links as examples.

Working with advisory committees.

Describe:

Working with child care resource and referral agencies.

Describe:

The agency works in collaboration with the Center of Resources and Referrals for Early Childhood (the acronym for its name in Spanish for CETRANA) and United Ways of Puerto Rico. These referral agencies provide support in the implementation of the referral process to community agencies and support the identification of child care facilities by geographic areas. United Ways includes the CCDF program within the island wide and also have a 2-1-1 line which is a comprehensive referral system that serves as a resource for parents to enhance the accessibility of services through location and service modalities.

These collaborations are carried out, given the fact that the ACUDEN do not delegate funding for resources and referrals.

Also referrals are received from government agencies such as the Department of Education, ADSEF, ADFAN and the Department of Health.

Providing translation in other languages.

Describe:

In the top right side of <https://childcare.familia.pr.gov>web, there will a language option for the user to select their preferred language.

Sharing through social media (e.g., Twitter, Facebook, Instagram, email).

**Describe:**

The approved updated version of the State Plan is posted in the Lead Agency web page <https://childcare.familia.pr.gov> . which can also be accessed by ADSEF, ASUME, ADFAN and Secretariado web pages and by Twitter and Facebook platforms.



Providing notification to stakeholders (e.g., provider groups, parent groups).

**Describe:**



Other.

**Describe:**

The Lead Agency shares information through public meetings, website posts and through partner agencies and organizations involved in early childhood education. Websites, publications, public announcements and email are other means of notifying stakeholders.

## 1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

Lead Agencies are required to describe how the state or territory will efficiently, and to the extent practicable, coordinate child care services supported by CCDF with programs operating at the federal, state/territory, and local levels for children in the programs listed below. This includes programs for the benefit of Indian children, infants and toddlers, children with disabilities, children experiencing homelessness, and children in foster care (98.14(a)(1)).

### **1.4.1 Describe how the Lead Agency coordinates the provision of child care services with the following programs to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services that meet the needs of working families (658E(c)(2)(O); 98.12(a); 98.14(a)).**

This list includes agencies or programs required by law or rule, along with a list of optional partners that Lead Agencies potentially would coordinate with over the next 3 years to expand accessibility and continuity of care and to assist children enrolled in early childhood programs in receiving full-day services.

Include in the descriptions the goals of this coordination, such as:

- extending the day or year of services for families;
- smoothing transitions for children between programs or as they age into school;
- enhancing and aligning the quality of services for infants and toddlers through school-age children;
- linking comprehensive services to children in child care or school age settings; or
- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings

Check the agencies or programs the Lead Agency will coordinate with and describe all that apply.

- (REQUIRED) Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns.

Describe the coordination goals and process:

The Lead Agency shares information with federal and state government representatives through licensing staff, collaboration through working groups, and other family advocacy related to quality child care. The coordination process goal is to provide child care programs that are healthy, safe and accessible to families.

As part of the efforts, the Lead Agency coordinates with the municipalities to set the required goals and processes for the provision of high-quality services at their sponsored sites. This coordination looks toward to identify the strengths to be used as a foundation to design services, and the needs to address identified issues and reduce potential risks. The coordination with municipalities takes place through the involvement of a contact person in charge to connect all the areas to be involved in the provision of services and set the meeting with identified resources between both parties. All interactions between the Lead Agency and Municipalities representatives are intended to increase the availability and quality of services.

- (REQUIRED) State Advisory Council on Early Childhood Education and Care (or similar coordinating body) (pursuant to 642B(b)(1)(A)(i) of the Head Start Act).

Describe the coordination goals and process:

Consultation with the Head Start Program Governing Board administered by the Agency was performed to review the goals and procedures included in the State Plan. This board has members with qualifications related to child development, which in turn gather the areas related to education, development, physical and emotional health.

- Check here if the Lead Agency has official representation and a decision-making role in the State Advisory Council or similar coordinating body.

- (REQUIRED) Indian tribe(s) and/or tribal organization(s), at the option of individual tribes.

Describe the coordination goals and process, including which tribe(s) was consulted:

- N/A-There are no Indian tribes and/or tribal organizations in the State.
- (REQUIRED) State/territory agency(ies) responsible for programs for children with special needs, including early intervention programs authorized under the Individuals with Disabilities Education Act (Part C for infants and toddlers and and Part B, Section 619 for preschool).

Describe the coordination goals and process:

The Lead Agency has effective coordination with the agencies responsible for programs for children with special needs, including early intervention programs under the IDEA law. Discussions with the Department of Education and Early Intervention Program (Part C) are ongoing to develop the supply of quality care for vulnerable populations in child care and out-of-school time settings and ensure effective transitions and continuity of care. MOUs were developed to increase access to developmental screenings for infants and toddlers, working with local governments, special projects, and child care providers. Both agencies work in coordination ensuring adequate referrals for assessments, joint individualized planning, and special education services.

The leading agency serves children with special needs by providing equal opportunities for families. But the services children receive are channeled through the Department of Education and in some cases, it is parents who seek private service for their children.

The general objective is that this agreement establishes the needs of children with special needs. Specific objectives work with:

1. Facilitate communication and collaboration by the Leading Agency and the Associate Secretary of Special Education of the Department of Education known as DE by its acronym, Exchange information on the services offered by the agendas that are part of the agreement, guidance to employed officials so requested by either party.
2. Establish procedures that include the necessary documentation to refer to those children who are participants in the Program between the ages of 3 to 18 years and 11 months, who are suspected of having a lag in development.
3. Establish procedures that include the documentation necessary to refer children participating in the DE's Leading Agency services, in cases where the DE understands that part of the individualized plan of the child should include participation in an environment of care and development.
4. Establish a feedback process where both Agendas communicate the results or procedures carried out with the referred ones submitted.

5. Identify areas of common interest in which guidance, training, meetings, and activities of all kinds can be developed. Topics of interest may include the development of children between the ages of 3 to 18 years and 11 months of age, management of specific conditions within this age, methods of intervention, referral procedures, rights of persons with disabilities, parental rights, laws that protect them, services available, among others.
6. Certify the existence of any developmental condition or deficiency in a child participating in THE DE services and who in turn requests or is receiving services through the leading Agency, within the category of special needs.

(REQUIRED) State/territory office/director for Head Start state collaboration.

**Describe the coordination goals and process:**

The Puerto Rico Head Start Collaboration office located in La Fortaleza maintains direct contact with this office and works in conjunction with the Community Alliance initiative. This initiative aims to work together with all Head Start grantees in Puerto Rico in collaboration with the Child Care Program. Monthly meetings are held where the need for families is reviewed, work plans and strategies are discussed to provide the Puerto Rican family with the best childcare service and the best education in early childhood. The team consists of early childhood education experts, directors from all Head Start/Early Head Start grantees, directors of Early Partnership Head Start and Child Care, Family Department, and Leading Agency staff.

(REQUIRED) State agency responsible for public health, including the agency responsible for immunizations.

**Describe the coordination goals and process:**

Ongoing collaboration with the Puerto Rico Department of Health is focused on enforcing the immunization requirement and developing a seamless system to ensure and track developmental screenings and preventive health care for young children.

Lead Agency efforts also promote healthy lifestyles, reproductive health and prenatal care for younger parents that receive child care. The Department of Health has an online system (<https://prir.salud.gov.pr>) for the registration of immunizations that are used by providers to assist families in the compliance of this requirement.

The leading agency in collaboration with the Department of Health holds Health Fairs, where it is offered to the communities that serve the opportunity to acquire the benefits of free vaccination. These fairs are held twice a year, raising awareness of the importance of vaccination in children. The goal is for families and children to acquire information and benefits that will help them in the development of children.

This collaborative agreement is intended to facilitate communication and collaboration between the Child Care, Head Start and Early Head Start programs of the ACUDEN and the Immunization Division of the Assistant Secretary of Family Health and Integrated Services of the Department of Health, in order to adequately monitor the

registration in the PRIR and thus ensure compliance with Law 25. The agreements stipulate that:

1. Both parties will coordinate to exchange information needed to identify and segregate child care centers that receive federal funds through the Leading Agency.
2. The Department of Health will grant the staff of the Leading Agency, previously identified for these purposes, access to the PRIR system in order to monitor compliance with data entry made by Child Care service providers and The Agendas Delegates Head Start/ Early Head Start.
3. The parties shall establish communication links for consultation, guidance or training on registration in the PRIR, in accordance with Law 25 and in areas related to the vaccination service in order to ensure the effectiveness in the completion of these processes.

Annually, prior to the start of the school year, the Puerto Rico Department of Health publishes the Child Vaccination Requirements by Age on its website. These requirements are reported to the centers so that the Director of the Centre should guide the parents. In addition, if necessary, they are informed of the places where free or lower cost vaccination clinics are being carried out. Once children are vaccinated and enter the Child Care Program, the Health Unit provides follow-up to Center Directors to perform to the Department of Health by November 30 of each year a report on the immunization status of each child enrolled in their child center. When parents do not want to vaccinate their children for medical or religious reasons, they are asked to:

- Medical exemption - the child's doctor must complete and sign a certification that the child cannot receive the vaccine(s) because its administration could be detrimental to the child's health. Indicate vaccines that cannot be given and for how long the child should be exempted from being vaccinated.
- Religious exemption - the father and pastor of the congregation to which the family belongs, must go to a notary lawyer, make an affidavit in which to indicate that vaccination is contrary to their religious beliefs.

Both medical certification and religious exemption must be renewed annually.

When parent problems have faced that refuse to vaccinate their children and whose vaccine exemptions do not comply with the provisions of the Department of Health, the Health Unit refers them to the Director of Vaccination of the Department of Health and the Department of Health communicates with them, guides them and often accesses vaccination.

When there are disease outbreaks, the Health Unit receives direct recommendations and written information from The Department of Health's health personnel and is

disseminated among all Care and Development Centers and Program Care Networks. In addition, the information is disseminated through the regional offices of the Department of Family and the Care Vouchers area.



(REQUIRED) State/territory agency responsible for employment services/workforce development.

Describe the coordination goals and process:

The Lead Agency has adopted a dual-generation approach to services which targets children and parents simultaneously in order to promote the economic self-sufficiency, integral development and well-being of working families across generations. It encompasses an engagement in strategic partnerships with relevant agencies and organizations. A close relationship is maintained with the Department of Labor and other workforce development agencies and organizations to disseminate resources and referrals. An example of the efforts are several job fairs across the island where program participants join the event in order to be part of the recruitment and selection process of several industries; helping them in the search of job opportunities. The Lead Agency also has initiatives focus on the financial independence of the participants like "Empoderate Mujer" and "Jefa de Familia".



(REQUIRED) State/territory agency responsible for public education, including prekindergarten (preK).

Describe the coordination goals and process:

The Lead Agency has a close working relationship with the agency responsible for public education, including a kindergarten in which coordination of goals and process is performed to ensure the provision of quality services. The Lead Agency explores the adoption of the Pathway to Third Grade Success framework with its public education agency and Head Start partners to ensure in children school readiness and subsequent success at third grade. The framework proposes effective strategies at different levels to reduce risk factors and strengthen protective factors to reach the following goals:

- Healthy, well-timed births
- Health and development on track Supported and supportive families
- High-quality childcare and education from infancy to school-age (Ex. aligned early learning guidelines; qualified and competent edu-care providers)
- Continuity and smooth transitions in early childhood experiences Effective teaching and learning in K-3 classrooms

At present, children in the Department of Education Pre-K program have access to childcare services through vouchers, direct contractor slots in a contracted child care provider. School grades from second grade to twelve grade.

Pre-K children of the Department of Education have access to childcare services after

the school program through a voucher, contract with a CCDF provider or by a delegation of funds.

(REQUIRED) State/territory agency responsible for child care licensing.

Describe the coordination goals and process:

The Lead Agency keeps direct working coordination with the Licensing Office of the Department of Family, responsible for issuing the license to operate child care center in Puerto Rico. The licensing office promotes an effective communication between agencies and providers to ensure attainment of eligibility and State requirements. The Lead Agency works with the licensing division of the Department of the Family to complete the following goals:

- Ensure up-to-date information on child care supply is available for parents to support quality Child Care
- Improve the capacity of child care licensors

To achieve these goals, the program:

- Updates the list of the licensed Child Care Providers
- Provides Technical assistance to Child Care providers with State and Federal Regulations

Provides opportunities and access to continuing education conferences and/or training sessions in specialized knowledge and competencies.

(REQUIRED) State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs.

Describe the coordination goals and process:

The Lead Agency keeps an effective working relationship with the Puerto Rico Department of Education, which is the agency responsible for the Child and Adult Care Food Program. The child care centers managed by the Agency serve the meals based on the regulations applicable to the Food Program (PACNA). The goals shared and worked by the Lead Agency based on PACNA requirements are associated with menu planning, meal patterns, food safety, and nutrition education among others.

(REQUIRED) McKinney-Vento state coordinators for homeless education and other agencies providing services for children experiencing homelessness and, to the extent practicable, local McKinney-Vento liaisons.

Describe the coordination goals and process:

The Lead Agency has effective coordination established with the Department of the Family, which is the governmental agency in charge to provide child care services

through referrals. This working relationship has been enforced identifying and support families with children that became homeless as a result of the 2017 hurricane disasters.

The Department of the Family has an office to assist homeless families making a priority to provide services for families experiencing a homeless situation. A collaborative agreement was made to offer services to homeless children through referrals; providing the necessary services for appropriate access for children and their families, that lost their homes. In collaboration with DF homeless service providers, the Lead Agency assembling a workgroup to develop a strategic plan, outlining procedures and training that address the specific needs for effectively serving homeless children.



**(REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program.**

**Describe the coordination goals and process:**

The Lead Agency keeps a direct working condition with the Administration for the Socioeconomic Development for the Families under the Puerto Rico Department of Family to coordinate with the Nutritional Assistance Program (NAP) and TANF program.

THE ADSEF will guide and refer to the services offered to participants of the temporary assistance program of family's needs, who are located in employment and receiving the transitional payment for child care service. The referrals will be evaluated by the Leading Agency, as well as determine the eligibility of service aid.



**(REQUIRED) Agency responsible for Medicaid and the state Children's Health Insurance Program.**

**Describe the coordination goals and process:**

The Lead Agency has established a working relationship with staff from primary health care centers and insurance companies to support access to a medical home by participating families ensuring compliance with program regulations. The Lead Agency also coordinates with staff from the Department of Health since they have a service unit for families and children with health problems.



**(REQUIRED) State/territory agency responsible for mental health**

**Describe the coordination goals and process:**

The Lead Agency has established a working relationship with the Mental Health Anti Addiction Services Administration (ASSMCA for its Spanish acronym), responsible for the delivery of the mental health services. The Agency is in the process of setting an agreement to coordinate services for children in need, supported by its mental health consultant to refer cases to the appropriate services. The Lead Agency will continue working with its partners to promote an increased supply integration of child mental health services in primary health care and child care and development settings. It will

collaborate with ASSMCA and other relevant projects (Project LAUNCH) to establish mental health consultation and infant mental health initiatives among all providers.



**(REQUIRED) Child care resource and referral agencies, child care consumer education organizations, and providers of early childhood education training and professional development.**

**Describe the coordination goals and process:**

The Leading Agency created the Early Childhood Resource and Referral Centers, known by the acronym CENTRANA, with the purpose of forming a training entity for parents, guardians, professionals and the community at large. Its goal is to provide an information agency, technical assistance, training, guidance, and materials specialized in early education and make them available to professionals, parents and the community in general.

The areas in which services and resources are offered are child development, language and communication, socio-emotional development, physical development, self-help development, cognitive development, and special education. Through the resources and technical support offered by trained professionals, parents, guardians, professionals and the community at large, service centers enable personal and professional development on issues of relevance to growth and human development, behavioral management, curriculum, planning, preschool pedagogical methodology, health, nutrition, safety among others.

There is currently an agreement of understanding between the Leading Agency and the Municipality Of Vega Baja aims to ensure the continuity and development of the new concept of service delivery to the population that was served by CENTRANA. Under this new modality of services, children are impacted at an early age, parents, professionals and the community and allow the parties to strengthen efforts to improve the quality of services provided to the children's population in the regions in compliance with the quality standards presented in the Code of Federal Regulations, 45 C.F.R. S98.51 for the development of activities for the improvement of child care and the annual work plans designed by the leading Agency for provision of child care and development program services.

For the effective development of the program and the memorandum of understanding between the parties, the following activities include:

1. Design and implementation of the concept through the Municipality of Vega Baja with the technical assistance of the Leading Agency.
2. Technical assistance from the Leading Agency in the areas of child care, health, safety, nutrition, first aid, identification of contagious diseases, identification and prevention of child abuse and the management of children with special needs.
3. Programming of guidance to citizens in general on the scope of the services provided through the program and the alternatives they possess for the development of the capacities of the children in their care.
4. Assistance to parents, guardians, teachers, caregivers and professionals for the

- improvement of quality in the care and development of the children in their care.
5. Monitoring of the program and compliance with the objectives established by federal and state legislation, as well as with the work plan adopted by the Leading Agency for the development of the program.

In the agreements, the leading agency will make available to the Municipality of Vega Baja the materials and equipment necessary for the development of the program services and maintain a detailed record of the assignment of the equipment.

- (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable).

Describe the coordination goals and process:

The Lead Agency has established coordination with all its delegated providers and vouchers participants (Vale). This initiative has been extended to all providers with delegated funds and also the availability of Saturday child care has been offered to them. This after-school effort is a sustained one based on the identified needs on parents of children currently enrolled in the program.

- (REQUIRED) Agency responsible for emergency management and response.

Describe the coordination goals and process:

The Lead Agency has established an emergency operational plan following the passage of hurricanes across the island. This Emergency Operational Plan has been prepared in accordance with the guidelines established by the Department of Homeland Security, the Federal Emergency Management Agency, and in collaboration with the FEMA Emergency. The primary purpose is to protect life and property from the risks and dangers to which our service providers and/or employees may be exposed.

For the fulfillment of the same, training and workshops are coordinated for preparation before, during and after an emergency. The workshops on offer are earthquakes, hurricanes, fire, crisis management and nutrition for children before, during and after the passage of an atmospheric system. Through these training, providers are offered emergency telephones, such as preparing an emergency backpack, family plan preparation, a checklist to check before the hurricane season.

The leading agency maintains an up-to-date directory of all providers by a delegation of funds with their respective addresses, phone numbers, alternate phones, and e-mails. In addition, the directory contains information about whether they have an electric generator, their capacity if they use gas or gasoline. Cisterns, their capacity in gallons. On the other hand, the Agency is leading in collaboration with the licensing office making visits in, during and after the passage of a System to confirm that the centers that have been affected can offer adequate services to families and children. The needs of having one are identified after the passage of an atmospheric system.

*The following are examples of optional partners a state might coordinate with to provide services. Check all that apply.*

- State/territory/local agencies with Early Head Start - Child Care Partnership grants.

**Describe**

The Agency has four Early Head Start - Child Care partnership agreements in place with different Early Head Start grantees, to ensure child care regulations and procedures be implemented to safeguard quality services. The partnerships are:

- Iglesia Bautista de Quintana Inc.
- Municipality of San Sebastian
- Municipality of Mayaguez
- Municipality of Caguas

- State/territory institutions for higher education, including community colleges

**Describe**

The Agency is coordinating with different institutions of post-secondary education to offer services in their respective institutions. The Lead Agency works with the University of Puerto Rico to create alternative study programs leading to a CDA credential or infant-toddler development and care specialized certifications. In Addition, the agency will continue to partner with the University of Puerto Rico for implementation of the Quality Rating and Improvement System (QRIS). This collaboration measures the quality of services that are provided to the participants of the child care centers. The process consists of:

- Develop a plan to carry out the monitoring, the entry of the results (criteria scores) to the database by the mentors and make that information public.
- Use the database you own to add and place the data for each site. In addition, THE UPRRP will provide the Lead Agency with the information that this unit needs or requests in terms of the number of centers where "PASITOS" is implemented and the results thereof.
- It will send an annual report of the assessed centers to the ACUDEN.

- Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services.

**Describe**

The Lead Agency has adopted a dual generation approach to services which targets children and parents simultaneously in order to promote the economic self-sufficiency, integral development and well-being of working families across generations. To integrate this approach into programming ACUDEN will seek guidance from the most current research, developers and practitioners. It's Child Care and Advisory

Committee will include stakeholders from all sectors that will support the planning and implementation of this approach.

The collaborative agreement of the Municipality of San Sebastian together with the university institution \_\_\_\_\_, consists in referring to parents who are studying or participating in short courses, so they can receive child care for their family; according to their eligibility. The above mentioned, as established in Regulation 8687.

[State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.](#)

[Describe](#)

See collaboration with public health system above.

[Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.](#)

[Describe](#)

See collaboration with public health system above.

[State/territory agency responsible for child welfare.](#)

[Describe](#)

The Lead Agency will continue to work closely with the Administration for Families and Children of the Department of the Family to identify and provide child care services to children from foster parents who are working, in job training or school.

[State/territory liaison for military child care programs.](#)

[Describe](#)

N/A

[Provider groups or associations.](#)

[Describe](#)

The Agency coordinates with the Association of Child Care and Development Centers, incorporated to offer services. The entity United Ways of Puerto Rico ( Fondos Unidos) has a telephone line (211) to guide participants about the location of care centers in Puerto Rico, programs outside school hours, summer camps, recreational activities, tutoring, child protective services and support to families.

The Lead Agency maintains open communication and ongoing coordination with the main Child Care provider association.  
Some of the past efforts that the Lead Agency and United Ways had worked together included:

- Comité Asesor Ciudad Amiga de la Ninez
- Alianza Por Los Derechos de la Ninez

These initiatives promote projects that benefit children at an early age.

Parent groups or organizations.

Describe

N/A

Other.

Describe

## 1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds

### Optional Use of Combined Funds:

States and territories have the option to combine CCDF funds with any program identified as required in 1.4.1. These programs include those operating at the federal, state, and local levels for children in preschool programs, tribal early childhood programs, and other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care (658E(c)(2)(O)(ii)). Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers and school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, state/territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a state/territory may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or state/territory prekindergarten requirements in addition to state/territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of

the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start ' Child Care Partnerships:

[https://www.acf.hhs.gov/sites/default/files/occ/acf\\_im\\_ohs\\_15\\_03.pdf](https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf)  
).

**1.5.1 Does the Lead Agency choose to combine funding for CCDF services for any required early childhood program (98.14(a)(3))?**

No (If no, skip to question 1.5.2)

Yes. If yes, describe at a minimum:

a) How you define "combine"

b) Which funds you will combine

c) Your purpose and expected outcomes for combining funds, such as extending the day or year of services available (i.e., full-day, full-year programming for working families), smoothing transitions for children, enhancing and aligning quality of services, linking comprehensive services to children in child care or developing the supply of child care for vulnerable populations

d) How you will be combining multiple sets of funding, such as at the State/Territory level, local level, program level?

e) How are the funds tracked and method of oversight

**1.5.2 Which of the following funds does the Lead Agency intend to use to meet the CCDF matching and MOE requirements described in 98.55(e) and 98.55(h)?**

Note:

The Lead Agency must check at least public and/or private funds as matching, even if preK

funds also will be used.

Use of PreK for Maintenance of Effort: The CCDF final rule clarifies that public preK funds may also serve as maintenance-of-effort funds as long as the state/territory can describe how it will coordinate preK and child care services to expand the availability of child care while using public preK funds as no more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for preK services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

Use of Private Funds for Match or Maintenance of Effort: Donated funds do not need to be under the administrative control of the Lead Agency to qualify as an expenditure for federal match. However, Lead Agencies do need to identify and designate in the state/territory Plan the donated funds given to public or private entities to implement the CCDF child care program (98.55(f)).

N/A - The territory is not required to meet CCDF matching and MOE requirements

Public funds are used to meet the CCDF matching fund requirement. Public funds may include any general revenue funds, county or other local public funds, state/territory-specific funds (tobacco tax, lottery), or any other public funds.

-- If checked, identify the source of funds:

-- If known, identify the estimated amount of public funds that the Lead Agency will receive: \$

Private donated funds are used to meet the CCDF matching funds requirement. Only private funds received by the designated entities or by the Lead Agency may be counted for match purposes (98.53(f)).

-- If checked, are those funds:

donated directly to the State?

donated to a separate entity(ies) designated to receive private donated funds?

-- If checked, identify the name, address, contact, and type of entities designated to receive private donated funds:

-- If known, identify the estimated amount of private donated funds that the Lead Agency will receive: \$

- State expenditures for preK programs are used to meet the CCDF matching funds requirement.

If checked, provide the estimated percentage of the matching fund requirement that will be met with preK expenditures (not to exceed 30 percent):

-- If the percentage is more than 10 percent of the matching fund requirement, describe how the State will coordinate its preK and child care services:

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the matching funds requirement: \$

-- Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents:

- State expenditures for preK programs are used to meet the CCDF maintenance-of-effort requirements. If checked,

-- The Lead Agency assures that its level of effort in full-day/full-year child care services has not been reduced, pursuant to 98.55(h)(1) and 98.15(6).

No

Yes

-- Describe the Lead Agency efforts to ensure that preK programs meet the needs of working parents:

-- Estimated percentage of the MOE Fund requirement that will be met with preK expenditures (not to exceed 20 percent):

-- If the percentage is more than 10 percent of the MOE requirement, describe how the State will coordinate its preK and child care services to expand the availability of child care:

-- If known, identify the estimated amount of preK funds that the Lead Agency will receive for the MOE Fund requirement: \$

## 1.6 Public-Private Partnerships

Lead Agencies are required to describe how they encourage public-private partnerships among other public agencies, tribal organizations, private entities, faith-based organizations, businesses or organizations that promote business involvement, and/or community-based organizations to leverage existing service delivery (i.e., cooperative agreement among providers to pool resources to pay for shared fixed costs and operation) (658E(c)(2)(P)). ACF expects these types of partnerships to leverage public and private resources to further the goals of the CCDBG Act. Lead Agencies are required to demonstrate how they encourage public-private partnerships to leverage existing child care and early education service-delivery systems and to increase the supply and quality of child care services for children younger than age 13, for example, by implementing voluntary shared service alliance models (98.14(a)(4)).

**1.6.1 Identify and describe the entities with which and the levels at which the state/territory is partnering (level-state/territory, county/local, and/or programs), the goals of the partnerships, the ways that partnerships are expected to leverage existing service-delivery systems, the method of partnering, and examples of activities that have resulted from these partnerships (98.16(d)(2)).**

**Program: Resilient children/ Resilient Communities**

**Entity name: Columbia University/ National Center of Disaster Preparedness (NCDP)  
Institute for the development of the Youth (IDJ)**

### **Organization Websites:**

1. <https://ncdp.columbia.edu/>
2. <http://juventudpr.org/en/>

The purpose of the agreement is to authorize the NCDP to work with the regional offices of Humacao and Mayagüez in:

- Work in collaboration with the NCDP and IDJ in the development of new training materials, participate in drills and exercises to improve the preparedness for disasters for temporal homes and child care centers.
- Participate in individual and regional meetings through Puerto Rico Children and Youth Taskforce.
- Complete the Community Preparation Index (IPC) both at the start of the Project and at the end of the project and participate in activities related to that index.

**Department of Family**

**Entity: Save the Children Federation, Inc.**

**Organization website: <https://www.savethechildren.org/>**

The purpose of this Memorandum of Understanding (MOU) is to confirm agreements between the Government of Puerto Rico, acting through the Department of Family (DoF) and Save the Children Federation, Inc. (STC).

Since the passing of Hurricane Maria on September 20, 2017, Puerto Rico has been struggling with basic services such as shelter, water, electricity, and food. Amongst those most affected are the children of Puerto Rico. The priority of this agreement is to make sure that the needs of the children are being met, that they can get back to a regular routine as soon as possible, and to help the children emotionally recover from the catastrophe, hence having a positive impact on their lives.

This MoU sets forth the general understanding and specific responsibilities of each party relating to key aspects of the governance and operation of supporting systems strengthening to DoF personnel through tailored training on psychosocial support and preparedness. The training aims to provide DoF staff with tools and techniques that can be utilized to support the immediate and longer-term recovery of children and their families.

As part of its objective to support systems strengthening of government departments working with children and their families in Puerto Rico, Save the Children will train Department of Family staff on:

Save the Children's signature psychosocial support programs, Journey of Hope, which use cooperative play, literacy, discussion, drama, and art to help children and caregivers to explore and normalize their emotions, especially following stressful events

In addition to using arts for healing, HEART also uses arts-based creative learning methods to make education more interactive and fun in math, vocabulary, literacy, history, and other subject areas. Basics of Psychological First Aid (PFA).

Child Care Emergency Preparedness Planning with Head Start and Early Head Start staff. The CCEP supports child care facility staff to be better prepared for future emergencies.

The Department of Family (DoF) work in cooperation with STC in order for STC to provide training to DoF staff on psychosocial support and preparedness programs that will help Puerto Rican families recover from Hurricane Maria and be better prepared for future emergencies. Both parties shall work together to support the capacity building of DoF staff and programs.

### **Cooperativa de Servicios de Evaluación e Investigación**

The purpose of the Market Rate Survey is to assess market child care rates among child care centers and homes licensed by the Department of Family. These rates will then serve as a guide to provide subsidized child care to qualifying families according to their annual income and the number of family members.

The Market Rate Survey described will collect rates data for different children's age categories: infants (birth thru 18 months) and toddlers (19 months thru 2 years and 11 months), preschoolers (3 years thru 4 years and 11 months), and special needs children

(until 18 years and 11 months). It also takes into account if services are provided on a full time or part-time basis. The rate that lies at the 75th percentile is selected within each category.

The objectives that will guide this research were the following:

- Complete the selection of the sample
- Design the survey instrument and the associated database
- Provide training to the ACUDEN personnel that will collaborate in the data collecting process
- Transfer Market Rate Survey data collected to an SPSS database.
- Verify collected data examining the database vis a vis data collection documents and note
- Develop a sliding fee scale taking into account the family's annual income and the number of family members.
- Describe the procedure of developing a sliding fee scale in detail so that the ACUDEN can replicate the process in future Market Rate Surveys.

Develop and describe in detail the process of determining a family's child care copayments (reduced payments).

## 1.7 Coordination With Local or Regional Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system of local or regional child care resource and referral (CCR&R) organizations that is coordinated, to the extent determined by the state/territory, by a statewide public or private non-profit, community-based or regionally based, lead child care resource and referral organization (such as a statewide CCR&R network) (658E(c)(3)(B)(iii); 98.52).

- If Lead Agencies use CCDF funds for local CCR&R organizations, the local or regional CCR&R organizations supported by those funds must, at the direction of the Lead Agency, provide parents in the State with consumer education information concerning the full range of child care options (including faith-based and community-based child care providers), analyzed by provider, including child care provided during non-traditional hours and through emergency child care centers, in their area.

- To the extent practicable, work directly with families who receive assistance to offer the families support and assistance to make an informed decision about which child care providers

they will use to ensure that the families are enrolling their children in the most appropriate child care setting that suits their needs and one that is of high quality (as determined by the Lead Agency).

- Collect data and provide information on the coordination of services and supports, including services under Section 619 and Part C of the Individuals with Disabilities Education Act;

- Collect data and provide information on the supply of and demand for child care services in areas of the state and submit the information to the State;

- Work to establish partnerships with public agencies and private entities, including faith-based and community-based child care providers, to increase the supply and quality of child care services in the state and, as appropriate, coordinate their activities with the activities of the state Lead Agency and local agencies that administer funds made available through CCDF (98.52(b)).

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

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, what services are provided and how it is structured and use section 7.6.1 to address the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

#### **1.7.1 Does the Lead Agency fund a system of local or regional CCR&R organizations?**

No. The state/territory does not fund a CCR&R organization(s) and has no plans to establish one.

Yes. The state/territory funds a CCR&R system. If yes, describe the following:

a) What services are provided through the CCR&R organization?

b) How are CCR&R services organized, include how many agencies, if there is a statewide network and if the system is coordinated?

## 1.8 Disaster Preparedness and Response Plan

Lead Agencies are required to establish a Statewide Child Care Disaster Plan (658E(c)(2)(U)). They must demonstrate how they 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 a major disaster or emergency (as defined by Section 102 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5122)'through a Statewide Disaster Plan that, for a State, is developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(l)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i))) or similar coordinating body (98.16(aa)).

### **1.8.1 Describe how the Statewide Child Care Disaster Plan was developed in collaboration with the State human services agency, the State emergency management agency, the State licensing agency, the State health department or public health department, local and State child care resource and referral agencies, and the State Advisory Council on Early Childhood Education and Care or similar coordinating body:**

The Lead Agency has established an emergency operational plan following the passage of hurricanes across the island. This Emergency Operational Plan has been prepared in accordance with the guidelines established by the Department of Homeland Security, the Federal Emergency Management Agency, and in collaboration with the FEMA Emergency. The primary purpose is to protect life and property from the risks and dangers to which our service providers and/or employees may be exposed.

For the fulfillment of the same, training and workshops are coordinated for preparation before, during and after an emergency. The workshops on offer are earthquakes, hurricanes, fire, crisis management and nutrition for children before, during and after the passage of an atmospheric system. Through these training, providers are offered emergency telephones, such as preparing an emergency backpack, family plan preparation, a checklist to check before the hurricane season.

The leading agency maintains an up-to-date directory of all providers by a delegation of funds with their respective addresses, phone numbers, alternate phones, and e-mails. In addition, the directory contains information about whether they have an electric generator, their capacity if they use gas or gasoline. Cisterns, their capacity in gallons. On the other hand, the Agency is leading in collaboration with the licensing office making visits in, during and after the passage of a System to confirm that the centers that have been affected can offer adequate services to families and children. The needs of having one are identified after

the passage of an atmospheric system.

## Purpose

The purpose of the Joint Operational Catastrophic Incidents Plan (JOCIP) is to define the operational functions, roles and responsibilities of federal and state agencies before, during and after an incident that is or could be classified as a catastrophic incident. This plan is designed to establish a synchronized operational structure between the federal government and the state government to carry out activities of preparedness, response, recovery, and mitigation for incidents that have the potential or have caused serious damage to the population and infrastructure of Puerto Rico. The JOCIP establishes the operational, logistical and administrative procedures that will be carried out from the identification of a potential threat for the island until the recovery process after a disaster.

## Scope

The JOCIP is a plan that it is designed to allow federal government represented by the Federal Emergency Management Agency (FEMA) and the state government represented by the Puerto Rico Emergency Management Agency (PREMA), state agencies and private sector can work together, before, during and after an incident with catastrophic consequences such as a hurricane category 4 or 5. This document contains the organizational structures that FEMA and PREMA will be carried out during the different phases of the emergency. FEMA will coordinate with federal agencies under the umbrella of the US Department of Homeland Security and will work in coordination with the other branches of the Federal Government of the United States that will provide support during the incident. For its part, PREMA will coordinate with the State agencies the resources needed to prepare for, respond to and recover from a catastrophic event in Puerto Rico.

## Roles and Responsibilities.

The federal, state and municipal governments, the private sector, and the non-governmental organizations will have the following roles and responsibilities by the operational phases described above.

The Federal Government through the corresponding agencies will provide the funds and assistance necessary to the state/territory under federal laws and directives of disaster assistance.

The State Government will be responsible for issuing the request for an emergency or disaster declaration to the Federal Government for the activation of the support resources. In coordination with the state governmental agencies, the municipalities and the non-governmental organizations will be responsible for activating their emergency operations plans and the Joint Operational Catastrophic Incident Plan.

The Secretary/Director Executive/Commissioner of each agency/office will be responsible for carrying out the activities that are described in this plan and take the executive decisions necessary to fulfill the plan objectives.

## Information Sharing

Effective communications between all the emergency operations partners will be maintained at all times. All Notification concerning the status of the emergency “Situational Awareness” shall be transmitted to the situation planning unit within the planning section of the ICS.

The Government will make every effort to use all means of communications to keep the population well Notified about the emergency situation and potential risks concerning the incident. The means of communications are not limited to the use of radio broadcast, social media, websites, TV ads or others that may be available.

## Training

As part of the implementation of the *Joint Operational Catastrophic Incident Plan*, the government is responsible for carrying out training based on the JOCIP to all the governmental employees, including all state agencies. The training will be based on the implementation and execution of this plan with an emphasis on the roles and responsibilities they will have to carry out before, during and after a catastrophic event.

## Exercises

To validate the effectiveness of this plan JOCIP, there will be a series of exercises in compliance with the *Homeland Security Exercise and Evaluation Program (HSEEP)* of the Department of Homeland Security (DHS). The government of Puerto Rico will perform a series of exercises during the year that will be designed to validate different parts of this plan in its different phases of emergency from pre-incident to recovery. Each agency shall develop at least two Table Top Exercises and one Full-Scale Exercise annually.

## Plan Maintenance

This plan is designed as a living and interactive document subject to revisions and continuous changes that will depend not only on the lessons learned in previous events but also those incidents or events that occur anywhere in the world and that offer consideration that we should integrate into our plan. Also, revisions and changes to this plan will result from scientific studies and the development of adaptable technologies that are continuously carried out in universities and scientific research centers as well as those changes suggested by the new federal regulations, presidential guidelines and policies established by the federal government and its national security agencies as well as local ones. Likewise, the results and the subsequent evaluation of each exercise or simulation that is developed to validate the knowledge of our responders and officials responsible for the emergency management in PR will be taken into consideration for purposes of reviewing and updating this document.

file:///C:/Users/jose.fuentes/Downloads/Plan Emergencias%202015%20(2).pdf

**1.8.2 Describe how the Statewide Disaster Plan includes the Lead Agency's guidelines for the continuation of child care subsidies and child care services, which may include the provision of emergency and temporary child care services during a disaster and temporary operating standards for child care after a disaster:**

Within the Statewide Disaster Plan, there is the provision for Facilitating the Development of Access to Child Care. This requires the Lead Agency to work with the License Office to ensure that healthy and safe childcare arrangements are accessible to meet the needs of the children and parents after the disaster. Alternative childcare arrangements would be allowed to protect the health and safety of children, as well as promote family and community efforts to recover from natural disasters.

**1.8.3 Describe Lead Agency procedures for the coordination of post-disaster recovery of child care services:**

The Lead Agency post disaster efforts include the reestablishment of child care services by allowing the flexibility for Child Care Program meeting basic health and safety standards to reopen or expand capacity.

The Lead Agency developed procedures to ensure child care services can continue after a disaster. Some of the procedures are:

1. Contact child care providers in order to assess damage and needs.
2. If services providers were unable to be accessed by phone, the Lead Agency will coordinate to visit services providers physically.
3. Finance Department will process manual payments to services providers if needed in order to continue the services to children.

**1.8.4 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place-evacuation; relocation; shelter-in-place; lockdown; communications with and reunification of families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions:**

The Child Care providers receiving CCDF funds have an annual inspection or monitoring to ensure compliance with having a Disaster and Emergency Preparedness Plan in place that covers all topics listed above. State regulations require that CCDF providers have a Disaster and Emergency Preparedness in place. Failure to maintain a plan may result in the termination from the CCDF subsidy program.

**1.8.5 Describe how the Lead Agency ensures that providers who receive CCDF funds have the following procedures in place for child care staff and volunteers-emergency preparedness training and practice drills as required in 98.41(a)(1)(vii):**

Licensed, regulated and registered child care providers receiving CCDF are required to complete Emergency Preparedness training as part of orientation. The training covers all topic areas listed above. CCDF providers are required to utilize the of all professional development activities. The law and regulations of the Licensing Office require that the center staff receive continuous training on the management of an emergency. Also, monthly we have drills to maintain the practice of the training. The Area of Health and Safety monitoring visits, the provider's compliance is verified, requesting evidence of the training and the registration of drills.

**1.8.6 Provide the link to the website where the statewide child care disaster plan is available:**

Providers, families and the community in general can obtain information about disasters on the website:

<http://www.agencias.pr.gov/agencias/aemead/Pages/Home.aspx>

## 2 Promote Family Engagement through Outreach and Consumer Education

Lead Agencies are required to support the role of parents as child care consumers who need information to make informed choices regarding the services that best suit their needs. A key purpose of the CCDBG Act is to 'promote involvement by parents and family members in the development of their children in child care settings' (658A(b)). Lead Agencies have the opportunity to consider how information can be provided to parents through the child care assistance system, partner agencies, and child care consumer education websites.

The target audience for the consumer education information includes three groups: parents receiving CCDF assistance, the general public, and when appropriate, child care providers. In this section, Lead Agencies will address how information is made available to families to assist them in accessing high-quality child care and how information is shared on other financial assistance programs or supports for which a family might be eligible. In addition, Lead Agencies will certify that information on developmental screenings is provided and will describe how research and best practices concerning children's development, including their social-emotional development, is shared.

In this section, Lead Agencies will delineate the consumer and provider education information related to child care, as well as other services, including developmental screenings, that is made available to parents, providers, and the general public and the ways that it is made available. This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency and the manner in which it links to the national website and hotline. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

## 2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities

The Lead Agency is required to describe how it provides outreach and services to eligible families with limited English proficiency and persons with disabilities and to facilitate the participation of child care providers with limited English proficiency and disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

### **2.1.1 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families for whom English is not their first language. Check all that apply.**

- Application in other languages (application document, brochures, provider notices)
- Informational materials in non-English languages
- Website in non-English languages
- Lead Agency accepts applications at local community-based locations
- Bilingual caseworkers or translators available
- Bilingual outreach workers
- Partnerships with community-based organizations
- Other.

**Describe:**

The ACUDEN webpage has the information in Spanish, due to this being the principal language in Puerto Rico. Moreover, the page has the capacity to translate the information into English and other languages in order to make it more accessible to the different populations.

Families interested in requesting services can fill out the applications at all of the child care centers by fund allocation and administered by ACUDEN, in addition to all of the regional offices of the Department of Family. At these locations, they can receive orientation on the services that are offered and assistance in completing the application, should this be required.

At the majority of the offices of the Child Care Program, there is personnel that can at least communicate in both of the most used languages in Puerto Rico, that is Spanish

and English, to thereby facilitate communication with applicants.

**2.1.2 Check the strategies the Lead Agency or partners utilize to provide outreach and services to eligible families with a person(s) with a disability. Check all that apply.**

- Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities
- Websites that are accessible (e.g. Section 508 of the Rehabilitation Act)
- Caseworkers with specialized training/experience in working with individuals with disabilities
- Ensuring accessibility of environments and activities for all children
- Partnerships with state and local programs and associations focused on disability-related topics and issues
- Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers
- Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies
- Availability and/or access to specialized services (e.g. mental health, behavioral specialists, therapists) to address the needs of all children
- Other.

**Describe:**

Assessments and therapeutic services in the area of mental health are coordinated through municipal and state agencies.

The Program webpage is written and designed to access information in a quick and simple manner to ensure that people with disabilities face minimal difficulties. This page is also certified by the Puerto Rico Technological Assistance Program as provided by the State Accessibility Act, No. 006-2017 - pursuant to Law 229 of 2003.

Every service provider in the program is legally obligated to guarantee adequate access and services to children with special needs. For this, technical assistance is coordinated through the Childhood Development Unit along with the Advancing Together ("Avanzando Juntos") Program of the Department of Health. This coordination helps the provider to provide adequate accessibility, adaptation of educational curricula, and coordination of health services for children with special needs through the Department of Health.

Training sessions and technical assistance are coordinated through the Advancing

Together ("Avanzando Juntos") Program of the Department of Health and the Deputy Secretary of the Department of Education to assist providers and employees in the proper practices for children with special needs.

Collaborative agreements have been established with the Department of Health and the Department of Education to provide assistance to children served at the child care centers.

Assessments and therapy A través de agencias municipales y estatales de se coordinan evaluaciones y servicios terapéuticos en el área de salud mental para nuestros niños.

## 2.2 Parental Complaint Process

The Lead Agency must certify that the state/territory maintains a record of substantiated parental complaints and makes information regarding such complaints available to the public on request (658E(c)(2)(C); 98.15(b)(3)). Lead Agencies must also provide a detailed description of the hotline or similar reporting process for parents to submit complaints about child care providers; the process for substantiating complaints; the manner in which the Lead Agency maintains a record of substantiated parental complaints; and ways that the Lead Agency makes information on such parental complaints available to the public on request (98.16; 98.32).

### **2.2.1 Describe the Lead Agency's hotline or similar reporting process through which parents can submit complaints about child care providers, including a link if it is a Web-based process:**

ACUDEN has established a phone number, (787)721-1951, where anyone may contact the agency to share their concern or complaint regarding the child care services provided by the participating providers. This phone number is also promoted on the publicly available website, [www.saludyseguridad@familia.pr.gov](mailto:www.saludyseguridad@familia.pr.gov). The webpage also provides the opportunity to submit any situation that one wishes to bring to ACUDEN's attention in writing. This is through the "Contact Us" section where the person fills out a written form and this generates an e-mail that is received by the Administration Office. This office evaluates and handles it along with the Program offices, as needed.

**2.2.2 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints regarding CCDF providers, including whether the process includes monitoring:**

Any complaint received is evaluated and classified according to urgency. Any complaint that puts the children's safety at risk takes priority. In the event that it is a matter that is related to any negligence or child abuse, the *Institutional Abuse Protocol* is activated, which requires immediately documenting and referring the case to the Administration of Families and Children (ADFAN), as soon as the information is received. This agency of the Department of Family is who by law has the obligation and authority to investigate, intervene, and, if necessary, remove providers from the child care centers that have infringed upon the children's safety. ADFAN, through the Institutional Abuse Unit (UMI), which can be contacted at 1-800-981-8333, establishes the urgency of the situation and has a term for action of between two hours and five hours depending on the severity of the issue. The UMI informs us of the results of its investigation to, if necessary, remove the provider from the services provided by the Child Care Program. Whenever a situation like this arises, the Licensing Office is also alerted for the pertinent actions, which may include the license cancellation, if necessary. Other complaints that do not put a child's life at risk but reflect noncompliance with the required standards are evaluated and identified by the Program Director within a term of no more than five business days to thereby be handled by the program areas as needed. To handle these complaints, Health and Safety or Eligibility monitors are used to intervene, and corrective plans are established to mitigate them. Should the provider fail to comply with the plans without any justification, their eligible provider certification is cancelled and the children that they attend to are placed with another eligible provider according to the needs and choice of their parents.

**2.2.3 Describe the Lead Agency's process and timeline for screening, substantiating and responding to complaints for non-CCDF providers, including whether the process includes monitoring:**

Any complaint received with regard to a service provider that does not receive CCDF is evaluated to ensure that they are not putting the children's life at risk and is referred immediately to the Licensing Office within five business days for its attention. The Licensing Office activates its monitoring protocol to attend to the complaint and based on its resources sends its inspectors to visit the centers to verify and determine whether license removal is appropriate. If so, we are informed of the results. In those cases in which ACUDEN receives a complaint that reflects an imminent danger of negligence or child abuse, even if it does not receive CCDF funding, the Institutional Abuse Protocol is activated and it is referred to ADFAN to be handled as described above, in addition to reporting it to the Licensing Office.

#### **2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:**

Any complaint received by the Program that is identified as substantial, meaning that it may put the child's health and safety at risk, is documented in the provider's record to reflect all of the actions by ACUDEN, among these the referral and the results of the investigation by the Institutional Abuse Unit (UMI). The central registry of the Institutional Abuse Unit retains the case record for five years from the closing of the case. In turn, the lead agency, ACUDEN, retains the record for a maximum period of six years, pursuant to the record management protocol.

#### **2.2.5 Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3:**

The webpage of the Child Care Program publishes a directory of providers detailing the provider information, from the last monitoring performed by the Program to its substantial complaints, such as deaths of children at its center, positive abuse findings, and severely injured children. Likewise, the information may be obtained at the central offices of ACUDEN.

#### **2.2.6 Provide the citation to the Lead Agency's policy and process related to parental complaints:**

El Regulation 8687 of the Child Care Program, in Article 4.2, establishes that ACUDEN shall maintain an identified phone line and e-mail so that parents and the community at large can contact the lead agency to report any irregularity or concern regarding the services that the providers provide. Moreover, it establishes that anyone may visit the regional offices of the program to personally express their concern or complaint with regard to the services.

## 2.3 Consumer Education Website

States and Territories are required to provide information to parents, the general public, and when applicable, child care providers through a State website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III)). The website must include information to assist families in understanding the policies and procedures for licensing child care providers. The website information must also include provider-specific information, monitoring and inspection reports for the provider, the quality of each provider (if such information is available for the provider), and the availability of the provider (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To assist families with any additional questions, the website should provide contact information for local child care resource and referral organizations and any other agencies that can assist families in better understanding the information on the website.

To certify, respond to questions 2.3.1 through 2.3.10 by describing how the Lead Agency meets these requirements and provide the link in 2.3.11. If the Lead Agency has not fully implemented the Consumer Education website elements identified in Section 2.3, then respond to question 2.3.12. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved will require a CCDF Plan amendment.

### **2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:**

ACUDEN's website is available through [www.acuden.pr.gov](http://www.acuden.pr.gov). This facilitates access from any device with internet connection, including mobile devices. This site is designed so that the general public can easily access it, since it specifically identifies the information about the Child Care Program. The design is appealing yet simple, using visual strategies to classify the information in a simple manner. The information provided is written in a simple and concise manner so that individuals of different educational levels can understand it and benefit from it.

### **2.3.2 Describe how the website ensures the widest possible access to services for families that speak languages other than English (98.33(a)):**

The principal language in Puerto Rico is Spanish. Therefore, the webpage is written in this language. However, for those participants that require access to the information in another language, the page has a button option to change the language and facilitate its interpretation.

### **2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities:**

The agency's website provides the information on the Child Care Program for access by the general public, but it is also reviewed and certified by the Puerto Rico Technological Assistance Program as provided by the State Accessibility Act, No. 006-2017 – pursuant to Law 229 of 2003. The Technological Assistance Program is the agency that evaluates and guarantees that the webpages of the government and state agencies comply with the proper accessibility for persons with disabilities.

### **2.3.4 Lead Agency processes related to child care.**

A required component of the consumer education website is a description of Lead Agency policies and procedures relating to child care (98.33(a) (1)). This information includes a description of how the state/territory licenses child care, a rationale for exempting providers from licensing requirements, the procedure for conducting monitoring and inspections of providers, and the policies and procedures related to criminal background checks.

- a) Provide the link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in section 5.3.6:

The agency's website

<http://www.agencias.pr.gov/agencias/secretariado/Licenciamiento/Pages/default.aspx>, publishes the Regulation and the procedures used by the Child Care Program and the Licensing Office to provide orientation to, evaluate, and license a provider as eligible to provide child care services in accordance with the provisions of state and federal laws.

This information is described in detail and in simple language in section of the webpage identified as "Providers". The link to access the Licensing Office is also included.

b) Provide the link to the procedure for conducting monitoring and inspections of child care providers, as described in section 5.3.2:

[www.acuden.pr.gov](http://www.acuden.pr.gov)

c) Provide the link to the policies and procedures related to criminal background checks for staff members of child care providers and the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in sections 5.4.1 and 5.4.11:

<http://www.acuden.pr.gov/Programa%20Child%20Care/Documents/Salud%20y%20Seguridad.pdf>

### 2.3.5 List of providers

The consumer education website must include a list of all licensed providers and, at the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

a) Provide the website link to the searchable list of child care providers:

<http://www.acuden.pr.gov/Directorio/Documents/Dpreoveedores1.pdf>

b) In addition to the licensed providers that are required to be included in your searchable list, which additional providers are included in the Lead Agency's searchable list of child care providers (please check all that apply):

- License-exempt center-based CCDF providers
- License-exempt family child care (FCC) CCDF providers
- License-exempt non-CCDF providers
- Relative CCDF child care providers
- Other.

## Describe

c) Identify what informational elements, if any, are available in the searchable results.  
Note: Quality information (if available) and monitoring results are required on the website but are not required to be a part of the search results.

### Licensed Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

### License-Exempt, non-CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

### License-Exempt CCDF Center Based Providers

- Contact Information
- Enrollment Capacity

- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

#### License-Exempt CCDF Family Child Care

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

#### Relative CCDF Providers

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

Other.

Describe:

- Contact Information
- Enrollment Capacity
- Years in Operation
- Provider Education and Training
- Languages Spoken
- Quality Information
- Monitoring Reports
- Other.

Describe:

**2.3.6 Lead Agencies must also identify specific quality information on each child care provider for whom they have this information. The type of information provided is determined by the Lead Agency, and it should help families easily understand whether a provider offers services that meet Lead Agency-specific best practices and standards or a nationally recognized, research-based set of criteria. Provider-specific quality information must only be posted on the consumer website if it is available for the individual provider.**

a) How does the Lead Agency determine quality ratings or other quality information to include on the website?

- Quality rating and improvement system
- National accreditation
- Enhanced licensing system
- Meeting Head Start/Early Head Start requirements
- Meeting prekindergarten quality requirements
- School-age standards, where applicable
- Other.

Describe

b) For what types of providers are quality ratings or other indicators of quality available?

Licensed CCDF providers.

Describe the quality information:

*Pasitos* is a quality measurement system designed to evaluate the providers and their compliance with the quality standards. Based on the results of said evaluation, intervention strategies and work plans are designed in order to provide training sessions and individual technical assistance to thereby result in improvements in the quality of child care services.

Licensed non-CCDF providers.

Describe the quality information:

All child care centers that provide services in Puerto Rico must comply with the health, safety, and quality requirements established in the Licensing Act, Law 173 (2016). This law requires fulfillment of such requirements as emergency plans, fire department licenses, the staff having CPR certifications, complying with an evaluation of the facilities, requiring educational and professional training for teachers, assistants, and directors, among others. The licensing of a child care center is based on the minimum quality accepted by the Commonwealth in the provision of child care services.

License-exempt center-based CCDF providers.

Describe the quality information:

In Puerto Rico, the only child care centers that can operate without a license are Head Start and Early Head Start centers. This is because they are obligated to comply with high standards of quality stipulated by the federal government.

License-exempt FCC CCDF providers.

Describe the quality information:

License-exempt non-CCDF providers.

Describe the quality information:

Relative child care providers.

Describe the quality information:

Other.

Describe

**2.3.7 Lead Agencies are required to post monitoring and inspection reports on the consumer education website for each licensed provider and for each non-relative provider eligible to provide CCDF services on the consumer education website. These reports must include results of required annual monitoring visits and visits due to major substantiated complaints about a provider's failure to comply with health and safety requirements and child care policies. The reports must be in plain language and be timely to ensure that the results of the reports are available and easily understood by parents when they are deciding on a child care provider. Lead Agencies must post at least 3 years of reports when available, going forward (not retrospectively), beginning October 1, 2018.**

Certify by responding to the questions below:

a) What is the Lead Agency's definition of plain language and describe the process for receiving feedback from parents and the public about readability of reports.

It is in easily understood language for a population with basic reading and writing skills at a level that does not surpass the ninth-grade level. Likewise, the reports on providers that are published on the website are in easily understood language for the general public. Through the agency's webpage, parents or the community can communicate via e-mail in the event that questions arise and send suggestions.

b) Are monitoring and inspection reports in plain language?



If yes,

include a website link to a sample monitoring report.

<http://www.acuden.pr.gov>



If no,

describe how plain language summaries are used to meet the regulatory requirements and include a link to a sample summary.

c) Check to certify what the monitoring and inspection reports and/or their plain language summaries include:

Date of inspection

Health and safety violations, including those violations that resulted in fatalities or serious injuries.

Describe how these health and safety violations are prominently displayed.

In the provider directory detailed information is provided on the monitoring actions of the provider. Information is also included on whether it has had incidents of institutional abuse, deaths, or severely injured children.

Corrective action plans taken by the State and/or child care provider.

Describe

Should a corrective plan be required for the provider to comply with the standards of the Program, it is published along with the health and safety form that is used for monitoring, in addition to the follow-up reports that are given to it until it manages to fully comply.

d) The process for correcting inaccuracies in reports.

All of the results of the monitoring actions are discussed with the provider and signed by said provider. No result that has not been discussed and signed is published, thereby minimizing possible errors, given that it provides space for identifying them and discussing the between the parties and correcting any disagreement. In the event that any error in the results of the monitoring actions is published, the provider or someone from the community can report it through the webpage or by contacting the Health and Safety Area for evaluation and proper correction.

e) The process for providers to appeal the findings in reports, including the time requirements, timeframes for filing the appeal, for the investigation, and for removal of any violations from the website determined on appeal to be unfounded.

The process for correcting findings on the part of the Health and Safety Area is a simple one in which the provider informs in writing, electronically or by letter, addressed to the Program Director, the citation that they are appealing and it is immediately corroborated with the Program records. These records have the last health and safety form that was used to complete the report that is published. It is important to point out that these results are discussed with the provider and at the time of the visit they sign the evaluation document (form) and a corrective plan is agreed to and established, if necessary. If it is a data entry error, it is corrected immediately; but if the provider alleges not being in agreement with the results on the form, it is assigned to the area supervisor to perform a second evaluation to determine whether it is necessary to remove the finding and update the information on the webpage.

Should the disagreement not be settled, the provider can appeal through the Adjudicative Board of the Department of Family, pursuant to Regulation #8687 of the Child Care Program, Chapter 6, Article 6.1. The term for the provider to formally file a petition in writing must be no greater than 15 days from the citation. ACUDEN shall have a

maximum of 30 days to evaluate the matter and take the pertinente action.

In the event that it is the provider's understanding that the report by ADFAN (abus) is not correct, it has the right to appeal by filling a claim directly with said agency. ADFAN is the sole agency taht can remove any citation after the claim has been handled and investigated by them.

f) How reports are posted in a timely manner. Specifically, provide the Lead Agency's definition of 'timely' and describe how it ensures that reports are posted within its timeframe. Note: While Lead Agencies define 'timely,' we recommend Lead Agencies update results as soon as possible and no later than 90 days after an inspection or corrective action is taken

The Child Care Program performs continuous monitoring to comply with that required by the CCDF law of at least visiting the providers once a year. The monitoring report, known as the Health and Safety Form, is published on the webpage within 30 days of being completed. That form is kept on the webpage until it is updated as required by the visits that are made to the provider. In the cases in which the provider has a corrective action plan, the follow-up is at least monthly in order to ensure its progress and compliance.

g) Describe the process for maintaining monitoring reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)).

The provider reports updated and performed by the monitors remain published on the webpage in order to be used by parents in selecting their child's provider; however, the lead agency retains a physical and electronic record with the monitoring history performed for each provider while it is active and for six years after having discontinued the services. For the purposes of the webpage and in order to maintain easy accessibility to information, the parent may view only the latest monitoring action for no more than one year, as long as it is not in a corrective plan, since, if that is the case, the monitoring actions and follow-ups remain ongoing until it is corrected. If the parent requests it, additional information on past monitoring actions can be provided.

h) Any additional providers on which the Lead Agency chooses to include reports. Note - Licensed providers and CCDF providers must have monitoring and inspection reports posted on their consumer education website.

License-exempt non-CCDF providers

Relative child care providers

Other.

Describe

**2.3.8 Aggregate data on serious injuries, deaths, and substantiated cases of child abuse that have occurred in child care settings each year must be posted on the consumer education website. This aggregate information on serious injuries and deaths must be organized by category of care (e.g., center, FCC, etc.) and licensing status for all eligible CCDF provider categories in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. The aggregate report should not list individual provider-specific information or names.**

Certify by providing:

a) The designated entity to which child care providers must submit reports of any serious injuries or deaths of children occurring in child care (98.16 (ff)) and describe how the Lead Agency obtains the aggregate data from the entity.

The Administration of Families and Children (ADFAN) and its Institutional Abuse Unit (UMI) is part of the Department of Family. ADFAN is the agency responsible for determining when a serious injury exists that requires intervention by the State in addition to being who maintains the records of serious injuries and deaths at child care centers. ADFAN provides us with the information and certifies those providers that have had infractions, this can be accessed electronically at <http://www.agencias.pr.gov/agencias/adfan/Pages/default.aspx>

b) The definition of "substantiated child abuse" used by the Lead Agency for this requirement.

**Abuse:** any intentional act or omission in which the minor's father, mother, or caregiver engages that is of such a nature that it causes or puts the minor at risk of suffering harm or detriment to their physical, mental, and/or emotional health and integrity, including sexual abuse, as defined in Law 246-2011. Also, engaging in obscene behavior and/or the use of the minor to execute obscene behavior; allowing another individual to cause or put the minor at risk of suffering harm or detriment to their physical, mental, or emotional health or integrity; voluntary abandonment of a minor; the father, mother, or caregiver exploiting the minor or allowing another to do so by obligating them or permitting them to perform any act, including, but not limited to, using the minor to execute obscene behavior, in order to profit or receive any other benefit; engaging in behavior that, if processed criminally, would constitute a crime against the physical, mental, or emotional health and integrity of the minor, including sexual abuse, shall be considered abuse. Likewise, a minor shall be considered a victim of abuse if the father, mother, or caregiver has engaged in behavior constituting domestic violence in the presence of the minors, as defined in Law 54-1989, as amended.

**Institutional Abuse:** any act engaged in by an operator of a foster home or any employee or officer of a public or private institution Protocol for Reporting Incidents of Suspected Abuse - ACUDEN 9 [ sic] that provides child care services during a twenty-four-hour (24) day or part of such or that has a minor under its control or custody for their care, education, treatment, or detention, that causes harm or puts the minor at risk of suffering harm to their physical, mental, and/or emotional health and integrity, including, but not limited to, sexual abuse; engaging in obscene behavior, known or suspected, or resulting from the prevailing policy, practices, and conditions at the institution in question; exploiting a minor or allowing another individual to do so, including, but not limited to, using the minor to execute obscene behavior, in order to profit or receive any other benefit.

c) The definition of "serious injury" used by the Lead Agency for this requirement.

**Physical:** any non-accidental trauma, injury, or condition, including a lack of food that, if not dealt with, may result in death, disfigurement, illness, or temporary or permanente disability of any Protocol for Reporting Incidents of Suspected Abuse - ACUDEN 7 [ sic] part or function of the body, including lack of food. Moreover, the trauma, injury, or condition may be the product of a single episode or several episodes.

**Mental or Emotional Harm:** the undermining of the intellectual or emotional capacity of the minor within that considered normal for their age and in their cultural milieu. Moreover, it shall be considered that emotional harm exists whenever there is evidence that the minor recurrently manifests or displays behaviors such as: fear, feelings of helplessness or despair, of frustration and failure, anxiety, feelings of insecurity, isolation, aggressive or regressive behavior, or any other similar behavior that shows the vulnerability of a minor in the emotional aspect.

d) The website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted.

[www.acuden.pr.gov](http://www.acuden.pr.gov)

**2.3.9 The consumer education website should include contact information on referrals to local child care resource and referral organizations. How does the Lead Agency provide referrals to local CCR&R agencies through the consumer education website? Describe and include a website link to this information:**

There are three resource and referral centers, CENTRANA, one located at the central offices of ACUDEN, Municipality of Villalba, and Municipality of Vega Baja, respectively. This information is available on the ADCUDEN webpage in addition to being promoted locally through referrals from the regional offices of the Program or through the child care centers. Moreover, a directory of agencies is published on the ACUDEN webpage that includes their links where parents and the community can obtain information from the offices of services

that provide support to parents and children participating in the Child Care Program.  
<http://childcare.star-knowledge.in/centro-de-recursos-y-referidos/>

**2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website. Describe and include a website link to this information:**

the agency's webpage is <http://www.acuden.pr.gov/Directorio/Pages/default.aspx> On this page, the directory of our offices and the detailed contact information, at both the Central and Regional Levels, are published, where participants can contact or visit to obtain further details regarding our services and request orientation.

**2.3.11 Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes.**

[www.acuden.pr.gov](http://www.acuden.pr.gov)

**2.3.12 Other. Identify and describe the components that are still pending per the instructions on**

CCDF Plan Response Options for Areas where Implementation is Still in Progress in the Introduction.

N/A

## 2.4 Additional Consumer and Provider Education

Lead Agencies are required to certify that they will collect and disseminate information about the full diversity of child care services to promote parental choice to parents of eligible children, the general public, and where applicable, child care providers. In addition to the consumer education website, the consumer education information can be provided through CCR&R organizations or through direct conversations with eligibility case workers and child care providers. Outreach and counseling can also be effectively provided via information sessions or intake processes for families (658E(c)(2)(E); 98.15(b)(4); 98.33(b)).

In questions 2.4.1 through 2.4.5, certify by describing:

**2.4.1 How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state preK, as well as the availability of financial assistance to obtain child care services. At a minimum, describe what is provided (e.g., such methods as written materials, the website, and direct communications) and how information is tailored for these audiences.**

ACUDEN uses several strategies to promote the child care services that it provides. These strategies include: orientations for possible applicants that visit the regional offices seeking information on child care services, use of information centers (CCR&R), the municipalities that have contracts with ACUDEN provide promotion of services in their communities, meetings with the Child Care Center Owners Association, use of literatura (brochures) to promote the services, visits and educational activities in the communities, partnerships with providers, MOU with state agencies to receive referrals, use of the webpage, etc.

**2.4.2 The partnerships formed to make information about the availability of child care services available to families.**

Some partnerships are: Head Start / Early Head Start, TANF, Advancing Together (“Avanzando Juntos”, Dept of Health), WIC, Municipal Offices.

**2.4.3 How the Lead Agency provides the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers. In the description include, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners who assist in providing this information.**

**Temporary Assistance for Needy Families program:**

The TANF program is part of the Department of Family. Therefore, we work on referral agreements in order to prioritize services to participating families. Also, the ACUDEN webpage has a link to access the information on the TANF Program.

**Head Start and Early Head Start programs:**

ACUDEN is the lead agency for both programs, CCDF and HS, which means that we can more readily coordinate services between programs.

**Low Income Home Energy Assistance Program (LIHEAP):**

The ADSEF is the lead agency of this program and it is under the Department of Family. There are currently referral agreements for services between the programs. Also, our webpage has a link to access the ADSEF page.

**Supplemental Nutrition Assistance Programs (SNAP) Program:**

The ADSEF is the lead agency of this program and it is under the Department of Family. There are currently referral agreements for services between the programs. Also, our webpage has a link to access the ADSEF page.

**Women, Infants, and Children Program (WIC) program:**

ACUDEN established a Memorandum of Understanding in which coordinating and facilitating services between both agencies was established.

**Child and Adult Care Food Program(CACFP):**

**Medicaid and Children's Health Insurance Program (CHIP):**

**Programs carried out under IDEA Part B, Section 619 and Part C:**

ACUDEN has established mutual assistance agreements to serve Program participants. These agreements are based on the needs presented by the children upon undergoing screening tests, ASQ. The children are referred depending on their age to either the Dept. of Health or the Dept. of Education.

**2.4.4 Describe how the Lead Agency makes available to parents, providers, and the general public information on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity. Information about successful parent and family engagement should also be shared. At a minimum, include what information is provided, how the information is provided, and how the information is tailored to a variety of audiences and include any partners in providing this information.**

The Childhood Development Unit in the Program is the unit in charge of providing orientation to the parents and providers regarding the importance of intervening with appropriate stimuli during development in the stages of early childhood. This Unit provides training to teachers and assistants on the use of developmental guidelines and standardized curricula for their use at the child care centers. The teachers and assistants also receive follow-up visits to ensure that their execution and services is appropriate and that they are meeting the national standards established by *Caring for Our Children*. Alternatively, all of the families, parents, upon beginning the services, go through an individualized educational orientation in which in addition to explaining the importance of tending to the child's development, they are provided with orientation on how they are an essential part of said process, giving them constant participation in the process. Also, information on the aspects of childhood development is published on the ADUDEN webpage. This information is available to the entire community and is aimed at providing orientation and encouraging parents to become involved in the developmental process of their children.

**2.4.5 Describe how information on the Lead Agency's policies regarding the social-emotional and behavioral issues and early childhood mental health of young children, including positive behavioral intervention and support models based on research and best practices for those from birth to school age, are shared with families, providers, and the general public. At a minimum, include what information is provided, how the information is provided, and how information is tailored to a variety of audiences and**

**include any partners in providing this information.**

It is the policy and objective of the Child Care Program in Puerto Rico to foster the social and emotional development of the children and the prevention of difficult behavior through the Socio-emotional Development Intervention Model through the Pyramid Model of CSEFEL. This model provides a conceptual system of effective strategies for the family and primary caregivers that promotes positive behavior, emotional management, a decrease in defiant behavior, including a decrease in expulsions of pre-school-aged boys and girls, and fostering the development of a safe relationship (bonding) between the boys and girls both with their caregiver as well as their family. Additionally, as part of the screening, the ASEQ SE 2 Questionnaire is used to evaluate the behavior and socio-emotional development of the children in their early childhood. The objectives of the Socio-emotional Development Intervention Model that we use the following: Developing positive relationships between adults and children, as well as between the families and other professionals; Designing environments that foster the children's success by making them participate in significant activities, teaching them the expectations of the environment, and implementing a predictable schedule that makes every child participate; Implementation of effective socio-emotional teaching strategies; Strategies for using the "Positive Behavior Support" process to treat the needs of children that display intense and persistent unruly behavior; Providing support in the administrative processes that are needed to adopt and maintain the model practices and strategies. For the professionals that work with children from birth to the age of 5 years, they are provided with strategies for: Socio-emotional development within the context of relationships; Routines, environments, and flexible strategies to support socio-emotional development; Individualized interventions to determine the meaning of the behavior and the development of appropriate interventions; Developing a Play to Support Behavior; Developing leadership strategies to support development and confront the unruly behavior. To work with the families, sessions called "Positive Options for Families" have been developed, in which they are provided with strategies for: Building positive relationships, spending time together, positive comments, and praise. Play as a powerful practice in the education of boys and girls will be discussed, along with ways to support the development of friendship skills and fostering positive behavior. Determining the meaning of behavior, ways of clearly expressing expectations, developing and teaching the house rules. Emotional vocabulary, management of anger and disappointment, problem-solving. Strategies for the prevention of unruly behavior, for the development of a Family Plan and for a family routine. Within the procedures, the inclusion and orientation of the family on the socio-emotional development model and instruments to be used for screening in this area are encouraged, in addition to discussion of results and plans to work toward the proper development of their children. The staff hired by the Providers with allocation of funds and Administered Centers are provided with training and technical assistance on everything related to the socio-emotional development of children in early childhood. The families impacted through the Centers with allocation of funds and Administered Centers sign a family pledge in which they pledge to be involved and collaborate in the development of their sons and daughters. Alternatively, talks on socio-emotional development are offered to the general public and the Program's webpage provides access to further details regarding this information.

**2.4.6 Describe the Lead Agency's policies to prevent the suspension and expulsion of children from birth to age 5 in child care and other early childhood programs receiving CCDF funds (98.16(ee)), including how those policies are shared with families, providers, and the general public.**

The Child Care Program developed the Non-suspension Non-expulsion Protocol based on the appropriate practices and standards established in *Caring for Our Children* and the policies established in the state law and federal CCDF. This protocol is explained to the family at the initial orientation, in addition to training the educational staff to properly handle the cases. The document is published on the ACUDEN webpage. The Protocol has a Protocol the following: The purpose of this protocol is to create helpful procedures for child care centers, families, and children to prevent, limit, and eventually eliminate expulsion and suspension from the care and development centers. In this way, the appropriate practices to ensure the comprehensive health and safety of pre-school children is guaranteed. This model is based on the concept of socio-emotional development where the most important principle is establishing a safe and loving relationship between the child and their primary caregiver in order to produce their socio-emotional development in a normal manner. Establishing healthy bonding relationships with the children is the core principle of the Socio-emotional Development Intervention Model at all stages of early childhood. Every primary caregiver, teacher, teaching assistant, or any adult that intervenes in the care and development of a child in early childhood must carry out the Socio-emotional Development Intervention Model. The Socio-emotional Development Intervention Model is based on the Pyramid Model (CSEFEL) established by the Center on Social and Emotional Foundations of Learning. The Pyramid is a model that represents components that can be used to help children to develop a healthy and appropriate socio-emotional aptitude. The Pyramid Model describes the intertwined levels of practices dealing with the social and emotional development of all boys and girls. It is designed to: Guide the professional to understand the importance of socio-emotional development and the prevention of unruly behavior. Respond to a model of Public Health. Prevent boys and girls from having an intensive intervention. The principles within the Socio-emotional Development Intervention Model are: Supporting the social and emotional development of small children in order to prevent unruly behaviors. Individualizing interventions to correspond to the interests, strengths, and particularities of the children and their families. Fostering the development of abilities with enough intensity so as to observe changes in the desired behavior. Implementing strategies within the context of routines and natural environments. Ensuring committed use by way of a systemic change-making process. Modifying the strategies to correspond to the cultural and linguistic diversity of the families and children. Prevent the suspension and expulsion of children in early childhood from pre-school-level developmental environments. Whenever children display or are involved in defiant behaviors that cannot be easily resolved, the staff should: Assess the child's health and the adequacy of the study plan to satisfy the developmental and educational needs of the child. Commit themselves to immediately work with the parentes / guardians / family in a collaborative spirit with respect on what the best way to deal with the child's behaviors could be, including appropriate solutions that they have worked on at home or in other places. Access an early childhood health consultant to aid in developing an effective plan to deal with the child's defiant behaviors and to help the child in their age-

appropriate development, pro-social abilities. Facilitate, with the family's help, a referral for an evaluation, whether it be for Part C (early intervention) or B (pre-school special education), as well as any other services in the community. Facilitate linking the family to one of the child's primary care providers (for example, pediatrician, family medicine doctor, etc.) so that the primary physician can evaluate for any related health problem and facilitate the appropriate referrals. Some reasons to expel, suspend, or limit the child care service are the following: The aggressive behavior continues and clearly jeopardizes the physical safety of the child, their peers, and the adults. The evaluation of a qualified mental health consultant and all of the possible interventions and supports recommended by the qualified childhood mental health consultant aimed at providing a physically safe environment have been exhausted and the family is not willing to participate in the mental health consultation that has been provided through the child care program or independently. The family does not collaborate, follow the recommendations and child intervention plan available in the community. When the services does not meet the social and emotional needs of the child according to that agreed to by the staff and the family and a different program has been identified that is more capable of satisfying the needs that have been identified and can immediately provide services for the child. The procedure for the management of behavior in child care environments is the following: Get to know the children and establish bonding relationships. The teacher/primary caregiver will hold meetings with the family to receive information on their children. The teacher/primary caregiver will discuss documentation with the family, for example, the Developmental History. The teacher/primary caregiver will perform nurturing behaviors associated with caring for infants and small children that are necessary for bonding, for example, carrying them, rocking them, kissing them, staring at them, singing to them, feeding them. The quality and amount of these experiences for developing bonding are crucial factors. The teacher/primary caregiver will guarantee at least 8 weeks of adaptatino. The teacher/primary caregiver will create an affectionate learning community as established by the Proper Practices. The teacher/primary caregiver will apply the strategies provided in the Modules of the Socio-emotional Development Pyramid Model. Perform screening and assessment using the ASQ SE Questionnaires and Portage Guide, following each procedure. The strengths and particularities of the children will be identified, and this will be the basis for planning appropriate activities. Adapt the developmental environment to the needs of the children. The teacher/primary caregiver will change the setting according to the Weekly Planning and Topics of Study. The teacher/primary caregiver will use the Peace Corner (area of interest) and will furnish it with materials related to emotions, feelings, and relaxation. The teacher/primary caregiver will provide materials for performing activities that serve to prevent undesired behavior; emotional vocabulary, recognizing feelings, reading stories, rules, turtle technique, traffic light technique, breathing, among others. Adapt the daily routines and activities to the children's needs. The teacher/primary caregiver will establish a flexible, balanced routine. The teacher/primary caregiver will consistently and flexibly establish structure. The teacher/primary caregiver will perform large-group and small-group activities. The teacher/primary caregiver will perform individualized activities. The teacher/primary caregiver will perform activities within and outside of the developmental environment. The teacher/primary caregiver will perform child-initiated activities and adult-led activities. The teacher/primary caregiver will provide or negotiate additional time when the children need to complete a task or activity. The teacher/primary caregiver will allow the children to choose the task, topics of study, areas of interest, among other things. Identify the meaning of the behavior demonstrated by the children. The teacher/primary caregiver will make observations with purpose, using the

proper documents and instruments to then perform an analysis of the information obtained. The teacher/primary caregiver will identify temperments to adjust the strategies. The teacher/primary caregiver will identify health conditions that may lead to undesired behavior. The teacher/primary caregiver will identify needs through the screening and assessment results. IFSP or IEP, for example. Speech and Language Problems. The teacher/primary caregiver will identify external factors that affect the undesired behavior. Design effective socio-emotional teaching strategies. The teacher/primary caregiver will design strategies established in the Pyramid Model; Building positive relationships; Establishing clear and simple rules with the children; Being consistent; Use of praise and positive comments; Developing friendship skills; Teaching emotional vocabulary; Management of anger and disappointment; Problem-solving through situational examples; Filling the gas tank. Perform individual interventions in conjunction with the family. The teacher/primary caregiver will design Individualized Intervention Plans. The teacher/primary caregiver will share information and strategies with the family. The teacher/primary caregiver will provide orientation to the family on socio-emotional development. Refer the case. The teacher/primary caregiver will refer the case to the Assistant Coordinator of the corresponding Region upon having exhausted all other strategies. The teacher/primary caregiver will use the Referral Document and include a brief description of the child's behavior. The teacher/primary caregiver will include a copy of the ASQ 3 and ASQ SE Questionnaires and Daily Observations with the Referral. The teacher/primary caregiver will keep all required documentation up to date in the Development Portfolio. The Assistant Coordinator will perform a visit to evaluate the case, evaluate the environment, personal relationships, daily schedule, socio-emotional development strategies, developmental activities, family factor, management of special conditions. She will provide technical assistance with everything related to socio-emotional development, using the Pyramid Model of socio-emotional development and the Non-suspension Non-expulsion Protocol as references and will coordinate services with Advancing Together ("Avanzando Juntos") or the Department of Education. They will perform interventions with the family if necessary. If the behavior remains difficult to manage, the Assistant Coordinator will refer the case to the Childhood Development Unit at the Central Office for coordination of services by a human behavior specialist through the service agencies that lend support to the Program.

## 2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings, including information on resources and services that the State can deploy, such as the use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies must also include a description of how a family or child care provider can use these

resources and services to obtain developmental screenings for children who receive subsidies and who might be at risk of cognitive or other developmental delays, which can include social, emotional, physical, or linguistic delays (658E(c)(2)(E)(ii)). Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)).

### 2.5.1 Certify by describing:

a) How the Lead Agency collects and disseminates information on existing resources and services available for conducting developmental screenings to CCDF parents, the general public, and where applicable, child care providers (98.15(b)(3)).

Within the curricular procedure, it is established that all of the families served in Providers through allocation of funds and Administered Centers go through an initial orientation from the educational area in which they are provided with information on the instruments to be used in the screening, assessment, ongoing evaluation, and referral processes, among other aspects. When the screening process is completed, the needs of each child are determined and those that present a risk for developmental deficit. The information is shared with the family at individualized meetings. Upon sharing the information, a referral is made for specialized evaluation and the coordination of services available in the community or government agencies. The general population is provided with information on available services and resources for screening and specialized evaluations through the webpage.

b) The procedures for providing information on and referring families and child care providers to the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program - carried out under Title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) - and developmental screening services available under Section 619 and Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.).

The Child Care Program in Puerto Rico has the Screening and Referral Procedure, which is aimed at meeting the developmental screening requirements and coordinate services for the child. The procedure establishes that the instruments to be used for these purposes are the ASQ 3 Questionnaires, ASQ SE 2 Questionnaires, and M CHAT R/F. Whenever the family is eligible for the program and prior to the child beginning the service in the developmental setting, the family is provided with orientation on all of the aspects of development, and basic information is obtained on the family and the minor. After that initial orientation, an adaptation period is provided, which can last up to 8 weeks. After the child has adapted, the screening and assessment period begins, which has a duration of 45 business days. During this period, both the educational staff and the family work with the screening instruments, which are the ASQ 3, ASQ SE 2, M CHAT R/F, and Portage Guide questionnaires. After having been tabulated and depending on the screening results, it is determined whether a referral for evaluations and diagnosis is

needed. The agencies authorized by law to perform diagnoses are the Department of Health and the Department of Education (Part C and Part B of the IDEA Act). In the discussing the screening and assessment, the family is provided with orientation on the service coordination process, if necessary, and they are given referrals to take to the primary physician and the corresponding agency. If the child is ultimately diagnosed with any developmental deficit, the recommendations from the specialists are worked on and development is periodically monitored in order to ascertain the impact that the strategies have on their development. With regard to the general public, a link is provided on the webpage through which they can obtain information on the agencies where they can receive evaluation, diagnosis, and services.

c) How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work.

The Child Care Program establishes in the Curricular Procedure that the educational staff of the Providers receiving allocation of funds and the Administered Centers must hold 3 meetings per year to discuss the results of the screening and assessment instruments and establish goals with the family to work on the children's development. This is performed both for regular children as well as for children with special needs.

d) How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays.

The Child Care Program in Puerto Rico establishes in its Screening and Referral Program that any child served by Providers with allocation of funds and Administered Centers will undergo screening to detect risk of developmental deficits using the ASQ 3, ASE SE 2, and M CHAT R/ questionnaires and making referrals, if necessary. Additionally, the Child Care Program is aligned with the Department of Health through the Advancing Together Program ("Avanzando Juntos"), given that they use the same instruments. The Advancing Together Program responds to Part C of the IDEA Act and they receive those families referred by the Child Care Program to perform specialized evaluations on them and provide them with services. Likewise, it is worked on and coordinated with the Department of Education, which is Part B of the IDEA Act. Those families whose children we cannot perform screening tests on because they do not receive any service in the Providers with allocation of funds or Administered Centers system are provided with information through the webpage regarding where they can receive the services available.

e) How child care providers receive this information through training and professional development.

Within the Professional Development Plan, the competencies and domains that they all individuals working with children through the Child Care Program should have. One of the areas is related to the aspects of screening and referral. Training is provided in order

for the staff to develop skills for the use and handling of the screening instruments, early childhood development, inclusion, observation, among other topics related to screening and the special needs population.

f) Provide the citation for this policy and procedure related to providing information on developmental screenings.

In Regulation 8687 of the Child Care Program, Ch. 5, 5.2B, the importance of evaluating children's development through different screening tests that identify their needs is stipulated. For this, it is necessary to train and provide technical assistance to teachers and their assistants. The Child Care Program establishes an annual professional development plan, which responds to the fulfillment of this requirement of the Regulation.

## 2.6 Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select. This information about the child care provider selected by the parent includes health and safety requirements met by the provider, any licensing or regulatory requirements met by the provider, the date the provider was last inspected, any history of violations of these requirements, and any voluntary quality standards met by the provider. It must also describe how CCDF subsidies are designed to promote equal access, how to submit a complaint through a hotline, and how to contact local resource and referral agencies or other community-based supports that assist parents in finding and enrolling in quality child care (98.33(d)). Please note that if the consumer statement is provided electronically, Lead Agencies should consider how to ensure that the statement is accessible to parents and that parents have a way to contact someone to address questions they have.

### **2.6.1 Certify by describing:**

a) How the Lead Agency provides parents receiving CCDF funds with a consumer statement.

At the time of requesting services, the parent receives orientation regarding the Health and Safety standards that the provider must comply with and they are provided with a list of those that are in compliance with the Program requirements so that they can select the provider that in their view best suits their needs. In the event that the parent prefers a provider that is not on the list and has not been evaluated by the Program, said provider can be evaluated to determine whether it meets the requirements and certify it

as eligible for CCDF funds. The parent receives a document establishing that the selected provider meets the Program requirements, and if they observe any irregularity, they can contact the Program to report it, by e-mail, letter, or personally by visiting the offices.

b) What is included in the statement, including when the consumer statement is provided to families.

The statement includes the following information: "The Child Care Program promotes our participating families having the same opportunities of access to quality services as the community at large. With this aim, the Program evaluates all providers that provide child care services through monitoring of the different areas of the Program, such as: Health and Safety, and Childhood Development. In these monitoring actions, the providers' compliance with the quality standards is evaluated. This information on providers is published on our website [www.acuden.pr.gov](http://www.acuden.pr.gov). There, you will be able to find information regarding the last monitoring action performed, whether the center has had any abuse complaint or incidents of serious injury or death. When visiting our website, you must enter the Provider Directory section. If you identify any situation of abuse and/or negligence at the provider location, you should call the Situations of Abuse Hotline at 787-743-4333. Likewise, in order to report other issues related to the service that you receive from the Provider, you can contact ACUDEN's Safe Environment Line at 787-724-7474 ext: 3614, 3612 or 3774 or by visiting our Regional Offices. If you have any questions, please contact the Regional Office that provides you with services, the Health and Safety Area, or Central Level at 787-724-7474."

c) Provide a link to a sample consumer statement or a description if a link is not available.

[www.acude.pr.gov](http://www.acude.pr.gov)

### 3 Provide Stable Child Care Financial Assistance to Families

In providing child care assistance to families, Lead Agencies are required to implement these policies and procedures: a minimum 12-month eligibility and redetermination periods, a process to account for irregular fluctuations in earnings, a policy ensuring that families' work schedules are not disrupted by program requirements, policies to provide for a job search of not fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. Also, procedures for the enrollment of homeless children and children in foster care, if served, pending the completion of documentation, are required.

Note: Lead Agencies are not prohibited from establishing policies that extend eligibility beyond 12 months to align program requirements. For example, Lead Agencies can allow children enrolled in Head Start, Early Head Start, state or local prekindergarten, and other collaborative programs to finish the program year. This type of policy promotes continuity for families receiving services through multiple benefit programs.

In this section, Lead Agencies will identify how they define eligible children and families and how the Lead Agency improves access for vulnerable children and families. This section also addresses the policies that protect working families and determine a family's contribution to the child care payment.

### 3.1 Eligible Children and Families

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

#### **3.1.1 Eligibility criteria based on a child's age**

a) The CCDF program serves children

from birth

(weeks/months/years)

through 12

years (under age 13). . Note: Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

b) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are physically and/or mentally incapable of self-care?(658E(c)(3)(B), 658P(3))

No

Yes,

and the upper age is 18

(may not equal or exceed age 19).

If yes, Provide the Lead Agency definition of physical and/or mental incapacity: A person, between the ages of 12 to 18 years, who has been diagnosed with a physical, mental or sensory impairment that substantially limits one or more essential activities in his/her daily life, as established by Regulation 8687, Article 1.4, No. 38.

c) Does the Lead Agency allow CCDF-funded child care for children age 13 and above but below age 19 years who are under court supervision? (658P(3), 658E(c)(3)(B))

No.

Yes

and the upper age is 18 years old

(may not equal or exceed age 19)

d) How does the Lead Agency define the following eligibility terms?

"residing with":

A child who resides physically with his or her father, mother or legal guardian as defined by Regulation 8687, Art. 1.4, No 39s.

"in loco parentis":

Legal or physical custodian assigned by the Court or by the Department of Family Affairs and who has responsibility for the activities that the minor carries out.

### 3.1.2 Eligibility criteria based on reason for care

a) How does the Lead Agency define "working or attending a job training and educational program" for the purposes of CCDF eligibility at the time of determination? Provide the definitions below for:

"Working":

The employment permitted activity has two modalities. In the first modality, we look at salaried people who carry out an employment activity in exchange for a salary. The

salary must be below 85% of the median income. The participant of the activity must demonstrate minimum participation of 20 hours per week. The activity must be verifiable and must receive a payment subject to the state and federal laws of the Department of Labor. The second modality contemplated are self-employment activities in which the individual carries out a business activity on his own. The activity must be lawful and must have the permits required by federal and state laws to that effect. The individual must demonstrate that he/she dedicates a minimum of 20 hours a week to self-employment.

**"Job training":**

Permitted activity that consists of participating in an informal or formal educational, vocational or occupational course with the purpose of acquiring the knowledge, skills, and abilities to be part of the workforce. The minimum time required to consider this activity as permitted is 20 hours.

**"Education":**

Permitted activity in which the parent or guardian participates in a program aimed at developing knowledge and skills for obtaining and retaining a job. This program can be whether face-to-face or through online courses. It must consist of at least a minimum registration of twelve credits in an institution accredited by the Council of Higher Education of Puerto Rico. Similarly, it refers to participation in courses not accounted for in credits in which at least twelve hours per week are dedicated; such as internships, practices, and laboratories. It includes university students enrolled in graduate courses leading to a master's or doctorate degree with an academic load of six credits or six hours per week.

**"Attending job training or education" (e.g. number of hours, travel time):**

The participant must comply with the minimum amount of 20 hours per week in the case of employment, 20 hours in the case of training, and 12 hours in the case of studies. In the case of masters or doctorates, the participant must complete 6 hours per week. In cases where the applicant is in the process of obtaining his/her high school diploma or "GED," there is an exception as he/she does not have to meet a particular number of hours.

**3.1.2 Eligibility criteria based on reason for care**

**b) Does the Lead Agency allow parents to qualify for CCDF assistance on the basis of education and training participation alone (without additional minimum work requirements)?**

No.

**If no, describe the additional work requirements:**

Yes.

If yes, describe the policy or procedure:

The participant may be eligible by fulfilling the study or training activities as defined in Regulation 8687, Art. 2.4. This participation does not require participation in employment activity. In the case of studies, the participant must complete 12 credits or 12 hours, except in cases of master's degree students whose requirement is six credits or 6 hours. In the cases of training, you must comply with the amount of 20 hours per week.

### 3.1.2 Eligibility criteria based on reason for care

c) Does the Lead Agency consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search)

No.

Yes.

If yes, describe the policy or procedure. (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):

### 3.1.2 Eligibility criteria based on reason for care

d) Does the Lead Agency provide child care to children in protective services?

No.

Yes. If yes:

i. Please provide the Lead Agency's definition of "protective services":

As established in Regulation 8687, Art. 1.8, No. 40, these are children who are at risk of abuse, neglect, and exploitation. They are under the custody of the State, represented by the Department of Family Affairs, and are placed whether in authorized foster homes or with a family resource. Also included are families who are in shelters and are referred by the Department of Family Affairs or by non-profit agencies so they can receive services. These children and families are a priority for the provision of services.

*Note:* Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective

services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are not working or are not in education/training activities, but this provision should be included in the protective services definition above.

ii. Are children in foster care considered to be in protective services for the purposes of eligibility at determination?

No

Yes

iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (658E(c)(5))?

No

Yes

iv. Does the Lead Agency provide respite care to custodial parents of children in protective services?

No

Yes

### **3.1.3 Eligibility criteria based on family income. Note: The question in 3.1.3 relates to initial determination. Redetermination is addressed in 3.1.7.**

a) How does the Lead Agency define "income" for the purposes of eligibility at the point of determination?

It is considered as income the salary that the father, mother or guardian, and their respective spouses, earn as a result of their employment. The gross income of the applicant is subject to the mandatory deductions which we do not consider as benefits received as defined in Regulation 8687, Art. 2.6. Among the mandatory deductions established are FICA, Medicare, Income Tax Withholdings, Medical Plan, retirement contributions, mandatory contributions to unions of employees, SINOT, etc. In the case of self-employment, we use the income certified by the Department of the Treasury, which authorizes the deductions of expenses for business management. The corresponding deductions described above apply. Among the examples of the benefits that we do not consider as income are welfare funds, student scholarships, social security benefits, pensions or retirement, housing funds, among others. For the purposes of eligibility, we use the gross income and subtract the mandatory deductions and benefits to calculate the net income which we use to evaluate the applicant's eligibility. If the total is below 85% of the State Median Income (SMI), the applicant qualifies for the care services.

b) Provide the CCDF income eligibility limits in the table below at the time of initial determination. Complete columns (a) and (b) based on maximum eligibility at initial entry into CCDF. Complete columns (c) and (d) *only if* the Lead Agency is using income eligibility limits lower than 85 percent of the current state median income (SMI) at the initial eligibility determination point. Fill in the chart based on the most populous area of the state (the area serving the highest number of CCDF children). If the income eligibility limits are not statewide, please respond to c) below the table.

|             | (a)                   | (b)                                          | (c)                                                                                                                   | (d)                                                                                                          |
|-------------|-----------------------|----------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| Family Size | 100% of SMI(\$/Month) | 85% of SMI (\$/Month) [Multiply (a) by 0.85] | (IF APPLICABLE) (\$/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower Than 85% of Current SMI | IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI |
| 1           | 1040.83               | 884.71                                       | N/A                                                                                                                   | N/A                                                                                                          |
| 2           | 1409.17               | 1197.79                                      | N/A                                                                                                                   | N/A                                                                                                          |
| 3           | 1777.50               | 1510.88                                      | N/A                                                                                                                   | N/A                                                                                                          |
| 4           | 2145.83               | 1823.96                                      | N/A                                                                                                                   | N/A                                                                                                          |
| 5           | 2514.17               | 2137.04                                      | N/A                                                                                                                   | N/A                                                                                                          |

c) If the income eligibility limits are not statewide, describe how many jurisdictions set their own income eligibility limits and provide the income limit ranges across the jurisdictions (e.g. range from [lowest limit] to [highest limit])( 98.16(i)(3)).

N/A

*Reminder:* Income limits must be established and reported in terms of current SMI based on the most recent data published by the Bureau of the Census (98.20(a)(2)(i)) even if the federal poverty level is used in implementing the program. SMI guidelines are available at: <https://www.acf.hhs.gov/ocs/resource/liheap-im2017-03>.

d) SMI source and year. \$ 12,490. Federal Register, vol. 84, no. 22, February 1, 2019

e) Identify the most populous area of the State used to complete the chart above. Metropolitan áreas including San Juan, Bayamon, Guaynabo, Carolina.

f) What was the date (mm/dd/yyyy) that these eligibility limits in column (c) became

effective? October 1, 2019

g) Provide the citation or link, if available, for the income eligibility limits.

www.acuden.pr.gov

**3.1.4 Lead Agencies are required to ensure that children receiving CCDF funds do not have family assets that exceed \$1,000,000, as certified by a family member (98.20(a)(2)(ii)).**

a) Describe how the family member certifies that family assets do not exceed \$1,000,000 (e.g., a checkoff on the CCDF application).

Participants certify this information in the eligibility determination process at the beginning of the service when completing the document entitled Request for Services.

b) Does the Lead Agency waive the asset limit on a case-by-case basis for families defined as receiving, or in need of, protective services?

No.

Yes.

If yes, describe the policy or procedure and provide citation:

Regulation No. 8687 of 2016, in its Article 2.1, establishes an exception for participating families in which there is a child who receives protection from the state. This exception includes the eligibility criteria related to the income of the family nucleus and the permitted activity. Families defined as being under state protection are exempt from meeting income below 85% of the state median income and from having assets valued at less than one million dollars (\$1,000,000). Similarly, these families are exempt from compliance with any permitted activity such as employment, study, or training. For this, the resource which serves as a foster parent of the minor or the officer of the Department of Family Affairs must request the eligibility and show evidence on the granting of the custody or placement of the minor.

**3.1.5 Describe any additional eligibility conditions or priority rules applied by the Lead Agency during eligibility determination or redetermination (98.20(b)).**

The Childcare Program will grant the benefit of childcare taking into consideration the vacancies it has by age category and in the following order of priority for the participants:

1. Temporary Assistance for Needy Families (TANF) program participating families. TANF Program participants will have a preference in the granting of the benefit, and for this, they will have to present evidence provided by the Administration for the Socio-

Economic Development of the Family (ADSEF, by its Spanish acronym), which is the only agency in Puerto Rico that manages the fund.

2. For children under State protection, a document evidencing the granting of custody or placement of the minor is required.
3. For children with special needs with a diagnosis of a physical, mental or sensory impairment that substantially limits one or more essential activities in his/her life, the following evidence according to his/her age are requirements: if the child age is between birth to two years with eleven months, the Department of Health must certify his/her special need. If the child is between the ages of three and eighteen and eleven months of age, the Department of Education must certify his/her special needs.

**3.1.6 Lead Agencies are required to take into consideration children's development and promote continuity of care when authorizing child care services (98.21(f); 98.16(h)(6)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.**

- Coordinating with Head Start, prekindergarten, or other early learning programs to create a package of arrangements that accommodates parents' work schedules
- Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)
- Establishing minimum eligibility periods greater than 12 months
- Using cross-enrollment or referrals to other public benefits
- Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services
- Providing more intensive case management for families with children with multiple risk factors;
- Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities
- Other.

Describe:

### 3.1.7 Policies and processes for graduated phase-out of assistance at redetermination.

Lead Agencies are required to provide for a graduated phase-out of assistance for families whose income has increased above the state's initial income threshold at the time of redetermination but remains below the federal threshold of 85 percent of the state median income. Providing a graduated phase-out promotes continuity by allowing for wage growth, allows for a tapered transition out of the child care subsidy program as income increases, and supports long-term self-sufficiency for families.

- i. 85 percent of SMI for a family of the same size
- ii. An amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold that:
  - (A) Takes into account the typical household budget of a low-income family
  - (B) Provides justification that the second eligibility threshold is:
    - (1) Sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability
    - (2) Reasonably allows a family to continue accessing child care services without unnecessary disruption.

At redetermination, a child shall be considered eligible if his or her parents are working or attending a job training or educational program even if their income exceeds the Lead Agency's income limit to initially qualify for assistance as long as their income does not exceed the second tier of eligibility (98.21(a); 98.21(b)(1)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

A family eligible for services via the graduated phase-out of assistance is considered eligible under the same conditions as other eligible families with the exception of the copayment restrictions, which do not apply to a graduated phase-out. To help families transition off of child care assistance, Lead Agencies may gradually adjust copay amounts for families whose children are determined eligible under a graduated phase-out and may require additional reporting on changes in family income. However, Lead Agencies must still ensure that any additional reporting requirements do not constitute an undue burden on families.

a) Check and describe the option that best identifies the Lead Agency's policies and procedures regarding the graduated phase-out of assistance.

- N/A - The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- N/A - The Lead Agency sets its exit eligibility threshold at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- The Lead Agency sets the second tier of eligibility at 85 percent of SMI. Describe the policies and procedures.

Provide the citation for this policy or procedure.

- The Lead Agency sets the second tier of eligibility at an amount lower than 85 percent of SMI for a family of the same size but above the Lead Agency's initial eligibility threshold.

Provide the second tier of eligibility for a family of three.

Describe how the second eligibility threshold:

- i. Takes into account the typical household budget of a low-income family:
- ii. Is sufficient to accommodate increases in family income over time that are typical for low-income workers and that promote and support family economic stability:
- iii. Reasonably allows a family to continue accessing child care services without unnecessary disruption:
- iv. Provide the citation for this policy or procedure:

- Other.

Identify and describe the components that are still pending per the instructions on *CCDF Plan Response Options for Areas where Implementation is Still in Progress* in the Introduction.

3.1.7 b) To help families transition from assistance, does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

No

Yes

i. If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out.

ii. If yes, does the Lead Agency require additional reporting requirements during the graduated phase-out period? *(Note: Additional reporting requirements are also discussed in section 3.3.3 of the plan.)*

No.

Yes.

Describe:

### 3.1.8 Fluctuation in earnings.

Lead Agencies are required to demonstrate how their processes for initial determination and redetermination take into account irregular fluctuations in earnings (658E(c)(2)(N)(i)(II)). The Lead Agency must put in place policies that ensure that temporary increases in income, including temporary increases that can result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) from seasonal employment or other temporary work schedules, do not affect eligibility or family copayments (98.21(c)). Check the processes, if applicable, that the Lead Agency uses to take into account irregular fluctuations in earnings and describe, at a minimum, how temporary increases that result in a monthly income exceeding 85 percent of SMI (calculated on a monthly basis) do not affect eligibility or family copayments.

Average the family's earnings over a period of time (i.e. 12 months).

Describe:

In cases of self-employment where income is not constant, the agency uses the annual income form to average the monthly income, and in this way, determine the family's eligibility. In cases where the family has an income as a salaried employee where there is an increase in revenue from work for overtime, tips or bonuses, the agency does not consider them since it does not imply a fixed income for the family. In cases where the participant shows fluctuations in income at the time of the evaluation, we will make an analysis of the revenue for the last six months to average the monthly income and will use that numbers to determine the eligibility.

- Request earning statements that are most representative of the family's monthly income.

Describe:

- Deduct temporary or irregular increases in wages from the family's standard income level.

Describe:

At the time of the income evaluation, if it reflects extraordinary increases such as tips, temporary rise in hours worked, or special bonuses, we eliminate them and do not consider them as part of the fixed monthly income.

- Other.

Describe:

**3.1.9 Lead Agencies are required to have procedures for documenting and verifying that children receiving CCDF funds meet eligibility criteria at the time of eligibility determination and redetermination (98.68(c)). Check the information that the Lead Agency documents and verifies and describe, at a minimum, what information is required and how often. Check all that apply.**

- Applicant identity.

Describe:

The applicant will submit an original and a copy of his identification with a valid photo. This identification may be a driver's license, identification of the Department of Transportation and Public Works or passport.

- Applicant's relationship to the child.

Describe:

We use the child's birth certificate or legal document establishing custody of the child.

- Child's information for determining eligibility (e.g., identity, age, citizen/immigration status).

**Describe:**

Birth certificate. In cases of being a foreigner, we request evidence of legal immigration status.



**Work.**

**Describe:**

In case of being a salaried applicant, we use as evidence the payment slip or employer's certification. For self-employed applicants, we request the previous year income tax return submitted to the Department of the Treasury. If it is a new business, we request a copy of the patent and a sworn statement that establishes the projected monthly income and the number of hours invested weekly.



**Job training or educational program.**

**Describe:**

In the case of students, we accept as evidence a certification from the educational institution. Likewise, the class program is acceptable if the Registry Office of the educational institution has duly stamped it. In the case of training, an official certification from the institution that offers the training indicating that the applicant invests at least twenty hours a week for this training is acceptable as evidence.



**Family income.**

**Describe:**

We use birth certificates of the family members to determine the family composition and evidence of income. In the case of salaried employees, we use a pay stub or income certification. In the case of self-employment, we use the income tax return for the year prior to the application. If it is a new business, we request the municipal patent and an affidavit that establishes the number of hours invested per week and a revenue projection.



**Household composition.**

**Describe:**

Birth certificates of family members



**Applicant residence.**

**Describe:**

We corroborate it using evidence from the bill of the Electric Power Authority, the Aqueduct and Sewer Authority or residential telephone. In the absence of any of these invoices, we accept an affidavit that establishes the physical and postal address of the applicant.

Other.

**Describe:**

If the father or mother is married to a person other than the father or mother of the minor and this marriage has taken place under the separate property regime, we request the marriage agreements. In the case of divorced persons, we request a divorce decree or affidavit certifying the civil status.

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

Time limit for making eligibility determinations

**Describe length of time:**

We attend immediately the applications that we receive together with all the documents that the Program requires. In cases where the family does not have a required document available at the time of the evaluation of their application, we establish along with the applicant a new appointment so that they can deliver documentation within 30 days. In case an unusual situation arises, and the applicant has not been able to obtain the required document, he/she may request a change of evaluation date, but it must not extend for more than 60 days from the date of the first visit.

Track and monitor the eligibility determination process

Other.

**Describe:**

None

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

Lead Agencies are required to inform parents who receive TANF benefits about the exception to the individual penalties associated with the work requirement for any single custodial parent who has a demonstrated inability to obtain needed child care for a child younger than age 6 (98.16(v); 98.33(f)).

Lead Agencies must coordinate with TANF programs to ensure that TANF families with young

children will be informed of their right not to be sanctioned if they meet the criteria set forth by the state/territory TANF agency in accordance with Section 407(e)(2) of the Social Security Act.

In fulfilling this requirement, the following criteria or definitions are applied by the TANF agency to determine whether the parent has a demonstrated inability to obtain needed child care.

Note: The TANF agency, not the CCDF Lead Agency, is responsible for establishing the following criteria or definitions. These criteria or definitions are offered in this Plan as a matter of public record.

a) Identify the TANF agency that established these criteria or definitions: Administration for the Economic Development of Families ( ADSEF)

b) Provide the following definitions established by the TANF agency:

"Appropriate child care":

The state regulations of the TANF Program currently do not stipulate a formal definition, but they are in a review process to describe them in its rules and procedures. Meanwhile, all childcare centers must be licensed, which guarantees that they are appropriate to offer the services as the Licensing Office stipulates.

"Reasonable distance":

The state regulations of the Program do not stipulate a formal definition, but the program is planning a review to come up with a description in its procedures.

"Unsuitability of informal child care":

The state regulations of the Program do not stipulate a formal definition, but the program is planning a review to provide a suitable definition.

"Affordable child care arrangements":

The state regulations of the Program do not stipulate a formal definition, but the program is planning a review to provide a suitable definition.

c) How are parents who receive TANF benefits informed about the exception to the individual penalties associated with the TANF work requirements?



In writing



Verbally



Other.

Describe:

d) Provide the citation for the TANF policy or procedure:

Regulation No. 7653

### 3.2 Increasing Access for Vulnerable Children and Families

Lead Agencies are required to give priority for child care assistance to children with special needs, which can include vulnerable populations, in families with very low incomes and to children experiencing homelessness (658E(c)(3)(B); 98.46(a)). The prioritization of CCDF assistance services is not limited to eligibility determination (i.e., the establishment of a waiting list or the ranking of eligible families in priority order to be served).

Note:

CCDF defines "child experiencing homelessness" as a child who is homeless, as defined in Section 725 of Subtitle VII-B of the McKinney-Vento Act (42 U.S.C. 11434a) (98.2).

#### **3.2.1 Describe how the Lead Agency defines:**

a) "Children with special needs":

Children from 0 to 18 years of age who have been diagnosed by a professional authorized by the Department of Health or the Department of Education, and who have one or more physical, mental or sensory limitations that affect their daily living activities. This group has the third service priority in the Program.

b) "Families with very low incomes":

Families that have an income equal to or less than 50% of the state median income when compared to a family of the same size.

**3.2.2 Describe how the Lead Agency will prioritize or target child care services for the following children and families.**

a) Identify how services are prioritized for children with special needs. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

b) Identify how services are prioritized for families with very low incomes. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

c) Identify how services are prioritized for children experiencing homelessness, as defined by the CCDF. Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care

- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

d) Identify how services are prioritized, if applicable, for families receiving TANF program funds, those attempting to transition off TANF through work activities, and those at risk of becoming dependent on TANF (98.16(i)(4)). Check all that apply:

- Prioritize for enrollment
- Serve without placing these populations on waiting lists
- Waive copayments
- Pay higher rates for access to higher-quality care
- Use grants or contracts to reserve slots for priority populations
- Other.

Describe:

### **3.2.3 List and define any other priority groups established by the Lead Agency.**

We give priority in the service to children from birth to eighteen years with eleven months, who are in the custody of the State, after a judicial determination, at the request of the Department of Family Affairs.

### **3.2.4 Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.2.3.**

The Department of Family Affairs must refer children identified as being under the State protection and submit evidence of legal action. We deal with these cases immediately and exempt them from the required documentation on activity or income of parents or guardians.

**3.2.5 Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and TA to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (addressed in section 6), and (3) conduct specific outreach to homeless families (658E(c)(3); 98.51).**

a) Describe the procedures to permit the enrollment of children experiencing homelessness while required documentation is obtained.

We provide the childcare services and give the family 30 days to complete the Program documentation and submit evidence of immunization for eligibility purposes. When entering the center, the director of the center along with the parents must agree on an immunization plan for the child within two weeks or obtain a certification that the child complies with his/her immunizations as the Department of Health establishes, according to Regulation 8687 - Art.2.1; Act 25 of Immunization, of September 25, 1993.

b) Check, where applicable, the procedures used to conduct outreach for children experiencing homelessness (as defined by CCDF Rule) and their families.

- Lead Agency accepts applications at local community-based locations
- Partnerships with community-based organizations
- Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care
- Other

*Note:* The Lead Agency shall pay any amount owed to a child care provider for services provided as a result of the initial eligibility determination, and any CCDF payment made prior to the final eligibility determination shall not be considered an error or improper payment (98.51(a)(1)(ii)).

**3.2.6 Lead Agencies must establish a grace period that allows homeless children and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace**

period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).

Note:

Any payment for such a child during the grace period shall not be considered an error or improper payment (98.41(a)(1)(i)(C)(2)).

a) Describe procedures to provide a grace period to comply with immunization and other health and safety requirements, including how the length of the grace period was established in consultation with the state, territorial, or tribal health agency for:

Children experiencing homelessness (as defined by Lead Agency's CCDF)

Families that lack a fixed place to sleep or that stay overnight in areas that are not for human habitation, such as cars, parking lots, abandoned buildings, parks, etc. The definition will also include families who live in shelters, those who are in a transition from leaving the temporary home where they were, health institutions or preventive detention when they do not have a fixed and adequate place to return.

Provide the citation for this policy and procedure.

Regulation 8687, Art 1.8(28)

Children who are in foster care.

They are the children who are at risk of abuse, neglect, and exploitation. They are under the custody of the State, represented by the Department of Family Affairs. They live in authorized foster homes or with a family resource.

Provide the citation for this policy and procedure.

Regulation 8687, Art. 1.8 (40)

b) Describe how the Lead Agency coordinates with licensing agencies and other relevant state, territorial, tribal, and local agencies to provide referrals and support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements (98.41(a)(1)(i)(C)(4)).

Families in the communities can visit the participating Child Care and Development Fund (CCDF) Care Centers to receive guidance, or they can get a referral to our offices to determine their eligibility and apply the grace period processes as needed. These families receive advice and assistance through references to the *Avanzando Juntos* Program or the vaccination centers of the Department of Health to obtain the appropriate services in an agile manner.

c) Does the Lead Agency establish grace periods for other children who are not experiencing homelessness or in foster care?

No.

Yes.

Describe:

### 3.3 Protection for Working Families

#### **3.3.1 12-Month eligibility.**

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period, regardless of changes in income (as long as the income does not exceed the federal threshold of 85 percent of the state median income) or temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

This change means that a Lead Agency may not terminate CCDF assistance during the 12-month period if a family has an increase in income that exceeds the state's income eligibility threshold, but not the federal threshold of 85 percent of SMI. The Lead Agency may not terminate assistance prior to the end of the 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. A temporary change in eligible activity includes, at a minimum, any time-limited absence from work for an employed parent due to such reasons as the need to care for a family member or an illness; any interruption in work for a seasonal worker who is not working; any student holiday or break for a parent participating in a training or educational program; any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program; any other cessation of work or attendance at a training or educational program that does not exceed 3 months or a longer period of time established by the Lead Agency; a child turning 13 years old during the 12-month eligibility period (except as described in 3.1.1); and any changes in residency within the state, territory, or tribal service area.

a) Describe the Lead Agency's policies and procedures in implementing the minimum 12-month eligibility and redetermination requirements, including when a family experiences a temporary change in activity.

The ACUDEN gives the first appointment to the applicant and asks for all documentation related to family income, activity, family composition, and information of the child. The first time the ACUDEN evaluates the case, the family must meet the eligibility criteria to

determine if they can offer childcare services. At this time, the adult must comply with the allowed activity -work, education, or training, besides the family income, according to the state median income (SMI). Eligibility is automatically granted for a period of 12 months. The new determination of the next twelve months starts before the end of month 12 to guarantee continuity in the service. In this process, if the family has suffered a temporary change in the activity and does not meet the time required according to the type of activity, they get three months of transition. Likewise, if the family has exceeded the state median income and exceeds the income that the Program allows, they get three months as a transition period. During this period, the family is responsible for reporting any change in the activity that leads them to comply with the program requirements so that the case technician may grant them the new 12-month period. If the family does not report compliance with the eligibility criteria during the transition period, the agency closes the case and discontinues the service. The agency considers the income fluctuations as temporary changes, so the technician analyzes by averaging income at the time of the annual review to give continuity to the eligibility.

**b) How does the Lead Agency define "temporary change?"**

A temporary change is one that, at the time of the redetermination, does not meet the eligibility criteria but there is an expectation of change in a term of fewer than three months, and we address it through a transition period. During this period, it is re-evaluated to determine if the change will be permanent and how it would affect eligibility.

**c) Provide the citation for this policy and/or procedure.**

Regulation 8687, Art. 2.5 and 2.13

### **3.3.2 Option to discontinue assistance during the 12-month eligibility period.**

Lead Agencies have the option, but are not required, to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity (i.e., if the parent experiences a temporary change in his or her status as working or participating in a training or educational program, as described in section 3.3.1 of the plan).

If the Lead Agency chooses the option to discontinue assistance due to a parent's non-temporary loss or cessation of eligible activity, it must continue assistance at least at the same level for a period of not fewer than 3 months after each such loss or cessation for the parent to engage in a job search and to resume work or resume attendance in a job training or educational program. At the end of the minimum 3-month period of continued assistance, if the parent has engaged in a qualifying work, training, or educational program activity with an income below 85 percent of SMI, assistance cannot be terminated, and the child must continue

receiving assistance until the next scheduled redetermination or, at the Lead Agency option, for an additional minimum 12-month eligibility period.

a) Does the Lead Agency choose to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss or cessation of eligible activity and offer a minimum 3-month period to allow parents to engage in a job search and to resume participation in an eligible activity?

No, the state/territory does not allow this option to discontinue assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of attendance at a job training or educational program.

Yes, the Lead Agency discontinues assistance during the 12-month eligibility period due to a parent's non-temporary loss of work or cessation of eligible activity and provides a minimum 3-month period of job search. If yes:

i. Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change:

After determining the eligibility and granting the first 12 months of services, the eligibility technician will give a quarterly follow up with the family to ensure that the child continues to receive quality services and the family receives services according to their needs. The technician gives follow-up in such a way as to avoid the interruption of the family's permitted activity. So, the family must not come to the office because monitoring is by phone call, email, or letter. In these follow-ups, the family has the opportunity to request any change of provider or schedule of services that best suits the adult so that they can continue to comply with the permitted activity. In case the family reports a change that affects the eligibility criteria, and it is permanent, they have up to three months to search for a job or to start a study or training activity. During this period, the family must notify about the activity, whether it is a new job or enrollment in a study or training program, as defined by the Program. If the family informs this change before the end of the three-month transition period, the agency will amend the certification of eligibility and will grant 12 months of services. In cases where the family reports that the change is one of permanent income increase and that it exceeds 85% of the state income mediana, the agency warns the participant the closure of their case. The family gets a transition term not exceeding from three months. The purpose is that they can make the economic adjustments and assume the cost of care services without this putting their permanence in employment at risk.

ii. Describe what specific actions/changes trigger the job-search period.

Loss of employment, decrease in work hours, or resignation.

iii. How long is the job-search period (must be at least 3 months)?

3 months

iv. Provide the citation for this policy or procedure.

Regulation 8687, Art. 2.5

b) The Lead Agency may discontinue assistance prior to the next 12-month redetermination in the following limited circumstances. Check and describe any circumstances in which the Lead Agency chooses to discontinue assistance prior to the next 12-month redetermination. Check all that apply.

Not applicable.

Excessive unexplained absences despite multiple attempts by the Lead Agency or designated entity to contact the family and provider, including the prior notification of a possible discontinuation of assistance.

i. Define the number of unexplained absences identified as excessive:

The provider notifies the ACUDEN the monthly attendance of the minor to the childcare center. This attendance must meet 80% of the total approved monthly time. If there is no compliance with the attendance percentage established, there must be a documented justified reason for the absences. Should there be no justification, or the father does not take the child to the center for more than two consecutive months, the agency sends a notification of closure of the case and the participant has 15 days to appeal the decision.

ii. Provide the citation for this policy or procedure:

Regulation 8687 - Art 3.1; Manual of Procedures to Determine Eligibility (2016) - Cap 11

A change in residency outside of the state, territory, or tribal service area.

Provide the citation for this policy or procedure:

The adult responsible for the minor must notify the Program of any change affecting the eligibility certificate, including a change in the residential address where we cannot provide the service as, for example, moving to another state or territory, which implies the closure of the case. See Procedures Manual for the Determination of Eligibility, Chapter VIII (2016).

Substantiated fraud or intentional program violations that invalidate prior determinations of eligibility.

Describe the violations that lead to discontinued assistance and provide the citation for this policy or procedure.

We will consider fraud any information manipulated to obtain benefits or any action that goes against the conditions for which we issued the certification of eligibility. In such a case, the person that unlawfully received the money must return it; we may also refer him/her to the corresponding justice authorities. Regulation 8687; Eligibility Procedure Manual (2016).

### 3.3.3 Change reporting during the 12-month eligibility period.

The Lead Agency must describe the requirements for parents to report changes in circumstances during the 12-month eligibility period and describe efforts to ensure that such requirements do not place an undue burden on eligible families, which could impact the continuity of care for children and stability for families receiving CCDF services (98.16(h)(1)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.1.7(b).

Families are required to report a change to the Lead Agency at any time during the 12-month eligibility period if the family's income exceeds 85 percent of the state median income, taking into account irregular fluctuations in income (98.21(e)(1)). If the Lead Agency chooses the option to terminate assistance, as described in section 3.3.2 of the plan, they may require families to report a non-temporary change (as described in section 3.3.3 of the plan) in work, training or educational activities (otherwise known as a parent's eligible activity).

a) Does the Lead Agency require families to report a non-temporary change in a parent's eligible activity?

No

Yes

b) Any additional reporting requirements during the 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of SMI or that impact the Lead Agency's ability to contact the family or pay the child care providers (e.g., a family's change of address, a change in the parent's choice of child care provider).

Check and describe any additional reporting requirements required by the Lead Agency during the 12-month eligibility period. Check all that apply.

- Additional changes that may impact a family's eligibility during the 12-month period.

**Describe:**

The adult must inform the Administration for Integral Development of Childhood (ACUDEN, by its Spanish acronym) of changes in the number of hours of the permitted activity, permanent increase or decrease in income, change of type of activity, suspension of activity, changes in family composition, change of provider, and changes of residence, with the purpose of being able to make adjustments in the service according to the new need. In cases where there is a permanent income increase that does not exceed 85% of the SMI, we do not make any changes in the eligibility certification to ensure that co-payments stay unaltered as agreed initially. However, in cases where the income exceeds 85%, we proceed to a transition to close the case.

- Changes that impact the Lead Agency's ability to contact the family.

**Describe:**

The adult responsible for the minor must inform any residential address, postal, telephone or email change so that the agency can contact him/her and offer continuity of services.

- Changes that impact the Lead Agency's ability to pay child care providers.

**Describe:**

In cases in which the family provider changes information that affects payment, such as information about a bank account, the family provider must notify it promptly so that the agency can make the corresponding changes and submit the payment with the new information. In case the parent needs to change the provider, or the agency determines that the provider is not able to offer an adequate service, we inform the parties and amend the eligibility certification to reflect the new information.

Any additional reporting requirements that the Lead Agency chooses, as its option to require from parents during the 12-month eligibility period, shall not require an office visit. In addition, the Lead Agency must offer a range of notification options to accommodate families.

c) How does the Lead Agency allow for families to report changes to ensure that reporting requirements are not burdensome and to avoid an impact on continued eligibility between redeterminations? Check all that apply.

- Phone

- Email
- Online forms
- Extended submission hours
- Postal Mail
- FAX
- In-person submission
- Other.

Describe:

d) Families must have the option to voluntarily report changes on an ongoing basis during the 12-month eligibility period. Lead Agencies are required to act on information reported by the family if it will reduce the family's co-payment or increase the family's subsidy. Lead Agencies are prohibited from acting on information reported by the family that would reduce the family's subsidy unless the information reported indicates that the family's income exceeds 85 percent of SMI after considering irregular fluctuations in income or, at the option of the Lead Agency, the family has experienced a non-temporary change in eligible activity.

i. Describe any other changes that the Lead Agency allows families to report.

N/A

ii. Provide the citation for this policy or procedure.

N/A

### **3.3.4 Prevent the disruption of employment, education, or job training activities**

Lead Agencies are required to have procedures and policies in place to ensure that parents (especially parents receiving assistance under the TANF program) are not required to unduly disrupt their employment, education, or job training activities to comply with the Lead Agency's or designated local entity's requirements for the redetermination of eligibility for assistance (658E(c)(2)(N)(ii); 98.21(d)).

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for

the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g. use of languages other than English, access to transportation, accommodation of parents working non-traditional hours, etc.).

a) Identify, where applicable, the Lead Agency's procedures and policies to ensure that parents (especially parents receiving TANF program funds) do not have their employment, education, or job training unduly disrupted to comply with the state/territory's or designated local entity's requirements for the redetermination of eligibility.

- Advance notice to parents of pending redetermination
- Advance notice to providers of pending redetermination
- Pre-populated subsidy renewal form
- Online documentation submission
- Cross-program redeterminations
- Extended office hours (evenings and/or weekends)
- Other.

Describe:

b) How are families allowed to submit documentation, described in 3.1.9, for redetermination? Check all that apply.

- Postal Mail
- Email
- Online forms
- FAX
- In-person submission
- Extended submission hours
- Other.

Describe:

### 3.4 Family Contribution to Payments

Lead Agencies are required to establish and periodically revise a sliding-fee scale for CCDF families that varies based on income and the size of the family to determine each family's contribution (i.e., co-payment) that is not a barrier to families receiving CCDF funds (658E(c)(5)). In addition to income and the size of the family, the Lead Agency may use other factors when determining family contributions/co-payments. Lead Agencies, however, may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).

Note: To help families transition off of child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. However, section 3.4 applies only to families in their initial/entry eligibility period. See section 3.1.7 Graduated Phase-Out regarding co-pays during the graduated phase-out period.

#### **3.4.1 Provide the CCDF co-payments in the chart below according to family size for one child in care.**

a) Fill in the chart based on the most populous area of the State (area serving highest number of CCDF children).

|                    | (a)                                                                                                      | (b)                                                                                               | (c)                                                                                 | (d)                                                                                     | (e)                                                                                               | (f)                                                                                 |
|--------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <b>Family Size</b> | <b>Lowest Initial or First Tier Income Level Where Family Is First Charged Co-Pay (Greater Than \$0)</b> | <b>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?</b> | <b>The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?</b> | <b>Highest Initial or First Tier Income Level Before a Family Is No Longer Eligible</b> | <b>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?</b> | <b>The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?</b> |
| 1                  | 520.42                                                                                                   | 18.95                                                                                             | 4%                                                                                  | 884.71                                                                                  | 132.65                                                                                            | 15%                                                                                 |
| 2                  | 704.58                                                                                                   | 18.95                                                                                             | 3%                                                                                  | 1197.79                                                                                 | 132.65                                                                                            | 11%                                                                                 |
| 3                  | 888.75                                                                                                   | 18.95                                                                                             | 2%                                                                                  | 1510.88                                                                                 | 132.65                                                                                            | 9%                                                                                  |
| 4                  | 1072.92                                                                                                  | 18.95                                                                                             | 2%                                                                                  | 1823.96                                                                                 | 132.65                                                                                            | 7%                                                                                  |
| 5                  | 1257.08                                                                                                  | 18.95                                                                                             | 2%                                                                                  | 2137.04                                                                                 | 132.65                                                                                            | 6%                                                                                  |

b) What is the effective date of the sliding-fee scale(s)? October 1, 2019

c) Identify the most populous area of the state used to complete the chart above.

Metropolitan areas including San Juan, Bayamon, Guaynabo, Carolina

d) Provide the link to the sliding-fee scale: <http://www.acuden.pr.gov>

e) If the sliding-fee scale is not statewide, describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).

N/A

### 3.4.2 How will the family's contribution be calculated, and to whom will it be applied?

Check all that apply.

The fee is a dollar amount and:

The fee is per child, with the same fee for each child.

The fee is per child and is discounted for two or more children.

The fee is per child up to a maximum per family.

No additional fee is charged after certain number of children.

The fee is per family.

The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

Other.

Describe:

The fee is a percent of income and:

The fee is per child, with the same percentage applied for each child.

The fee is per child, and a discounted percentage is applied for two or more children.

- The fee is per child up to a maximum per family.
- No additional percentage is charged after certain number of children.
- The fee is per family.
- The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1).

Describe:

- Other.

Describe:

**3.4.3 Does the Lead Agency use other factors in addition to income and family size to determine each family's co-payment (658E(c)(3)(B))? Reminder ' Lead Agencies may NOT use cost of care or amount of subsidy payment in determining copayments (98.45(k)(2)).**

- No.
- Yes, check and describe those additional factors below.
  - Number of hours the child is in care.

Describe:

In cases where they receive service for a partial period (less than 6 hours), the amount of co-payment is lower compared to the instances in which they receive services for a full period (more than 6 hours).

- Lower co-payments for a higher quality of care, as defined by the state/territory.

Describe:

- Other.

Describe:

**3.4.4 The Lead Agency may waive contributions/co-payments from families whose incomes are at or below the poverty level for a family of the same size (98.45(k)) or for families who are receiving or needing to receive protective services, as determined for purposes of CCDF eligibility, or who meet other criteria established by the Lead Agency (98.45(k)(4)). Does the Lead Agency waive family contributions/co-payments for any of the following? Check all that apply.**

- No, the Lead Agency does not waive family contributions/co-payments.
- Yes, the Lead Agency waives family contributions/co-payments for families with an income at or below the poverty level for families of the same size.
- Yes, the Lead Agency waives family contributions/co-payments for families who are receiving or needing to receive protective services, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation.

For children identified as being under the protection of the State, we do not require co-payments in the Childcare service. The income of families with children under the protection of the state are exempt from the evaluation of their income and activity. Therefore, we consider it as a zero income (\$ 0.00), which automatically falls as a family with less than half of the state median income reason why they do not have co-payments.

- Yes, the Lead Agency waives family contributions/co-payments for other criteria established by the Lead Agency.

Describe the policy and provide the policy citation.

Families with income less than 50% of the state median income do not have to pay co-payments. Childcare Program Regulation Art. 2.11, Procedural Manual, Eligibility Section, Chapter XIII.

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

A core purpose of CCDF is to promote parental choice and to empower working parents to make their own decisions regarding the child care services that best suit their family's needs. Parents have the option to choose from center-based care, family child care or care provided in the child's own home. In supporting parental choice, the Lead Agencies must ensure that families receiving CCDF funding have the opportunity to choose from the full range of eligible child care settings and must provide families with equal access to child care that is comparable to that of non-CCDF families. Lead Agencies must employ strategies to increase the supply and to improve the quality of child care services, especially in underserved areas. This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each State/Territory identifies and defines its own categories and types of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

### 4.1 Parental Choice in Relation to Certificates, Grants, or Contracts

The parent(s) of each eligible child who receive(s) or is offered financial assistance for child care services has the option of either receiving a child care certificate or, if available, enrolling his or her child with a provider that has a grant or contract for providing child care services (658E(c)(2)(A); 98.30(a)). Even if a parent chooses to enroll his or her child with a provider who has a grant or contract, the parent will select the provider, to the extent practicable. If a parent chooses to use a certificate, the Lead Agency shall provide information to the parent on the range of provider options, including care by sectarian providers and relatives. Lead Agencies must require providers chosen by families to meet health and safety standards and has the option to require higher standards of quality. Lead agencies are reminded that any policies and procedures should not restrict parental access to any type of care or provider (e.g. center care, home care, in-home care, for-profit provider, non-profit provider or faith-based provider, etc.) (98.15 (a)(5)).

**4.1.1 Describe the child care certificate, including when it is issued to parents (before or after the parent has selected a provider) and what information is included on the certificate (98.16 (q)).**

The Child Care Certificate is a document that establishes the agreement between the parents and ACUDEN. In it, the name of the child and the adult caregiver is established, along with the service category according to their age, the type of care service that they will receive, the rate that will be paid for the care service and the copayment if applicable, the type of provider that will provide the service, the period of validity, and the adult's responsibilities. It is important to point out that prior to this certification the provider's availability has already been evaluated with regard to the service Schedule for the child and the costs that they would charge. The provider that will provide the service is always selected by the parents prior to issuing the Certificate and it is based on their selection in terms of their needs and preferences. The selected provider must be certified by ACUDEN as one that meets the standards of the Child Care Program and they are furnished with a copy of the child's Eligibility Certificate. In the event that the provider selected by the parents is new to ACUDEN, they are provided with orientation and verification visits are made as applicable to ensure that they meet the quality standards established by the Program to provide the services requested by the parents.

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

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

Describe:

#### 4.1.3 Child care services available through grants or contracts.

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

No. If no, skip to 4.1.4.

Yes, in some jurisdictions but not statewide.

If yes, describe how many jurisdictions use grants or contracts for child care slots.

Yes, statewide. If yes, describe:

i. How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider:

The parents have the option of selecting the provider that best responds to their needs. For this, the parent receives information on all the service providers in the geographic area where they seek for their child to receive the service. The parent visits the provider or providers that they are interested in and obtains a service availability agreement in which the provider establishes that they are available to serve the child under the requirements stated by the parent. No parent is obligated to select a provider that participates in a funding allocation agreement.

ii. The type(s) of child care services available through grants or contracts:

For the most part, the contracted services are through a licensed child care center with the aim of providing better quality services. Moreover, there are some provider agreements that we call Care Networks, which are licensed homes.

iii. The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers):

Child Care Providers from non-profit agencies or municipalities.

iv. The process for accessing grants or contracts:

During the summer, a request for proposals (RFP) is carried out, in which the type of care service that is being requested is established. The proposal guidelines establishing the standards that will be used as a parameter for measurement,

assessment, and compliance for the selection of proponents are published. se lleva a cabo una solicitud de propuestas (RFP) en la que se establece el tipo de servicio de cuidado que se está solicitando. The Administrator of ACUDEN selects the members of the evaluating committee. This Committee makes recommendations to the Administrator based on the results and the Administrator selects them and establishes a legal contract for allocation of funds.

v. How rates for contracted slots are set through grants and contracts:

The cost per contracted slot is set at minimum at the subsidy rate, but other expenses for quality and operation are added. The costs vary, given that the purpose is to increase the inventory of services and the expense is considered based on that reported by the providers in their community.

vi. How the Lead Agency determines which entities to contract with for increasing supply and/or improving quality:

All of the entities that are contracted have two main purposes: to increase the availability of child care services in needy communities and for them to provide quality service. Each proponent provides a justification in their report regarding the need for quality child care services in the community that it seeks to serve. This justification is evaluated by the Committee and the Administrator makes the decision based on the availability of funds.

vii. If contracts are offered statewide and/or locally:

Statewide

4.1.3 Child care services available through grants or contracts.

b) Will the Lead Agency use grants or contracts for child care services to increase the supply and/or quality of specific types of care? Check all that apply.

- Programs to serve children with disabilities
- Programs to serve infants and toddlers
- Programs to serve school-age children
- Programs to serve children needing non-traditional hour care
- Programs to serve children experiencing homelessness
- Programs to serve children in underserved areas
- Programs that serve children with diverse linguistic or cultural backgrounds
- Programs that serve specific geographic areas

- Urban
  - Rural
  - Other
- Describe

#### 4.1.3 Child care services available through grants or contracts.

c) Will the Lead Agency use grants or contracts for child care services to increase the quality of specific types of care? Check all that apply.

- Programs to serve children with disabilities
  - Programs to serve infants and toddlers
  - Programs to serve school-age children
  - Programs to serve children needing non-traditional hour care
  - Programs to serve homeless children
  - Programs to serve children in underserved areas
  - Programs that serve children with diverse linguistic or cultural backgrounds
  - Programs that serve specific geographic areas
    - Urban
    - Rural
    - Other
- Describe

#### 4.1.4 Certify by describing the Lead Agency's procedures for ensuring that parents have unlimited access to their children whenever their children are in the care of a provider who receives CCDF funds (658E(c)(2)(B); 98.16(t)).

Regulation 8687 (2016) establishes in Ch. 3, Article 3.1 the service provider's responsibilities and clearly establishes that they must allow parents Access to the center at any time that they deem such to be necessary. Furthermore, on the Health and Safety monitoring form, it is evaluated whether the provider complies with this policy. The parents receive orientation regarding their right to Access the child care center and if they do not have access, they are encouraged to report such to ACUDEN immediately in order for the corresponding actions to be taken. In those cases in which the provider limits entry to the parents while the children are being cared for and they refuse to comply and provide access and change their policy, they CCDF funds are withdrawn immediately, the Licensing Office is informed for the

corresponding action to be taken, and the parents are offered the selection of another provider that meets the requirements of the Program and that responds to their needs.

**4.1.5 The Lead Agency must allow for in-home care (i.e., care provided in the child's own home) but may limit its use (98.16(i)(2)). Will the Lead Agency limit the use of in-home care in any way?**

- No.
- Yes. If checked, what limits will the Lead Agency set on the use of in-home care? Check all that apply.
  - Restricted based on minimum the number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements.  
Describe:
  - Restricted based on the provider meeting a minimum age requirement. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2).  
Describe:
  - Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours).  
Describe:
  - Restricted to care by relatives.  
Describe:
  - Restricted to care for children with special needs or a medical condition.  
Describe:  
In-home care may be provided to those children who have any medical condition that limits them from receiving services outside of their home or who have any special need documented by a physician. For this, the parents select a provider that best responds to their needs.

- Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF.

Describe:

- Other.

Describe:

## 4.2 Assessing Market Rates and Child Care Costs

Lead Agencies have the option to conduct a statistically valid and reliable (1) market rate survey (MRS) reflecting variations in the price to parents of child care services by geographic area, type of provider, and age of child and/or (2) an alternative methodology, such as a cost estimation model (658E(c)(4)(B)). A cost estimation model estimates the cost of care by incorporating both data and assumptions to model what expected costs would be incurred by child care providers and parents under different cost scenarios. Another approach would be a cost study that collects cost data at the facility or program level to measure the costs (or inputs used) to deliver child care services. The MRS or alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan.

Note - Any Lead Agency considering using an alternative methodology, instead of a market rate survey, is required to submit a description of its proposed approach to its ACF Regional Child Care Program Office for pre-approval in advance of the Plan submittal (see <https://www.acf.hhs.gov/occ/resource/ccdf-acf-pi-2016-08>). Advance approval is not required if the Lead Agency plans to implement both a market rate survey and an alternative methodology. In its request for ACF pre-approval, a Lead Agency must:

- Provide an overview of the Lead Agency's proposed approach (e.g., cost estimation model, cost study/survey, etc.), including a description of data sources.
- Describe how the Lead Agency will consult with the State's Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.
- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead

Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.

- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care'such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.

- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.

- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location and quality.

- Describe how the alternative methodology will use current, up to date data.

- Describe the estimated reporting burden and cost to conduct the approach.

**4.2.1 Please identify the methodology(ies) used below to assess child care prices and/or costs.**

MRS

Alternative methodology.

Describe:

Both.

Describe:

**4.2.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors (98.45 (e)).**

Describe how the Lead Agency consulted with the:

a) State Advisory Council or similar coordinating body:

**ACUDEN uses the service rates set forth in the 2016 State Plan. Rates were established in the 2016 Plan as required by the methodology suggested by the ACF. The study results were included in the draft state plan and were shared with the State Advisory Council in force at the time.**

b) Local child care program administrators:

**Rates based on the MRS 2016 were included in the draft 2016 State Plan and were published and shared with the child care center director's association, to obtain their comments and suggestions.**

c) Local child care resource and referral agencies:

N/A

d) Organizations representing caregivers, teachers, and directors:

N/A

e) Other. Describe:

N/A

**4.2.3 Describe how the market rate survey is statistically valid and reliable. To be considered valid and reliable, the MRS must represent the child care market, provide complete and current data, use rigorous data collection procedures, reflect geographic variations, and analyze data in a manner that captures other relevant differences. For example, market rate surveys can use administrative data, such as child care resource and referral data, if they are representative of the market. If an alternative methodology, such as cost modeling, is used, demonstrate that the methodology used reliable methods.**

The market rate survey performed by ACUDEN through Coopsei used a quantitative methodology. This methodology is useful when collecting numerical data to describe a phenomenon (Creswell, 2008; Hernández Sampieri, Fernández Collado & Baptista Lucio,

2014). Creswell (2008) indicates that the use of quantitative methods allows the researcher to study tendencies. In the case at hand, the aim was to study the dollar amount parents pay to procure child care services for their children. Research design refers to the planning and implementation of procedures used to find answers to research questions (Hernández Sampieri, Fernández Collado & Baptista Lucio, 2014). As the term implies, market rate surveys use survey research as its design. Survey research is typically a quantitative design in which the researcher collects, analyzes, and reports numerical data in an aggregated form (Fowler, 2013). The data gathered allows the researcher to describe and compare groups of individuals or entities in one or more variables. The questionnaire is the instrument used in survey research. Questionnaires can be administered and collected using different ways (e.g., regular mail, Internet, electronic mail, telephone, fax). Each form of administration has its strengths and challenges. However, what lies underneath obtaining reasonable response rates are the steps taken to follow up respondents. A response rate of 65 percent or higher is desirable, as recommended in the final rule (Early Childhood Training and Technical Assistance System, 2018b). The method used in this study is the telephone survey. In this form of administration, research staff can follow up nonresponsive providers by making multiple calls and coordinating convenient interview times, which may increase response rates. “Additionally, having well-trained interviewers can improve the consistency of the responses” (Early Childhood Training and Technical Assistance System, 2018b, p. 5). The following sections describe the steps taken in order to procure the necessary data to assess market rates.

**Sampling:** Child care providers were identified using the information obtained from the Department of Family Licensing Office. The licensing databases are generally the most comprehensive source of information for identifying the regulated child care programs operating legally within a state that provide services to the public (Early Childhood Training and Technical Assistance System Early Childhood Training and Technical Assistance System, 2018a). The database provided was revised and transferred to a Microsoft Excel spreadsheet. It included a total of 843 providers. The spreadsheet contained a total of 122 foster homes, 36 institutions, and 2 group homes. These 160 homes and institutions were discarded from the sample, for parents do not pay for the services their children receive. Also, another 24 centers were excluded from the sample because they: were duplicates, did not have contact information, or offered subsidized services only. Therefore, the population surveyed consisted of 659 licensed centers and homes. This number represents 100% percent of applicable providers. A sample of providers was not selected. Instead, all providers that qualified for the study were included (i.e., the target population was surveyed).

**Data Collection Process:** CoopSEI research staff developed an interview protocol to guide the data collection process. The interview protocol included three documents. The first document is an *Interview Guide* with instructions on how to conduct the phone interview. The interview guide contained information on how to approach care providers and a description of the market rate survey process, purpose, and importance (phone call’s purpose, data required, and the importance of the data and their cooperation). It also informed that: participation was voluntary, they had the right to decide to participate, they did not have to answer any question that they did not want to answer, and that answers were confidential. The latter is consistent with the informed consent process, which is an essential component related to research ethics principles of confidentiality and the freedom to choose whether to participate or not. The second document was the *Data Collection Sheet*. This sheet included questions related to the child care facility’s contact information and location, and the rates established for each population group receiving services. Items related to the child care facility’s contact information and location included: name, address, telephone, region,

municipality, type of child care facility (center or licensed home) and whether it was in an urban or a rural zone. The data related to the child care rates contained the following: number of children receiving services, maximum enrollment established in its license, number of hours included in the price, type of rate (hourly, weekly, monthly), full-time rate, part-time rate, registration cost (month, trimester, annual), and summer rate if applicable. The number of children according to the license and the number of children currently enrolled in the child care facility were divided according to the following categories: Special Needs (18 years and 11 months of age or less), Infants (1 year and 6 months of age or less) and Toddlers (1 year and 7 months until 2 years and 11 months), Preschoolers (3 years until four years and 11 months), and School-age (5 years until 12 years and 11 months). The *Data Collection Sheet* was used in printed and online versions. The online version facilitated and reduced errors during the data entry process, while the printed version was used when the staff did not have access to the Internet. The third document was a *Call Log* in which the staff registered their progress and difficulties contacting and surveying the providers. This log was created using a Microsoft Excel spreadsheet. It provided a record of the date and time in which each call was made. The interviewers registered in the log the progress during telephone calls, as well as the reasons why the provider cannot be contacted. Child care personnel within the Administration for the Integral Child Care and Development (ACUDEN, for its Spanish Acronym) were trained to conduct the phone interviews on May 8th, 2019 from 9:00 am through 12:00 pm. The training session included demonstrations and role-playing. CoopSEI recruited additional interviewers to complete the data gathering procedures. They also participated in the training session. Interviewers were continuously supervised and supported to address their concerns and provide answers to questions that emerged during the data collection process. This supervision tasks included giving support to the staff when they needed reassurance that they were conducting the procedures correctly. Interviewers made a minimum of five calls before stating that a care provider cannot be reached or that the care provider was not willing to participate. All available contact phone numbers for each care provider were called during multiple days and times. When respondents informed that they were not able to provide the data when requested, the survey staff personnel inquired about the best day and time to call back. As a quality assurance process, CoopSEI staff examined, each week, the information entered in the Data Collection Sheet and the Data Logs. The interviewers were contacted immediately when a data error or inconsistency was identified. In the final phase of the data gathering process, a random sample of 40 centers were called again. This process had two purposes: to make sure that child care providers were contacted and to verify the data collected by the staff. The data collection process was carried out from May 9 to June 7, 2019. A total of 6 meetings were held with ACUDEN staff during the coordination and implementation of the study. ACUDEN, as the Lead Agency, provided continuous monitoring of the process, which is essential to guarantee the success of the survey. Response Rate The total number of child care service providers' telephone numbers provided by ACUDEN was 659. From these, 56 were eliminated because they belonged to centers that did not qualify for the study as they only provide subsidized services with funds from ACUDEN or another organization, and do not offer services to children from the private sector. Additionally, 15 child care providers were excluded because they were no longer in operation. Moreover, call efforts revealed that 60 telephone numbers led to wrong numbers and numbers out of service. Likewise, 75 telephone numbers were never answered. Therefore, the total number of qualifying telephone numbers was 453 (see figure 1); numbers which were used to calculate the response rate. The final number of Child care providers that participated in the Market Rate

Survey analysis was 339, resulting in a 74.83% response rate.

**DATA ANALYSIS:** Data Rates Conversions Data conversions were performed depending on how child care providers reported child care rates. All informed rates were converted to monthly rates to enable comparisons among child care providers. If a child care provider reported a weekly rate, the amount was converted to a monthly rate by multiplying the weekly rate by 4.345238. This value was obtained from the following equation  $365 \div 12 \div 7 = 4.345238$  (i.e., days in a year  $\div$  months in a year  $\div$  days in a week). On the other hand, if a child care provider reported a daily rate, the amount was converted to a weekly rate. Once expressed as a weekly rate, the amount can be converted to a monthly rate using the procedure described in the previous paragraph. The daily rate was converted to a weekly rate by multiplying the daily rate by 5 (i.e., the number of workdays within a week). Another useful conversion to make comparisons is to convert a monthly rate to a daily rate. In order to obtain a daily rate, the monthly rate is divided by 21.72619. This value was obtained from the following equation  $4.345238 \times 5 = 21.72619$  (weeks within a month  $\times$  work days within a week). Most child care providers charged parents with an annual registration fee. This fee was included in the monthly rate by dividing it by 10; thus, excluding the two summer months. The result was then added to the monthly rate. Rates Computed and Analyzed: The computational methods used in previous studies were incorporated to the rate analysis to enable comparison of child care provider's rate across time. SPSS version 22 was used in making all calculations and analysis. The SPSS syntax used to compute rates can be seen in Appendix A (unadjusted rates) and Appendix B (adjusted rates). Unadjusted Monthly Rate. The unadjusted monthly rate corresponds with the one informed by child care providers. The only adjustment performed, if necessary, was to convert a daily or weekly rate to a monthly rate using the equations described in the previous section. Adjusted Monthly Rate to a Ten-Hour Day (A10). This adjusted monthly rate is calculated multiplying the hourly rate by 10 and then by 21.72619. This rate recognizes that a typical workday for parents consists of eight hours and that parents need time to travel from work to the child care facility during their lunch hour and at the end of the day. Adjusted Monthly Rate to a Three-Hour Day (A3). This adjusted monthly rate is calculated multiplying the hourly rate by 3 and then by 21.72619. It was computed for school-age children because the service provided is based on extended day services only (i.e., on a part-time basis). Adjusted Monthly Rate (A6). This adjusted monthly rate is equal to the unadjusted monthly rate if the child care provider offers at least 6 hours of service daily or equal to the Adjusted Monthly Rate to a Ten-Hour Day (A10) if the child care provider offers less than 6 hours of service daily. Adjusted Monthly Rate (A6M). It is the adjusted monthly rate A6 plus one tenth of the registration cost. One tenth of the registration cost was added as child care providers allow parents to include registration costs in their monthly payment instead of paying the whole amount at the beginning of the year. The registration cost is divided by ten because it excludes the two summer months. Monthly Rate (A5\_5). This monthly rate is computed and used by ACUDEN for child care providers that provided extended services to school-age children. It is important to notice that this is not an adjusted monthly rate. The monthly rate is computed using only the data given by child care facilities that provide services to school-age children on a part-time basis (i.e., less than 6 hours a day). Statistical Analyses: Descriptive statistical analyses were performed to examine measures of central tendency (mean, median, and mode), dispersion (standard deviation), and distribution (frequency, percentages, and percentiles 75 through 95). Inferential statistical analyses were also performed to compare the means of groups formed by, for example, zone (urban and rural) and region. The comparison of rates according to zones was computed using the

independent samples *t*-test and the Mann-Whitney U test. These tests are appropriate to compare the means of two independent groups (King, Rosopa, & Minium, 2011). Mann-Whitney U was used if the assumptions of the *t*-test were not met. The One-Way Analysis of Variance (ANOVA) and the Kruskal Wallis test were used to compare the ten groups formed by the variable region. King, Rosopa, and Minium (2011) state that ANOVA and Kruskal-Wallis are appropriate when comparing more than three (3) independent groups. Kruskal Wallis was used if the assumptions of the ANOVA were not met. Mann-Whitney U and Kruskal-Wallis are nonparametric tests.

#### **4.2.4 Describe how the market rate survey or alternative methodology reflects variations in the price or cost of child care services by:**

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

The rate study was carried out through a representative sample of the child care centers and care homes in different municipalities on the island. From a total of 78 towns, 59 or a total of 76% of them were represented in the study. In the study, significant differences in rates between urban and rural areas are not considered, but differences in the type of service in the areas are. In the urban area, there is a greater demand for service through child care centers, while in the rural areas there is a greater demand for service in care homes. This information is important when establishing strategies to guarantee equal access to the participating families.

**b) Type of provider. Describe:**

ACUDEN establishes different rates based on the type of service that the provider offers. The rates are classified in payments to licensed centers and payments to care homes.

**c) Age of child. Describe:**

Rates are established based on the child's age and whether they are a child with special needs. The age categories are: infants, maternal, preschool, and school-age.

**d) Describe any other key variations examined by the market rate survey or alternative methodology, such as quality level.**

All of the child care centers included in the study are licensed in at least meeting the basic quality level required by the state laws governing the Licensing Office.

**4.2.5 After conducting the market rate survey or alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or alternative methodology. The detailed report must also include the estimated cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, pre-K standards, Head Start performance standards, or State defined quality measures.)**

Describe how the Lead Agency made the results of the market rate survey or alternative methodology report widely available to the public (98.45(f)(1)). by responding to the questions below.

a) Date of completion of the market rate survey or alternative methodology (must be no earlier than July 1, 2016, and no later than July 1, 2018). July 12, 2019

b) Date the report containing results was made widely available - no later than 30 days after the completion of the report. July 30, 2019

c) Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted.

[http://www.acuden.pr.gov/Programa\\_Child\\_Care/Pages/default.aspx](http://www.acuden.pr.gov/Programa_Child_Care/Pages/default.aspx)

Moreover, hard copies are available to the public at the Central Level Offices, by request.

d) Describe how the Lead Agency considered stakeholder views and comments in the detailed report.

The suggestions and comments on the MRS were shared by the Child Care Providers Association with the Administrator of the Lead Agency, ACUDEN.

### 4.3 Setting Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or alternative methodology, at a level to ensure equal access for eligible families to child care services that are comparable with those provided to families not receiving CCDF funds. The Lead Agency must re-evaluate its payment rates at least every 3 years.

**4.3.1 Provide the base payment rates and percentiles (based on the most recent MRS) for the following categories below. Percentiles are not required if the Lead Agency conducted an alternative methodology only (with pre-approval from ACF), but must be reported if the Lead Agency conducted an MRS alone or in combination with an alternative methodology. The ages and types of care listed below are meant to provide a snapshot of the categories on which rates can be based and are not intended to be comprehensive of all categories that might exist or to reflect the terms used by the Lead Agency for particular ages. Please use the most populous geographic region (area serving highest number of CCDF children) to report base payment rates below, if they are not statewide. Note: If the Lead Agency obtained approval to conduct an alternative methodology, then reporting of percentiles is not required.**

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

Rate \$ 379 per monthly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75%

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

Rate \$ 310 per monthly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75%

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

Rate \$ 379 per monthly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75%

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

Rate \$ 310 per monthly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75%

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

Rate \$ 369 per monthly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75%

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 369 per monthly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75%

g) School-age child (6 years), full-time licensed center care in most populous geographic region

Rate \$ 288 per monthly unit of time (e.g., daily, weekly, monthly, etc.)

Percentile of most recent MRS: 75%

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region

Rate \$ 222 per monthly unit of time (e.g., daily, weekly, monthly)

Percentile of most recent MRS: 75%

i) Describe how part-time and full-time care were defined and calculated.

Full-time care is that which is provided for a total of more than six hours of care to the child during a 24-hour period per day, while part-time is from one hour to 5 hours of service within a 24-hour period per day.

j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). October 1, 2019

k) Identify the most populous area of the state used to complete the responses above. The most populous areas and which had the greatest representation in the randomized sampling were San Juan and Bayamón.

- l) Provide the citation or link, if available, to the payment rates. <http://www.acuden.pr.gov>
- m) If the payment rates are not set by the Lead Agency for the entire state/territory, describe how many jurisdictions set their own payment rates (98.16(i)(3)).

N/A

#### 4.3.2 Lead Agencies can choose to establish tiered rates, differential rates, or add-ons on top of their base rates as a way to increase payment rates for targeted needs (i.e., a higher rate for special needs children as both an incentive for providers to serve children with special needs and as a way to cover the higher costs to the provider to provide care for special needs children).

Check and describe the types of tiered reimbursement or differential rates, if any, the Lead Agency has chosen to implement. In the description of any tiered rates or add-ons, at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS and/or an alternative methodology, and the amount of the rate. Check all that apply.

Differential rate for *non-traditional hours*.

Describe:

Differential rate for *children with special needs*, as defined by the state/territory.

Describe:

ACUDEN takes into consideration the fact that, in order to provide care needs to a child with special needs, the provider incurs greater expenses, wherefore a part of the survey is geared toward exploring this information with providers. The study establishes a higher pay rate than the base rate for the age categories. Therefore, this is the amount that is paid for a child who on their eligibility is identified as special needs.

Differential rate for *infants and toddlers*. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on.

Describe:

- Differential rate for *school-age programs*. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on.

Describe:

- Differential rate for higher quality, as defined by the state/territory.

Describe:

- Other differential rates or tiered rates.

Describe:

- Tiered or differential rates are not implemented.

#### 4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access

**4.4.1 Lead Agencies must certify that CCDF payment rates are sufficient to ensure equal access for eligible families to child care services comparable to those provided by families not receiving CCDF assistance (98.16(a)). Certify that payment rates reported in 4.3.1 are sufficient to ensure equal access by providing the following summary of facts (98.45(b)):**

a) Describe how a choice of the full range of providers eligible to receive CCDF is made available; the extent to which eligible child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices.

All providers that comply with the state licensing laws are able to participate in the Child Care Program and serve the participating children. The Program has identified the providers that currently receive CCDF funds and provides this information to parents through individual and group orientations, as well as on the webpage, for them to freely select the provider that works best for them. If the parent decides to select another provider and that provider wishes to provide the service to them, they are evaluated to ensure that they meet the licensing requirement and the standards of the Program and they are integrated into the directory and as an option to parents. Every provider is offered as the rate established in the Market Rate Survey by the Program as the maximum rate for payment for their services. If the established amount is exceeded and the parent still wants the service with that provider, the parent assumes the cost

difference but also has the option to select another less expensive provider from the participant directory.

b) Describe how payment rates are adequate and have been established based on the **most recent MRS or alternative methodology** . Note: Per the preamble (81 FR 67512), in instances where a MRS or alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result.

Care service payments to the CCDF providers are established using the Market Rate Survey. This study used the universe of state-licensed care providers to ensure that the participation in the study was a representative one. In the survey, a Response Rate of 74.83% was achieved, which guarantees an excellent representation of the current costs for child care services in Puerto Rico. This study used a quantitative methodology, which facilitated the establishing of statistical trends to establish the rates.

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF.

All child care centers in PR must be licensed in order to operate. The Health and Safety standards, adult-child ration, and quality in development are currently established in the licensing law. The surveyed centers in the rate study were all licensed, which supports that the reported rate allows them to operate and comply with the law.

d) Describe how the Lead Agency took the cost of higher quality into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For States without a QRIS, the States may use other quality indicators (e.g. provider status related to accreditation, Pre-K standards, Head Start performance standards, or State defined quality measures).

The level considered by ACUDEN as high quality is based on the quality standards established in the Head Start Program, which exceeds the base quality required by the licensing law.

e) How will the Lead Agency ensure that the family contribution/co-payment, based on a sliding-fee scale, is affordable and is not a barrier to families receiving CCDF funds (98.16 (k))? Check all that apply.



Limit the maximum co-payment per family.

Describe: .

Limit the combined amount of co-payment for all children to a percentage of family income. List the percentage of the co-payment limit and

Minimize the abrupt termination of assistance before a family can afford the full cost of care ('the cliff effect') as part of the graduated phase-out of assistance discussed in 3.1.7.

Whenever the family exceeds the established income, in order to avoid an abrupt termination of the services, they are offered a transition period and a financial adjustment, this in order to facilitate being able to pay for the care and thereby not expose them to the risk of job loss due to not being able to afford their children's care. This period never exceeds three months of services.

Other.

Describe:

f) To support parental choice and equal access to the full range of child care options, does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

No

Yes. If yes:

i. Provide the rationale for the Lead Agency's policy to allow providers to charge families additional amounts above the required co-payment, including a demonstration of how the policy promotes affordability and access for families.

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.

iii. Describe the Lead Agency's analysis of the interaction between the additional amounts charged to families with the required family co-payment, and the ability of current subsidy payment rates to provide access to care without additional fees.

g) Describe how Lead Agencies' payment practices described in 4.5 support equal access to a range of providers.

The payment of services to providers is carried out through the electronic case

management system, CIMA. This facilitates the eligibility technician recording attendance and the payment is proceeded to be made within 21 days through direct electronic payment to the provider's account. This type of transaction facilitates the existence of appropriate access and continuity of services, in addition to preventing providers not wanting to serve the children due to bureaucracy or complexity in processes to obtain their money for the service rendered.

h) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.

Geographic area.

Describe:

Type of provider.

Describe:

The licensed care centers have a higher pay rate than the care homes, this given that the operating expenses generated by a center are higher.

Age of child.

Describe:

The children's ages are determining factors in the costs of care. For example, an infant child has a higher rate than a preschool child, this given that the complexity of care for an infant is of a greater complexity than that of a preschool child.

Quality level.

Describe:

Other.

Describe:

i) Describe any additional facts that the Lead Agency considered in determining its payment rates to ensure equal access. Check all that apply and describe:

Payment rates are set at the 75th percentile benchmark or higher of the most recent MRS.

Describe:

In the most recent MRS, the 75th percentile was used to establish family income in order to increase participation by more families in care services.

- Based on the approved alternative methodology, payments rates ensure equal access.

Describe:

- Feedback from parents, including parent surveys or parental complaints.

Describe:

- Other.

Describe:

#### 4.5 Payment Practices and the Timeliness of Payments

Lead Agencies are required to demonstrate that they have established payment practices applicable to all CCDF child care providers that include ensuring the timeliness of payments by either (1) paying prospectively prior to the delivery of services or (2) paying within no more than 21 calendar days of the receipt of a complete invoice for services. To the extent practicable, the Lead Agency must also support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by (1) paying based on a child's enrollment rather than attendance, (2) providing full payment if a child attends at least 85 percent of the authorized time, (3) providing full payment if a child is absent for 5 or fewer days in a month, or (4) using an alternative approach for which the Lead Agency provides a justification in its Plan (658E(c)(2)(S)(ii); 98.45(l)(2)).

Lead Agencies are required to use CCDF payment practices that reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF-funded assistance. Unless a Lead Agency is able to demonstrate that the following policies are not generally accepted in its particular state, territory, or service area or among particular categories or types of providers, Lead Agencies must (1) pay providers based on established part-time or full-time rates rather than paying for hours of service or smaller increments of time and (2) pay for reasonable, mandatory registration fees that the provider charges to private-paying parents (658E(c)(2)(S); 98.45(l)(3)).

In addition, there are certain other generally accepted payment practices that are required. Lead Agencies are required to ensure that child care providers receive payment for any

services in accordance with a payment agreement or an authorization for services, ensure that child care providers receive prompt notice of changes to a family's eligibility status that could impact payment, and establish timely appeal and resolution processes for any payment inaccuracies and disputes (98.45(l)(4) through (6); 658E(c)(2)(S)(ii); 98.45(l)(4); 98.45(l)(5); 98.45(l)(6)).

**4.5.1 Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.**

a) Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

Paying prospectively prior to the delivery of services.

Describe the policy or procedure.

Paying within no more than 21 calendar days of the receipt of a complete invoice for services.

Describe the policy or procedure.

ACUDEN will receive the evidence of attendance for the child within five business days after the month of service at the regional offices. The attendance sheet may be sent by e-mail, in person, or mail. The Eligibility Technician evaluates the attendance to determine whether it meets more than 80% attendance for the month when recording it for payment in the CIMA system. In cases in which the child does not meet 80% attendance but for some justified reason, for example illness, the payment is approved. After having recorded the attendance, the Finance Office makes a payment to all the providers that have registered their attendance as evidence that the service was rendered. This payment is made electronically to their bank account and it should not exceed 21 calendar days.

b) To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by: (Note: The Lead Agency is to choose at least one of the following):

Paying based on a child's enrollment rather than attendance.

Describe the policy or procedure.

- Providing full payment if a child attends at least 85 percent of the authorized time.

Describe the policy or procedure.

- Providing full payment if a child is absent for five or fewer days in a month.

Describe the policy or procedure.

- Use an alternative approach for which the Lead Agency provides a justification in its Plan.

If chosen, please describe the policy or procedure and the Lead Agency's justification for this approach.

ACUDEN evaluates the child's attendance and they have to have participated in the service for at least 80% of the days in the month. IN the evento that the child has not completed 80% but their absence has been due to a justified reason, such as illness, travel, family vacation, natural disasters, among others, it is justified and payment is approved based on the fact that the provider was based on the fact that the provider was available to provide the service and is thus not penalized.

c) The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

- i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time).

Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time).

ACUDEN establishes its rates and costs based on a market study to guarantee equal access to participating families, this pursuant to Regulation 8687, Ch. 4, Art 4.1. The Child Care Program does not pay based on hours of individual services. The rates are fixed and are based on payments for monthly services. These rates are defined for full-time and part-time. A fixed part-time rate may be from 1 to 5 hours of services. A fixed full-time rate is from 6 to 10 hours of services.

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents.

Describe the policy or procedure.

In Puerto Rico, very few providers require payments in order to register. ACUDEN does not pay for said tuition payments given that it offers a fixed rate for child care services. In the event that the parent selects a provider to require this type of payment, the parent must assume said expense. If, on the contrary, they cannot assume it, they are provided with orientation and they are offered the variety of licensed providers that do not require tuition payment and participate in CCDF to select one that suits their needs.

d) The Lead Agency ensures that providers are paid in accordance with a written payment agreement or an authorization for services that includes, at a minimum, information regarding provider payment policies, including rates, schedules, any fees charged to providers, and the dispute-resolution process. Describe:

In order to receive the CCDF funds, every provider receives a Provider Certification after being evaluated and being found to be in compliance with the standards of the Program. In said document, the conditions and responsibilities of both parties-the provider and ACUDEN-are established. In these conditions, it is stipulated that in order to receive payment for the child care services, the child must meet at least 80% attendance or have a justified cause for not having done so. Also, in the orientation provided by ACUDEN to new providers, this matter is explained to them in detail before the provider decides to provide services to the CCDF families. Furthermore, the provider receives a copy of the child's service eligibility certification that stipulates the rate paid, service schedule, and co-payment, if applicable.

e) The Lead Agency provides prompt notice to providers regarding any changes to the family's eligibility status that could impact payments, and such a notice is sent no later than the day that the Lead Agency becomes aware that such a change will occur.

Describe:

In order for the provider to know the conditions of the service agreed to with the parents, the provider is provided with a copy of the child's Eligibility Certification. Should a change arise that requires amending the eligibility certification, it is performed so that it takes

effect the next calendar month after the date of the amendment. This change information is provided to the provider by way of a copy of the certification.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

Conflicts related to provider payments are immediately handled in the Program, this without exceeding ten business days. In those cases involving any issue of fiscal default required by the agency is handled by the Finance Office, which is governed by the requirements of the Department of the Treasury, the provider shall have 15 days to appeal before the Finance Office Director. If the conflicts cannot be resolved or the provider understands that the decision was not adverse, Regulation 8687, Art. 6.1 establishes the terms for appealing before the Adjudicative Board of the Department of Family, a quasi-judicial entity. The time for doing so shall be 15 calendar days from the determination by ACUDEN and the process established in said Article shall be followed.

g) Other. Describe:

N/A

#### 4.5.2 Do payment practices vary across regions, counties, and/or geographic areas?

No, the practices do not vary across areas.

Yes, the practices vary across areas.

Describe:

#### 4.6 Supply-Building Strategies to Meet the Needs of Certain Populations

Lead Agencies are required to develop and implement strategies to increase the supply of and to improve the quality of child care services for children in underserved areas; infants and toddlers; children with disabilities, as defined by the Lead Agency; and children who receive care during non-traditional hours (658 E(c)(2)(M); 98.16 (x)).

**4.6.1 Lead Agencies must identify shortages in the supply of high-quality child care providers. List the data sources used to identify shortages, and describe the method of tracking progress to support equal access and parental choice.**

In licensed family child care.

In licensed child care centers.

ACUDEN has agreements with municipalities and non-profit agencies, which through proposals to provide child care services, they express the need for services in the communities where they are located. These proposals must be based on a needs study of the community taking into consideration the child care services provided by other programs such as Head Start and Early Head Start. Additionally, waiting lists are used to measure the demand for services throughout the regions. Based on these lists, the applications are identified according to the municipality in which the needy families live, which enables us to better serve the geographic areas where there is less access to child care services. All of the centers or providers in homes are obligated to have a license to operate issued by the Licensing Office. Moreover, they are required to participate in an orientation and training on the quality standards and Health and Safety requirements, and they are provided with technical assistance, which enables parents to select providers that provide quality services.

Other.

**4.6.2 Describe what method(s) is used to increase supply and to improve quality for the following.**

a) Children in underserved areas. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

ACUDEN requests proposals from providers to provide child care services in different communities. The agency establishes guidelines and requirements to

guarantee quality sought to serve the families. Based on the evaluation of said proposals, the Administrator selects those that meet the expectations of quality and a contractual agreement is established to allocate the funds.

Family child care networks.

Describe:

Through the request for service proposals, benefits are granted to provide services through the Child Care Networks, a system that guarantees quality in the services since they are assigned an inspector and director, whereby oversight of compliance is direct, which facilitates meeting the program standards.

Start-up funding.

Describe:

Technical assistance support.

Describe:

The regional offices and central office provide training sessions and follow-up for providers to assist them in the quality compliance required by the Child Care Program.

Recruitment of providers.

Describe:

We continuously provide orientation to parents, municipalities, communities, and providers regarding our services and we are open to the recruitment of new providers. These new providers are provided with orientation on the program standards and they are given technical assistance.

Tiered payment rates (as discussed in 4.3.2).

Describe:

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

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

b) Infants and toddlers. Check and describe all that apply.

Grants and contracts (as discussed in 4.1.3).

Describe:

ACUDEN identifies specific funds to be used for the infant and maternal populations. Based on these funds, proposals are then requested from providers to offer child care services. The agency establishes the requirements to guarantee quality that is sought to serve the families. Based on the evaluation of said proposals, the Administrator selects those that meet the expectations of quality and a contractual agreement is established to allocate the funds.

Family child care networks.

Describe:

Through the request for service proposals, benefits are granted to provide services through the Child Care Networks, a system that guarantees direct oversight and quality in the services given that it must meet the program standards.

Start-up funding.

Describe:

- Technical assistance support.

Describe:

Based on need, training sessions and follow-ups are provided to providers to assist them in the quality compliance required by the Child Care Program.

- Recruitment of providers.

Describe:

We continuously provide orientation to parents, municipalities, communities, and providers regarding our services and we are open to the recruitment of new providers. These new providers are provided with orientation on the program standards and they are given technical assistance.

- Tiered payment rates (as discussed in 4.3.2) .

Describe:

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

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

c) Children with disabilities. Check and describe all that apply.

- Grants and contracts (as discussed in 4.1.3).

Describe:

This population requires special attention on the part of the provider, wherefore, based on need, ACUDEN requests proposals from providers to provide child care services adapted to this population. The agency establishes guidelines and requirements to guarantee quality sought to serve these children. Based on the evaluation of said proposals, the Administrator selects those that meet the expectations of quality and a contractual agreement is established to allocate the funds.

- Family child care networks.

Describe:

- Start-up funding.

Describe:

- Technical assistance support.

Describe:

We provide training and follow up to providers to assist them in the quality compliance required by the Child Care Program.

- Recruitment of providers.

Describe:

We continuously provide orientation to parents, municipalities, communities, and providers regarding our services and we are open to the recruitment of new providers. These new providers are provided with orientation on the program standards and they are given technical assistance.

- Tiered payment rates (as discussed in 4.3.2).

Describe:

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

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

d) Children who receive care during non-traditional hours. Check and describe all that apply

- Grants and contracts (as discussed in 4.1.3).

Describe:

ACUDEN requests proposals from providers to provide child care services in different communities. The agency establishes guidelines and requirements to guarantee quality sought to serve the families. Based on the evaluation of said proposals, the Administrator selects those that meet the expectations of quality and a contractual agreement is established to allocate the funds.

- Family child care networks.

Describe:

- Start-up funding.

Describe:

- Technical assistance support.

Describe:

Through the regional offices and central office, training sessions and technical assistance are provided to participating providers.

- Recruitment of providers.

Describe:

We continuously provide orientation to parents, municipalities, communities, and providers regarding our services and we are open to the recruitment of new providers. These new providers are provided with orientation on the program standards and they are given technical assistance.

- Tiered payment rates (as discussed in 4.3.2) .

Describe:

- Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

- Accreditation supports.

Describe:

- Child Care Health Consultation.

Describe:

- Mental Health Consultation.

Describe:

- Other.

Describe:

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

e) Other. Check and describe all that apply:

Grants and contracts (as discussed in 4.1.3).

Describe:

Family child care networks.

Describe:

Start-up funding.

Describe:

Technical assistance support.

Describe:

Recruitment of providers.

Describe:

Tiered payment rates (as discussed in 4.3.2).

Describe:

Support for improving business practices, such as management training, paid sick leave, and shared services.

Describe:

Accreditation supports.

Describe:

Child Care Health Consultation.

Describe:

Mental Health Consultation.

Describe:

Other.

Describe:

**4.6.3 Lead Agencies must prioritize investments for increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and do not currently have sufficient numbers of such programs.**

a) How does the Lead Agency define areas with significant concentrations of poverty and unemployment?

In order to serve low-income families, needs studies performed by the municipalities are evaluated when presenting proposals for allocation. These studies are based on the low-income communities that require services. Moreover, there is an agreement with the TANF program that provides us with information and refers its participants that are classified as being at poverty levels to be served by the Program, which also helps us to identify the areas of greatest poverty and demand for services.

b) Describe how the Lead Agency prioritizes increasing access to high-quality child care and development services for children of families in areas that have significant concentrations of poverty and unemployment and that do not have high-quality programs

ACUDEN annually requests proposals for services in communities where there is very little to no quality child care service or where very few to no licensed centers exist. The proponents are municipalities or non-profit foundations that request funds for establishing licensed child care centers in low-income communities through a justification and needs study. This allocation of funds is established through a legal agreement stipulating the quality standards that providers must provide in order to comply with the Program. A specific number of slots, enrollment, where the ages of the children to be served are established, along with Health and Safety requirements for the provider and quality requirements to foster the proper development of the child.

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

Lead Agencies are required to certify that there are in effect licensing requirements applicable to all child care services in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to providers serving CCDF children, whether they are licensed or license-exempt. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for providers of child care in a state or territory and then moves to focus in on CCDF providers who may be licensed, exempt from licensing, or relative providers. The section then covers the health and safety requirements and training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Lead Agencies are also asked to describe any exemptions for relative providers (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children.

Note: When responding to questions in this section, the OCC recognizes that each State/Territory identifies and defines its own categories of care. The OCC does not expect States/Territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements are in effect for all child care staff members that are licensed, regulated or registered under state/territory law and all other providers eligible to deliver CCDF services.

## 5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

**5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below? Check all that apply and provide a citation to the licensing rule.**

Center-based child care.

Describe and Provide the citation:

Law 173 of 2016, "Law for the Licensing of Care, Development and Learning Establishments for Children in the Commonwealth of Puerto Rico. Regulation #8860 of November 29, 2016 for the Licensing of Establishments for the Care, Development, and Learning of Children in the Commonwealth of Puerto Rico establish the requirements for the licensing of Childcare Centers and Foster Homes. Both documents establish general requirements for establishments and specific requirements depending on the type of provider to which they refer. Article 12 of the Regulations establishes the personnel and establishment requirements. On the requirements of the establishment, section 12.1 lists the following: 1. Use Permit of the Permit Management Office (OGPe, by its Spanish acronym) or of the Municipal Urban Planning and Permit Office (OMPUS, by its Spanish acronym); 2. Sanitary License of the Environmental Health Program of the Department of Health (annual); 3. Certification of the Fire Prevention Bureau of the Puerto Rico Fire Department (annual); 4. Certification of the Center for Municipal Tax Revenues (CRIM, by its Spanish acronym); 5. Registration and evidence of payment of Municipal Patent,

when applicable; 6. Puerto Rico State Insurance Fund Corporation Policy (when applicable); 7. Current Public Liability Policy, with evidence of payment, which will cover, among others, accidents within the establishment, its premises and in transportation during outside activities; 8. Menu certified by a registered dietitian nutritionist or certified by the School Lunch Division, as applicable; 9. Layout - it will include the entire area to be used for the service and its interior and exterior measurements; 10. Equipment and materials needed in functional conditions in all the service areas (play and learning areas, bedrooms, living room, kitchen, laundry, restrooms, recreational areas, among others); 11. The Emergency Operational Plan (EOP) will include procedures to deal with potential emergencies and disasters, such as fire, atmospheric phenomena, earthquakes, terrorism, gas emanation, preventive call protocol, among others; the plan will be certified by the State Emergency Management Agency of the municipality; 12. In new applications, a budget and evidence of income will be submitted through a checkbook slip, employer's certificate, income tax return form or another certifying document that reflects economic solvency to comply with the services pretend to be offered; 13. Financial report (annually) that reflects the economic capacity to continue providing the service; it will be certified by an accountant (those establishments administered by the Federal Government agency, the Government of the Commonwealth of Puerto Rico, Municipal Governments and Law 173 of 2016, Law for the Licensing of Care, Development and Learning Establishments for Children in the Commonwealth of Puerto Rico are excluded from complying with the requirements of this section). 14. Annual fumigation and evidence of the contract (The establishment will be fumigated when children are not present). 15. A leasing contract indicating the use that will have the structure (if it is owned by the provider, the owner shall submit a copy of the deed of ownership or certification of the CRIM;). 16. Comply with the disposition of title 11 of the law of 1990 ADA, Americans with disabilities (American Disabilities Act) Copy of Incorporation of the Department of State of Puerto Rico and of the members of the Board of Directors and certification of Good Standing as applicable. 17. Regulations or policy establish by the establishment. should be accessible to the, enrollment, family, custodian or any agency related to the operation of the establishment. This regulation will include among others, the following aspects: Description of the service; Operating rules and procedures Schedule of the services offered Criteria and procedures of income and expenditures Services offered Curriculum or educational activities Handling of Correspondence Responsibility of the staff to report any situation or suspicion of abuse and neglect, and standards of staff; 18. Protocols such as: Management of medical

emergencies and contagious diseases, safe administration of medications, prevention calls, physical or sexual assault, suspected abuse, neglect or exploitation of children according to 246-2011, emergency drills, safe handling of breast milk and others according to need; 19. The record system should have a registry to protect the safety, security and confidentiality of enrollment, parents and employees, all person involved with the use of these records in the establishment will be responsible of it use, these include: records of registration which will include full name and demographic information, name, address and phone number of the family member, guardian or case manager. Description of provided services. Date of enrollment and last day, if applicable. Also must have a record of daily incidents in which will be documented incidents or actions outstanding in each shift, a record of daily inspection - the care, development and learning centers and day care homes will have a Protocol of daily inspection of the child, at the entrance to and exit of the establishment, a record of visits, anyone who visit the establishment must register and provide the following information: date, time of entry and exit, name and last name, Purpose, attendance record, staff establishment will register assistance daily, in the established system for these purposes, record of the handling of prescription drugs, who are receiving drugs should indicate their full name, name of medication, date and time the dosage was administered and the name of the person who administered it, would also include a form with consent of the mother, father, guardian or responsible, as applicable; 20. Transportation - Any establishment that offers this service will have available a motor vehicle and a driver. Both must comply with the norms established by the Public Service Commission as applicable; 21. Telephone Service - Every establishment must have a telephone service, which must be operational and will be located in a place accessible for its use. The establishment will have at sight, in a readily accessible area, the numbers of the emergency agencies (Puerto Rico Police, Fire Department, Emergency Management Office, among others); 22. Equipment inventory; 23. First aid kit. In terms of the personnel requirements, Regulation #8860, in section 12.2, establishes the following: 1. All requirements established in sections 8.1 and 8.2 of these regulations (requirements for background checks and confidentiality); 2. Health Certificate (annually) - If issued by a private physician, it will include the laboratory results for the V.D.R.L. , and tuberculin test or chest X-rays; 3. Negative criminal record certificate (every 6 months) - Infractions to the vehicles and traffic laws will not be considered a crime, except for gross and reckless driving when driving motor vehicles; 4. Negative Certification of Verification of the Sex Offender and Crimes against Minors Registry issued by the Puerto Rico Police (annual); 5. Foster homes will submit the

abuse or negligence record that the Auxiliary Administration for the Social Protection for Children, of the Central Registry of the Administration for Families and Children (ADFAN, by its Spanish acronym), issues annually only for the first license they request; 6. Negative certification of the Administration for the Support of Minors (ASUME, by its Spanish acronym); 7. Annual tax filing certification - Foster homes and care homes must submit a certification from the Department of the Treasury; 8. Annual certification of participation in the Nutrition Assistance Program; 9. Certification of the Integrated Credentials and Criminal History System (SICHDe, by its Spanish acronym); 10. Three reference letters that include the name and last name, address and telephone number of the undersigned. One of them must be from the last employer and two from neighbors with no consanguinity relationship or affinity if applicable. This requirement applies only to foster homes and nursing homes; 11. Authorization in writing that, with due confidentiality measures and due process of law, the Puerto Rico Police Department and the Departments of Justice and the Family and federal authorities respectively can investigate their conduct; 12. First Aid and Cardiopulmonary Resuscitation course in force; 13. Evidence of academic preparation and training taken. At the date of renewal of the license, it is required that: 1. The childcare, development, and learning centers present current evidence that all direct service personnel working with them have completed the certification or renewal of the Child Development Associate (CDA) Credential which must be pertinent to the level served as evidence of their training and continuing education; that the care homes, foster care homes, group care homes, and children's institutions comply with the training course, as part of the staff training or the families that interact with the children receiving their services. The purpose is to promote that the services in these establishments are of quality and are provided by owners, operators, administrators, directors, guardians, and that all the personnel that work in the care, development and learning establishments know the children's needs during their different stages of development and that they use the theories and practices appropriate to the particularities and level of development and learning of each child for their and their families benefit. 2. It is established that the CDA course, the training course, and continuing education courses must be offered by entities that are duly authorized by the Department to offer said service. Similarly, section 12.4 of the regulations establish the specific security measures for all establishments. These security measures and the emergency operational plan shall be certified by the State emergency management agency and shall include, but not be limited to, the following: 1. designated relocation and eviction area, 2. procedure for notifying fathers, mothers or guardians about the

relocation, 3. a procedure to address the individual needs of children including those with special needs, 4. instructions for staff to handle these situations and for coordination with the relevant agencies in the case of an emergency 5. measures aimed at requiring monthly drills that provide eviction and contingency plans to face situations of natural disasters and emergencies. Likewise, it is established that for the use or participation of recreational facilities and activities that represent risks, they will have to comply with special requirements, (a) establishments with swimming pool will have to present a water purity certification and will be governed by the rules established by the Department of Health. (b) The pool must have a five feet high fence around it. Also, it must have a gate. The pool gate lock key must be out of reach of children. In addition, the pool must have depth markers in each area, so that children who do not know how to swim are in the shallowest area. (c) The use of portable pools in the care and development centers is prohibited. (d) Children are not allowed to use the pool without adult supervision. (e) There must be lifeguards or other lifesaving devices according to the age of the children. (f) When litter boxes are used, they should remain covered when not in use to prevent contamination and transmission of diseases. (g) When using buckets or deep containers with water, they will be voided after each use and kept down and out of reach of children. The regulation establishes that pets such as dogs, cats, birds, and other domestic pets will be allowed. However, a certificate from the veterinarian will be required to guarantee that they do not represent health concerns for children, staff or visitors. Fish tanks/bowls must have security measures so that they do not constitute a risk. In terms of the building structure, it is established that the use of glass or mirrors divisions/doors are not allowed unless they show written evidence certifying that they have security laminates that meet the required tests standards against human impact, forced entry, surface abrasion, fire, among others. The establishments will adopt safety measures in restrooms such as safety handles in showers and toilets, an anti-slip surface on the shower floor, and ventilation or exhaust fans in the sanitary area. The use of bathtubs will be avoided. On the use of cell phones and the taking of photos and videos, the Regulations prohibits the children's direct care staff use of cell phones while they are on their work shift. It prohibits taking photos, videos, recordings of conversations of children by any staff member without written authorization from the father, mother, legal guardian or any person holding parental authority. Likewise, the publication of photos, videos or any information related to children, in social networks or any other means of communication is prohibited, unless written authorization is granted by the father, mother, legal guardian or any person holding parental authority. In terms of the number of children, the Department of

the Family will determine the capacity of the establishment for the provision of services. If any governmental agency, with legal authority to establish capacity in the establishments, determines a different capacity, the most restrictive will prevail. The criteria for determining the capacity are the type of establishment and service modality, physical space available for service, the proportion of personnel versus participants receiving services, the proportion of restrooms versus children and staff. The center must have a record for each child. The record must include a medical and social profile, separately or integrated. These records will be kept in a secure cabinet under lock to guarantee confidentiality. In addition to the professionals who provide direct services to the children, the licensing officer will have access to the records in the performance of his duties. The father, mother, legal guardian, or any person holding parental authority will have access to it if applicable. Every child's record must contain the following information: 1. request for services, 2. demographic data, 3. name, and full address of the father, mother, legal guardian, or any person holding parental authority, telephone numbers of the workplace and residence, 4. date of admission and service contract, 5. authorization from the father, mother, legal guardian, any person holding parental authority, or the case manager to attend and participate in the activities outside the establishment or the agency that enrolled the child in the center, 6. authorization of the father, mother, or guardian for the provision of medical and nutritional services, 7. recommendations of medical services for children who require special care such as therapies and medications, 8. recent photograph, 9. copy of immunization certificate, except for children who are not immunized due to a medical condition or religious beliefs provided that it is justified in accordance with applicable laws, 10. evidence that the parents or guardian were given a copy of the establishment's rules and procedures manual, 11. document of progress notes or evaluation, as applicable, 12. court resolution and protection order if applicable 13. initial interview, 14. social history, 15. evidence of psychological, psychiatric, occupational, speech assessments, among others; copy of the results of screening tests, evidence of physical examination, performed by a physician. In the same way, it is required to maintain a personnel file. This file will include the application for employment, service contract or appointment including the description of the duties and responsibilities of the position, evidence of academic preparation, work experience, copy of license and professional association, evidence of continuing education courses and training received, evaluations of work performed, record of daily attendance, description of responsibilities and duties, copy of all documents required, and date and reason for termination of employment. There will also be a file for the

establishment in which all the documents required for the operation, the work history in the establishment, forms, payroll, correspondence, and other pertinent information are included. The care, development and learning centers have specific requirements for their licensing, these are: Physical plant - the interior areas to carry out the activities for the care, development, and learning for the children will be divided into infants, maternal, preschool and extended hours, as applicable. This space will have a ratio of twenty-five square feet per child for the development of activities. The restrooms, corridors, kitchen, food storage, staff lounge, and storage areas are excluded from this proportion. For children with special needs, spaces must be forty square feet per child, the physical plant must be free of architectural barriers, children five years and older who receive services during extended hours will be cared for in their specific activities space, independent of the spaces of the rest of the children served. In the infants' area, there will be a minimum of three feet of space between each cradle or playpen. The reception and the administrative areas must be separated from the activities area. There must be an area of cubicles or drawers for personal effects for each child and storage space for cots or mats. It must have a dining room, kitchen, and food storage. The tables for the educational activities of the maternal and preschool infants may also be used to eat food. For children who eat by themselves, an area for eating tables should be provided. If there is a separate and closed area for the storage of toxic substances, it should have adequate space for nursing mothers. The yard should be protected by a fence of no less than five feet tall. The yard must be level, free of stones, holes, power lines, vermin, among others. A controlled area with a slight natural slope can be prepared for toddlers to experiment and develop balance. It must have defined areas suitable for each age group for a variety of outdoors learning and development activities and the use of play equipment for the physio-motor exercise. It must have as well trails for locomotion, in addition to trees, roof or tents among others to provide a shaded area. The use of natural elements must be safe. The yard should have enough space for the activities of physical-motor development according to the appropriate practices established by the pertinent professional organizations. All the equipment in the yard must be in good conditions, clean and free of breakages. It must also have equipment and safety materials such as rubber floor for the slide area, etc. The gate to access the center must always remain closed and the key must be out of reach of children. The physical plant must have a parking area. Lighting, ventilation, and sanitation indoors must be adequate to control and prevent contamination and spread of diseases. When it is necessary to use an air conditioner, it should be kept at a temperature between 65 to 75 degrees. The windows

and doors to the outside must have metallic or plastic screens in good conditions. The doors must have the necessary accessories for the protection of children. Those Centers located on second floors or that do not have a yard must comply with the following: appropriate and safe areas for active and vigorous activities, and the services required to centers located on first floors. If the Center does not have outdoor play or recreation areas, then, it must have an interior area for these purposes. It must have an emergency exit and handrails on the staircase or elevator if applicable. In the case that there are infants and toddlers, it must have a separate but visible and accessible area for cribs, rooms for infants with a minimum of three feet of space between each cradle or playpen, crawling area with sufficient space according to the number of children and to the appropriate practices, sufficient space for toddlers' and infants' mobility and activity, space and furniture suitable for nursing mothers, areas for changing diapers and a refrigerator to store artificial or maternal milk. The minimum requirements for the areas dedicated to preschoolers and children in extended hours are the following: 1. areas or functional centers for development and learning experiences, 2. enough tables and chairs for the activities and socialization of the children and adults community and access to drinking water. These Centers must comply with sanitary facilities that meet the following requirements: 1. toilets, urinals, and sinks suitable for the use of children; 2. the proportion of restrooms will be one restroom for every fifteen children, separated by gender in the infant and preschool areas. 3. One of the restrooms must meet the requirements for children with disabilities (ADA Act). 4. One of the restrooms will have a toilet area with a tub or shower, 5. a diaper changing area for the infants, having a sink and a table for those purposes and a storage space for the materials. 6. There will be another restroom for the use of employees and other people visiting the center. The Center must have water and electricity services in each of its service areas, as appropriate, water reserve devices to supply the establishment needs, a power plant in establishments that operate 24/7 with children that have health conditions for which electrical service is essential. In the same way, it must have food service to provide three meals a day - breakfast, lunch, and dinner, as applicable, as well as snacks between meals. The establishment must submit a menu certified by a licensed nutritionist-dietitian, which includes infants. The establishment may ask the nutritionist-dietitian to modify such menu in situations that require nutritional adjustments, including religious reasons. In case all the foods are provided and prepared by the School Food Service Division, the establishment is exempt from this requirement, but they must present the food service contract. The quantity, consistency, and quality of the food will be according to the age

and nutritional needs of children. The type and size of the food must be considered according to age to prevent choking. The Centers that provide services during the evening hours will give the food service according to the schedule in which the service begins and ends. The Center must provide children with daily fluids, especially of drinking water to keep them properly hydrated. The staff of the establishment will take precautionary measures so that the children always have easy access to drinking water. The daily menu will be available and visible in an area where parents can examine it. If parents choose to use artificial milk to feed infants, strict management and sterilization measures will be followed. It must be prepared following the instructions of the manufacturer and the health professional. In the infant feeding period, the facility's staff will attend to only one child at a time and will use the moment as an opportunity for meaningful interaction with them. The utensils for eating will be appropriate to the age and needs of the child. In the period where the food is served, the participants will be encouraged to have the food sharing in a familiar and harmonious atmosphere. The moment will be used for conversation and interaction. When food is prepared outside the establishment, evidence of the Environmental Health Certification will be required, in addition to the certified menu. In case of use of lunch boxes, parents or guardians will be required to use a nutritious and balanced food guide. The food storage area will have a reserve of non-perishable food equivalent to seven days. Cleaning products and other products will be kept separate from food, out of the reach of children. The children will be attended according to their needs and abilities. Children will be encouraged to eat but will not be forced to eat. In those cases, in which the consumption of food is not adequate on a recurrent basis, the parent or guardian will be notified immediately so that he/she can consult his/her pediatrician. Food will not be used as disciplinary measures or to modify the behavior of children. The Centers are required to have utensils and equipment for eating and cooking such as an eating table and chair of the appropriate size for each child; it must be manageable and promote an upright posture to prevent the risk of choking. There will be enough dishware and cutlery for all children, such as glasses, plates, spoons, forks, etc. These should be of light material, not brittle, not sharp and hygienic, easy to clean and durable, of manageable size and shape for the children. The Center must comply with the standards of the food service and with the special needs of the children. The kitchen must have the necessary equipment according to the number of children and type of service. It must comply with appropriate equipment and with all regulations established by the Division of Environmental Health for food services. The kitchen will be equipped to prepare artificial milk or special dietary modifications,

recommended by a medical professional. When cups, plates, cutlery, and other disposable material are used in the establishment, it shall be made of a resistant material and shall not be reused. The establishment must have: 1. a cook, 2. and a kitchen assistant (as needed), 3. This staff will perform exclusive functions related to the food service, 4. The food service staff must present a certification of approval of the food handling course issued by a certified agency for such purposes and must ensure faithful compliance with the standards established in this certification. Health services will be offered for which a written authorization will be required from the father, mother, guardian or whoever holds the parental authority of the child, to manage the medical services of the child in emergency situations and for administering medicines. The establishment will develop and implement standards and procedures for the protection and promotion of children's health and safety using the guidelines contained in the Caring for Our Children: National Health and Safety Performance Standards Guidelines for Early Care and Education Programs, and the rules established by the program that subsidizes its services. This document and its attachments will be available for examination by the mother, father, or guardian of each child. The Center is responsible for verifying the immunization status of the children admitted, maintaining the registry of the vaccines in the Puerto Rico Immunization Registry (PRIR) and sending a report to the Department of Health. It must also report the amount of admitted children, the children who are exempt from vaccination for religious or clinical reasons, and those that they have provisionally enrolled. This process must be completed and certified annually, within sixty (60) days of the beginning of what is known as "the school year." There must be adequate individual rest mats for each child, toddlers, and preschooler to rest. These will be arranged a foot apart and should be covered with a sheet and kept clean and sanitized. For infants, there will be cribs that comply with the current standards and guidelines of the Consumer Product Safety Commission (CPSC) and the ASTM International. Mattresses must be covered with a sanitized and well-adjusted sheet. Cribs must not have any loose items or toys inside and will only be used for sleeping or resting and not as a means to confine or restrict the movement of the children for more than 15 minutes. Infants must not sleep or rest in other equipment such as a highchair, a car seat, or a swing, among others. The centers that offer evening service will have cribs or beds. Cribs and beds must be arranged three-feet space apart. Toys and play equipment must be adequate and safe according to the ages, stages of development and interests of the children. In addition, the playing material must be varied and, in enough quantity, to stimulate curiosity, creativity and provide a diversity of development and learning experiences. Toys will be

kept clean and sanitized and stored in a safe place. For the selection of playground equipment, the Center must follow the guides provided by the U.S. Consumer Product Safety Commission (CPSC) and the Caring for Our Children: National Health and Safety Performance Standards Guidelines for Early Care and Education Programs. The Center that provides extended hour services to children of school age, after school hours or during the vacation period, must implement and maintain a program of supervised activities designed exclusively for this population, which will include time and space for recreation and vigorous exercise, reading and painting activities and development and expression of their creativity. In Section 14.11, the Regulations establish the primary personnel and their academic preparation requirements. The Regulations establish that the Center must have the following staff: (1) director - the person appointed by the license holder, with whom she/he shares the responsibility of the management, operation, and services in the establishment. The director must have a minimum academic preparation of Bachelor's degree with the minimum required courses (three courses) in education in early childhood and must have a current Child Development Associate (CDA) Credential; (2) a teacher is a person responsible for the planning, coordination, and execution of the educational curriculum directed to the care, development, and learning of the children. The director must meet the following academic preparation requirements: (a) Bachelor's degree in education and a current CDA relevant to the level of development served (the teachers who have a concentration in early education or preschool that includes infants and toddlers are exempted from this requirement) or must have the current Teacher Certification in the preschool area issued by the Department of Education; (3) teacher assistants, under the supervision of the director and the teacher, collaborate in the planning, coordination, and execution of the educational curriculum directed to the care, development, and learning of the children.

[Family child care.](#)

[Describe and Provide the citation:](#)

Article 15, Sections from 15.1 to 15.12 of the Regulation #8860 of November 29, 2016, for the Licensing of Establishments for the Care, Development, and Learning of Children in the Commonwealth of Puerto Rico. This regulation establishes that any person interested in operating, or who are currently operating, a childcare home must comply with the general provisions and must also comply with the requirements mentioned in this article. It requires the completion of a social study that demonstrates that the childcare home can offer childcare, development, and learning services that respond to their well-

being, safety, and biopsychosocial needs. The childcare home must consider the aspects related to the individual functioning of each member of the family, as well as those related to the family relationship. The family nucleus must comply with some essential requirements as detailed below. (1) The requirements established in Article 12 of this Regulation, as applicable. (2) The service will be carried out in a family home. (3) The person to whom the license is granted will be responsible for the direct service to the children and must be twenty-one years old or older. (4) The caregiver must have knowledge in child care, development, and learning, according to their development stage. (5) The caregiver and other members of the family must be people who enjoy a good reputation and moral solvency, as well as acceptance in the community; (6) all household members must agree in writing that their household serves as a childcare resource. (7) The members of the childcare home must be people capable of showing affection for the children and understanding of their needs, as well as having the flexibility to offer them the care and attention they need. (8) The caregiver must demonstrate the ability to solve the daily problems at home and those related to the needs of the child. Training is required at the time of renewal of the license. To comply with this requirement, the caregiver must register in the Basic Competency Training Course established in the Licensing Law. The physical plant must comply with certain requirements, including accessibility for the community resources and public transportation means. The childcare home must have the following (1) living room, (2) dining room, (3) bedrooms, (4) and bathroom. It must have screens in its windows and doors to the outside to prevent insects from getting access. Households located on second floors must have gratings, gates, etc. to guarantee the safety of the children. The home must have a sanitary service equipped with a shower, washbowl, and toilet in good condition. Parents must provide the child with items for personal use, duly identified with the child's name. The rest area must have playpens and cribs according to the age and needs of the children, so they can rest. Cribs must be arranged a foot apart. They must be covered with sheets. The children furniture must be clean and sanitized and placed in an appropriate area. The childcare home must have play equipment and materials for development and learning which will be safe and appropriate according to the ages, stages of development and interests of the children. Also, the toys will be varied and in enough quantity for the use of all children. It will be kept clean and sanitized in a safe place. The childcare home must have utilities. Drinking water and electricity service systems will be available in each of its service areas, as appropriate. There must be hot water and room temperature water in the laundry area, showers, sinks, and kitchen, and

water reserve tanks to supply the needs in the home. Homes with problems of frequent blackouts must have an emergency power plant. The childcare home will provide food service in three daily meals: breakfast, lunch, and dinner, as applicable, as well as snacks between meals. It will present a balanced menu using the nutritional guidelines of an authorized entity, whether public or private. The amount, consistency, and quality of the food will be according to the age and dietary needs of the children. The food type and size must be considered according to age to prevent choking. It must provide children with daily fluids, especially of drinking water to keep them properly hydrated. The caregiver will take precautionary measures so that the children always have easy access to drinking water. If parents choose to use artificial milk to feed infants, strict management and sterilization measures will be followed. It must be prepared following the instructions of the manufacturer and the health professional. In the infant feeding period, the caregiver will attend to only one child at a time and will use the moment as an opportunity for meaningful interaction with them. The dishware and cutlery will be appropriate to the age and needs of children. The dining room will be equipped according to the participants and their needs. In the period where the food is served, it will be promoted that children share food in a harmonious environment. Cleaning products and other chemicals will be kept in a separate place from the food, out of reach of children. The childcare home will require a written authorization from the father, mother, guardian or the person who holds the child's custody to manage the child's medical services in emergency situations and for administering medication.

In-home care (care in the child's own home).

Describe and provide the citation (if applicable):

N/A

### **5.1.2 Describe if any providers are exempted from licensing requirements and how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)).**

Note: Additional information about exemptions related to CCDF providers is required in 5.1.3. x Center-based childcare if checked: In the case of providers that offer services through the Head Start Program, the law expressly exempts them from licensing requirements because

the standards are more rigorous or comprehensive than local law. However, the Childcare Program applies in this type of providers the Childcare Home/ Licensed Childcare Home, CCSS-18-16 form. In addition, all personnel working in the center must also comply with all the background check requirements of the CCDF.

x Family childcare if checked: In the case of providers that offer services to children who are their relatives within the third degree of consanguinity or affinity, it is understood that by the existing family ties between the caregiver, the child, and her/his family, the caregiver will provide a quality service that will exceed the state standards. In the case of providers who are not relatives of the children to whom they provide the service and provide the service to no more than two children, the law state criteria are not applicable to them. To ensure that non-family exempt households provide quality services that do not expose the health and safety of the children receiving our services, before authorizing them to provide services through the Childcare Program, the Health and Safety Area applies the form Exempt Childcare Home/ Non-Family monitoring CCSS-12-16. This form is part of the Health and Safety Procedure. If the supplier does not comply with any of the standards included in the form, we will develop an improvement plan in order to achieve compliance. This type of provider is subject to background checks as well as all adults residing in the provider's home. This background check complies with the CCDF. In this way, the Program ensures that children are not put at risk.

x IN-HOME CARE IF CHECKED: This service can be offered through family providers or non-family exempt providers. In the case of providers that offer services to children who are their relatives within the third degree of consanguinity or affinity, it is understood that by the existing family ties between the caregiver, the child, and her/his family, the caregiver will provide a quality service that will exceed the state standards. Non-family exempt providers may provide services at home, where applicable. The provider must comply with the background check process which includes, verification of local background check, verification of local and national sexual assault record, verification of abuse background, verification of the crime information center and verification of fingerprints through the next generation system of the FBI. In cases where the provider has resided outside of Puerto Rico for the past 5 years, the provider must request the criminal records of all the states where she/he has resided. The provider is exempted from the inspection of the physical plant of her/his property because it will not be the place where he/she will provide the service. In this way, the Program ensures that children served are not at risk.

**5.1.3 Check and describe any CCDF providers in your state/territory who are exempt from licensing (98.40(2)(i) through (iv))? Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care or any other factors applicable to the exemption**

Center-based child care.

If checked, describe the exemptions.

Family child care.

If checked, describe the exemptions.

The Licensing Law 173-2016 does not apply to those providers that offer services to up to two children. These providers are known as non-family exempt providers. To ensure that children receiving services in these homes are safe, the Exempt Childcare Home/ Non-Family monitoring CCSS-12-16 form is applied. They must also comply with all the background check requirements of the CCDF.

In-home care.

If checked, describe the exemptions.

## 5.2 Health and Safety Standards and Requirements for CCDF Providers

### **5.2.1 Standards on ratios, group sizes, and qualifications for CCDF providers.**

Lead Agencies are required to establish child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories.

#### a) Licensed CCDF center-based care

##### 1. Infant

-- How does the State/territory define infant (age range):

The State/territory defines the infant age range from birth to eighteen months.

-- Ratio:

Maximum of four children per adult (4:1)

-- Group size:

Up to 10 children

-- Teacher/caregiver qualifications:

Teacher: Bachelor's degree in education, current CDA, which must be relevant to the infant/toddler level (the teachers who have a concentration in early education or preschool that includes infants and toddlers are exempted from the CDA requirement). People who have a current teacher certification in the preschool area issued by the Department of Education may also be teachers. Childcare Assistants: High school diploma and current CDA, which must be relevant to the infants and toddlers' level.

## 2. Toddler

-- How does the State/territory define toddler (age range):

The State/territory defines the toddler age range from nineteen months to two years and eleven months.

-- Ratio:

Maximum of four children per adult (4:1)

-- Group size:

Up to 16 children

-- Teacher/caregiver qualifications:

Teacher: Bachelor's degree in education, current CDA, which must be relevant to the infant/toddler level (the teachers who have a concentration in early education or preschool that includes infants and toddlers are exempted from this requirement). People who have a current teacher certification in the preschool area issued by the Department of Education may also be teachers. Childcare Assistants: High school diploma and current CDA, which must be relevant to the infants and toddlers' level.

## 3. Preschool

-- How does the State/territory define preschool (age range):

The State/territory defines the preschool age range from three years to four years and eleven months.

-- Ratio:

Maximum of eight children per adult.

-- Group size:

Up to 24 children.

-- Teacher/caregiver qualifications:

Teacher: Bachelor's degree in education, current CDA, which must be relevant to the preschool level (the teachers who have a concentration in early education or preschool that includes infants and toddlers are exempted from this requirement). People who have a current teacher certification in the early education or preschool area issued by the Department of Education may also be teachers. Childcare Assistants: High school diploma and current CDA, which must be relevant to the preschool level.

#### 4. School-age

-- How does the State/territory define school-age (age range):

The State/territory defines the school age range from five years to twelve years and eleven months. If the child has special needs, the age range is up to eighteen years.

-- Ratio:

Maximum of twelve children per adult.

-- Group size:

Up to 30 children.

-- Teacher/caregiver qualifications:

Teacher: Bachelor's degree in education, current CDA (the teachers who have a concentration in early education or preschool that includes infants and toddlers [sic]

are exempted from this requirement). People who have a current teacher certification in the preschool area issued by the Department of Education may also be teachers. Childcare Assistants: High school diploma and current CDA.

5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers

Providers who use Head Start standards, have the child-adult ratio, and staff requirements as established by the Head Start Program. These requirements are stricter than those of local law.

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.

N/A

7. Describe the director qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care.

The director must have a bachelor's degree with the minimum required courses (three courses) for the specialty in early childhood education and current CDA according to the age of the children served.

b) Licensed CCDF family child care provider

1. Infant

-- How does the State/territory define infant (age range):

The State/territory defines the infant age range from birth to eighteen months.

-- Ratio:

Maximum of six children per adult (6:1)

-- Group size:

Up to six children

-- Teacher/caregiver qualifications:

Not applicable

## 2. Toddler

### -- How does the State/territory define toddler (age range):

The State/territory defines the toddler age range from nineteen months to two years and eleven months.

### -- Ratio:

Maximum of six children per adult (6:1)

### -- Group size:

Up to six children

### -- Teacher/caregiver qualifications:

Not applicable

## 3. Preschool

### -- How does the State/territory define preschool (age range):

The State/territory defines the preschool age range from three years to four years and eleven months.

### -- Ratio:

Maximum of six children per adult (6:1)

### -- Group size:

Up to six children

### -- Teacher/caregiver qualifications:

Not applicable

## 4. School-age

### -- How does the State/territory define school-age (age range):

The State/territory defines the school age range from five years to twelve years and

eleven months. If the child has special needs, the age range is up to eighteen years.

-- Ratio:

Maximum of six children per adult (6:1)

-- Group size:

Up to six children

-- Teacher/caregiver qualifications:

Not applicable

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes

Non-family exempt providers offer services in a ratio of 2:1; the groups' size is up to two children. There are no academic qualifications requirements for the providers.

c) In-home CCDF providers:

1. Describe the ratios

Two children per adult (2:1)

2. Describe the group size

Two children

3. Describe the maximum number of children that are allowed in the home at any one time.

Two children

4. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size

No

5. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day

No

## 5.2 Health and Safety Standards and Requirements for CCDF Providers

### 5.2.2 Health and safety standards for CCDF providers.

States and territories must establish health and safety standards for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance 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 child care providers receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for providers who are caring for their own relatives because Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)).

a) To certify, describe how the following health and safety standards for programs serving children receiving CCDF assistance are defined and established on the required topics (98.16(l)). Note: This question is different from the health and safety training requirements, which are addressed in question 5.2.3.

#### 1. Prevention and control of infectious diseases (including immunization)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The Child Care Program's Protocol for the Prevention of Infectious Diseases at Childcare Centers and Homes and Child Development defines infectious diseases as diseases caused by an infection with different germs that may include viruses, bacteria, fungi, or parasites. Most of these infectious diseases may be passed from one person to another. The manual covers the following topics: (1) Risk factors for the development and spread of infectious diseases; (2) How are infectious diseases spread; (3) How do we control the spread of infectious diseases; (4) Cleaning, sanitizing, and disinfecting areas, equipment, and material; (5) Guidelines for area cleaning and disinfection; (6) Medication supplies; (7) Oral hygiene; (8) Preventive nutrition practices; and (9) Diaper change practices. The requirements for providers, with emphasis on the protection of staff members and of the children in their care,

include: (1) Requiring employees to provide a health certificate; (2) Keeping updated health documents in the children's files, which includes their clinical history, health certificate and immunization certificate; (3) Referring to the doctor any child who shows signs of requiring medical attention; (4) Excluding from service any children who show symptoms of infectious diseases while they receive attention and until symptoms disappear; (5) Conducting daily inspections before and after the service; (6) Continuous employee training on standard and universal precautionary measures for the handling of blood and bodily fluids; (7) Hand washing practices and the use of protective gloves; (8) Keeping all center and child care areas clean, sanitized, and disinfected by carrying out the cleaning and disinfection practices for all center and child care areas; (9) Administering and storing medications in a safe manner; (10) Promoting adequate tooth cleaning and brushing practices for children in all categories; (11) Using preventative nutrition practices, including the use of drinking water, cleaning and disinfection of kitchen, food service utensils, infant bottles and nipples, among others; (12) Properly receiving, preparing and handling baby formula and breast milk; (13) Receiving, storing, preparing, cooking, and serving food to children in all categories in a safe manner; (14) Adequate diapering practices. )

-- List all citations for these requirements, including those for licensed and license-exempt programs

Child Care Program Rules, Art. 5.2. Protocol for the Prevention of Infectious Diseases in Child Care and Development Centers and Homes.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

The requirements are the same; however, simpler materials are used for guidance and training purposes in order to achieve greater understanding between providers.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of children, except for diapering procedures.

-- Describe if relatives are exempt from this requirement

Providers who offer services to children who are their relatives are not required to meet these requirements; nevertheless, they are offered information materials on

infectious disease prevention.

## 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

As defined by the Child Care Program's Sudden Infant Death Syndrome Protocol, sudden death means the sudden death of a one-year-old infant that remains unexplained upon conducting a full investigation, including an autopsy, an examination of the death scene and a review of the infant's clinical history. The Sudden Infant Death Prevention Protocol covers the following topics: (1) Personnel training on sudden death prevention; (2) Characteristics of the infant's resting/sleeping area; (3) Safety of the infant's resting/sleeping area; (4) Adequate infant resting practices; (5) Crib standards and safety guidelines (distance between cribs), US Consumer Product Safety Commission crib requirements; (6) Infant supervision during sleep and while awake; (7) Adequate pacifier use practices. In order to prevent sudden infant death, providers are required to: (1) Provide annual training to their personnel on adequate practices for the prevention of sudden death syndrome; (2) Ensuring that every child has his/her own crib and that each crib is identified with the child's name and has been cleaned and disinfected; (3) Placing infants on their back to sleep in order to avoid sudden death, unless otherwise specified by a physician due to the child's health condition; (4) Ensuring a safe resting environment in order to prevent sudden death syndrome: All crib mattresses must be covered with fitted sheets; (5) No monitors, positioning devices, sheets, pillows, and/or toys should be left on the cribs; (6) Maintaining a distance of three feet between each crib; (7) No items should be attached to crib rails; (8) Room temperature must be adequate in all resting areas to avoid the need to use blankets to cover the child; (9) Resting areas must be well-lit; (10) Follow adequate pacifier use practices according to American Academy of Pediatrics guidelines; (11) The practices recommended by the American Academy of Pediatrics are followed as part of the measures for the prevention of plagiocephaly; (12) Adequate supervision of infants during sleep.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Regulation 8687 of the Child Care Program, Art. 5.2. Protocol for the Prevention of

Sudden Death Syndrome.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

The requirements are the same for Day Care and Home Care Centers. Guidelines and recommendations are provided to exempted providers who are not relatives.

Preventive measures are the same for all services.

-- Describe any variations based on the age of the children in care

These practices are used only on infants, since the risk of occurrence is from birth to twelve (12) months old.

-- Describe if relatives are exempt from this requirement

It is not applicable; however, they are provided information and guidance in this regard.

### 3. Administration of medication, consistent with standards for parental consent

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The Protocol for Proper Medication Storage and Administration refers to the correct manner to secure and store the medications of participating children, while the Medication Administration guidelines refer to the correct way to administer medication to a person. For the purposes of this protocol, medication is a chemical substance designed to prevent, treat, or cure a disease. Non-prescription medication refers to any medication that may be obtained without medical authorization. This protocol covers the following topics: (1) Personnel training; (2) Instructions to be followed before, during, and after administering the medication; (3) Procedures to obtain authorization to administer medications; (4) Medication storage and maintenance; (5) Proper medication handling. Providers are required to follow these practices: (1) Designating the staff members that will be responsible for administering medications, including alternate personnel in case that the designated personnel is absent; (2) Providing training to the personnel in charge of administering medications, to alternate personnel, and to all personnel on the proper administration of medications; (3) Ensuring that all medications received are identified with the child's name and last names, name of the prescribing physician, expiration date, and instructions for administering the medication. All medications must be provided in their original container and with childproof caps; (4) A special area is designated for storing both refrigerated and non-refrigerated medications; (5) Medication storage areas must be adequate, be out of the reach of children, and have an adequate temperature to ensure proper preservation; (6) Authorization from parents or guardians is required to

administer prescription and non-prescription drugs to children; (7) Prior to administering the medication, staff members must wash their hands and read the instructions on the medication's label, including the required dose, whether the medication must be taken with or without food, and any other relevant information; (8) Staff members shall confirm with parents or guardians when was the last dose administered and whether the child experienced any side effects, among other information; (9) Staff members will administer the medication to the child and will document it on the Medication Administration Log, which includes the date, time, medication name, and administered dose; (10) In the event of side effects, the parent or guardian shall be notified immediately and the situation will be documented on the Medication Administration Incident Report Form; (11) All emergencies shall be handled in accordance with the Medical Emergency Protocol; (12) Medications requiring refrigeration must be stored in plastic containers in the refrigerator at an adequate temperature; (13) If no refrigeration is required, they will be stored in a locked box or cabinet; (14) At the end of the day, all medications are returned to the parent or guardian.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Regulation 8687 of the Child Care Program, 5.2. Protocol for Medication Storage and Administration.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations between provider types.

-- Describe any variations based on the age of the children in care

There are no variations by children's categories.

-- Describe if relatives are exempt from this requirement

Family child care providers are exempted from meeting these requirements. They are provided information and guidance on proper medication storage and administration.

#### 4. Prevention of and response to emergencies due to food and allergic reactions

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

According to the Food Allergies Management Protocol, a Food Allergy occurs when the body reacts to harmless proteins found in food. The body's immune system overreacts and may presents the following symptoms: skin problems such as red spots, swelling, breathing problems (sneezing, wheezing sound, and throat tightness), stomach symptoms (nausea, vomiting, and diarrhea) or circulatory problems

(paleness, dizziness, or loss of consciousness). This protocol covers the following topics: (1) Upon enrolling the child in the service, parents are required to fill out a form regarding any food allergies experienced by the child; (2) A health care plan is also required if the child has any of the following conditions: asthma, anaphylactic allergies, diabetes mellitus, blindness, cancer, epilepsy, seizures, heart conditions, muscular dystrophy, hearing or orthopedic impairment, autism, and other neurological conditions. This also applies to children who are fed with a gastric tube. The drug medication storage and administration protocol is followed; (3) If a child has multiple food allergies and the child care center does not have all the food items required for his/her diet, said food items must be provided by the parent in order to prevent any food allergies; (4) In the case of children whose allergies have been notified by their parents or guardians, steps must be taken to avoid cross-contamination with food allergens; (5) If the child care provider has a proposal through the PACNA Program, the program's instructions shall be followed; (6) Evidence of the guidance provided to employees regarding the children's allergies should be maintained; (7) Preventing children from sharing food with other children who have food allergies; (8) Cleaning all surfaces that come in contact with the food to which children are allergic; (9) Care should be taken with educational activities in which allergy-causing materials are used; (10) A list of the foods to which the children are allergic must be taken to all activities held outside the child care center; (11) In case of an emergency regarding a child's allergic reaction, both 9-1-1 and the child's parents will be called.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Regulation 8687 of the Child Care Program, Art. 5.2. Food Allergy Management Protocol.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

In the case of providers who prepare the food, the parent is responsible for informing the home child care provider of the foods to which the child is allergic. If the child has multiple allergies, the parent shall provide the child's food. In the case of home child care providers, a list should be kept so that all household members are aware of the foods that are not allowed due to the child's allergies. En el caso de hogares el personal que los supervisa deberá verificar el cumplimiento con los requisitos de alergias.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children.

-- Describe if relatives are exempt from this requirement

Relatives are not required to comply with this protocol; they are provided with informational materials.

5. Building and physical premises safety, including the identification of and protection from hazards that can cause bodily injury, such as electrical hazards, bodies of water, and vehicular traffic

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The Procedure for Determining the Eligibility of Childcare Service Providers, the Child Care Program Rules (Regulation 8687), and the Rules for the Licensing of Care, Development, and Learning establishments for Children in the Commonwealth of Puerto Rico (Regulation 8860) set the policies and standards to ensure that providers' facilities are safe and free of hazards for the children who receive the services. A safe childcare center/home is one that abides by the rules of all the regulating agencies in accordance with the Department of the Family's Licensing Act. These policies address the following topics: (1) Relevant regulating agencies; (2) State Emergency Management Agency; (3) Puerto Rico Fire Department; (4) Puerto Rico Department of Health; (5) Public Service Commission; (6) Department of the Family; (7) Child Care Program's Health and Safety; (7) Child/adult ratio; (8) Emergency management plans; (9) Facility conditions, specifically: Learning environments, kitchen, dining room, outdoor area, restrooms, parking lot, entrances and exits, inspection and isolation areas, hallways; (10) Monitoring by the Licensing Office, which includes: Requirements for the acquisition, granting, and suspension of licenses; (11) Monitoring by the Child Care Program's Health and Safety Division: Monitoring process, monitoring form, discussion of findings, improvement plan, granting of certifications to eligible providers, suspension of Eligible Provider certifications; (12) In order the facilities to be safe and free of hazards for the children, the provider must meet the following requirements: The provider must possess the following permits and certifications, which must be in full force and effect: (a) Fire Prevention Certification - Issued by the Fire Department, valid for one year; (b) Valid Health Permit - Issued by the Department of Health, (c) Department of the Family License - Valid for two years, issued by the Department of the Family's Licensing Office; (d) Public Service Commission Certification - Applies only if a gas stove is used, it is a perpetual license and is issued by the Public Service Commission; (e) Must meet the child/adult ratio established in the Child Care Program Rules; (f) Must have an emergency plan in place, approved by the Puerto Rico State/Municipal Emergency Management Agency. This plan must be based on the needs of each facility and must be evaluated and updated annually; (13) The facility must be in adequate condition and free of hazards for the children. This includes: (a) Learning environments - Must have adequate lighting and ventilation. Must be clean and organized. Must be free of leakages and other undesirable conditions such as pests and hazardous materials. Must have emergency exits and routes. Must have adequate equipment, including fire extinguishers, smoke detectors, and emergency lighting. Doors and windows must be in good condition, as well as the window metal and/or plastic screens. The provider must facilitate and be able to demonstrate compliance with the following procedures and practices; (14) Handwashing; (15) Diapering; (16) Tooth brushing; (17) Kitchen - must be clean and organized. Must have cleaning equipment and materials. The area

must be clearly delimited. All equipment and utensils must be stored in a safe manner and out of the reach of children; (18) Dining room - Equipment must be in good condition and must be clean, organized, and enclosed; (19) Restrooms - Must be clean and must not be used to store any supplies or items that may cause accidents or be hazardous. Step stools must be stable. At least one of the restrooms must meet all ADA regulations; (20) Outdoor area - must have a fence or gate to prevent unauthorized access or prevent children from leaving the facility without authorization. All equipment must be in good condition, areas must be evenly leveled, free of rocks, holes, roots, bushes and venomous plants. If using climbing equipment, it must be surrounded by a cushioned surface. Shaded areas must be provided and green areas must be in good condition; (21) Parking - The child drop-off and pick-up area must be safe and clearly delimited; (22) Entrances and exits - All centers must have at least two emergency exits, which must be properly marked with an exit sign; (23) Inspection and isolation area - The center must have a daily inspection area that guarantees the child's privacy. It must also have an isolation area that guarantees an adequate rest away from the other children; (24) Hallways - Hallways must be completely unobstructed and must prevent unauthorized access to the center facilities; (25) Monitoring by the Licensing Office: (a) license acquisition requirements - The Licensing Office evaluates the documents and certifications required to conduct a facility inspection. If the center has the required documentation and the facilities are adequate, they are granted a license valid for two years; (c) License suspension - The Department of the Family may suspend a license in the event of noncompliance with the standards established by the Regulation or if a child abuse report is filed, or if the owner or any of his/her employees is convicted of any of the crimes listed in the regulation; (d) Monitoring by the Child Care Program's Health and Safety Division, (e) Monitoring process - It begins with a pre-service orientation detailing all the aspects to be evaluated by the monitor. The provider is given a copy of the evaluation form for his/her information. Visits are both announced and unannounced; (f) Monitoring form - It covers all the facility areas and is based on Caring for our children, (g) Discussion of findings - At the end of the monitoring, the monitor discusses the findings with the Center Director and they reach agreements regarding their correctness, (h) Improvement Plan - If the center needs to comply with a specific issue that would not affect the health and safety of children, an improvement plan is put in place to achieve compliance; (i) Granting of the Eligible Provider Certification - The Eligible Provider Certification is valid for one year; (j) Suspension of the Eligible Provider Certification - If the provider fails to comply with the improvement plan and there are recurring findings or a finding that puts the safety of children at risk, the Eligible Provider Certification is revoked.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Child Care Program Regulation (Regulation 8687), rules for the Licensing of Child Learning and Development Establishments in the Commonwealth of Puerto Rico (Regulation 8860), Procedure for Determining the Eligibility of Childcare Service Providers.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

Licensed Childcare Centers and Homes used the same standards. However, non-family exempted providers are not subject to the Department of the Family license or the regulating agencies. Act 173-2016 exempts them from fulfilling these requirements when providing services to one or two children. These homes are evaluated by the Child Care Program's Health and Safety Division. The evaluated standards include: facilities, specifically the area where services are provided, hallways, stairs, restrooms, kitchen, and outdoor area.

-- Describe any variations based on the age of the children in care

There are no variations based on the age of the children.

-- Describe if relatives are exempt from this requirement

Relatives are exempted from fulfilling these requirements.

## 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

According to the Child Care Program's Shaken Baby Syndrome Prevention Protocol, a shaken baby has suffered a brain trauma due to him/her having been shaken violently. This can cause brain damage and even death. The characteristics of this syndrome include: brain hemorrhage, retinal hemorrhages, damage to the spinal cord and neck, rib fractures and other bone fractures. Shaken baby symptoms include: extreme irritability, lethargy, poor appetite, breathing problems, seizures, vomiting, pale or blue skin color. The protocol covers the following: (1) Daily inspection; (2) Protocol for suspected child abuse incidents; (3) Steps to deal with crying infants. In order to prevent shaken baby syndrome, providers must implement the following practices: (1) Provide training to all center or home personnel; (2) Perform a daily inspection following the inspection procedure; (3) If child abuse is suspected, implement the protocol for suspected child abuse incidents; (4) The following actions must be performed to calm a crying infant; (5) A sign explaining these actions must be clearly visible: (a) Checking whether the child is hungry, (b) Checking to see if the child needs a diaper change, (c) Checking whether the child is gassy and, if so, burping him/her several times, (d) Checking whether the child is cold, (e) Checking whether the child shows any symptom of disease, (f) Playing soft music, singing, or talking to the baby to calm him/her, (g) Placing the infant in an age-adequate cradle for a short period of time, in order to calm him/her, (h) Using a toy or pacifier to calm the infant, following the correct practices, (i) Taking the child for a stroller ride, (j) Using a constant sound similar to the one produced by a hair dryer, since this is the sound that the infant used to hear when he/she was in his/her mother's womb, (k) If none of the above works, the caregiver must put the infant in a safe place, such as his/her crib, try to remain calm, take deep breaths, and ask another caregiver to replace him/her. If the child does not

stop crying, his/her parents shall be called so they can take the child to the doctor and rule out any medical condition.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Regulation 8687 of the Child Care Program Art. 5.2, Child Care Program's Protocol for the Prevention of Shaken Baby Syndrome.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations.

-- Describe any variations based on the age of the children in care

This applies to infants and toddlers. Other children are excluded.

-- Describe if relatives are exempt from this requirement

They are exempt from fulfilling this requirements. They are provided with informational materials.

7. 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), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)). Emergency preparedness and response planning (at the child care provider level) must also include procedures for evacuation; relocation; shelter-in-place and lockdown; staff and volunteer training and practice drills; communications and reunification with families; continuity of operations; and accommodations for infants and toddlers, children with disabilities, and children with chronic medical conditions.

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

According to Act 173-2016, providers must have an Operational Emergency Plan in

place detailing the procedures to face potential emergencies and disasters such as fire, weather events, earthquakes, terrorist acts, gas fumes, and the protocol for preventive calls, among others. This plan must be certified annually by the State Emergency Management Office. The plan must address the following topics: (1) Planning an effective response; (2) Mitigating effects and damages; (3) Preparing the facilities to prevent or minimize the loss of lives and damage to property; (4) Responding during and after the emergency; (5) Implementing a recovery system; (6) Identifying the agencies that will work together to face the emergency; (7) In order to meet the emergency plan requirement, providers must: (a) Develop a plan to be certified by the state/municipal emergency management agency; (b) This certification must be renewed every year; therefore, the plan must be reviewed and updated annually; (c) The plan must contain information to manage the following emergencies: chemical accidents, criminal acts, bomb threats, air pollution events, gas leaks, weather events such as hurricanes, storms, tornadoes, tsunamis, waterspouts, troughs, flooding, fire, earthquakes, dangerous individuals, travel or field trip incidents, shootings; (8) Providers must develop their plan based on their geographical and social conditions, with emphasis on potential risks of their location and submitting a plan for each type of event; (9) The plan must include an adequate evacuation plan, which shall be displayed in a conspicuous place within the center. The plan must be discussed with employees upon recruitment and with the parents upon enrollment of their children. Providers must ensure that every employee, child, or parent knows what their meeting point is in case of an emergency. Monthly emergency drills shall be conducted to ensure an adequate emergency response; (10) The plan must contain information regarding the meeting point in the event of a relocation. A nearby safe location should be identified to be used as the meeting point. At the time of the emergency, the Center's staff members shall carry a safety backpack that will contain an emergency kit and a list of the names of all children with their parents' names and phone numbers. The backpack must also contain non-perishable food. The emergency evacuation drill established at the Center shall be used for the relocation process; (11) If the children and staff members are required to stay at the Center during an emergency, said emergency shall be handled in accordance with the management plan for each of the specified emergencies; (12) The Center's staff members shall receive training on emergency management according to the Center's Emergency Plan, which shall be duly authorized by the State/Municipal Emergency Management Agency. All staff members must be familiar with the emergency plan and must receive training annually in order to achieve an effective implementation of the plan; (13) The plan must include the relocation of monthly emergency drills. These emergency drills must address different types of emergencies and both parents and children must know how to respond to each type of emergency; (14) As part of the emergency management, it is important to stay in contact with the child's parent or guardian, if communications systems allow. A phone line shall always be available at the Centers. An updated list with the names and phone numbers of all parents and other relatives to be contacted in case of an emergency shall be kept. This list must be included in the emergency backpack. Likewise, a list of emergency phone numbers, such as the Puerto Rico Police Department, Fire Department, State/Municipal Emergency Management Agency, and Medical Emergencies Services, among others, shall also be kept on hand.; (15) The emergency plan must also establish all the necessary measures to restore the service. After an emergency, it is crucial to return

to normal as soon as possible as conditions allow. The specific actions to be undertaken by the provider in order to restore the services must be defined; (16) The emergency plan shall contain sufficient information regarding the services that may be provided to infants, toddlers, children with special needs, and children with chronic health conditions.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Article 3.01 of Act 176-2016, Child Care Program Regulation (8687)

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

All Centers and Licensed Homes must have an emergency operational plan designed in accordance with the provisions of Act 173-2016. Exempted non-relative providers are not required to have an emergency operational plan certified by the Emergency Management Office. However, they must have a plan devised to manage unforeseeable emergencies.

-- Describe any variations based on the age of the children in care

The only variation is in the case of infants and toddlers for which providers are required to have at least one emergency crib to be used during the evacuation or relocation process. The use and handling of the emergency crib must be included in the emergency operational plan.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from developing an emergency operational action plan.

## 8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The Procedure Manual for Determining the Eligibility of Childcare Services Providers establishes Childcare Home/Center Form CCSS-18-16, which sets as requirement that childcare homes/centers must keep all supplies such as detergents, chemicals, poisons, and flammable materials out of the reach of children. Each Health and Safety inspection verifies compliance with this standard. During the pre-service orientations, providers receive guidance on the importance of complying with this standard. To ensure compliance with this standard, providers must fulfill the following requirements: (1) Making sure that all cleaning supplies, detergents, spray cans, pesticides, poisons, and other chemicals are kept entirely separate from food products, stored in a locked area, and kept out of the reach of children; (2) Making sure that all cleaning supplies,

detergents, spray cans, pesticides, poisons, and other chemicals are stored in their containers with their original labels; (3) Using cleaning supplies, detergents, aerosol cans, pesticides, poisons, and other chemicals for their intended purposes only, according to the manufacturer's instructions, and taking all necessary precautions to avoid contaminating all playing surfaces, toys, food products, and food preparation areas; (4) Ensuring that all medications are properly labeled, have childproof caps, are stored at suitable temperatures, are kept separate from food products, and are stored in a locked area; (5) Following the recommendations made in the Protocol for the Proper Disposal of Biohazard Materials; (6) Provide personnel training on the adequate handling of these materials and provide evidence of said training.

-- List all citations for these requirements, including those for licensed and license-exempt providers

The Procedure Manual for Determining the Eligibility of Childcare Services Providers establishes Childcare Home/Center Forms CCSS-18-16, CCSS-12-16, and CSS-06-16. Child Care Program Regulation Art. 5.2.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations by provider type. In the case of exempt non-relative providers, compliance with this standard is evaluated based on the Child Care Program Home / Exempt Non-Relative Provider Monitoring Form CCSS-12-16.

-- Describe any variations based on the age of the children in care

There are no variations by child age or category.

-- Describe if relatives are exempt from this requirement

Providers who are relatives are not visited by the Health and Safety division; therefore, compliance with this standard is not evaluated. However, document CCSS-06-16 provides guidance on the importance of fulfilling the requirement of keeping all dangerous or poisonous items out of the reach of children and using childproof locks. This includes cleaning supplies and insecticides.

## 9. Precautions in transporting children (if applicable)

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The Public Service Commission, by virtue of the powers conferred by the Public Service Act, Act 109-1962, provides the requirements that a person must meet in order to operate a public vehicle in Puerto Rico. To this end, the Procedure Manual for Determining the Eligibility of Childcare Services Providers, in Childcare Home/Center Monitoring Form CCSS-06-16, provides that all drivers offering transportation services

for children who receive CCDF services are required to have a license issued by the Public Service Commission. The content addressed by the standard refers to compliance with Act 109-1962 and Regulations 5107 and 5268 of the Public Service Commission. In order to meet this standard, any provider offering transportation services for children who receive CCDF services must have a driver duly licensed by the Public Service Commission to provide said transportation service. This license must be valid at all times. At the time of the visit by Child Care Program personnel, the possession and validity of this license is verified.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Act 109-1962, Regulations 5107 and 5268 of the Public Service Commission, and Procedure Manual for Determining the Eligibility of Childcare Services Providers, Childcare Home/Center Monitoring Form CCSS-06-16.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations by provider type.

-- Describe any variations based on the age of the children in care

In addition to complying with the requirements of the Public Service Commission, providers who transport infants and toddlers must comply with all Fire Department regulations regarding the proper use of car seats, which must be certified by said agency.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from complying with this standard.

## 10. Pediatric first aid and cardiopulmonary resuscitation (CPR) certification

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

According to the First Aid and CPR Protocol, First Aid is immediate and provisional care provided to victims of an accident or a disease prior to receiving the services of a licensed medicine doctor in Puerto Rico. Cardiopulmonary Resuscitation (CPR) refers to the emergency life-saving procedure used when a person has stopped breathing or his/her heart has stopped beating. This protocol addresses the following topics: (1) Personnel training; (2) First aid kit; (3) First aid backpack to be used outside the center or home; (4) Administering first aid or CPR as applicable; (5) General recommendations to provide first aid assistance; (6) Steps to be followed in case of an emergency; (7) In order to comply with the First Aid and CPR Protocol, providers must meet the following requirements: (a) All staff members working at a childcare center or

home must take a pediatric first aid and CPR course from a certified entity. This course must include demonstration and practice to ensure that the technique can be properly executed during an emergency. Training must be kept up to date at all times; (b) The first aid kit must be well-stocked, accessible to adults, and out of the reach of children; (c) Expired or missing items must be replaced and disposed of on a monthly basis; (d) Providers must carry a first aid backpack to all outings. This backpack must include any emergency medications that may be required for a child; (e) In case of an emergency, first aid and CPR shall be administered as applicable; (f) General first aid recommendations must be followed in the following emergency situations: (g) Difficulty breathing; (h) Neck and/or back injuries; (i) Injuries that require immobilization of the affected area, (j) Eye injuries, (k) Bruises; (l) Arm or leg wounds; (m) Cuts or lacerations; (n) Hemorrhage; (o) Sprains; (p) Fractures; (q) Dislocations; (r) Choking; (s) Burns; (t) Allergies; (u) Insect bites; (v) Seizures, (w) Human or animal bites.

-- List all citations for these requirements, including those for licensed and license-exempt providers

First Aid and CPR Protocol . Child Care Program Regulation, Art. 5.2.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

No distinction is made between provider types.

-- Describe any variations based on the age of the children in care

No distinction is made.

-- Describe if relatives are exempt from this requirement

Relatives are exempt from fulfilling this requirement.

## 11. Recognition and reporting of child abuse and neglect

-- Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

Article 4.3 of Child Care Program Regulation #8687, regarding Affirmative Action against Child Abuse, requires all providers to take affirmative action to prevent and report child abuse situations. To this end, the Comprehensive Child Care and Development Administration (hereinafter, "ACUDEN") has established the Protocol to Report Suspected Child Abuse Incidents under the Child Safety, Wellbeing, and Protection Act. This protocol adopts the definitions set out in the Child Safety, Wellbeing, and Protection Act (Act 246-2011), which provides the following definitions for abuse, neglect, and sexual abuse. **Abuse** - any intentional act or omission performed by a child's parent or guardian that may cause harm to a child or put a child at risk of suffering harm to their health and their physical, mental, and/or emotional

integrity, including sexual abuse, as defined by this Act. The following acts shall also be considered as abuse: Engaging in obscene conduct and/or using a minor to engage in obscene conduct; allowing another person to cause harm to a child or to put the child at risk of suffering harm to their health and physical, mental, and/or emotional integrity; voluntary abandonment of a child; a parent or guardian who exploits a child or who allows another person to do so by forcing or allowing the child to perform any act, including, but not limited to, using the child to engage in obscene conduct in order to make a profit or to receive any other benefit; engaging in conduct that, if criminally prosecuted, would constitute a crime against the child's health and his/her physical, mental, and emotional integrity, including sexual abuse. Furthermore, it shall be considered that a child is a victim of abuse if the child's parent or guardian has engaged in the conduct described above or has engaged in domestic violence in front of the child, as defined by Act 54-1989, as amended. **Sexual abuse** - engaging in sexual conduct in front of a child and/or using a child to voluntarily or involuntarily engage in sexual conduct aimed at satisfying their lust, or any act that, if criminally prosecuted, would constitute any of the following crimes: sexual assault, lewd acts, human trafficking for sexual acts, indecent exposures, indecent proposals, production of child pornography, possession and distribution of child pornography, using a child for child pornography; sending, transporting, selling, distributing, publishing, exhibiting, or possessing obscene material and obscene shows as described in the Puerto Rico Criminal Code. **Neglect** - a type of abuse that consists in failing to fulfill their duties or failing to exercise their powers to properly provide a child with food, clothing, shelter, education, or health care; failing in their duty to supervise a child; failing to visit a child or failing to keep in contact or to communicate frequently with the child. It shall also be considered that a child is a victim of neglect if the child's parent or guardian has engaged in the conduct described in Article 166 A, subparagraphs (3) and (4) of the Puerto Rico Civil Code. Articles 7 and 21 of Act 246-2011 establish the citizen's and government duty to report any suspected situation of abuse. The legal obligation to report is based on the suspicion of abuse. Protocol to Report Suspected Child Abuse Incidents under the Child Safety, Wellbeing, and Protection Act provides the necessary guidance for all providers to make referrals in order for the Department of the Family to be able to conduct the corresponding child abuse investigation. This protocol addresses the following topics: (1) Purpose of the protocol. (2) Legal basis, (3) State public policy, (4) Important definitions, including abuse, neglect, sexual abuse, abandonment, and emotional harm, among others; (5) The protocol summarizes the substantive articles of Act 246-2011 that all providers should know; (6) Procedure to report situations of abuse; (7) General steps to guarantee the child's safety. In order to meet standards to identify and report child abuse situations, providers must comply with the following practices: Act 246 Ley, Child Safety, Wellbeing, and Protection Act, requires that procedures be established to identify child abuse incidents both at the family and institutional level. For this reason, the ACUDEN has developed the *Protocol to Report Suspected Child Abuse Incidents under the Child Safety, Wellbeing, and Protection Act*. Training on this subject includes information regarding the provisions of Articles 1, 2, 3, 7, 21, 22, 23, 56, and 57 of the Act. In addition to the provisions of ACUDEN's Protocol with regard to the obligation to identify and report suspected cases of abuse, all staff members are required to do the following: **Domestic Abuse:** (1) Identifying the child who is a suspected victim of abuse; (2) Referring the situation to the child abuse hotline; (3) Asking the hotline

personnel for their name and referral number; (4) Notifying the Center Director; (5) Completing the *Suspected Abuse Incident Report*; (6) Discussing the report with the Director; (7) The Director shall notify the Program, using the *Notice of Child Abuse Referral*; (8) If necessary, request support from the parents and education area personnel; (9) The report must be stored in a separate file; (10) The Center's personnel shall assume custody of the child until the Department of the Family takes responsibility for the child. **Institutional Abuse:** (1) Identifying a child that is a suspected victim of institutional abuse and/or neglect; (2) Referring the case to the Child Abuse Hotline; (3) Asking the hotline representative for their name and referral number; (4) Filling out the Incident Report for Institutional Abuse or Neglect at the Center level; (5) Discussing the with the Center Director; (6) The Center Director shall inform the parent or guardian of the situation of institutional abuse or neglect and the process to be followed; (7) The Center Director shall complete the Notice of Referral and shall send it to the corresponding Regional Executive Director. All drafted documents shall be stored in a separate file in order to safeguard the provisions of Act No. 246, Child Safety, Wellbeing, and Protection Act, with specific reference to Article 26 - Confidentiality of the Child's Reports and Files; (8) The Executive Director shall send the Notice of Child Abuse Referral to the Program Director immediately; (9) The Program Director shall meet with or inform the Human Resources Director in order to determine the corresponding action to be taken and shall notify the the decision to: a. The employee, b. The Center Director, and c. The Executive Director; (10) The Program Director shall request support from all Parents and Special Education components in conjunction with the Mental Health Professional, to work with the family and the employees; (11) The involved Central Office personnel shall prepare an administrative report, which shall be submitted to the Program Director. The information shall be kept in strict confidentiality. **If the Center Director engages in institutional abuse or neglect, the employee shall:** (1) Take the first 4 steps for Institutional Abuse cases; (2) Immediately notify the corresponding Regional Executive Director by phone; (3) Send the Incident Report for Institutional Abuse or Neglect at the Center Level to the Executive Director within 48 hours; (4) The Executive Director shall fill out and send the Notice of Child Abuse Referral to the Program Director immediately; (5) The Executive Director shall keep the Incident Report for Institutional Abuse or Neglect at the Center Level in a separate file, in order to safeguard the provisions of Act No. 246, Child Safety, Wellbeing, and Protection Act, with specific reference to Article 26 - Confidentiality of the Child's Reports and Files; (6) The Executive Director shall send the Notice of Child Abuse Referral to the Program Director immediately; (7) The Program Director shall meet with or shall inform the Human Resources Director in order to take the corresponding action and shall notify the decision in writing to: 1. The employee, 2. The Center Director, and 3. The Executive Director; (8) The Program Director shall request support from all Parents and Early Education components in conjunction with the Mental Health Professional, in order to work with the family and the employees; the involved Central Office personnel shall draft an administrative report, which shall be submitted to the Program Director. The information shall be kept in strict confidentiality. **If a Social Worker visits the Center,** (1) The Center Director shall fill out the Notice of Child Abuse Referral and shall send it to the corresponding Regional Executive Director; (2) All drafted documents shall be stored in a separate file in order to safeguard the provisions of Act No. 246, Child Safety, Wellbeing, and Protection Act, with specific

reference to Article 26 - Confidentiality of the Child's Reports and Files; (3) The Executive Director shall send the Notice of Child Abuse Referral to the Program Director immediately. **All personnel: (1)** Shall collaborate with the Department of the Family Case Worker in charge of the Investigation; (2) All persons, officials, or institutions shall be required to provide information regarding any situation of abuse as defined under the Act, and shall enjoy immunity from any civil or criminal proceeding that may be initiated as a result of said act.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Act 246-2011 Art. 3, Art. 7, Art. 21 and Protocol to Report Suspected Child Abuse Incidents under the Child Safety, Wellbeing, and Protection Act, sections 1 to 7. Child Care Program Regulation, Article 4.3.

-- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations by provider type.

-- Describe any variations based on the age of the children in care

There are no variations based on the child's age.

-- Describe if relatives are exempt from this requirement

Relatives are not exempted from identifying and reporting incidents of abuse. Act 246-2011 involves a civil duty. However, providers who are relatives will not have to comply with the Protocol to Report Suspected Child Abuse Incidents.

b) Does the Lead Agency include any of the following optional standards?



No, if no, skip to 5.2.3.



Yes, if yes provide the information related to the optional standards addressed.

#### 1. Nutrition

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

According to the Protocol for the Evaluation of Menu Cycles at the Center Level defines a menu cycle as a group of menus designed by a Licensed Nutritionist/Dietitian in Puerto Rico. This menu cycle contains healthy and nutritional meals and snacks that are planned for days or for pre-defined periods. This protocol, in conjunction with other materials, address the following topics: (1) Requirements for providers participating in the Child and Adult Care Food Program (PACNA, for its

Spanish acronym); (2) Requirements for providers who are not Child and Adult Care Food Program (PACNA) participants; (3) Infant formula management; (4) Breast milk management; (5) Receiving and preparing infant formula; (6) Introduction to solid foods for infants. Food allergies; (7) Good infant nutrition; (8) Mother nutrition; (9) Iron-rich foods; (10) Adequate mealtime to achieve a healthy child nutrition. In order to meet the nutritional standards, providers must: (1) If the provider is a PACNA participant, a valid PACNA Certification or Compliance Agreement must be submitted; (2) If the provider is not a PACNA participant, their menu must comply with the provisions of Act 45-2004 of the Puerto Rico Nutritionists and Dietitians Association; (3) The menu must be visible to parents at all times.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Protocol for the Evaluation of Menu Cycles at the Center Level. Child Care Program Regulation 8687, Chapter 5, Art. 5.2, A.

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are two options for menus served at home: (1) Licensed homes may request the fund refund offered by the Administration for the Socioeconomic Development of the Family (ADSEF, for its Spanish acronym) and must use the menu prepared by this agency; (2) Using the menu suggested by the Child Care Program. They are not required to have a menu certified by a nutritionist/dietitian.

-- Describe any variations based on the age of the children in care.

There are no variations based on the ages of children.

--Describe if relatives are exempt from this requirement

Providers who are relatives are not required to meet these standards.

## 2. Access to physical activity

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The Child Development Unit works with the Creative Curriculum, which promotes the development of physical activities from birth to 5 years old. As for educational aspects, the Curriculum establishes that physical development in young children includes gross motor skills and fine motor skills. Motor skills develop in a predictable way that progresses from simple to complex, from the head to the feet. There is a link between the development of motor skills and physical activity. Constant physical activity helps in developing the bones, muscles, and joints - and helps to keep them healthy. Physical activity helps in managing weight and prevents the occurrence of certain

diseases. The more physical activities are provided to children, the more likely it is for them to establish a positive cycle of learning and good health. The Creative Curriculum directs education personnel to develop physical activities within and outside of the development environments. The use of skill development tools seeks to develop motor skills based on the peculiarities of each child, which means the teacher or primary caretaker must plan and develop physical activities outside of the development environments. In addition, proper practices promote the use of activities to maintain good health. The development of activities where children can learn about eating healthy, taking care of their body, trying new foods, being a good example when eating, among others, is required. The Weekly Planning documented used by the Child Development Unit for Providers being Delegated Funds and Administrative Centers requires the planning of activities for the development of motor skills and physical development within and outside of the development environment.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Regulation 8687 of the Childcare Program, Chapter 5, Art. 5.2, B.

-Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations based on the type of provider.

-- Describe any variations based on the age of the children in care.

There are no variations based on the child's age.

--Describe if relatives are exempt from this requirement

Providers who are relatives are not exempt from this requirement.

### 3. Caring for children with special needs

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

The population of children with special needs is attended at all ages and through all of the Childcare Program's modalities. All of the departments require procedures for complying with standards for the care of children with special needs. These include the child-adult ratio, screening, adaptation of developmental activities, service coordination intervention in natural environment, adaption educational equipment and materials, provision of assistive and adaptive equipment, adaptation of menu to special diets, and specialized training. Concerning health and safety, Providers are

required to comply with the ADA's requirements regarding access to facilities, the size of restrooms, the size of doors and ramps, access to outdoor equipment for children with disabilities, among others. Emergency plans are adapted, menus are adjusted for children with food allergies, there are procedures for administering medications, among others.

-- List all citations for these requirements, including those for licensed and license-exempt providers

Regulation 8687

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

There are no variations based on the type of provider

-- Describe any variations based on the age of the children in care.

There are no variations based on the child's age.

--Describe if relatives are exempt from this requirement

Providers who are relatives are not exempt from this requirement.

4. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)).

Describe:

NA

--Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)

NA

-- List all citations for these requirements, including those for licensed and license-exempt providers

NA

--Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).

NA

-- Describe any variations based on the age of the children in care.

NA

--Describe if relatives are exempt from this requirement

NA

### **5.2.3 Health and safety training for CCDF providers on required topics.**

Lead Agencies are required to have minimum pre-service or orientation training requirements (to be completed within 3 months), as appropriate to the provider setting and the age of children served, that address the health and safety topics described in 5.2.2, and child development. Lead Agencies must also have ongoing training requirements on the health and safety topics for caregivers, teachers, and directors of children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). The state/territory must describe its requirements for pre-service or orientation training and ongoing training. These trainings should be part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory. Lead Agencies have flexibility in determining the number of training hours to require, but they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

#### **Pre-Service or Orientation Training Requirements**

a) Provide the minimum number of pre-service or orientation training hours on health and safety topics for caregivers, teachers, and directors required for the following:

1. Licensed child care centers:

4 hours

2. Licensed FCC homes:

4 hours

### 3. In-home care:

2 hours

### 4. Variations for exempt provider settings:

Exempt providers who are not relatives receive pre-service orientation when they are visited. In addition, they are given informative materials concerning Health and Safety. This orientation has a duration of 2 hours.

#### b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

The pre-service orientation is preferably offered before the provider begins to offer the services, but it is offered no later than three months from the moment they are hired.

#### c) Explain any differences in pre-service or orientation training requirements based on the ages of the children served

There are no age-based differences.

#### d) Describe how the training is offered, including any variations in delivery (e.g. across standards, in rural areas, etc.) Note: There is no federal requirement on how a training must be delivered

It is offered at a conference level in small groups of ten (10) at the regional offices of the Department of Family Affairs. Exempt providers who are not relatives are offered training at their homes when they are visited.

#### e) Identify below the pre-service or orientation training requirements for each topic (98.41(a)(1)(i through xi)).

##### 1. Prevention and control of infectious diseases (including immunizations)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Childcare Program's Protocol for the Prevention of Contagious Diseases at Childcare and Child Development Homes and Centers, Childcare Program Regulation Num. 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care

for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

### 5.2.3e 2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Childcare Program's Protocol for the Prevention of Sudden Deaths, Regulation Num. 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF are allowed to care for children unsupervised?

- Yes
- No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

- Yes
- No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

### 5.2.3e 3. Administration of medication, consistent with standards for parental con

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Protocol for the Storage and Administration of Medication, Regulation Num. 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

5.2.3e 4. Prevention and response to emergencies due to food and allergic reactions

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Protocol for the Handling of Food Allergies, Regulation Num.8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

5.2.3e 5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Procedure for the Determination of the Eligibility of Childcare Providers, Regulation Num. 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

5.2.3e 6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

The Childcare Program's Protocol for the Prevention of Shaken Baby Syndrome, Regulation 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

5.2.3e 7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Law 173-2016, requirements for all establishments. Regulation Num. 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

5.2.3e 8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

#### 5.2.3e 9. Appropriate precautions in transporting children (if applicable)

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Manual of Procedures for the Determination of the Eligibility of Childcare Providers,  
Regulation Num. 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

5.2.3e 10. Pediatric first aid and CPR certification

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

First Aid and Cardiopulmonary Resuscitation Protocols, Regulation Num. 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

5.2.3e 11. Recognition and reporting of child abuse and neglect

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Childcare Program Regulation 8687

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Providers who are relatives are exempt from complying with this requirement.

### 5.2.3e 12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Regulation 8687 establishes the Child Development Unit's role in the Childcare Program. This Unit is responsible for offering training to providers concerning the importance of a child's development in the early stages of their childhood.

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

Yes, blood relatives are exempt from participating in the training, although they are provided with information (literature) concerning the stages of development and the importance of adequate stimulation in the early stages.

### 5.2.3e 13.

Describe other training requirements, such as nutrition, physical activities, caring children with special needs, etc..

There are no other requirements

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

N/A

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in licensed CCDF programs are allowed to care for children unsupervised?

Yes

No

Does the state/territory require that this training topic be completed before caregivers, teachers, and directors in license-exempt CCDF programs are allowed to care for children unsupervised?

Yes

No

Describe if relatives are exempt from this requirement

N/A

## Ongoing Training Requirements

**5.2.4 Provide the minimum number of annual training hours on health and safety topics for caregivers, teachers, and directors required for the following.**

a) Licensed child care centers:

10 hours

b) Licensed FCC homes:

10 hours

c) In-home care:

4 hours

d) Variations for exempt provider settings:

4 hours

**5.2.5 Describe the ongoing health and safety training for CCDF providers by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).**

1. Prevention and control of infectious diseases (including immunizations)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

### 3. Administration of medication, consistent with standards for parental consent

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

### 4. Prevention and response to emergencies due to food and allergic reactions

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?



Annually



Other

Describe:

Â

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?



Annually



Other

Describe:

Â

5. Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?



Annually



Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

7. Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

#### 8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

#### 9. Appropriate precautions in transporting children (if applicable)

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

10. Pediatric first aid and CPR certification

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

11. Recognition and reporting of child abuse and neglect

-- Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

-- How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

12. Child development (98.44(b)(1)(iii))

Provide the citation for this training requirement, including citations for both licensed and license-exempt providers

Child Care Program regulation 8687

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

13. Describe other requirements such as nutrition, physical activities, caring for children with special needs, etc..

Provide the citation for other training requirements, including citations for both licensed and license-exempt providers

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed CCDF programs?

Annually

Other

Describe:

How often does the state/territory require that this training topic be completed by caregivers, teachers, and directors in licensed-exempt CCDF programs?

Annually

Other

Describe:

### 5.3 Monitoring and Enforcement Policies and Practices for CCDF Providers

### **5.3.1 Enforcement of licensing and health and safety requirements**

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 State and local health and safety requirements, including those described in 98.41 (98.42(a)). This may include, but is not limited to, any systems used to ensure that providers complete health and safety trainings, any documentation required to be maintained by child care providers or any other monitoring procedures to ensure compliance. Note: Inspection requirements are described starting in 5.3.2.

To certify, describe the procedures to ensure that CCDF providers comply with all applicable State and local health and safety requirements

Providers who offer services through the CCDF must comply with all of the requirements of Law 173-2016 in order to obtain a License from the Department of Family Affairs. To be granted this license, the provider must have all of the valid permits and certificates issued by the regulatory agencies. In addition to complying with the License from the Department of Family Affairs, all providers must possess the Eligible Provider Certification (CCSS-14-16). Being granted both documents allows for the delegation of funds through the Childcare Program. The Eligible Provider Certification is based on the License from the Department of Family Affairs. In order for the provider to obtain the Eligible Provider Certification, they must comply with the Childcare Program's Health and Safety requirements. In order to do so, they must receive pre-service orientation, initiate the background check process, and provide proof of having requested all of the documents contemplated in the evaluation. In addition, they must agree to the Childcare Program's Health and Safety monitoring. Providers who are exempt from obtaining the License from the Department of Family Affairs must comply with the Health and Safety evaluation carried out by the Childcare Program.

### **5.3.2 Inspections for licensed CCDF providers.**

Lead agencies must require licensing inspectors to perform inspections-with no fewer than one pre-licensure inspection for compliance with health, safety, and fire standards-of each child care provider and facility in the state/territory. Licensing inspectors are required to perform no fewer than one annual, unannounced inspection of each licensed CCDF provider for compliance with all child care licensing standards; it shall include an inspection for compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards; inspectors may inspect for compliance with all three standards - health, safety, and fire - at the same time (658E(c)(2)(K)(i)(II); 98.16 (n); 98.42(b)(2)(i)). Certify by responding to the questions below to describe your state/territory's monitoring and enforcement procedures to ensure that

licensed child care providers comply with licensing standards, including compliance with health and safety (including, but not limited to, those requirements described in 98.41) and fire standards.

a) Licensed CCDF center-based child care

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed child care center providers for compliance with health, safety, and fire standards

Article 12 of Regulation 8860 for the Licensing of Establishments for the Care, Development, and Learning of Children in the Commonwealth of Puerto Rico specifically establishes the requirements for the Establishment; in section 12.1, it lists the following: (1) Use Permit of the Permit Management Office (OGPe, for its Spanish acronym) or of the Municipal Urban Planning and Permit Office (OMPUS, by its Spanish acronym) (2) Sanitary License of the Environmental Health Program of the Department of Health (annual); (3) Certification of the Fire Prevention Bureau of the Puerto Rico Fire Department (annual); (4) Certification of the Center for Municipal Tax Revenues (CRIM, by its Spanish acronym); (5) Registration and evidence of payment of Municipal Patent, when applicable; (6) Puerto Rico State Insurance Fund Corporation Policy (when applicable); (7) Current Public Liability Policy, with evidence of payment, which will cover, among others, accidents within the establishment, its premises and in transportation during outside activities; (8) Menu certified by a registered dietitian nutritionist or certified by the School Lunch Division, as applicable; (9) Layout - it will include the entire area to be used for the service and its interior and exterior measurements; (10) Equipment and materials needed in functional conditions in all the service areas (play and learning areas, bedrooms, living room, kitchen, laundry, restrooms, recreational areas, among others); (11) The Emergency Operational Plan (EOP) will include procedures to deal with potential emergencies and disasters, such as fire, atmospheric phenomena, earthquakes, terrorism, gas emanation, preventive call protocol, among others; the plan will be certified by the State Emergency Management Agency of the municipality; (12) In new applications, a budget and evidence of income will be submitted through a checkbook slip, employer's certificate, income tax return form or another certifying document that reflects economic solvency to comply with the services pretend to be offered; (13) Financial report (annually) - It will reflect the economic capacity to continue providing the service; it will be certified annually by an accountant. Establishments administrated by the Federal Government, the Government of Puerto Rico, the municipal

governments, and incorporated religious organizations such as religious non-profits, are exempt from complying with the requirements in this section - they are instead required to have a certification for the availability of funds to operate; (14) Annual fumigation contract and evidence of said service being provided. The establishment must be fumigated when the children are not present; (15) Lease agreement indicating the purpose for which the property will be used; (16) If the property is owned by the operator, they must present a copy of the deed to the property or a CRIM certification; (17) Must comply with Title 11 of the American Disabilities Act of 1990; (18) Copy of Incorporation from the Puerto Rico Department of State and from the members of the Board of Directors, and a certificate of Good Standing as applicable; (19) Set of rules establishing the norms or guidelines that govern the establishment. These rules must be made accessible to the enrollment, their relatives, their guardians, and any other representative of an agency related to the establishment's operation. Among other aspects, the following must be included: A description of the objectives and services. Rules concerning the establishment's operation and procedures. Service hours. Criteria and procedures for enrollment and graduation. Services to be offered, curriculum, or activity plan, as applicable. The handling of correspondence, telephone use, and visits will be determined in accordance with that is established by the case handler from the (20) Department and the establishment, as applicable. The responsibility the personnel have to report any abuse or negligence, as stipulated by the pertinent child protection law. Fees for the service, if applicable; (21) Personnel rules; (22) Protocols: The handling of medical emergencies and contagious diseases. Safe administration of medication. Escapes. Physical or sexual assault or aggression. Emergency drills. The safe handling of breastmilk. Privacy protocols (rules and procedures). Suspected abuse, negligence, and/or exploitation of children in accordance with Law 246-2011. The handling of contagious diseases. Others, as needed; (23) Records - a records system for ensuring the safety, protection, and privacy of the enrollment, parents, and employees. Anyone who works with said records at the establishment will be responsible for handling them properly:

Enrollment records - The following information must be documented for each child and must be made available to officials from the Licensing Office when required: Full name and demographic information. Name, address, and phone number of the relative, tutor, or handler for the case. The department's region of origin, when applicable. Date of enrollment and graduation, if applicable. Daily record of incidents - the most relevant incidents or actions that take place during each shift will be recorded. Record

of daily inspections - the care, development, and learning centers, and the daycare homes must have a protocol for the daily inspection of the child upon their entry and exit. Record of visits; (24) Any person who visits the establishment must be documented and must provide the following information: date and time of entrance and exit, full name, and the purpose of the visit. Attendance records - all personnel must record daily attendance in the system established for said purpose; (25) Record of the handling of medication - a record of all children taking medication that includes their full name, the name of their medication, the time and date at which the medication is being administered, and the name of the person who administered the medication; (26) It must also include a consent form signed by the mother, father, tutor, or guardian, as applicable; (27) Transportation - Any establishment that offers this service will have available a motor vehicle and a driver; (28) Both must comply with the norms established by the Public Service Commission as applicable; (29) Telephone Service - Every establishment must have a telephone service, which must be operational and will be located in a place accessible for its use; (30) The establishment will have at sight, in a readily accessible area, the numbers of the emergency agencies (Puerto Rico Police, Fire Department, Emergency Management Office, among others); (31) Inventory of equipment; (32) First aid kit; (33) Once a provider complies with these requirements, they may obtain a license from the Department of Family Affairs - once they obtain the License from the Department of Family Affairs, they may request an Eligible Provider Certification through the Childcare Program; (34) In order to obtain this certification, the provider must comply with the background check requirements and must agree to Health and Safety monitoring.

## [2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF child care center providers](#)

Article 9 of Regulation 8830 and Law 176-2016 establish that the Licensing Office of the Department of Family Affairs is to visit the providers four times per year, one (1) visit every three (3) months. Through its Health and Safety Department, the Childcare Program conducts an initial, announced visit, after which it conducts an unannounced visit in accordance with the Procedure for Determining the Eligibility of Providers, Chapter VII, section C.

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that child care center providers comply with the applicable licensing standards, including health, safety, and fire standards.

In accordance with Regulation 8687 and in accordance with the Procedure for Determining the Eligibility of Providers, the Childcare Program has developed two monitoring forms. Both have been standardized. The inspectors are assigned to the Childcare Program's Health and Safety Department. The Non-Relative Exempt Home Care Monitoring Form has been designated CCSS-12-16, while the Licensed Care Center/Home Form has been designated CCSS-18-16. Both documents are based on the standards provided by Caring for Our Children.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers

Childcare Program Regulation 8687 / Procedure for Determining the Eligibility of Providers.

b) Licensed CCDF family child care home

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed family child care providers for compliance with health, safety, and fire standards

Article 12 of Regulation 8860 for the Licensing of Establishments for the Care, Development, and Learning of Children in the Commonwealth of Puerto Rico specifically establishes the requirements for personnel and establishments. Section 12.1 lists the following requirements for establishments: (1) Certification of the Fire Prevention Bureau of the Puerto Rico Fire Department (annual); (2) Certification of the Center for Municipal Tax Revenues (CRIM, for its Spanish acronym); (3) Registration and evidence of payment of Municipal Patent, when applicable; (4) Puerto Rico State Insurance Fund Corporation Policy, when applicable; (5) Current Public Liability Policy, with evidence of payment, which will cover, among others, accidents within the

establishment, its premises and in transportation during outside activities; (6) Menu certified by a registered dietitian nutritionist or certified by the School Lunch Division, as applicable; (7) Layout - it will include the entire area to be used for the service and its interior and exterior measurements; (8) Equipment and materials needed in functional conditions in all the service areas (play and learning areas, bedrooms, living room, kitchen, laundry, restrooms, recreational areas, among others); (9) The Emergency Operational Plan (EOP) will include procedures to deal with potential emergencies and disasters, such as fire, atmospheric phenomena, earthquakes, terrorism, gas emanation, preventive call protocol, among others; the plan will be certified by the State Emergency Management Agency of the municipality; (10) In new applications, a budget and evidence of income will be submitted through a checkbook slip, employer's certificate, income tax return form or another certifying document that reflects economic solvency to comply with the services that are to be offered; (11) Financial report (annually) - It will reflect the economic capacity to continue providing the service; it will be certified annually by an accountant. Establishments administrated by the Federal Government, the Government of Puerto Rico, and incorporated religious organizations such as religious non-profits, are exempt from complying with the requirements in this section - they are instead required to have a certification for the availability of funds to operate; (12) Annual fumigation contract and evidence of said service being provided. The establishment must be fumigated when the children are not present; (13) Lease agreement indicating the purpose for which the property will be used. If the property is owned by the operator, they must present a copy of the deed to the property or a CRIM certification; (14) Must comply with Title 11 of the American Disabilities Act of 1990; (15) Copy of Incorporation from the Puerto Rico Department of State and from the members of the Board of Directors, and a certificate of Good Standing as applicable; (16) Set of rules establishing the norms or guidelines that govern the establishment. These rules must be made accessible to the enrollment, their relatives, their guardians, and any other representative of an agency related to the establishment's operation. Among other aspects, the following must be included: A description of the objectives and services. Rules concerning the establishment's operation and procedures. Service hours. Criteria and procedures for enrollment and graduation. Services to be offered, curriculum, or activity plan, as applicable. The handling of correspondence, telephone use, and visits will be determined in accordance with that is established by the case handler from the Department and the establishment, as applicable. The responsibility the personnel

have to report any abuse or negligence, as stipulated by the pertinent child protection law. Fees for the service, if applicable. Rules for the personnel; (17) Protocols: The handling of medical emergencies and contagious diseases. Safe administration of medication. Escapes. Physical or sexual assault or aggression. Emergency drills. The safe handling of breastmilk. Privacy protocols (rules and procedures). Suspected abuse, negligence, and/or exploitation of children in accordance with Law 246-2011. The handling of contagious diseases. Others, as needed; (18) Records - a records system for ensuring the safety, protection, and privacy of the enrollment, parents, and employees. Anyone who works with said records at the establishment will be responsible for handling them properly: Enrollment records - The following information must be documented for each child and must be made available to officials from the Licensing Office when required: Full name and demographic information. Name, address, and phone number of the relative, tutor, or handler for the case. The department's region of origin, when applicable. Date of enrollment and graduation, if applicable. Daily record of incidents - the most relevant incidents or actions that take place during each shift will be recorded. Record of daily inspections - the care, development, and learning centers, and the daycare homes must have a protocol for the daily inspection of the child upon their entry and exit. Record of visits - any person who visits the establishment must be documented and must provide the following information: date and time of entrance and exit, full name, and the purpose of the visit. Attendance records - all personnel must record daily attendance in the system established for said purpose. Record of the handling of medication - a record of all children taking medication that includes their full name, the name of their medication, the time and date at which the medication is being administered, and the name of the person who administered the medication. It must also include a consent form signed by the mother, father, tutor, or guardian, as applicable; (19) Transportation - Any establishment that offers this service will have available a motor vehicle and a driver. Both must comply with the norms established by the Public Service Commission as applicable; (20) Telephone Service - Every establishment must have a telephone service, which must be operational and will be located in a place accessible for its use. The establishment will have at sight, in a readily accessible area, the numbers of the emergency agencies (Puerto Rico Police, Fire Department, Emergency Management Office, among others); (21) Inventory of equipment; (22) First aid kit.

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF family child care providers

Article 9 of Regulation 8830 and Law 176-2016 establish that the Licensing Office of the Department of Family Affairs is to visit the providers four times per year, one (1) visit every three (3) months. Through its Health and Safety Department, the Childcare Program conducts an initial, announced visit, after which it conducts an unannounced visit in accordance with the Procedure for Determining the Eligibility of Providers, Chapter VII, section C.

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

The provider is visited four times per year by personnel from the Licensing Office, in addition to receiving an unannounced visit by personnel from the Childcare Program's Health and Safety Department.

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that CCDF family child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

In accordance with Regulation 8687 and in accordance with the Procedure for Determining the Eligibility of Providers, the Childcare Program has developed two monitoring forms. Both have been standardized. The inspectors are assigned to the Childcare Program's Health and Safety Department. The Non-Relative Exempt Home Care Monitoring Form has been designated CCSS-12-16, while the Licensed Care Center/Home Form has been designated CCSS-18-16. Both documents are based on the standards provided by Caring for Our Children.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers

Article 9, Article 12 of Regulation 8860 / Article 4.14 of the Childcare Program Regulation 8687 / Procedure for Determining the Eligibility of Providers.

c) Licensed in-home CCDF child care

N/A. In-home CCDF child care (care in the child's own home) is not licensed in the State/Territory. Skip to 5.3.2 (d).

1. Describe your state/territory's requirements for *pre-licensure inspections* of licensed in-home child care providers for compliance with health, safety, and fire standards

2. Describe your state/territory's requirements for annual, unannounced inspections of licensed CCDF in-home child providers

3. Identify the frequency of unannounced inspections:

Once a year

More than once a year

Describe:

4. Describe the monitoring procedures (including differential monitoring, if applicable) and how the inspections ensure that in-home CCDF child care providers comply with the applicable licensing standards, including health, safety, and fire standards.

5. List the citation(s) for your state/territory's policies regarding inspections for licensed in-home CCDF providers

d) List the entity(ies) in your state/territory that are responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers

N/A

### 5.3.3 Inspections for license-exempt CCDF providers

Lead Agencies must have policies and practices that require licensing inspectors (or qualified monitors designated by the Lead Agency) to perform an annual monitoring visit of each license-exempt CCDF provider for compliance with health, safety (including, but not limited to, those requirements described in 98.41), and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Lead Agencies have the option to exempt relative providers (as described in section (658P(6)(B))

from this requirement. To certify, respond to the questions below to describe the policies and practices for the annual monitoring of:

a) License-exempt center-based CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

Article 9 of Regulation 8830 and Law 176-2016 establish that the Licensing Office of the Department of Family Affairs is to visit the providers four times per year, one (1) visit every three (3) months. Through its Health and Safety Department, the Childcare Program conducts an initial, announced visit, after which it conducts an unannounced visit in accordance with the Procedure for Determining the Eligibility of Providers, Chapter VII, section C.

Provide the citation(s) for this policy or procedure

Article 9 of Regulation 8830, Law 176-2016, Article 4.14 Childcare Program Regulation, and Procedure for Determining the Eligibility of Providers, Chapter VII, section C.

b) License-exempt family child care CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring is used

Exempt providers who are not relatives are not visited by the Licensing Office of the Department of Family Affairs. These providers are visited by the Childcare Program's Health and Safety inspectors. During these visits, the Non-Relative Exempt Home Care Form (CCSS-12-16) is used. Providers are visited before they begin provider their services. This initial visit is a scheduled visit. Further visits will be unannounced inspections.

Provide the citation(s) for this policy or procedure

Section IV of the Procedures Guide for Determining the Eligibility of Care Service Providers

c) License-exempt in-home CCDF providers, including if monitoring is announced or unannounced, occurs more frequently than once per year, if relative care is exempt from monitoring, and if differential monitoring is used

Exempt providers who are not relatives are not visited by the Licensing Office of the Department of Family Affairs. In the case of children who are bed-ridden, this type of provider may provide services at home to the minor. In these cases, monitoring is not conducted because the services are offered at the minor's home. However, background checks are performed, and the provider must comply with the CPR course and First Aid course requirements.

Provide the citation(s) for this policy or procedure

Section IV of the Procedures Guide for Determining the Eligibility of Care Service Providers

d) Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home (98.42(b)(2)(iv)(B)). Does your state use alternate monitoring procedures for monitoring in-home care?

No

Yes. If yes,

describe:

In these cases, neither the center nor home monitoring requirements are not applied because it is the child's home. A background check of the provider is performed.

e) List the entity(ies) in your state/territory that are responsible for conducting inspection of license-exempt CCDF providers

Child Care Program, Health and Safety Department

### 5.3.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) 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 State's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a) To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers and that those inspectors have received training 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)(1-2)).

Health and Safety inspectors receive continuous training in subjects concerning the licensing aspects. This training is offered by the agencies that regulate each of the requirements.

b) Provide the citation(s) for this policy or procedure

**5.3.5 The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).**

a) To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis.

A There is currently no state regulation that establishes an exact number of licensure inspectors with regards to licensed care centers and homes, but the Department of Family Affairs guarantees that it has sufficient employees carry out inspections and monitoring as stipulated in Law 173. The Licensing Office maintains a minimum of 10 inspectors for each of the 10 identified regions in the Department. These inspectors provide orientation for applicants and visit them in order to determine their compliance with the law and in order to license them. In addition, the ACUDEN has a Health and Safety program department that monitors compliance with CCDF and state laws. A total of 11 CCDF examiners randomly visit providers in order to ensure their continuing compliance with the Program's requirements and state and federal laws. In cases where inspectors identify a violation that puts children at risk and fails to comply with licensing requirements, said office is alerted for the evaluation and, if necessary, cancellation of the license. The ratio of licensing inspectors to licensed providers is approximately 47:1. The ratio of examiners to providers is 42:1.

b) Provide the policy citation and state/territory ratio of licensing inspectors

Law 173, which pertains to licensing, does not stipulate the exact ratio of inspectors to licensed providers, but it does require a guarantee that of compliance with said law, which is why the Secretary of the Department of Family Affairs will assign the personnel required to meet the needs and comply with state regulations.

**5.3.6 States and territories have the option to exempt relatives (defined in CCDF regulations as grandparents, great-grandparents, siblings if living in a separate residence, aunts, and uncles (98.42(c)) from inspection requirements. Note: This**

**exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from the inspection requirements listed in 5.3.3?**

Yes, relatives are exempt from all inspection requirements.

If the state/territory exempts relatives from all inspection requirements, describe how the state ensures the health and safety of children in relative care.

Persons who are relatives of the minor, or parents up to a third degree of consanguinity or affinity are exempt from complying with the Health and Safety requirements. Visits and background checks are not carried out. It is believed that, because of the existing relation and the fact that they were selected by the mother, father, or guardian, these providers will provide the necessary safety in caring for the children. Even so, they are provided with information and orientation concerning the importance of a child's early development and concerning health and safety in their homes.

Yes, relatives are exempt from some inspection requirements.

If the state/territory exempts relatives from the inspection requirements, describe which inspection requirements do not apply to relative providers (including which relatives may be exempt) and how the State ensures the health and safety of children in relative care.

No, relatives are not exempt from inspection requirements.

## 5.4 Criminal Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct criminal background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For FCC homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)).

A criminal background check must include 8 specific components (98.43(2)(b)), which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks

| Components                                                                                                                                              | In-State | National | Inter-State |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|-------------|
| 1. Criminal registry or repository using fingerprints in the current state of residency                                                                 | x        |          |             |
| 2. Sex offender registry or repository check in the current state of residency                                                                          | x        |          |             |
| 3. Child abuse and neglect registry and database check in the current state of residency                                                                | x        |          |             |
| 4. FBI fingerprint check                                                                                                                                |          | x        |             |
| 5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)                                                                       |          | x        |             |
| 6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional |          |          | x           |
| 7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years                                          |          |          | x           |
| 8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years                                |          |          | x           |

In recognition of the significant challenges to implementing the Child Care and Development Fund (CCDF) background check requirements, all States applied for and received extensions through September 30, 2018. The Office of Child Care (OCC)/Administration for Children and Families (ACF)/U. S. Department of Health and Human Services (HHS) is committed to granting additional waivers of up to 2 years, in one year increments (i.e., potentially through September 30, 2020) if significant milestones for background check requirements are met.

In order to receive these time-limited waivers, states and territories will demonstrate that the milestones are met by responding to questions 5.4.1 through 5.4.4 and then apply for the time-limited waiver by completing the questions in Appendix A: Background Check Waiver Request Form. By September 30, 2018, states and territories must have requirements, policies and procedures for four specific background check components, and must be conducting those checks for all new (prospective) child care staff, in accordance with 98.43 and 98.16(o):

|                                                                                      |                                                              |
|--------------------------------------------------------------------------------------|--------------------------------------------------------------|
| --The national FBI fingerprint check; and,                                           |                                                              |
| --The three in-state background check provisions for the current state of residency: |                                                              |
|                                                                                      | --state criminal registry or repository using fingerprints;  |
|                                                                                      | --state sex offender registry or repository check;           |
|                                                                                      | --state-based child abuse and neglect registry and database. |

All four components are required in order for the milestone to be considered met.

| Components                                                                    | New (Prospective) Staff           | Existing Staff                           |
|-------------------------------------------------------------------------------|-----------------------------------|------------------------------------------|
| 1. Criminal registry or repository using fingerprints in the current state of | Milestone/Prerequisite for Waiver | Possible Time Limited Waiver for current |

|                                                                                                                                                         |                                                                                                                                                                                                        |                                                           |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| residency                                                                                                                                               |                                                                                                                                                                                                        | (existing) staff                                          |
| 2. Sex offender registry or repository check in the current state of residency                                                                          | Milestone/Prerequisite for Waiver                                                                                                                                                                      | Possible Time Limited Waiver for current (existing) staff |
| 3. Child abuse and neglect registry and database check in the current state of residency                                                                | Milestone/Prerequisite for Waiver                                                                                                                                                                      | Possible Time Limited Waiver for current (existing) staff |
| 4. FBI fingerprint check                                                                                                                                | Milestone/Prerequisite for Waiver                                                                                                                                                                      | Possible Time Limited Waiver for current (existing) staff |
| 5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR)                                                                       | Possible Time Limited Waiver for:<br>--Establishing requirements and procedures and/or<br>--Conducting checks on all new (prospective) staff and/or<br>--Conducting checks on current (existing) staff |                                                           |
| 6. Criminal registry or repository in any other state where the individual has resided in the past 5 years, with the use of fingerprints being optional | Possible Time Limited Waiver for:<br>--Establishing requirements and procedures and/or<br>--Conducting checks on all new (prospective) staff and/or<br>--Conducting checks on current (existing) staff |                                                           |
| 7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years                                          | Possible Time Limited Waiver for:<br>--Establishing requirements and procedures and/or<br>--Conducting checks on all new (prospective) staff and/or<br>--Conducting checks on current (existing) staff |                                                           |
| 8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years                                | Possible Time Limited Waiver for:<br>--Establishing requirements and procedures and/or<br>--Conducting checks on all new (prospective) staff and/or<br>--Conducting checks on current (existing) staff |                                                           |

Use the questions below to describe the status of the requirements, policies and procedures for background check requirements. These descriptions must provide sufficient information to demonstrate how the milestone prerequisites are being met and the status of the other components that are not part of the milestone. Lead Agencies have the opportunity to submit a waiver request in Appendix A: Background Check Waiver Request Form, for components not included in the milestones. Approval of these waiver requests will be subject to verification that the milestone components have been met as part of the CCDF Plan review and approval process.

## In-state Background Check Requirements

### **5.4.1 In-State Criminal Registry or Repository Checks with Fingerprints Requirements (98.43(b)(3)(i)).**

Note: A search of a general public facing judicial website does not satisfy this requirement. This check is required in addition to the national FBI criminal history check (5.4.4 below) to mitigate any gaps that may exist between the two sources.

a) Milestone #1 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

Criminal records are issued by the Puerto Rico Police. This agency issues the criminal record certificate through a written request and a verification in the electronic system. Local criminal records are not verified through fingerprints. This requirement applies to all providers who offer services through the Licensed Centers and Licensed Homes regardless of whether they offer their services through the Childcare Program. Any personnel who works in a Center or resides where services are offered through a Licensed Home must request their Certificate of Good Conduct every six months.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

This requirement applies to relatives working through Licensed Centers, Licensed Homes, and Exempt Homes who are not relatives but provide services through the CCDF. It does not apply to the homes of relatives up to the third degree of consanguinity or affinity. The validity of documents is corroborated through monitoring visits.

b) Has the search of the in-state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

**Describe:**

A The process of verifying criminal records is currently performed through a name search in the State Police database. This process requires that the person fill out an application and show official proof of personal identification, such as a Real ID, Passport, or Driver's License. The police establishes an official certification that indicates the negative or positive findings in the database. Fingerprints are not used as verification in this process because the Police Department, which is the agency in charge of the process, does not require it and there is no state law that stipulates such a requirement. Viable alternatives are being discussed so that, in the future, it is possible to establish a requirement for fingerprints as part of the laws and regulations that govern the Police Department.

#### **5.4.2 In-State Sex Offender Registry Requirements (98.43(b)(3)(B)(ii)).**

Note: This check must be completed in addition to the national NCIC sex offender registry check (5.4.5 below) to mitigate any gaps that may exist between the two sources. Use of fingerprints is optional to conduct this check.

a) Milestone #2 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state sex offender registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and

98.16(o). Describe and provide citations

The Puerto Rico Police issues the Sex Offender Registry Certification. This document is requested by the provider, their employees, or relatives from the Police. The Puerto Rico Police verifies the local Sex Offender Registry system, as well as the National Sex Offender Registry verification system. The Certificate states that both sources were verified.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

This requirement applies to all providers who offer services through the Licensed Centers and Licensed Homes regardless of whether they offer their services through the Childcare Program. Any personnel who works in a Center or resides where services are offered through a Licensed Home must request their negative Certificate of sexual assault every twelve months.

b) Has the search of the in-state sex offender registry been conducted for all current (existing) child care staff?



Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

There is no difference.



No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state criminal registry or repository, using fingerprints for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

### 5.4.3 In-State Child Abuse and Neglect Registry Requirements (98.43(b)(3)(B)(iii)).

Note: This is a name-based search.

a) Milestone #3 Prerequisite for New (Prospective) Child Care Staff: Describe the requirements, policies and procedures for the search of the in-state child abuse and neglect registry.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Central Registry of the Administration for Children and Families issues the Child Abuse and/or Neglect Registry; this is done upon receiving a request from providers, their employees, or those who live in the home. The person may directly request it from the Central Registry, or they may request it through the Health and Safety department of the Childcare Program.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

This requirement applies to all providers who offer services through the Licensed Centers and Licensed Homes regardless of whether they offer their services through the Childcare Program. All personnel who work in a Center or who reside in a Licensed Home must request the Central Registry's Certification.

b) Has the search of the in-state child abuse and neglect registry been conducted for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the search of the state child abuse and neglect registry for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

**Describe:**

The Administration for Children and Families (ADFAN), which has been assigned to the Department of Family Affairs, manages the child abuse and neglect registry. There is an administrative order issued by the Secretary of the Department which instructs the ADFAN to ensure that the Central Registry prioritizes requests made by the ACUDEN. However, the process is slow and affects the ability to verify of criminal records within a reasonable period of time. This occurs because of the lack of personnel at the Central Registry and the large number of requests they have to address. Currently, it has been possible to obtain nearly 70% of the records, but strategies for speeding up the process are being reviewed in agreements with the ADFAN.

## National Background Check Requirements

### **5.4.4 National FBI Criminal Fingerprint Search Requirements (98.43(b)(1)).**

Note: The in-state (5.4.1 above) and the inter-state (5.4.6 below) criminal history check must be completed in addition to the FBI fingerprint check because there could be state crimes that do not appear in the national repository. Also note, that an FBI fingerprint check satisfies the requirement to perform an interstate check of another State's criminal history records repository if the responding state (where the child care staff member has resided within the past five years) participates in the National Fingerprint File program (CCDF-ACF-PIQ-2017-01).

- a) Milestone #4 Prerequisite for New (Prospective) Child Care Staff. Describe the requirements, policies and procedures for the search of the National FBI fingerprint check.
  - i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Childcare Program has occasionally hired a private provider that carries out the process of verifying fingerprints. This provider handles the process of collecting fingerprints, then sends them to the FBI's offices and delivers the results to the Childcare Program in a sealed envelope that is used for the corresponding analysis and to report the results to employees and the employer. Even though it is not the ACUDEN's obligation to procure services for the collection of fingerprints, and it is instead the applicant's obligation to obtain this verification, based on the availability of funds, care center providers are assisted in covering the costs so that their employees are able to comply with this requirement.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The Licensing Office of the Department of Family Affairs maintains this requirement for service providers who do not offer their services through federal subsidies. In addition, the Childcare Program requires that providers are blood relatives of the child.

b) For all current (existing) child care staff, has the FBI criminal fingerprint check been conducted?



Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.



No. (Waiver request allowed. See Appendix A). Describe the status of conducting the FBI fingerprint check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

The ACUDEN has hired an agency that assists in procuring verifications of FBI records. This hired provider sends and receives the FBI results and delivers them electronically to ACUDEN. The process has been made significantly faster, but it has not been possible to obtain 100% of the results within the period of time required by the CCDF. We are currently achieving a compliance rate of nearly 85%.

## National Background Check Requirements

### **5.4.5 National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) Search Requirements (98.43(b)(2)).**

Note: This is a name-based search. Searching general public facing sex offender registries does not satisfy this requirement. This national check must be required in addition to the in-state (5.4.2 above) or inter-state (5.4.7 below) sex offender registry check requirements. This check must be performed by law enforcement.

a) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all new (prospective) child care staff

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

In Regulation 8687, Chapter 4, Article 4.5, it is established that these records are required. The National Sex Offender Registry's verification process is carried out through the Puerto Rico Police Department along with the local criminal records.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

This requirement applies to all providers in Puerto Rico, except for family providers.



No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other

programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

Difficulties have been encountered in obtaining verification of records from the National Crime Information Center. Agreements are currently being established through the Puerto Rico Department of Health and security agencies in order to be provided with said verification.

b) Has the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check been put in place for all current (existing) child care staff?



Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

There is no difference.



No. (Waiver request allowed. See Appendix A). Describe the status of conducting the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

## Inter-state Background Check Requirements

Checking a potential employee's history in any state other than that in which the provider's services are provided qualifies as an inter-state check, per the definition of required criminal background checks in 98.43(b)(3). For example, an inter-state check would include situations

when child care staff members work in one state and live in another state. The statute and regulations require background checks in the state where the staff member resides and each state where the staff member resided during the previous 5 years. Background checks in the state where the staff member is employed may be advisable, but are not strictly required.

**5.4.6 Interstate Criminal Registry or Repository Check Requirement (including in any other state where the individual has resided in the past 5 years). (98.43 (b)(3)(i)).**

Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check (5.4.4 above) to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).

a) Has the interstate criminal registry or repository check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The applicant or employee is responsible for providing these records. In spite of this, when the ACUDEN has been able to allocate the funds, they have been given financial assistance to obtain the records and hasten the processes.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the the interstate criminal registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other

programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

b) Has the interstate criminal registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

The applicant or employee is responsible for providing these records.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate criminal registry or repository check for current (existing) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

#### **5.4.7 Interstate Sex Offender Registry or Repository Check Requirements (including in any state where the individual has resided in the past 5 years). (98.43 (b)(3)(ii)).**

Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (5.4.5 above) to mitigate any gaps that may exist between the two sources.

a) Has the interstate sex offender registry or repository check been put in place for all new

(prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The applicant or employee is responsible for providing these records.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for new (prospective) child care staff including:

-- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

-- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)

-- Key challenges to fully implementing this requirements

-- Strategies used to address these challenges

Describe:

b) Has the interstate sex offender registry or repository check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

The applicant or employee is responsible for providing these records.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate sex offender registry or repository check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

#### 5.4.8 Interstate Child Abuse and Neglect Check Registry Requirements (98.43 (b)(3)(iii)).

Note: This is a name-based search.

a) Has the interstate child abuse and neglect check been put in place for all new (prospective) child care staff?

Yes. If yes,

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

The applicant or employee is responsible for providing these records.

ii. Describe how these requirements, policies and procedures apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i) and 98.16(o). Describe and provide citations

N/A

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for new (prospective) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs

- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

b) Has the interstate child abuse and neglect check been put in place for all current (existing) child care staff?

Yes

Describe, if applicable, any differences in the process for existing staff than what was described for new staff and provide citations.

The applicant or employee is responsible for providing these records.

No. (Waiver request allowed. See Appendix A). Describe the status of conducting the interstate child abuse and neglect check for current (existing) child care staff including:

- Efforts to date to complete the requirement for all existing child care staff in licensed, regulated or registered programs
- Efforts to date to complete the requirement for all existing child care staff in other programs eligible to receive CCDF services (e.g. license-exempt CCDF eligible providers)
- Key challenges to fully implementing this requirements
- Strategies used to address these challenges

Describe:

### **Provisional Employment**

The CCDF final rule states a child care provider must submit a request to the appropriate state/territory agency for a criminal background check for each child care staff member, including prospective staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter (98.43(d)(1) and (2)). A prospective child care staff member may not begin work until one of the following results have been returned as satisfactory: either the FBI fingerprint check or the search of the state/territory criminal registry or repository using fingerprints in the state/territory where the staff member resides. The child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

Note: In recognition of the concerns and feedback OCC received related to the provisional hire provision of the CCDF final rule, OCC will allow states and territories to request time-limited waiver extensions for the provisional hire provision. State/territories may submit a waiver request to allow additional time to meet the requirements related to provisional hires (see Appendix A). A state/territory may receive a waiver from this requirement only when:

1. the state requires the provider to submit the background check requests before the staff person begins working; and
2. the staff member, pending the results of the elements of the background check, is supervised at all times by an individual who has completed the background check.

**5.4.9 Describe the state/territory requirements related to prospective child care staff members using the checkboxes below. (Waiver request allowed. See Appendix A). Check all that apply.**

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after completing and receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides.

Describe and include a citation:

It is requested that the employee submit local criminal records and records of their inclusion in local and national sex offender registries. The background check is not carried out using fingerprints.

- The state/territory allows prospective staff members to begin work on a provisional basis (if supervised at all times) after the request has been submitted, but before receiving satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the child care staff member resides. Note: A waiver request is allowed for this provision (see Appendix A).

Describe and include a citation:

- Other.

Describe:

**5.4.10 The state/territory must conduct the background checks as quickly as possible and shall not exceed 45 days after the child care provider submitted the request. The state/territory shall provide the results of the background check in a statement that indicates whether the staff member is eligible or ineligible, without revealing specific disqualifying information. If the staff member is ineligible, the state/territory will provide information about each disqualifying crime to the staff member.**

Describe the requirements, policies, and procedures in place to respond as expeditiously as possible to other states', territories', and tribes' requests for background check results to accommodate the 45-day timeframe, including any agencies/entities responsible for responding to requests from other states (98.43(a)(1)(iii)).

The ACUDEN, in its role as the lead agency of the CCDF funds, guarantees the privacy of the Childcare Program employees and of its providers, as established in Regulation 8687, Chapter 1, Art. 1.7. Any request for information concerning an employee may be accommodated with the written authorization of said employee. Any state that requires such information is informed of the written process and provided with contact information. Requests for information with proper authorization from the employee are processed within no more than 15 workdays. In the case that the requested information is not available to the ACUDEN, requesting parties are referred to the pertinent agencies to proceed with the corresponding processes as established by each agency.

**5.4.11 Child care staff members cannot be employed by a child care provider receiving CCDF subsidy funds if they refuse a background check, make materially false statements in connection with the background check, or are registered or required to be registered on the state or National Sex Offender Registry. Potential staff members also cannot be employed by a provider receiving CCDF funds if they have been convicted of: a felony consisting of murder, child abuse or neglect, crimes against children, spousal abuse, crimes involving rape or sexual assault, kidnapping, arson, physical assault or battery, or - subject to an individual review (at the state/territory's option)- a drug-related offense committed during the preceding 5 years; a violent misdemeanor committed as an adult against a child, including the following crimes - child abuse, child endangerment, or sexual assault; or a misdemeanor involving child pornography (98.43(c)(1)).**

Note: The Lead Agency may not publicly release the results of individual background checks. It may release aggregated data by crime as long as the data do not include personally identifiable information (98.43(e)(2)(iii)).

Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(c)(i)?

No

Yes.

Describe other disqualifying crimes and provide citation:

According to Regulation 8687 of the Childcare Program, Chapter 4, Article 4.7, the following has been stipulated: No service provider may employ and/or allow unsupervised access to participating children to any individual who:

1. Does not consent to undergoing the background check established in the previous article.
2. Knowingly provides false information during the background check process.
3. Is registered in or is in the process of being included in the national or local sex offender registry, as certified by the corresponding agency or law enforcement official.
4. Through the background check, is determined to have committed one or more of the following crimes or has one of the following on their criminal record:
  - a. Record of child, family, or institutional abuse and/or negligence, according to the ADFAN's central registry.
  - b. Record of child, family, or institutional abuse, according to the records kept by any state or territory in which they have resided during the past five (5) years.
  - c. Has been convicted at the state or federal level, or outside Puerto Rico, for any of the crimes listed in Act 458 of December 29, 2000, as amended:
    1. Aggravated misappropriation, in all its modalities
    2. Extortion
    3. Construction fraud
    4. Fraud in the execution of construction works
    5. Fraud in the delivery of goods
    6. Undue intervention in the processes of awarding bids or in government operations
    7. Bribery, in all its modalities
    8. Aggravated bribery
    9. Offer to bribe

10. Undue influence
  11. Crimes against public funds
  12. Preparation of forged documents
  13. Presentation of forged documents
  14. Possession and transfer of forged documents
- d. Has been convicted at the state or federal level, or outside of Puerto Rico, for any of the crimes listed in Act 300 of September 2, 1999, as amended:
1. Murder, in any of its degrees or modalities
  2. Homicide, in any of its degrees or modalities
  3. Incitement to suicide
  4. Aggravated assault, in any of its degrees or modalities
  5. Mutilation
  6. Throwing acid to a person
  7. Rape, in any of its modalities
  8. Seduction
  9. Sodomy
  10. Bestiality
  11. Indecent exposure
  12. Obscene propositions
  13. Procurement, roguery, or carnal commerce
  14. Incest
  15. Restriction of liberty, in any of its degrees or modalities
  16. Kidnapping, in any of its modalities
  17. Abandonment of a minor
  18. Child abduction
  19. Illegal deprivation of custody
  20. Adoption in exchange for payment
  21. Perversion of a minor
  22. Public mendicancy by a minor
  23. Theft
  24. Extortion
  25. Abuse against minors or disabled persons
  26. Imposture
  27. Arson, in any of its degrees or modalities
  28. Devastation
- e. Has been convicted at the state or federal level, or outside of Puerto Rico, for any of the crimes listed in the *Childcare and Development Block Grant Act, 2014*:
1. *Murder*
  2. *Child abuse or neglect*
  3. *A crime against children, including child pornography*
  4. *Spousal abuse*
  5. *A crime involving rape or sexual assault*

6. *Kidnapping*
7. *Arson*
8. *Physical assault or battery*
9. *A drug related offense*
10. *Child Endangerment*
11. *Sexual assault against child*

**5.4.12 The state/territory has a process for a child care staff member to appeal the the results of his or her background check to challenge the accuracy or completeness of the criminal background report, as detailed in 98.43(e)(3).**

Describe how the Lead Agency ensures the privacy of background checks and provides opportunities for applicants to appeal the results of background checks. In addition, describe whether the state/territory has a review process for individuals disqualified due to a felony drug offense to determine if that individual is still eligible for employment (98.43(e)(2-4)).

Two notifications are sent. One is sent to the provider, indicating the employee's eligibility or ineligibility. In cases where an employee is ineligible, the provider is not notified of the reason for the ineligibility. The employee is notified separately and is explained the reason for their ineligibility; the result is included, and they are notified of their right to appeal.

**5.4.13 The state/territory may not charge fees that exceed the actual costs of processing applications and administering a criminal background check (98.43(f)).**

Describe how the state/territory ensures that fees charged for completing the background checks do not exceed the actual cost of processing and administration, regardless of whether they are conducted by the state/territory or a third-party vendor or contractor.

Lead Agencies can report that no fees are charged if applicable (98.43(f)).

Each of the agencies that perform the verification of criminal records establishes its own processing fees based on their policies. The ACUDEN, the lead agency of the CCDF funds, does not charge a fee for processing criminal records for providers.

**5.4.14 Federal requirements do not address background check requirements for relative providers who receive CCDF; therefore, states have the flexibility to decide which background check requirements relative providers must meet, as defined by CCDF in 98.2 under eligible child care provider.**

Note: This exception only applies if the individual cares only for relative children. Does the state/territory exempt relatives from background checks?

- No, relatives are not exempt from background check requirements.
- Yes, relatives are exempt from all background check requirements.
- Yes, relatives are exempt from some background check requirements. If the state/territory exempts relatives from some background check requirements, describe which background check requirements do not apply to relative providers.

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

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)); and addresses early learning and developmental guidelines.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

## 6.1 Professional Development Framework

**6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components: (1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.**

a) Describe how the state/territory's framework for training and professional development addresses the following required elements:

-- State/territory professional standards and competencies. Describe:

The Childcare Program has established a professional development plan that describes standards to be achieved and their requirements. The purpose of the Professional Development Plan is to delineate the skills that every professional involved in early education must have to ensure success in children and their families. These competencies have as a frame of reference the appropriate practices and code of ethics established by the NAEYC, the Creative Curriculum, the national standards established in Caring for Our Children and the state requirements established in the licensing law. Competencies consist of 7 areas. These are Growth, Development and Learning at an Early Age; Socioemotional Development; Curriculum, Planning and Environments of Development; Observation, Sifting, Continuous Assessment and Referral; Connection and alliances with the family and the community; Health, Safety, and Nutrition; Professionalism and ethics.

-- Career pathways. Describe:

The Professional Development Plan is aimed at developing and maintaining skills and knowledge concerning the changes that may arise in the area of care and development of children at an early age. In this way, the employee will improve his performance until achieving and maintaining the required quality of service. This development plan also responds to the recent Licensing law, Law 173 - 2016, Licensing Law for Care, Development and Learning establishments, which establishes elevated requirements to the level of academic preparation. This law requires that the director must have a bachelor's degree, the minimum required courses for a specialty in early childhood and a valid CDA, relevant to the level of development served. The teacher must have a bachelor's degree in education, and a CDA corresponding to the level of development

served or the current Teacher Certification in the preschool area that the Department of Education issues. Teachers who have a concentration in Early Childhood or Preschool Education that includes infants and mothers do not need the CDA. Teacher's Assistants - must have at least a high school degree supplemented with a valid CDA, relevant to the level of development served. Because the Childcare Program requires a license, the provider is obliged to hire duly qualified personnel, who are capable of offering quality services. However, the alternative of providing ways so that the staff from the provider showing economic incapacity obtain the CDA is under consideration. For example, collaborative agreements with the Office of Administration and Transformation of the Human Resources of the Government of Puerto Rico (OATRH, by its Spanish acronym) and with university institutions such as the University of Puerto Rico can make it feasible for this staff to obtain the CDA. These institutions can offer this credential or the courses that the Council for Professional Recognition (CPR) requires for the granting of the CDA. Furthermore, the Childcare Program establishes strategies for internal professional development that reinforce the knowledge personnel, who offer services to children, already have. As part of these strategies, the program plans to provide training on issues of child development, family eligibility, health, and safety. This plan contains an expectation of continuous training of at least 10 hours of annual participation.

**-- Advisory structure. Describe:**

Through the Child Development Unit, the Program participates in various workgroups such as committees with the Department of Health, the Educational Research Center of the UPR, center provider associations, community alliances, among others. These working groups make consultations and agreements about all of the alternatives that exist to offer professional development. We also receive advice from other entities like the Institute of Developmental Deficiencies from the School of Public Health within the Medical Sciences Campus, Avanzando Juntos program of the Department of Health, the University of Puerto Rico (sic). At the moment, the SAC is in the process of reorganizing itself, and therefore we do not have advice from this council.

**-- Articulation. Describe:**

The Childcare Program coordinates logistics with professional resources to maintain professional development and maintain the required knowledge of the center staff. This way, the most critical areas of the child's development are reinforced, as well as areas of health and security. For this purpose, training in specialized subjects is offered using ACUDEN's internal professional resources and, as necessary, external resources who have the professional expertise are hired. Furthermore, trainings with university institutions and non-profit organizations are coordinated for center staff, an example being the Professional Development Institute. This institute is carried out as a convention for teachers and assistants to offer training in the areas mentioned above. For the development of this type of activity, personnel necessities are identified through visits to providers during which personnel's academic preparation and CDA compliance, if applicable, are evaluated. Areas of deficiencies are also identified for developing the various topics covered in training for knowledge reinforcement.

-- Workforce information. Describe:

Information from the Childcare Program's workforce is obtained using the Health and Safety Form, which gathers data from employees at care centers. The Child Development Unit validates said information through visits to the centers. This information is collected and used for the professional development of employees.

-- Financing. Describe:

CCDF funds are used for quality improvements to be able to finance the training that is required and that the providers have demonstrated an inability to pay.

b) The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

- Continuing education unit trainings and credit-bearing professional development to the extent practicable

Describe:

- Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework

Describe:

- Other

Describe:

**6.1.2 Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.**

The SAC is currently under reorganization and therefore is not operating. For consultative purposes, the lead agency uses the participation of work committees with other agencies and programs such as the Department of Health, the association of providers of care centers, the University of Puerto Rico, through its Educational Research Center, the Head Start and Early Head Start programs, among others.

### **6.1.3 Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)).**

Currently, state licensing law requires that center staff have specific academic levels and, in many cases, the CDA as a supplement. The fact that ACUDEN has established agreements and a sponsorship for obtaining the CDA, with the University of Puerto Rico for example, has greatly helped in the retention of center employees and in conserving the license required to operate them. Also, the provision of training and ongoing technical assistance has reflected higher quality services. Teachers, assistants, and principals have demonstrated a better understanding and a more effective way of working when attending to parents and children thanks to these pieces of training.

## **6.2 Training and Professional Development Requirements**

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements--as described in Section 5 for caregivers, teachers, and directors in CCDF programs--align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

### **6.2.1 Describe how the state/territory incorporates the knowledge and application of its early learning and developmental guidelines (where applicable); its health and safety standards (as described in section 5); and social-emotional/behavioral and early childhood mental health intervention models, which can include positive behavior intervention and support models (as described in section 2) in the training and professional development framework (98.44(b)).**

The Childcare Program has created a professional development plan in which the areas to be addressed, and their needs are described according to service and quality goals. The purpose of the Professional Development Plan is to delineate the skills that every professional involved in early education should have to guarantee success in children and

their families. In order to achieve this, all programmatic areas are incorporated: Eligibility, for the involvement and orientation of parents; Health and Safety, so that the needs of the provider are met in their centers regarding infrastructure and child safety; Health, to promote physical development using protocols to train providers; and the area of Child Development with an education and skills approach that includes assessments and the use of structured curricula, which include an interest in the socioemotional behavior of the children and their family. In the annual training plan, which includes a minimum 10 hours of participation from providers, each program area designs follow-up reinforcement trainings, which are coordinated within the plan to maintain coherence according to the goal of increasing the quality of services.

**6.2.2 Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).**

N/A

**6.2.3 States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers:**

**a) with limited English proficiency**

In Puerto Rico, Spanish is the principal language and it is the language used by the majority of suppliers. In very little occasions are there suppliers that don't use this language but, if, in the process of promoting and recruiting providers, we identify someone with difficulties in communicating, actions are taken to ensure that the necessary adaptations are made, technical assistance is offered, and that specialized personnel are available so as to guarantee access and participation.

**b) who have disabilities**

If, in the process of recruiting providers, any person with limitations or disabilities is identified, any type of evaluation or assistance is coordinated through the state vocational rehabilitation office to make the necessary adjustments and offer technical assistance to ensure their access and participation.

**6.2.4 Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians and Native Hawaiians (98.44(b)(2)(iii--iv)).**

The Professional Development Plan establishes the competencies and skills that every provider should have. These competencies have as a frame of reference the appropriate practices and code of ethics established by the NAEYC, the Creative Curriculum, and the national standards established by the Caring for Our Children, besides abiding by state requisites for licensing. Every training must respond to the providers' necessities so as to be pertinent and adapt their learning capacity, taking into consideration academic preparation, communication capacity, and special needs that stem from some physical impairment so that these aspects do not prevent the provider from accessing the desired benefits.

**6.2.5 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).**

- a) Describe the state/territory's training and TA efforts for providers in identifying and serving homeless children and their families (relates to question 3.2.2).

Providers receive training and technical assistance from auxiliary coordinators in regional offices and from the Eligibility Area in the Central Level Office. This assistance is intended for the adequate management of applicants who don't have a home when arriving at their centers. Providers are trained on the exceptions applicable in the eligibility process to provide care for children as well as the importance of coordinating services with the relevant agencies to obtain assistance according to their shelter needs.

- b) Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.2.2).

The ACUDEN has administrative agreements with the Office of the Multisectoral Council in Support of the Homeless Population, which identifies homeless families in the community

and coordinates a variety of services which include childcare. This office refers us people to be evaluated in their eligibility to receive the necessary services. These agreements and the management of applicants, families without a home, are discussed through trainings and meetings with auxiliary coordinators and eligibility technicians from regional service offices. The responsibilities of training and coordination are assigned to the supervisor of the Eligibility Area in the Central Offices of ACUDEN to ensure fulfillment.

**6.2.6 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)). Describe how the state/territory ensures that all providers for children receiving CCDF funds are informed and trained regarding CCDF requirements and integrity (98.68(a)(3)). Check all that apply**

- Issue policy change notices
- Issue new policy manual
- Staff training
- Orientations
- Onsite training
- Online training
- Regular check-ins to monitor the implementation of CCDF policies

Describe the type of check-ins, including the frequency.

The Eligibility Area at the Central Level has the responsibility of carrying out quarterly monitoring with the purpose of determining errors in the application of the eligibility criteria to the requesting families and the adequate granting of funds. The results of this monitoring help identify the training necessities of employees in order to correct errors.

- Other

Describe:

Monitoring is carried out by internal monitors of the Program in addition to inspectors of the Licensing Office. These monitors apply a form that requires evidence and compliance with all programmatic standards. This internal monitoring requires a minimum of one follow-up visit per year. These visits include follow-up training and the fulfillment of the curricular plans, in addition to providing specialized technical assistance.

**6.2.7 Lead Agencies must develop and implement strategies to strengthen the business practices of child care providers to expand the supply and to improve the quality of child care services (98.16 (z)). Describe the state/territory's strategies to strengthen provider's business practices, which can include training and/or TA efforts.**

a) Describe the strategies that the state/territory is developing and implementing for training and TA.

As part of the training and guidance offered by the Office of Finance, Budget and Fiscal Monitoring, ACUDEN offers training on the proper management of funds so that the business is an effective one and meets the requirements of law.

b) Check the topics addressed in the state/territory's strategies. Check all that apply.

- Fiscal management
- Budgeting
- Recordkeeping
- Hiring, developing, and retaining qualified staff
- Risk management
- Community relationships
- Marketing and public relations
- Parent-provider communications, including who delivers the training, education, and/or technical assistance
- Other

Describe:

**6.3 Early Learning and Developmental Guidelines**

**6.3.1 States and territories are required to develop, maintain, or implement early learning and developmental guidelines that are appropriate for children in a forward progression from birth to kindergarten entry (i.e., birth-to-three, three-to-five, birth-to-five), describing what children should know and be able to do and covering the essential domains of early**

**childhood development. These early learning and developmental guidelines are to be used statewide and territory-wide by child care providers and in the development and implementation of training and professional development (658E(c)(2)(T)). The required essential domains for these guidelines are cognition, including language arts and mathematics; social, emotional, and physical development; and approaches toward learning (98.15(a)(9)). At the option of the state/territory, early learning and developmental guidelines for out-of-school time may be developed. Note: States and territories may use the quality set-aside, discussed in section 7, to improve on the development or implementation of early learning and developmental guidelines.**

a) Describe how the state/territory's early learning and developmental guidelines are research-based, developmentally appropriate, culturally and linguistically appropriate, and aligned with kindergarten entry

The Department of Education is the lead agency in charge of establishing the Standards of Excellence and Content of degrees in Puerto Rico. According to the information presented by the Department of Education, the Early Learning Goals (ELG), were developed based on recent national and local research. They are organized by infant, maternal and preschool levels, appropriate to the stages of development. All material is culturally and linguistically adapted taking into consideration children, their families and providers. The Standards of Excellence and Content cover skills from birth to twelfth grade, this presents an alignment between stages and levels. The Early Learning Goals from the Department of Education establishes the importance of early age education in strengthening integral development and ensuring academic preparation as well as success in life.

b) Describe how the state/territory's early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry.

The Early Learning Goals are a frame of reference that corresponds to a typical development regarding what early childhood should demonstrate as part of its learning. The Early Learning Goals provide and facilitate learning in all areas of development in a comprehensive manner during early childhood leading each child to their optimal development. It also provides the appropriate skills in each level of development in a direction from what is easiest to what is most difficult. The Department of Education bases its Early Learning Goals on a curriculum framework that possesses an integral, emergent, and humanist focus, which corresponds to the developments in both Puerto Rican society and the global changes of the XXI century. The Early Learning Goals work on development skills in the infant, maternal and preschool stages. The impacted development areas are: socioemotional, physical and motor, cognitive, linguistic and creative. An integral focus helps infants achieve, for example, turning their head when their name is mentioned, responding with a smile to someone who smiles at them, reacting to sounds with sounds of their own, the enjoyment of games with others, making simple gestures, pointing to objects of their interest, emitting sounds with meaning, and using words spontaneously. Furthermore, infants can drag themselves, crawl, walk, turn, and sit. At a maternal level, they can also construct simple sentences of 2 to 4 words, and follow basic instructions, they are progressively independent, can play with their

imagination, scribble, classify and identify images when mentioned, and can walk on their own and begin to run. At a preschool level, they can show affection to their peers, construct simple sentences of 4 to 6 words, follow instructions, collaborate with other children, go up and down stairs, pedal on a tricycle, and are independent. All of the skills that are developed at each stage prepare each child for kindergarten.

c) Verify by checking the domains included in the state/territory's early learning and developmental guidelines. Responses for "other" is optional

- Cognition, including language arts and mathematics
- Social development
- Emotional development
- Physical development
- Approaches toward learning
- Other

Describe:

d) Describe how the state/territory's early learning and developmental guidelines are implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body.

The Childcare Program implements the Early Learning Goals established by the Department of Education through a curriculum that recognizes the need for individualized activities and that integrates educational aspects in all areas of development, in addition to using screening and development guidelines aligned to the Early Learning Goals from 2010 to 2016, the Childcare Program worked with the implementation of the Early Learning Goals in coordination with the Department of Education and the SAC. Currently they are already implemented. What would be worked in collaboration with the Department of Education, if necessary, would be the review of, or any consultation regarding, the Early Learning Goals. The last collaboration with the Department of Education and SAC was in December 2016 in the revision of the Curriculum Framework and of the Early Learning Goals. The revised Curricular Framework has already been published.

e) Describe how the state/territory's early learning and developmental guidelines are updated and include the date first issued and/or the frequency of updates

The current document for the Early Learning Goals includes the date of its first issue, it being in 2010. In December 2016, efforts were made together with the SAC to complete the revision of the Early Learning Goals. A complete work was carried out and the results were submitted to the Department of Education for a final review and an approval so that the final version could be published. The Department of Education, as the lead agency, plans to create a revision committee. The Child Development Unit of the Childcare

Program will be part of the committee with the objective of collaborating in the revision of the Early Learning Goals.

f) If applicable, discuss the state process for the adoption, implementation and continued improvement of state out-of-school time standards

N/A

g) Provide the Web link to the state/territory's early learning and developmental guidelines.

[www.de.gobierno.pr](http://www.de.gobierno.pr)

### **6.3.2 CCDF funds cannot be used to develop or implement an assessment for children that:**

-- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF,

-- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider,

-- Will be used as the primary or sole method for assessing program effectiveness,

-- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2)).

Describe how the state/territory's early learning and developmental guidelines are used. The Early Learning Goals are used as reference guidelines so that educators can know and comprehend child development; the different stages in a child's development and how each child learns. It helps them plan activities adequate to each child's particularities. This guide serves as a reference for understanding children as individuals; their interests, capabilities, backgrounds, needs, language, and family environment, so that the learning experience be a significant, pertinent, and attractive one for them. The Early Learning Goals are the guide to ensure the proper screening and identification of the strengths and needs of each child in the process of development and they also help us carry out continuous evaluations where we ensure progress in the individual development of each child. Incorporating the families in the process helps both building relationships as well as providing the resources that in turn help support development.

## 7 Support Continuous Quality Improvement

Lead Agencies are required to reserve and use a portion of their Child Care and Development Fund program expenditures for activities designed to improve the quality of child care services and to increase parental options for and access to high-quality child care (98.53). The quality activities should be aligned with a statewide or territory-wide assessment of the state's or territory's need to carry out such services and care. States and territories are required to report on these quality improvement investments through CCDF in three ways:

1. In the Plan, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).
2. ACF will collect annual data on how much CCDF funding is spent on quality activities using the expenditure report (ACF-696). This report will be used to determine compliance with the required quality and infant and toddler spending requirements (658G(d)(1); 98.53(f)).
3. For each year of the Plan period, states and territories will submit a separate annual Quality Progress Report that will include a description of activities to be funded by quality expenditures and the measures used by the state/territory to evaluate its progress in improving the quality of child care programs and services within the state/territory (658G(d); 98.53(f)).

States and territories must fund efforts in at least one of the following 10 activities:

- Supporting the training and professional development of the child care workforce
- Improving on the development or implementation of early learning and developmental guidelines
- Developing, implementing, or enhancing a tiered quality rating and improvement system for child care providers and services
- Improving the supply and quality of child care programs and services for infants and toddlers
- Establishing or expanding a statewide system of child care resource and referral services
- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)

- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children
- Supporting providers in the voluntary pursuit of accreditation
- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development
- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible.

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)) These activities can benefit infants and toddlers through school age populations.

This section covers the quality activities needs assessment and quality improvement activities and indicators of progress for each of the activities undertaken in the state or territory.

## 7.1 Quality Activities Needs Assessment for Child Care Services

**7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)).**

The Child Care Program through Pasitos has the ability to evaluate and measure the quality of services provided by the center providers. Pasitos is a measurement instrument that is based on standards aligned with those of *Caring for our Children* and state licensing laws. The provider is initially evaluated to establish their base level of quality to then provide them with ongoing technical assistance using mentors in their centers to model and train them. After intervening with the providers through assistance, they are measured again using the Pasitos instrument to determine progress and the need for continued technical assistance.

This participation by the provider in Pasitos is estimated at one year. Moreover, there are other quality assessment strategies that are used in the Programming Areas. The area of Health and Safety, the Childhood Quality and Development Unit, and the Child Health Unit

visit the providers continuously in order to monitor and verify compliance. At these visits, the provider's compliance with the program requirements and standards are assessed, and their needs are established in order to provide technical assistance, trainings, equipment, and materials that they require and so that we can provide them with based on availability of funds. These visits are performed at least yearly. Also, in the case of providers through Funding Allocation Contracts, they submit a proposal every year establishing their needs to provide quality services in the communities that they serve.

### **7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.**

The usual findings are those related to the physical facilities and the application of educational curricula to improve the children's development. Usually the providers have many challenges in maintaining the conditions of the physical facilities of the centers in optimum conditions. With the aim of improving educational environments, technical assistance, ongoing training, and coordination of financial aid are provided to make the appropriate improvements so that they can continue providing quality services in safe environments that contribute to the children's proper development. Other general findings include the need for teachers to update their knowledge in favor of childhood development. For this, the goal is to focus efforts on obtaining adequate educational curricula, training teachers in their use, providing specialized technical assistance in the stages of childhood development, coordinating the attainment of the CDA or continued education.

## 7.2 Use of Quality Funds

### **7.2.1 Check the quality improvement activities in which the state/territory is investing**

- Supporting the training and professional development of the child care workforce If checked, respond to section 7.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Developing, maintaining, or implementing early learning and developmental guidelines. If checked, respond to section 6.3 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Developing, implementing, or enhancing a tiered quality rating and improvement system. If checked, respond to 7.4 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Improving the supply and quality of child care services for infants and toddlers. If checked, respond to 7.5 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7. If checked, respond to 7.6 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to 7.7 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Evaluating and assessing the quality and effectiveness of child care services within the state/territory. If checked, respond to 7.8 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting accreditation. If checked, respond to 7.9 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development. If checked, respond to 7.10 and indicate which funds will be used for this activity. Check all that apply.

CCDF funds

Other funds

Describe:

Other activities determined by the state/territory to improve the quality of child care services and which measurement of outcomes related to improved provider preparedness, child safety, child well-being, or kindergarten entry is possible. If checked, respond to 7.11 and indicate which funds will be used for this activity. Check all that apply

CCDF funds

Other funds

Describe:

## 7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds

Lead Agencies can invest in the training, professional development, and post-secondary education of the child care workforce as part of a progression of professional development activities, such as those included at 98.44 in addition to the following (98.53(a)(1)).

### **7.3.1 Describe how the state/territory funds the training and professional development of the child care workforce**

a) Check and describe which content is included in training and professional development activities and describe who or how an entity is funded to address this topic. Check all that apply.

- Promoting the social, emotional, physical, and cognitive development of children, including those efforts related to nutrition and physical activity, using scientifically based, developmentally appropriate, and age-appropriate strategies

**Describe:**

ACUDEN provides training to teachers, teaching assistants, and center directors in order to promote adequate early intervention in the children participating in the Program. In order to do so, the topics are classified into socio-emotional development, psychomotor development, and childhood health. For socio-emotional development, the emotional intervention modules have been established according to the stages of development, integrating the child, the parents, and the teacher. For psychomotor development, trainings are established for teachers and assistants based on the accredited curricula used by the Program. In the area of health, center staff is trained on the protocols to be used in the practice and provision of service. For all of these trainings, funds are used for contracting external resources with expertise on these topics, in addition to purchasing educational and promotional materials to support the needs of the trainings. Institutes geared toward the training and professional development of teachers are also held. The lead agency has the "Kindred Teachers" ("Maestros del Alma") initiative. This initiative supports teachers in their professional development, providing them with training during

- Implementing behavior management strategies, including positive behavior interventions and support models that promote positive social-emotional development and early childhood mental health and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.5.)

### Describe:

Within the topic of socio-emotional development and positive behavior, a training is offered to the providers on the skills and strategies for managing childhood behavior. The provider acquires the knowledge that they will use to help the children to develop the capacity to form safe, close relationships with adults and other children, experience, manage, and express feelings in a socially and culturally appropriate manner, explore their surroundings, and learn. These strategies are founded on the Vanderbilt University CSEFEL Pyramid Model of socio-emotional development. This provides a conceptual system of effective strategies for the family and primary caregivers that promotes positive behavior, management of emotions, decreased defiant behavior including a decrease in expulsions of preschool-aged boys and girls and fosters the development of a safe relationship (bonding) between boys and girls with both their caregiver as well as their family. The Pyramid Model describes the intertwined levels of practices dealing with the social and emotional development of all boys and girls. This is designed to: (1) Guide professionals to understand the importance of socio-emotional development and the prevention of unruly behavior; (2) Respond to a Public Health model; (3) Prevent boys and girls from having an intensive intervention; (4) Supporting the social and emotional development of small children in order to prevent unruly behavior; (5) Individualize interventions to correspond to the particular interests, strengths, and particularities of the children and their families; (6) Foster the development of abilities with enough intensity so as to produce changes in the desired behavior; (7) Implement strategies within the context of routines and natural environments; (8) Ensure proper and consistent use by way of a systematic process for enacting changes; (9) Modify the strategies to correspond to the cultural and linguistic diversity of the families and children; (10) Prevent early childhood suspension and expulsion from developmental preschool environments; (11) Develop positive relationships between the children and other children, as well as between families and other professionals; (12) Design environments that foster the children's success by making them participate in significant activities, teaching them the expectations of the environment, and implementing a predictable environment that stimulates the participation of every child; (13) Implementation of effective socio-emotional teaching strategies; (14) Strategies regarding the use of the "Positive Behavior Support" process to tend to the needs of children that display intense and persistent unruly behavior; (15) Provide support in the administrative processes that are needed to adopt and maintain the practices and strategies of the model. ACUDEN uses funds to contract expert resources in the area of human development with the aim of providing trainings or technical assistance, intervening directly with the providers. It also uses funds for the purchase of necessary equipment or materials for the trainings.



[Engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's positive development](#)

### Describe:

The Child Care Program develops material through the Family and Community Unit that is disseminated through the ACUDEN webpage and through printed brochures

that are distributed during community events, and at the Regional and Central Level Offices. These informative materials are geared toward the following topics: Prepare for an Emergency, Infectious Diseases at Home, What Is an Eligible Child Care Provider?, Child Care Program Eligibility; Reading to Your Child, Loving Connection, Proper Home Hygiene Practices, Bridge to Health, My Emotions, Get to Know Them!, Spaces for Playing and Learning, Health and Safety Recommendations at My Child's Child Care Center and Health and Safety Recommendations for Child Care Homes, among other topics. All of the informative material is written in a simple manner and at a basic reading and comprehension level to ensure that it is understood. Likewise, the Childhood Development Unit promotes the participation of parents and families through activities suggested by the curriculum. It has been established as a standard to provide an orientation to parents at the centers regarding everything related to childhood development, assessment instruments, procedures, and protocols of the educational area before the child begins receiving service in the developmental environment. At this initial family orientation, their participation is encouraged and a written pledge is established by way of which they become partners of the work team. Moreover, they are integrated into the administering of the ASQ Questionnaires and family meetings are held periodically to inform them of their child's progress in terms of development. Also, if services from other agencies are needed, they are provided with orientation regarding the appropriate processes, they are given referrals, and their rights and obligations for the coordination of services are explained to them. Everything related to socio-emotional development is handled through the "Positive Options for the Family" sessions, in which they are provided with strategies for: (1) Building positive relationships, spending time together, positive comments and praise; (2) Recognizing play as a powerful practice in the education of boys and girls; (3) Determining the meaning of behavior, ways to clearly express expectations, developing and teaching house rules; (4) Developing emotional vocabulary, managing anger and disappointment, problem-solving; (5) The prevention of unruly behavior, to develop a Family Plan and family routine.



[Implementing developmentally appropriate, culturally and linguistically responsive instruction, and evidence-based curricula and designing learning environments that are aligned with state/territory early learning and developmental standards.](#)

**Describe:**

Everything related to the implementation of strategies proper development is based on the Standards of Excellence and Content in Early Childhood established by the NAEYC. At all the trainings that are provided on professional development geared toward proper development, developmental environments, screening, professional ethics, socio-emotional development, curriculum, planning, proper observation, and other topics related to early childhood development, the trainings are adapted both culturally and linguistically for the population to be impacted. A series of instruments have been selected for working with proper early childhood development, which are aligned with the Standards of Excellence and Content in Early Childhood, the trainings that are provided for the use of these instruments are also adapted to the impacted population. With regard to the developmental environments of the different categories,

they are organized based on the proper practices, the creative curriculum, and the standards of *Caring for Our Children* to achieve the fulfillment of early childhood development, according to the Standards of Excellence and Content in Early Childhood. Developmental environments are the scenario in which children display their interests, achievements, problems, and concerns. The environment includes all the situations and people that affect and influence children's participation. It involves or includes the physical, emotional, interpersonal, time-related environments. At the trainings, strategies are provided for developing skills and knowledge aimed at creating developmental environments that are appropriate for development, safe, and comfortable, where the children have a sense of belonging, meaningful and challenging activities and experiences, that invite them to explore and investigate, that engage the children in an active and sustained manner, where both the children and the adults can initiate the experience, where time is flexible, and the experiences are culturally relevant.

- Providing onsite or accessible comprehensive services for children and developing community partnerships that promote families' access to services that support their children's learning and development

Describe:

- Using data to guide program evaluation to ensure continuous improvement

Describe:

- Caring for children of families in geographic areas with significant concentrations of poverty and unemployment

Describe:

When publishing the guide for filing proposals, ACUDEN requires each one of the proponents to perform a needs assessment in their community to establish the zones with the greatest need for services and the highest levels of poverty. This way, the delivery of services can be concentrated and aimed at the children residing in these areas. Likewise, the Home Networks provide an alternative for people residing in places where accessibility to Child Care Centers exists.

- Caring for and supporting the development of children with disabilities and developmental delays

Describe:

The population of children with special needs is a service priority. With this population, inclusion is worked on. The staff is trained to develop skills and knowledge with regard to the development of children with developmental deficits. The instruments that are used provide strategies for identifying at-risk children and being able to coordinate the necessary services with other agencies and help the families to be more informed in

this regard. The instruments furthermore provide strategies for integrating and adapting activities, educational equipment, and the developmental environments. The staff receives technical assistance for the proper management and development of this population.

Supporting the positive development of school-age children

Describe:

Other

Describe:

b) Check how the state/territory connects child care providers with available federal and state/territory financial aid or other resources to pursue post-secondary education relevant for the early childhood and school-age workforce. Check all that apply

Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling

Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities

Financial awards, such as scholarships, grants, loans, or reimbursement for expenses, from the state/territory to complete post-secondary education

Other

Describe:

Providers that fail to meet the minimum education requirements based on the licensing and program requirements are referred to higher education institutions that may use federal funds such as the Pell Grant and other state financial aid to promote the completion of their education in the area of early childhood education.

**7.3.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

Through the scores obtained by the providers in the measurement system called Pasitos, we can assess with relevant indicators of progress, the quality of the service provided by our providers. These data are gathered statistically at the individual and group levels, wherefore they serve for analyzing and developing strategies and trainings that reinforce the

improvement of quality.

## 7.4 Quality Rating and Improvement System (QRIS)

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards
2. Supports to programs to improve quality
3. Financial incentives and supports
4. Quality assurance and monitoring
5. Outreach and consumer education

### **7.4.1 Does your state/territory have a quality rating and improvement system or other system of quality improvement?**

- No, but the state/territory is in the QRIS development phase. If no, skip to 7.5.1.
- No, the state/territory has no plans for QRIS development. If no, skip to 7.5.1.
- Yes, the state/territory has a QRIS operating statewide or territory-wide

Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners and provide a link, if available.

By way of a contractual agreement with the Center for Educational Research (CIE, for its Spanish initials) at the University of Puerto Rico, ACUDEN uses a quality measurement system known as Pasitos. This system has an assessment instrument in which the providers are measured according to the national quality standards of Caring for Our Children along with the requirements of the state licensing law to establish a minimum requirement for quality and levels of progress until providing services of excellence. By Pasitos being a system, it has intervention models that have been designed to be performed through a coach who provides training and technical assistance to promote the improvement of service. As progress is made, a progress symbol is assigned to the provider, known as a Step. Upon achieving the maximum of five steps, the goal is for the provider to maintain quality services of

excellence through assistance and support. The level of quality that has been achieved by the provider is promoted to inform the community and parents, which helps the provider in recruiting enrollment.

- Yes, the state/territory has a QRIS initiative operating as a pilot-test in a few localities or only a few levels but does not have a fully operating initiative on a statewide or territory-wide basis.

Provide a link, if available.

- Yes, the state/territory has another system of quality improvement  
If the response is yes to any of the above, describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures.

#### 7.4.2 QRIS participation

a) Are providers required to participate in the QRIS?

- Participation is voluntary
- Participation is mandatory for providers serving children receiving a subsidy. If checked, describe the relationship between QRIS participation and subsidy (e.g., minimum rating required, reimbursed at higher rates for achieving higher ratings, participation at any level).
- Participation is required for all providers.

b) Which types of settings or distinctive approaches to early childhood education and care participate in the state/territory's QRIS? Check all that apply

- Licensed child care centers
- Licensed family child care homes
- License-exempt providers
- Early Head Start programs

- Head Start programs
- State prekindergarten or preschool programs
- Local district-supported prekindergarten programs
- Programs serving infants and toddlers
- Programs serving school-age children
- Faith-based settings
- Tribally operated programs
- Other

Describe:

### 7.4.3 Support and assess the quality of child care providers.

The Lead Agency may invest in the development, implementation, or enhancement of a tiered quality rating and improvement system for child care providers and services. Note: If a Lead Agency decides to invest CCDF quality dollars in a QRIS, that agency can use the funding to assist in meeting consumer education requirements (98.33). If the Lead Agency has a QRIS, respond to questions 7.4.3 through 7.4.6.

Do the state/territory's quality improvement standards align with or have reciprocity with any of the following standards?

- No
- Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.
  - Programs that meet state/territory preK standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between preK programs and the quality improvement system) .
  - Programs that meet federal Head Start Program Performance Standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, there is a reciprocal agreement between Head Start programs and the quality improvement system).
  - Programs that meet national accreditation standards are able to meet all or part of the quality improvement standards (e.g., content of the standards is the same, an alternative pathway exists to meeting the standards).

- Programs that meet all or part of state/territory school-age quality standards.
- Other.

Describe:

#### **7.4.4 Do the state/territory's quality standards build on its licensing requirements and other regulatory requirements?**

- No
- Yes. If yes, check any links between the state/territory's quality standards and licensing requirements
  - Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.
  - Embeds licensing into the QRIS
  - State/territory license is a "rated" license
  - Other.

Describe:

#### **7.4.5 Does the state/territory provide financial incentives and other supports designed to expand the full diversity of child care options and help child care providers improve the quality of services that are provided through the QRIS**

- No
- Yes. If yes, check all that apply
  - One time grants, awards, or bonuses.
  - Ongoing or periodic quality stipends
  - Higher subsidy payments
  - Training or technical assistance related to QRIS.
  - Coaching/mentoring.
  - Scholarships, bonuses, or increased compensation for degrees/certificates

- Materials and supplies
- Priority access for other grants or programs
- Tax credits (providers or parents)
- Payment of fees (e.g., licensing, accreditation)
- Other

Describe:

#### **7.4.6 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The Pasitos results are concrete indicators of quality measurement that are used to assess the effectiveness of service, given that in addition to measuring the basic requirements, it also has a component of ongoing intervention with the provider in order to improve service quality. The assessment instrument is applied annually to determine progress and improvement in the services provided by the provider. The Pasitos instrument contains 10 standards. These standards in turn contain criteria that are evaluated through 5 steps. Each one of these steps contains information on the activities that the provider is expected to perform to meet the criterion. The scores obtained are submitted to mathematical processes to determine the compliance percentage for each one of the standards. Then, all the standards are calculated to determine the overall score for the instrument. The result of this exercise provides the necessary information for determining the level (defined as a step) that the Center is found to be at. The standards observed in the process are the following: 1. Positive relationships. 2. Daily activity plans to stimulate childhood development. 3. Teaching. 4. Assessment of the children's development. 5. Health and safety. 6. Teachers. 7. Families. 8. Community relations. 9. Physical environment. 10. Leadership and administration.

#### **7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers**

Lead Agencies are encouraged to use the needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the

infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs. Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

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

- Establishing or expanding high-quality community- or neighborhood-based family and child development centers. These centers can serve as resources to child care providers to improve the quality of early childhood services for infants and toddlers from low-income families and to improve eligible child care providers' capacity to offer high-quality, age-appropriate care to infants and toddlers from low-income families

**Describe:**

ACUDEN requests proposals annually to increase the availability of services in poor communities throughout the island. These providers are required to provide high-quality service and to guarantee compliance with all the program standards. These Funding Allocation contracts are performed with faith-based and community-based entities, as well as with municipal entities that have identified communities with a great need for quality childcare services.

- Establishing or expanding the operation of community- or neighborhood-based family child care networks.

**Describe:**

In those municipalities that have communities lacking child care centers, the creation of child care homes is promoted to provide options for participating families. The Child Care Home Networks are established through allocation of funds to municipalities that know the needs of their residents and identify the providers in rural areas and other areas with lack of adequate access to quality services. These child care networks are required to comply with the Program's standards of quality, and they are provided with training, technical assistance, and continuous monitoring to evaluate compliance.

- Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers

**Describe:**

The staff of the Child Care Program at the Regional and Central Offices provides trainings and technical assistance continuously to the providers that provide services to

maternal infants through the Child Care Program. These trainings are based on the early childhood education guidelines and use specialized employees from the Childhood Development Unit or contracts are signed with external resources that are experts on the topic.

- Providing coaching, mentoring, and/or technical assistance on this age group's unique needs from statewide or territory-wide networks of qualified infant-toddler specialists

Describe:

- Coordinating with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.).

Describe:

A Memorandum of Understanding was created with the Department of Health to exchange information and services for maternal infants.

- Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments

Describe:

- Developing infant and toddler components within the state/territory's child care licensing regulations

Describe:

- Developing infant and toddler components within the early learning and developmental guidelines

Describe:

- Improving the ability of parents to access transparent and easy-to-understand consumer information about high-quality infant and toddler care that includes information on infant and toddler language, social-emotional, and both early literacy and numeracy cognitive development

Describe:

Parents that receive services from providers through allocation of funds are provided with orientation and training on the importance of infant and maternal development to form part of the process and progress of said development. These orientations are performed in a simple manner and are adapted to the parents' education level to ensure understanding.

- Carrying out other activities determined by the state/territory to improve the quality of infant and toddler care provided within the state/territory and for which there is evidence that the activities will lead to improved infant and toddler health and safety, cognitive and physical development, and/or well-being

Describe:

- Coordinating with child care health consultants.

Describe:

- Coordinating with mental health consultants.

Describe:

- Other

Describe:

**7.5.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services for infants and toddlers within the state/territory and the data on the extent to which the state or territory has met these measures**

Data gathered by the teachers and parents during the child's assessment process while the service is being provided is used, for example, the ASQ. These results are used to adjust strategies and use funds to strengthen areas of weakness and which do not favor the child's development.

**7.6 Child Care Resource and Referral**

A Lead Agency may expend funds to establish or expand a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based, or regionally based lead child care resource and referral organization

(658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

**7.6.1 Describe the measurable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The Lead Agency requires the entities to possess a CENTRANA that provides evidence of participation and the results of the satisfaction surveys to evaluate the effectiveness of the program of each location. The technical assistance is developed based on the results of the feedback received from the participants. The statistics on referrals and demand for services are considered to improve the quality of the services and modify the procedures.

**7.7 Facilitating Compliance With State Standards**

**7.7.1 What strategies does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory requirements for inspection, monitoring, training, and health and safety and with state/territory licensing standards?**

**Describe:**

All providers must meet the requirements of the Licensing Office. The Lead Agency allocates funds to the Licensing Office to ensure that there are trained inspectors and that they can carry out a timely intervention with the providers, as well as to provide training through the Regional Offices. There is communication between the Inspectors from the Licensing Office and the Monitors from the Child Care Program to exchange information and knowledge. To provide training to current and potential providers in the area of health and safety, thus ensuring quality services.

**7.7.2 Does the state/territory provide financial assistance to support child care providers in complying with minimum health and safety requirements?**

- No
- Yes. If yes, which types of providers can access this financial assistance?
- Licensed CCDF providers
  - Licensed non-CCDF providers
  - License-exempt CCDF providers
  - Other
- Describe:

### **7.7.3 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The indicators for measuring progress in the provision of quality services and the use of funding are included on the evaluation forms in the areas of Health and Safety, Childhood Development, and Child Health. On these forms, which are used on monitoring visits to providers, they are evaluated according to the program standards. The results indicate whether there is a need for technical assistance and use of funding for improvements and to establish continuous progress in the provision of services. Moreover, Pasitos, QIRS, facilitates information on compliance with program standards and standards of quality in service by the providers and serves as a basis for us for necessary interventions.

## **7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services**

### **7.8.1 Describe how the state/territory measures the quality and effectiveness of child care programs and services in both child care centers and family child care homes currently being offered, including any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children**

The minimum requirements of quality are established by the Licensing Office of the Department of Family. The Licensing Office of the Department of Family is the basis for quality for the providers through contracts for allocation of funds or through the voucher

system, with the exception of providers exempted from such under Law 173-2016. In order to measure the quality provided by the providers, instruments such as the Health and Safety Monitoring Form, ASQ for assessing the skills and development of the child, and the Health Protocol Compliance Form, are used. The Health and Safety form measures minimum state compliance and also the expectation of the Program with regard to better quality in compliance with regard to matters such as child-adult ration, training certifications, background checks, etc. This form helps us to establish corrective plans and intervention strategies to facilitate the progress of providers and thereby improve the services to the children. Alternatively, the *Ages and Stages Questionnaire (ASQ)* is used to evaluate the child's development during their participation in the child care services, which allows us to identify the needs of teachers to intervene appropriately with the children. durante su participación en los servicios de cuidado lo cual nos facilita identificar las necesidades de las maestras para intervenir adecuadamente con los niños. In addition to being used to train teachers, this questionnaire helps us to coordinate referrals to the Department of Health and to involve the parents in activities that foster their children's development. In addition to these instruments, the Program trains and evaluates the performance of providers based on form regarding aspects related to the child's health at the child care center and facilitates training in areas showing weakness. The Pasitos system is also a measurement instrument that provides information on the quality of the service prior to intervening with mentors and individualized assistance and then measures their progress.

**7.8.2 Describe the measureable indicators of progress relevant to this use of funds that the State/Territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures**

The providers report the progress of each one of the children by making use of periodic reports such as the ASQ Results Summary and Domains Summary. Through the analysis of these reports, the progress of each one of the children is measured. Should any child not possess an indicator of progress, they are referred to the corresponding agencies for evaluation and/or services. Likewise, the services are coordinated if the child merits such. In the area of Health and Safety, compliance reports are written along with corrective plans for which continuous follow-up is provided to document progress. Pasitos statistically measures the collective and individualized progress and is published as an educational strategy to the consumer to facilitate the appropriate selection by parents.

## 7.9 Accreditation Support

### **7.9.1 Does the state/territory support child care providers in the voluntary pursuit of accreditation by a national accrediting body with demonstrated, valid, and reliable program standards of high quality?**

- Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes

Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation

- Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers.

Describe:

- Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care

Describe:

- Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide

- Focused on child care centers

Describe:

- Focused on family child care homes

Describe:

- No, but the state/territory is in the accreditation development phase

- Focused on child care centers

Describe:

Focused on family child care homes

Describe:

No, the state/territory has no plans for accreditation development

**7.9.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

The program PASITOS.

## 7.10 Program Standards

**7.10.1 Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for infants and toddlers, preschoolers, and/or school-age children**

N/A

**7.10.2 Describe the measureable indicators of progress relevant to this use of funds that the state/territory will use to evaluate its progress in improving the quality of child care programs and services within the state/territory and the data on the extent to which the state or territory has met these measures**

N/A

## 7.11 Early Learning and Development Guidelines and Other Quality Improvement Activities

**7.11.1 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measureable indicators that will be used to evaluate the state/territory's progress in improving the quality of child care programs and services and the data on the extent to which the state/territory has met these measures (98.53(f)(3)).**

N/A

**7.11.2 List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities, and also describe the measureable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry and the data on the extent to which the state or territory has met these measures. Describe:**

N/A

## 8 Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity and accountability apply to:

- Memorandums of understanding within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF
- MOU's, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF
- Grants or contracts to other organizations that administer or carry out various aspects of CCDF such as professional development and family engagement activities
- Internal processes for conducting child care provider subsidy

## 8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

**8.1.1 Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity. Check all that apply:**

Train on policy manual

**Describe:**

The Lead Agency offers trainings on best practices in the management of federal funds, as stipulated in federal regulations and in the contract awarding the funds. Additionally, the Divisions of Finance and Fiscal Monitoring offer technical assistance to service providers in order to ensure that they effectively understand fiscal requirements and how to comply with the procedures and policies set by ACUDEN in the Funds Award contract.

Train on policy change notices

**Describe:**

Were the Administration for Integral Development of Childhood (ACUDEN, for its Spanish initials) to make changes to their policies or procedures, or were there to be any changes in federal regulations, the fiscal division of ACUDEN issues a "Memorandum of Understanding" notifying any changes in policies or procedures. In addition to notifying the service provider of any information or any new fiscal procedure, ACUDEN will offer

training and/or technical assistance to clear up any doubts and ensure that changes can be implemented effectively.

**Ongoing monitoring and assessment of policy implementation**

**Describe:**

The Child Care program monitors the eligibility determination for participating children, as well as providers' continued compliance with Health and Safety requirements. Providers make a pre-determination regarding eligibility, however, the regional office technicians review this determination to ensure that it meets the applicable guidelines, thereby offering providers with continuous monitoring and assistance. Moreover, Licensing inspectors and Health and Safety monitors visit centers without prior notice, as a way of providing the continuous oversight needed to ensure compliance with licensing and quality standards. Additionally, through the fund award contract, the Finance Division of ACUDEN stipulates that, prior to disbursement, service providers must submit multiple documents and reports allowing ACUDEN's financial personnel to corroborate that the awarded funds are used in an adequate and permissible manner. If any irregularity in the use of awarded funds is observed, the case is referred to the Division of Financial Monitoring for evaluation in accordance with the intervention protocol.

**Other**

**Describe:**

**8.1.2 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:**

**Verifying and processing billing records to ensure timely payments to providers**

**Describe:**

To ensure that the payment for the care voucher is correct and timely, service providers or the participants, whichever is most best for the families, must provide the appropriate regional office with the minor's attendance record on or before the first five (5) business days. Once the Eligibility Technician in the regional office receives the attendance record, it should be reviewed as agreed upon in the case and registered in the CIMA system. Auxiliary Coordinators in each regional office will review and approve it in the CIMA system so that payment can be processed. For those cases with registered attendance records, ACUDEN's Department of Payroll and Expenditures then processes a petition for funds to send the Internal Revenue Service in order to pay providers by means of electronic transfer. Ordinarily, this process takes less than 21 days. Regarding the disbursements to service providers through the delegation of awarded funds, the

contract stipulates that the payments will be made in advance from trimestral funds designated for center operations, as long as the entity or municipality meets the contract's stipulations meant to ensure the sound management of the granted funds.



### Fiscal oversight of grants and contracts

#### Describe:

Prior to the start of each fiscal year, the Offices of Finance and Fiscal Monitoring are responsible for reviewing the funds award contract yearly, ensuring that it includes all instructions or recommendations received by the Office of the Inspector General of the United States and the Office of the Comptroller of Puerto Rico. In addition, the Administration convokes the Offices of Finance and Fiscal Monitoring once a year as part of the proposal evaluation process involving the fund awards providers. This is done in order to prepare a fiscal profile of providers' files, with the purpose of making recommendations to the Agency Administration regarding correct and timely compliance with fiscal requirements and the appropriate management of the awarded funds. This evaluation could be found to be favorable or unfavorable to the service provider, according to the results of the analysis conducted. If the evaluation is deemed unfavorable, the recommendation could be to not grant the funds or to issue a conditional contract contingent upon meeting the stipulated requirements immediately. Additionally, the Division of Fiscal Monitoring requests an annual evaluation of single audits for any entity or municipality that receives more than \$750,000.00 in federal funds. This is not limited to instances when the funds awarded are less than the required amount for the simple audit. If said report indicates a problem in the CCDF program and/or any other federal program, a plan for corrective action (PAC, for its initials in Spanish) is initiated in order to establish measures to avoid the recurrence of the problem and to prevent it from affecting the funds awarded by ACUDEN. If the finding is related to the CCDF program, visits are paid to the the service provider as required by the OMB-A133, in order to corroborate the implementation of the PAC. Personnel in the Division of Fiscal Monitoring could intervene and conduct fiscal evaluations due to internal or external referrals to verify compliance with the funds award contract and other federal regulations. If a fiscal finding or disputed cost involves the service provider, the Division of Monitoring prepares a report, and recommends that the disputed amount be collected applying Regulation #44, Non-contributory Debt of the Internal Revenue Service. This also requires a PAC, which will include appropriate internal controls to avoid the recurrence of the problem. The PAC has to be approved by the Division of Fiscal Monitoring, and its implementation will be corroborated six (6) months after being established. If the incompliance were to go uncorrected by the provider, the awarding of funds or payment to the provider would be canceled, and the Program will immediately relocate children with other providers that are in compliance and that meet the parents' preferences and needs. Parents are notified regarding the necessity of relocating their children and are provided with a list of active providers for them to choose. The parent could also request that other providers be evaluated by the Program, so they can be certified as able to receive funds from CCDF and thereby enroll the child with them.

Tracking systems to ensure reasonable and allowable costs

Describe:

The Child Care Program carries out a study of tariffs in which they evaluate child care costs in the marketplace with the objective of establishing appropriate fees that guarantee equal access to participating families. The Program follows up with participants, verifying that providers comply with the payment agreement established in the child's Eligibility Certification. If they do not, they could be referred to the Office of Fiscal Monitoring for evaluation. The Office of Fiscal Monitoring, along with the Child Care Program, continuously supervises that the funds awarded to the providers which is meant to address the needs of the children identified as being eligible for CCDF [ sic]. This is achieved through periodic, unannounced visits by Health and Safety monitors, Auxiliary Coordinators, Eligibility technicians, and fiscal monitors. If a provider were to have used CCDF funds for any other purpose than that which it was intended for, immediate action is taken, which can include collections so that funds are returned to the agency, removal of eligible service provider certification so that they are no longer able to provide services to the Program, and - in extreme cases - could involve filing legal action, in accordance with state regulations and prevailing laws. Moreover, personnel authorized by the Division of Finances and Fiscal Monitoring conduct random visits to guarantee that CCDF funds are being utilized to attend to the needs of eligible children, as well as in compliance with Federal Regulation Code, part 200 "CFR Part 200", uniform administrative requirements, cost basis, and audits required for the CCDF program's federal award. Municipalities considered to be service providers are regulated by Act #81, the Autonomous Municipalities of the Commonwealth of Puerto Rico Act of August 30, 1991, amended in 2006. This Act stipulates that, in order to guarantee the sound management of funds and just and reasonable costs, the municipality must obtain three (3) or more bids under equal conditions, informal auctions and/or auctions [ sic], as applicable, when purchasing any goods or services. Purchases must be in carried out in accordance with the requirements stipulated by the funds award contract and approved by the Program, to assure that they correspond to the services provided to CCDF children.

Other

Describe:

**8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Check all that apply:**

Conduct a risk assessment of policies and procedures

Describe:

The Program has established a continuous monitoring system to ensure that CCDF children's eligibility is determined in accordance with the eligibility criteria established by

the ACF. To this end, two types of evaluations are conducted: the Program's continuous and internal Eligibility Monitoring System, and the Error Rate Review required by the ACF. The program's Monitoring consists of a random, trimestral selection of cases to evaluate whether the determination established in the family's Certification of Eligibility is in accordance with the requirements of the Program. During this evaluation, Quality Control Eligibility Technicians at the Central Level use an evaluation worksheet to measure compliance. This document indicates the type of error, if any, and is used to create plans for corrective action, as well as technical assistance with the Auxiliary Coordinators of Eligibility Technicians [ sic] in the regional offices. Additionally, the Error Rate Review is conducted as required by the ACF and, based on the results, plans for immediate corrective action are instituted in order to correct errors, and minimize or eliminate incorrectly granted funds. Annually, prior to the adjudication or proposals, the Divisions of Finance and Fiscal Monitoring evaluate service providers' fiscal operations and issues a recommendation. Under instructions from the Office of the Comptroller of PR, this assignment has to be taken into account prior to the granting service providers with a contract for continuation of service using awarded funds. Every three (3) years, the Division of Fiscal Monitoring, under direction from the Office of Comptroller of PR, applies the Assessment and Self-Assessment Criteria for the establishment of an Internal Controls and Fraud Prevention Program called PROCIP (for its initials in Spanish). In the same manner, the Division of Fiscal Monitoring evaluates ACUDEN's internal controls in order to detect any weaknesses that could affect any program using awarded funds.



#### Establish checks and balances to ensure program integrity

##### Describe:

The amount to be given to each child is established in their Certification of Eligibility and this information is registered in the CIMA case management system. When the eligibility technician enters the child's monthly attendance at the care centers into the system, they will also check that it meets the stipulations to then approve the payment. In the case of providers receiving awarded funds, they will hand in a list of their CCDF children and their attendance records so that payment can be issued in accordance with the funds award contract. If an error is detected, payment is withheld or, if applicable, an invoice will be sent to the provider asking for a return of funds. In addition, the Division of Finance requires bank statements, bank reconciliations, and cancelled checks to guarantee that the funds are being utilized in accordance with the budget approved in the award of funds.



#### Use supervisory reviews to ensure accuracy in eligibility determination

##### Describe:

Auxiliary Coordinators in the regional offices are responsible for supervising the technicians' work and for the review of cases under their management to ensure compliance with CCDF requirements, so that payments to providers can be approved. This corroboration and approval is carried out through the CIMA system, helping streamline the process.

Other

Describe:

**8.1.4 Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.**

a) Check and describe all activities that the Lead Agency conducts to identify and prevent fraud or intentional program violations. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations. Include a description of the results of such activity.

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

Describe

At the moment, PR does not have an electronic or manual way to crosscheck information with other benefits programs such as TANF, SNAP, SSA; however, prior to formalizing a funds award contract, ACUDEN's Legal Division makes sure that providers, contractors and/or companies do not appear as registered in the System for Award Management (SAM) and prints out the result of the inquiry for each service provider, contractor, and/or company to be sure that they can receive CCDF funds.

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

Describe:

In the case of vouchers, payments are issued using the CIMA system. This system is programmed with all eligibility requirements, which serve as a filter to ensure adequate management and payment for each case. If a technician were to make a mistake while using the CIMA system, it would alert them and prevent further work until the error is corrected. These "quality filters" minimize possible errors in issuing payments. Moreover, the Division of Finance in ACUDEN verifies compliance before the issuance of payments to providers using awarded funds. They receive and verify the following

reports to ensure compliance with the contract as well as with local and Federal regulations:

- Summary of Expenses by Category -this report is meant to prevent providers from spending funds on unauthorized categories or line items. \*List of Obligations- this report details all accounts payable from the project.
- Bank statements, bank reconciliations, and cancelled checks - these documents allow us to determine whether an expense is permissible and whether it is authorized in the list of obligations. In the same way, we can tell whether the provider was paid within the terms required by federal regulations and verify the cash-on-hand balance.
- Certified payroll - this allows us to ensure that payroll expenditures do not exceed the amount approved in the proposal, as long as there hasn't been a change in enrollment affecting the adult/child ratio.

Annual requirements:

- Public Liability Insurance - we guarantee non-federal financial compensation in case of any unintentional accident that affects the children, parents, and/or employees of the provider.
- Fidelity Bond - We guarantee the protection of awarded funds from any fraudulent transaction by the recipient of the funds and/or their employees.
- Certification of Bank Account - This identifies the people authorized to manage the funds that have been deposited into the account.
- Registry of Authorized Signatures Model SC781 We guarantee [ sic] those people responsible for preparing and signing the different fiscal reports or of carrying out the different fiscal procedures.



#### [Review enrollment documents and attendance or billing records](#)

##### [Describe:](#)

The Auxiliary Eligibility Coordinator in each regional office supervises and approves determinations of eligibility for participating families recommended by their eligibility technicians. They do this through the CIMA system, which provides access to the electronic files (documents) for the case and also references the physical case files located in the offices. Any error observed can be corrected immediately by requesting technicians take appropriate action. Additionally, they will verify compliance every month, and authorize children's attendance records technicians have entered into the system, in order to proceed with payment. These actions allow us to minimize any errors that could arise from lack of documentation or and avoid improper payments. The Office of Invoicing and Collections within the Division of Finance manages collections against natural or legal persons for services rendered to governmental entities or for Program benefits received improperly. It also determines, negotiates, and makes administrative arrangements for past due, non-contributive debt to be considered as uncollectable, be cancelled, or be liquidated. Some of the non-

contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. *Non-covered spaces due to incompletion with enrollment, and Final Reports on the Head Start/Early Head Start Programs*, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, subsections A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without receiving payment or establishing a payment plan or without any action being taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or given personally. It will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Office of Debt within the Bureau of Interventions in the Central Accounting Office. This notification is made so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the Division of Receivables Accounting in the Department of the Treasury to evaluate and confirm that collection proceedings have been completed. This report should be submitted with the copy of the file, which includes the returned check, copy of the "Invoice for Collection" (Model SC-724), and the document "Second Collection Notice of Non-contributive Debt" (Model SC-1071) so that this department can evaluate whether collection proceedings were completed. Subsection no. 3 involves procedures to follow when the returned check is successfully cashed. Subsections 4

and 5 establish that: Returned checks sent for collection proceedings cannot be kept for more than three (3) months by the Official Special Collector or the Official Special Bursar. When carrying out the collection proceedings agencies must exhaust all available remedies before referring the case to the Office of Receivables Accounting in the Department of the Treasury of the Internal Revenue Service. Objection to the Payment of the Debt The following procedures are included in Regulation's Article VI, subsections A, B, and C: If the debtor objects to the debt within fifteen (15) business days following the receipt of the Model SC-724 invoice, ACUDEN will evaluate and halt all collection proceedings regarding the same. In cases where a second notice of collection has been sent, the debtor will have ten (10) business days to object. If a notification is not received within this time, the case will continue. When the debtor objects to the debt, the Director of Finance will evaluate the case and will inform the debtor of their decision in writing within twenty (20) business days following the receipt of the objection. If the debtor were to disagree with the decision taken, they will inform the Director of Finance in writing within fifteen (15) business days from the receipt of the written communication. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family. When the Service Provider believes that ACUDEN has made a mistake in an invoice for collection, they can submit an objection to the Director of Finance. They will review the case and will communicate their decision to the debtor in writing within twenty (20) business days following the receipt of the objection. Were the debtor not in agreement with the decision taken, they will communicate the reasons for their objection to the Director of Finance in writing within fifteen (15) business days of the receipt of the letter. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family.



#### Conduct supervisory staff reviews or quality assurance reviews.

##### Describe:

In the Child Care Program, ACUDEN uses continuous monitoring system in the area of eligibility to guarantee compliance. The Eligibility Monitoring system is operated in the central offices of the Program where, every trimester, a random sampling of cases is analyzed using a compliance evaluation worksheet in order to detect any errors. The Error Rate Review, required by ACF, is also used for the same purpose. These two systems help us maintain continuous supervision over the eligibility determinations in order to grant funds to the families. They also facilitate the identification of any Program weaknesses to create corrective plans of action and retrain personnel, as well as offer customized technical assistance. Moreover, all fiscal management operations from ACUDEN and that facilitate the identification of errors are included in the Manual of Fiscal Procedures, for which the most recent approved revision is dated June 5, 2015. The Manual's main objective is to establish written

procedures to guide the supervisory, administrative, fiscal, and budgetary processes carried out in the following Divisions: Finance, Budget, Procurement, and Fiscal Monitoring.



#### Audit provider records.

##### Describe:

The Division of Fiscal Monitoring safeguards those service providers' files that require the submission of a single audit as well as its corresponding PAC, if applicable. The Division also safeguards the results of any fiscal evaluations conducted.



#### Train staff on policy and/or audits.

##### Describe:

The Lead Agency (ACUDEN) offers continuous training for care services providers and agency employees to ensure the use of best practices in the management of federal funds, as stipulated in federal regulations. The Eligibility Area at the central level is responsible for offering meetings and trainings for providers and staff, based on the results of their monitoring to correct any weaknesses in either providers or regional office personnel. Additionally, meetings are held with the staff with the objective of discussing specific situations raised by any region and, thus, take appropriate action to address it. Moreover, the Divisions of Finance and Fiscal Monitoring offer technical assistance for service providers to ensure that they effectively understand fiscal requirements and how to comply with procedures and policies from ACUDEN. In the same manner, were there to be changes in the policies and procedures, or were there to be any change in federal regulation in the fiscal area for ACUDEN, it will issue a Memorandum of Understanding alerting to any change in policies and procedures. In addition to this, it will notify service providers as to any new information or fiscal procedure that requires implementation.



#### Other

##### Describe:

b) Check and describe all activities the Lead Agency conducts to identify unintentional program violations. Include in the description how each activity assists in the identification and prevention of unintentional program violations. Include a description of the results of such activity.



#### Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

##### Describe:

At the moment, PR does not have an electronic or manual way to corroborate information with other benefits programs such as TANF, SNAP, SSA; however, prior

to formalizing a contract granting funds, ACUDEN's Legal Division makes sure that providers, contractors and/or companies are not registered in the System for Award Management (SAM) and prints out the result of the inquiry for each service provider, contractor, and/or company to be sure that they can receive CCDF funds.



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

##### Describe:

Because the cases are handled by technicians, there is a possibility of error as mistakes could be made while entering information into the system or in the interpretation of the information. In the case of vouchers, however, payments are issued through the CIMA system. This system is programmed with all the eligibility requirements, which serves as a filter that ensures the appropriate handling and payment for the case. When the technician works the case in CIMA, if they were to make a mistake, the system would alert them and prevent them from continuing until it is corrected. These "quality filters" minimize potential errors that could be made when issuing payments. Moreover, compliance is verified before the issuance of payments to providers using awarded funds. ACUDEN's Division of Finance receives and reviews the following reports to ensure compliance with the funds award contract and state and federal regulations:

- Summary of Expenses by Category -this report prevents situations where service providers might spend funds in an unauthorized category or line item.
- List of Obligations - this details the entire project's accounts payable.
- Bank statements, bank reconciliations, and cancelled checks - with these documents, we can identify whether an expense is permissible and whether it is included in the list of obligations. We can also tell whether the provider was paid within the terms established in federal regulations and verify the "cash on hand".
- Certified payroll - this helps us verify that payroll expenses do not exceed the amount approved in the proposal, as long as there are no changes in enrollment affecting the child/adult ratio.

##### Annual requirements:

- Public Liability Insurance - We guarantee non-federal financial compensation in the case of any unintentional accident that affects children, parents, and employees of the service providers.
- Fidelity Bond - We guarantee the protection of the awarded funds from any fraudulent action on the part of the receiver and/or their employees.
- Certification of Bank Account - This identifies those who are authorized to manage the funds deposited into the account.
- Registry of Authorized Signatures SC781 - We guarantee [sic] the people who are responsible for preparing and signing the different fiscal reports or of conducting different fiscal procedures.

[Review enrollment documents and attendance or billing records](#)

**Describe:**

In family cases, technicians handle many documents and information which can lead them to make an unintentional error. To minimize errors, the Eligibility Auxiliary Coordinator in regional offices reviews and approves eligibility determinations involving participating families that have been referred to them by eligibility technicians. To this end, they use the CIMA system, which contains the case electronic files and can also reference the hard copy file located in the offices. Any identified error can be corrected immediately by requesting that technicians take appropriate action. Additionally, they verify compliance monthly, and authorize children's attendance records entered into the system so that payment can be processed. These actions allow us to minimize errors arising from lack of documentation or from improper payment. The Office of Invoicing and Collections carries out collection attempts in the case of natural or legal persons, due to services rendered to governmental entities or Program benefits received improperly. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows:

Auditing Reports -Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. *Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs*, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, subsections A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without receiving payment or establishing a payment plan or without any action being taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or given personally. It will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Office of Debt within the Bureau of Interventions in the

Central Accounting Office. This notification is made so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the Division of Receivables Accounting in the Department of the Treasury to evaluate and confirm that collection proceedings have been completed. This report should be submitted with the copy of the file, which includes the returned check, copy of the "Invoice for Collection" (Model SC-724), and the document "Second Collection Notice of Non-contributive Debt" (Model SC-1071) so that this department can evaluate whether collection proceedings were completed. Subsection no. 3 involves procedures to follow when the returned check is successfully cashed. Subsections 4 and 5 establish that: Returned checks sent for collection proceedings cannot be kept for more than three (3) months by the Official Special Collector or the Official Special Bursar. When carrying out the collection proceedings agencies must exhaust all available remedies before referring the case to the Office of Receivables Accounting in the Department of the Treasury of the Internal Revenue Service. Objection to the Payment of the Debt The following procedures are included in Regulation's Article VI, subsections A, B, and C: If the debtor objects to the debt within fifteen (15) business days following the receipt of the Model SC-724 invoice, ACUDEN will evaluate and halt all collection proceedings regarding the same. In cases where a second notice of collection has been sent, the debtor will have ten (10) business days to object. If a notification is not received within this time, the case will continue. When the debtor objects to the debt, the Director of Finance will evaluate the case and will inform the debtor of their decision in writing within twenty (20) business days following the receipt of the objection. If the debtor were to disagree with the decision taken, they will inform the Director of Finance in writing within fifteen (15) business days from the receipt of the written communication. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family. When the Service Provider believes that ACUDEN has made a mistake in an invoice for collection, they can submit an objection to the Director of Finance. They will review the case and will communicate their decision to the debtor in writing within twenty (20) business days following the receipt of the objection. Were the debtor not in agreement with the decision taken, they will communicate the reasons for their objection to the Director of Finance in writing within fifteen (15) business days of the receipt of the letter. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the

Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family.



#### Conduct supervisory staff reviews or quality assurance reviews.

##### Describe:

Before approving a request to receive services from CCDF, the Auxiliary Coordinators in regional offices review the case to identify any errors made by the eligibility technicians. Additionally, ACUDEN uses a continuous monitoring system in the eligibility area to guarantee compliance. The Eligibility Monitoring system is run in the central offices of the Program, where they take a random sampling of cases and compare them to an evaluation worksheet to identify any errors in compliance. The Error Rate Review required by the ACF is used for the same purpose. These two systems help us consistently monitor eligibility determinations in order to provide funds for the families. It also allows us to identify the weaknesses in the Program to prepare plans of corrective action and retrain personnel. It also allows us to provide customized technical assistance. Moreover, all of ACUDEN's fiscal management operations that facilitate error identification are included in the Manual of Fiscal Procedures, for which the most recent approved revision is dated June 5, 2015. The Manual's main objective is to establish written procedures to guide the supervisory, administrative, fiscal, and budgetary processes carried out in the following Divisions: Finance, Budget, Procurement, and Fiscal Monitoring. The Manual is a guide meant to guarantee that the administration, control, management, and disbursement of federal and state funds received by ACUDEN are carried out adequately and effectively.



#### Audit provider records.

##### Describe:

The Division of Fiscal Monitoring safeguards those service providers' files that require the submission of a single audit as well as its corresponding PAC, if applicable. The Division also safeguards the results of any fiscal evaluations conducted.



#### Train staff on policy and/or audits.

##### Describe:

The Lead Agency (ACUDEN) offers continuous training for care services providers and agency employees to ensure the use of best practices in the management of federal funds, as stipulated in federal regulations. The Eligibility Area at the central level is responsible for offering meetings and trainings for providers and staff, based on the results of their monitoring to correct any weaknesses in either providers or regional office personnel. Additionally, meetings are held with the staff with the objective of discussing specific situations raised by any region and, thus, take appropriate action to address it. Moreover, the Divisions of Finance and Fiscal Monitoring offer technical assistance for service providers to ensure that they effectively understand fiscal requirements and how to comply with procedures and policies from ACUDEN. In the same manner, were there to be changes in the policies and procedures, or were there to be any change in federal regulation in the fiscal area

for ACUDEN, it will issue a Memorandum of Understanding noting any change in policies and procedures. In addition to this, it will notify service providers as to any new information or fiscal procedure that requires implementation.



Other

Describe:

c) Check and describe all activities the Lead Agency conducts to identify and prevent agency errors. Include in the description how each activity assists in the identification and prevention of agency errors.



Share/match data from other programs (e.g., TANF program, CACFP, FNS, Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, PARIS).

Describe:

At the moment, PR does not have an electronic or manual way to corroborate information with other benefits programs such as TANF, SNAP, SSA; however, prior to formalizing a contract granting funds, ACUDEN's Legal Division verifies that providers, contractors and/or companies are not registered in the System for Award Management (SAM) and prints out the result of the inquiry for each service provider, contractor, and/or company to be sure that they can receive CCDF funds.



Run system reports that flag errors (include types).

Describe:

The management of cases by technicians implies the possibility of errors in inputting the data into the system or errors in interpreting the information and the application of the Program's criteria. To avoid or prevent these errors, in the case of vouchers, payments are issued using the CIMA system. This system is programmed with all the eligibility requirements, which serve as filters to ensure the adequate management and payment for the case. When the technician works on the case in CIMA, were they to make a mistake, the system alerts them and prevents them from continuing until the mistake is fixed. These "quality filters" prevent and avoid possible mistakes that could be made in the issuance of payments. Moreover, technicians' compliance with case management protocols is verified before issuing payments to providers using awarded funds. These "quality filters" minimize the errors that could be made in the issuance of payments. Moreover, prior to the issuance of payments to providers using awarded funds, compliance is verified by the Finance Division in ACUDEN, which receives and verifies the following reports to ensure compliance with the funds award contract and State and Federal regulations.: \*Summary of Expenses by Category - this report is meant to prevent providers from spending funds on unauthorized categories or line items. \*List of Obligations- this report details all accounts payable from the project. \*Bank statements, bank reconciliations, and cancelled checks - from these documents, we are able to tell whether an expense is permissible and whether it is

authorized in the list of obligations. In the same way, we can tell whether the provider was paid within the terms required by federal regulations and verify the cash-on-hand balance. \*Certified payroll - this allows us to ensure that payroll expenditures do not exceed the amount approved in the proposal, as long as there isn't a change in registration affecting the adult/child ratio. \* Annual requirements: \*Public Liability Insurance - we guarantee non-federal financial compensation in case of any unintentional accident that affects the children, parents, and employees of the provider. \*Fidelity Bond- We guarantee the protection of awarded funds from any fraudulent transaction by the recipient of the funds and/or their employees. \*Certification of Bank Account - This identifies the persons authorized to manage the funds that have been deposited into the account. \*Registry of Authorized Signatures Model SC781 We guarantee who are the persons [sic] responsible for preparing and signing the different fiscal reports or of carrying out the different fiscal procedures.



### Review enrollment documents and attendance or billing records

#### Describe:

In cases involving families, the technician manages a large amount of documents and information, which could lead him to make a mistake. To prevent these, the Auxiliary Coordinator of Eligibility in the regional offices supervises and approves eligibility determinations of participating families that have been recommended by their eligibility technicians. They use the CIMA system, which has the electronic file (documents) for the case. It can also reference the hard copy of the file located in the offices. Any mistake identified can be corrected immediately by requesting technicians take appropriate action. Additionally, they check compliance every month and authorize children's attendance records as entered into the system by the technician so they can proceed to payment. These steps allow us to minimize errors due to lack of documentation or any improper payment. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. *Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs*, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. *Objective* To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, subsections A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without

receiving payment or establishing a payment plan or without any action being taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or given personally. It will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Office of Debt within the Bureau of Interventions in the Central Accounting Office. This notification is made so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the Division of Receivables Accounting in the Department of the Treasury to evaluate and confirm that collection proceedings have been completed. This report should be submitted with the copy of the file, which includes the returned check, copy of the "Invoice for Collection" (Model SC-724), and the document "Second Collection Notice of Non-contributive Debt" (Model SC-1071) so that this department can evaluate whether collection proceedings were completed. Subsection no. 3 involves procedures to follow when the returned check is successfully cashed. Subsections 4 and 5 establish that: Returned checks sent for collection proceedings cannot be kept for more than three (3) months by the Official Special Collector or the Official Special Bursar. When carrying out the collection proceedings agencies must exhaust all available remedies before referring the case to the Office of Receivables Accounting in the Department of the Treasury of the Internal Revenue Service. *Objection to the Payment of the Debt* The following procedures are included in Regulation's Article VI, subsections A, B, and C: If the debtor objects to the debt within fifteen (15) business days following the receipt of the Model SC-724 invoice, ACUDEN will evaluate and halt all collection proceedings regarding the same. In cases where a second notice of collection has been sent, the debtor will have ten (10) business days to object. If a notification is not received within this time, the case will continue. When the debtor objects to the debt, the Director of Finance will evaluate the case and will inform the debtor of their decision in writing within twenty (20) business days following the receipt of the objection. If the debtor were to disagree with the decision taken, they will inform the Director of Finance in writing within fifteen (15) business days from the receipt of the written communication. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the

Department of the Family. When the Service Provider believes that ACUDEN has made a mistake in an invoice for collection, they can submit an objection to the Director of Finance. They will review the case and will communicate their decision to the debtor in writing within twenty (20) business days following the receipt of the objection. Were the debtor not in agreement with the decision taken, they will communicate the reasons for their objection to the Director of Finance in writing within fifteen (15) business days of the receipt of the letter. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family.



#### Conduct supervisory staff reviews or quality assurance reviews.

##### Describe:

Before approving a request to receive services from CCDF, the Auxiliary Coordinators in regional offices review the case to identify any errors made by the eligibility technicians. Additionally, ACUDEN uses a continuous monitoring system in the eligibility area to guarantee compliance. The Eligibility Monitoring system is run in the central offices of the Program where, every trimester, they take a random sampling of cases and compare them to an evaluation worksheet to identify any errors in compliance. The Error Rate Review required by the ACF is used for the same purpose. These two systems help us monitor eligibility determinations consistently in order to grant funds to the families and allow us to identify the weaknesses in the Program to prepare plans of corrective action and retrain personnel. It also allows us to provide customized technical assistance. Moreover, all of ACUDEN's fiscal management operations that facilitate error identification are included in the Manual of Fiscal Procedures, for which the most recent approved revision is dated June 5, 2015. The Manual's main objective is to establish written procedures to guide the supervisory, administrative, fiscal, and budgetary processes carried out in the following Divisions: Finance, Budget, Procurement, and Fiscal Monitoring. The Manual is a guide meant to guarantee that the administration, control, management, and disbursement of federal and state funds received by ACUDEN are carried out adequately and effectively.



#### Audit provider records.

##### Describe:

When a service provider does not agree with a report issued by the Division of Fiscal Monitoring, they can submit an objection to the Director of Finance, who can halt the process and facilitate the filing of an appeal before the Adjudicative Board of the Department of the Family. The Adjudicative Board is ruled by Regulation #7757, from October 5, 2009, named the Regulation to Establish Procedures for the Adjudication of Controversies before the Adjudicative Board of the Department of the Family.

Train staff on policy and/or audits.

Describe:

The Lead Agency (ACUDEN) offers continuous training for care services providers and agency employees to ensure the use of best practices in the management of federal funds, as stipulated in federal regulations. The Eligibility Area at the central level is responsible for offering meetings and trainings for providers and staff, based on the results of their monitoring to correct any weaknesses in either providers or regional office personnel. Additionally, meetings are held with the staff with the objective of discussing specific situations raised by any region and, thus, take appropriate action to address it. Moreover, the Divisions of Finance and Fiscal Monitoring offer technical assistance for service providers to ensure that they effectively understand fiscal requirements and how to comply with procedures and policies from ACUDEN. In the same manner, were there to be changes in the policies and procedures, or were there to be any change in federal regulation in the fiscal area for ACUDEN, it will issue a Memorandum of Understanding noting any change in policies and procedures. In addition to this, it will notify service providers as to any new information or fiscal procedure that requires implementation.



Other

Describe:

### **8.1.5 The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.**

a) Check and describe all activities that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:



Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Collection proceedings against natural or legal persons for services rendered to governmental entities or for Program benefits, are carried out by the Office of Invoicing and Collections. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. *Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs, or*

returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, subsections A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without receiving payment or establishing a payment plan or without any action being taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or given personally. It will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Office of Debt within the Bureau of Interventions in the Central Accounting Office. This notification is made so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the Division of Receivables Accounting in the Department of the Treasury to evaluate and confirm that collection proceedings have been completed. This report should be submitted with the copy of the file, which includes the returned check, copy of the "Invoice for Collection" (Model SC-724), and the document "Second Collection Notice of Non-contributive Debt" (Model SC-1071) so that this department can evaluate whether collection proceedings were completed. Subsection no. 3 involves procedures to follow when the returned check is successfully cashed. Subsections 4 and 5 establish that: Returned checks sent for collection proceedings cannot be kept for more than three (3) months by the Official Special Collector or the Official Special Bursar. When carrying out the collection proceedings agencies must exhaust all available remedies before referring the case to the Office of Receivables Accounting

in the Department of the Treasury of the Internal Revenue Service. Objection to the Payment of the Debt The following procedures are included in Regulation's Article VI, subsections A, B, and C: If the debtor objects to the debt within fifteen (15) business days following the receipt of the Model SC-724 invoice, ACUDEN will evaluate and halt all collection proceedings regarding the same. In cases where a second notice of collection has been sent, the debtor will have ten (10) business days to object. If a notification is not received within this time, the case will continue. When the debtor objects to the debt, the Director of Finance will evaluate the case and will inform the debtor of their decision in writing within twenty (20) business days following the receipt of the objection. If the debtor were to disagree with the decision taken, they will inform the Director of Finance in writing within fifteen (15) business days from the receipt of the written communication. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family. When the Service Provider believes that ACUDEN has made a mistake in an invoice for collection, they can submit an objection to the Director of Finance. They will review the case and will communicate their decision to the debtor in writing within twenty (20) business days following the receipt of the objection. Were the debtor not in agreement with the decision taken, they will communicate the reasons for their objection to the Director of Finance in writing within fifteen (15) business days of the receipt of the letter. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family.

- [Coordinate with and refer to the other state/territory agencies \(e.g., state/territory collection agency, law enforcement agency\).](#)

**Describe:**

The Legal Division of ACUDEN, through a referral to the Director of Finance using subsection E in Regulation #44, Collection Procedure by Legal Means when the Owed Amount Exceeds \$5,000.00 and Collection Procedures from the Division Of Finance are Unsuccessful. In this case, the file with the details and determination is sent to the Secretary of Justice of Puerto Rico.

- [Recover through repayment plans.](#)

**Describe:**

Regulation #44 establishes the guidelines for the Payment Plan, which can be granted by the Director of Finance or the Nominated Authority. The Plan establishes a first payment of 50% of the total owed and the other 50% to be paid in installments in a maximum of 12 months.

- Reduce payments in subsequent months.

Describe:

In the trimestral petition for funds, an adjustment is made to satisfy the debt for non-covered enrollment as long as there is an invoice for collection for the current year.

- Recover through state/territory tax intercepts.

Describe:

- Recover through other means.

Describe:

- Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

Collection proceedings against natural or legal persons for services rendered to governmental entities or for Program benefits, are carried out by the Office of Invoicing and Collections. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. *Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs*, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, subsections A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without receiving payment or establishing a payment plan or without any action being taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or given personally. It will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will

check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Office of Debt within the Bureau of Interventions in the Central Accounting Office. This notification is made so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the Division of Receivables Accounting in the Department of the Treasury to evaluate and confirm that collection proceedings have been completed. This report should be submitted with the copy of the file, which includes the returned check, copy of the "Invoice for Collection" (Model SC-724), and the document "Second Collection Notice of Non-contributive Debt" (Model SC-1071) so that this department can evaluate whether collection proceedings were completed. Subsection no. 3 involves procedures to follow when the returned check is successfully cashed. Subsections 4 and 5 establish that: Returned checks sent for collection proceedings cannot be kept for more than three (3) months by the Official Special Collector or the Official Special Bursar. When carrying out the collection proceedings agencies must exhaust all available remedies before referring the case to the Office of Receivables Accounting in the Department of the Treasury of the Internal Revenue Service. Objection to the Payment of the Debt The following procedures are included in Regulation's Article VI, subsections A, B, and C: If the debtor objects to the debt within fifteen (15) business days following the receipt of the Model SC-724 invoice, ACUDEN will evaluate and halt all collection proceedings regarding the same. In cases where a second notice of collection has been sent, the debtor will have ten (10) business days to object. If a notification is not received within this time, the case will continue. When the debtor objects to the debt, the Director of Finance will evaluate the case and will inform the debtor of their decision in writing within twenty (20) business days following the receipt of the objection. If the debtor were to disagree with the decision taken, they will inform the Director of Finance in writing within fifteen (15) business days from the receipt of the written communication. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family. When the Service Provider believes that ACUDEN has made a mistake in an invoice for collection, they can submit an objection to the Director of Finance. They will review the case and will communicate their decision to the debtor in writing within twenty (20) business days following the receipt of the objection. Were the debtor not in agreement with the decision taken, they will communicate the reasons for their objection to the Director of Finance in writing within

fifteen (15) business days of the receipt of the letter. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family.



Other

Describe:

b) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:



Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

Describe:

Collection proceedings against natural or legal persons for services rendered to governmental entities or for Program benefits, are carried out by the Office of Invoicing and Collections. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. *Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs*, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, addendums A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without receiving payment or establishing a payment plan or any action taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive

Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or personally, and will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Section of Debt within the Bureau of Interventions in the Central Accounting Office. This notification, so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with Subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the Division of Receivables Accounting in the Department of the Treasury to evaluate and confirm that collection proceedings have been completed. This report should be submitted with the copy of the file, which includes the returned check, copy of the "Invoice for Collection" (Model SC-724), and the document "Second Collection Notice of Non-contributive Debt" (Model SC-1071) so that this department can evaluate whether collection proceedings were completed. Subsection no. 3 involves procedures to follow when the returned check is successfully cashed. Subsections 4 and 5 establish that: Returned checks sent for collection proceedings cannot be kept for more than three (3) months by the Official Special Collector or the Official Special Payer. When carrying out the collection proceedings agencies must exhaust all available remedies before referring the case to the Division of Receivables Accounting in the Department of the Treasury of the Internal Revenue Service. Objection to the Payment of the Debt The following procedures are included in Regulation's Article VI, Subsection A, B, and C: If the debtor objects to the debt within fifteen (15) business days following the receipt of the Model SC-724 invoice, ACUDEN will halt evaluate [sic] all collection proceedings regarding the same. In cases where a second notice of collection has been sent, the debtor will have ten (10) business days to object. If a notification is not received within this time, the case will continue. When the debtor objects to the debt, the Director of Finance will evaluate the case and will inform the debtor of their decision in writing within twenty (20) business days following the receipt of the objection. If the debtor were to disagree with the decision taken, they will inform the Director of Finance in writing within fifteen (15) business days from the receipt of the written communication. Subsection D establishes the procedure to follow when a debtor submits an appeal to the Director of Finance. Subsection E outlines the legal collection procedures if the amount exceeds \$5,000.00. If this were the case, when raising an objection to the invoice after the Director of Finance's determination, they will have an opportunity to present an appeal before the Adjudicative Board of the Department of the Family. When the Service Provider understands that ACUDEN has made a mistake in an invoice for collection, they can submit an objection to the

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- [Coordinate with and refer to the other state/territory agencies \(e.g., state/territory collection agency, law enforcement agency\).](#)

[Describe:](#)

The Legal Division of ACUDEN, through a referral to the Director of Finance using subsection E in Regulation #44, Collection Procedure by Legal Means when the Owed Amount Exceeds \$5,000.00 and Collection Procedures from the Division Of Finance are Unsuccessful. In this case, the file with the details and determination is sent to the Secretary of Justice of Puerto Rico.

- [Recover through repayment plans.](#)

[Describe:](#)

Regulation #44 establishes the guidelines for the Payment Plan, which can be granted by the Director of Finance or the Nominated Authority. The Plan establishes a first payment of 50% of the total owed and the other 50% to be paid in installments in a maximum of 12 months.

- [Reduce payments in subsequent months.](#)

[Describe:](#)

In the trimestral petition for funds, an adjustment is made to satisfy the debt for non-covered enrollment as long as an invoice for collection for the current year is present.

- [Recover through state/territory tax intercepts.](#)

[Describe:](#)

- [Recover through other means.](#)

[Describe:](#)

- [Establish a unit to investigate and collect improper payments and describe the composition of the unit below.](#)

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Collection proceedings against natural or legal persons for services rendered to governmental entities or for Program benefits, are carried out by the Office of Invoicing and Collections. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, addendums A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without receiving payment or establishing a payment plan or any action taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or personally, and will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Section of Debt within the Bureau of Interventions in the Central Accounting Office. This notification, so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with Subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the Division of Receivables Accounting in the Department of the Treasury to evaluate and confirm that collection proceedings have been completed. This report should be submitted with the copy of the file, which includes the returned check, copy of the

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Other

Describe:

c) Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

- Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount

**Describe:**

Collection proceedings against natural or legal persons for services rendered to governmental entities or for Program benefits, are carried out by the Office of Invoicing and Collections. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, addendums A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the original invoice and the copy must be approved and signed by the Director of the Division of Finance. The original invoice is sent to the debtor and a file is prepared to include the request for collection, the letters sent, copies of the payments received, if any, and copy of the remittances. The file is then archived. If ten (10) business days from the due date indicated in the invoice have passed without receiving payment or establishing a payment plan or any action taken, the Director of the Division of Finance will send a second notice, "Second Collection Notice of Non-contributive Debt" (Model SC-1071). This second notice must be sent with acknowledgement of receipt through the mail or personally, and will indicate a due date, the nature and amount of the debt, and any fees or interest accrued, if any. If payment is not initiated or the debt settled, the Director of the Division of Finance will check whether the debtor is included in the Registry of Suppliers of the Central Accounting System PRIFAS. Were they to be registered, a "Notice of Non-contributory Debts or Authorization to Cancel or Amend a Notification" (Model SC-776.1) is sent to the Section of Debt within the Bureau of Interventions in the Central Accounting Office. This notification, so that the debt is discounted from the payment or reimbursement made in favor of the debtor, in accordance with Article 9(j) of Act No. 230, of July 23, 1974, as amended, known as the "Act of Accounting for the Government of Puerto Rico." Procedure in case of Returned Checks. In cases of returned checks, the steps to follow will be in accordance with Subsection F (1, 2, 3, 4, and 5) of Article V. Subsection No. 1 establishes that the Division of Reconciliation in the Department of the Treasury will send the list of returned checks provided by Banco Popular to the agencies. Subsection no. 2 establishes that the procedure to follow when the debt is less than \$5,000.00, and the attempts to cash a check have been unsuccessful, is as follows: The "Report on Checks Returned by the Bank for which Collection Proceedings Have Been Unsuccessful" (Model SC-1107) is prepared and sent to the

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[Coordinate with and refer to the other state/territory agencies \(e.g., state/territory collection agency, law enforcement agency\).](#)

**Describe:**

The Legal Division of ACUDEN, through a referral to the Director of Finance using subsection E in Regulation #44, Collection Procedure by Legal Means when the Owed Amount Exceeds \$5,000.00 and Collection Procedures from the Division Of Finance are Unsuccessful. In this case, the file with the details and determination is sent to the

Secretary of Justice of Puerto Rico.

Recover through repayment plans.

Establish a unit to investigate and collect improper payments.

Regulation #44 establishes the guidelines for the Payment Plan, which can be granted by the Director of Finance or the Nominated Authority. The Plan establishes a first payment of 50% of the total owed and the other 50% to be paid in installments in a maximum of 12 months.

Reduce payments in subsequent months.

Describe:

In the trimestral petition for funds, an adjustment is made to satisfy the debt for non-covered enrollment as long as an invoice for collection for the current year is present.

Recover through state/territory tax intercepts.

Describe:

Recover through other means.

Describe:

Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe:

Collection proceedings against natural or legal persons for services rendered to governmental entities or for Program benefits, are carried out by the Office of Invoicing and Collections. Some of the non-contributive debt that arise from the operations or functions of ACUDEN are as follows: Auditing Reports - Disputed Costs, Improper payments or benefits received unduly. Fiscal Monitoring Findings, Reports on the Closings of Child Care Programs. Non-covered spaces due to incompliance with enrollment, and Final Reports on the Head Start/Early Head Start Programs, or returned checks. Regulation No. 44, "Existing Non-contributive Debts owed to the Commonwealth of Puerto Rico", of the Internal Revenue Service, is used to carry out the collection procedures of any debt owed to ACUDEN. This Regulation establishes the rules governmental Agencies must follow when collecting debt. Objective To use all means at our disposal to quickly collect on debts in the most effective manner and in accordance with applicable legal provisions, Regulations, and Rules established by the Internal Revenue Service and other governmental entities. *Debt Collection Procedures* The procedures that follow are included in the Regulation's Article V, addendums A, B, C, D, and E: The initial request for collection proceedings is received and an Invoice for Collection (Model SC-724) is prepared. The debtor will be granted thirty (30) calendar days to make a payment and fifteen (15) to appeal. Both the

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Other

Describe:

**8.1.6 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:**

Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

Describe:

When a client is disqualified, they will have the right to present an appeal in front of the Adjudicative Board of the Department of the Family. The Adjudicative Board, which is governed by Regulation #7757, of October 5, 2009, Regulation to Establish Procedures for the Adjudication of Controversies before the Adjudicative Board of the Department of the Family. The Board will grant them an administrative hearing citing both parties. The Board will issue a resolution after evaluating the allegations and the evidence presented by both parties. If the service provider is not in agreement with the ruling issued by the Board, they can take their case to the Court of Appeals of Puerto Rico.

Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

**Describe:**

When a service provider is disqualified, they will have the right to present an appeal before the Adjudicative Board of the Department of the Family. The Adjudicative Board, which is governed by Regulation #7757, of October 5, 2009, Regulation to Establish Procedures for the Adjudication of Controversies before the Adjudicative Board of the Department of the Family. The Board will grant them an administrative hearing citing both parties. The Board will issue a resolution after evaluating the allegations and the evidence presented by both parties. If the service provider is not in agreement with the ruling issued by the Board, they can take their case to the Court of Appeals of Puerto Rico.

**Prosecute criminally.**

**Describe:**

The Legal Division of ACUDEN could refer a service provider or client to the Department of Justice of Puerto Rico, if a situation involving fraud were to necessitate it.

**Other.**

**Describe:**

## Appendix A: Background Check Waiver Request Form

Lead Agencies may apply for a temporary waiver for certain background check requirements if milestone prerequisites have been fully implemented. These waivers will be considered "transitional and legislative waivers" to provide transitional relief from conflicting or duplicative requirements preventing implementation, or an extended period of time in order for the state/territory legislature to enact legislation to implement the provisions (98.19(b)(1)) These waivers are limited to a one-year period and may be extended for at most one additional year from the date of initial approval.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in section 5 questions 5.4.1 -- 5.4.4 to confirm that the milestones are met. If milestone prerequisites are not met, the waiver request will not be approved. Approved waivers would begin October 1, 2018 through September 30, 2019. If approved, States and Territories will have the option to renew these waivers for one additional year as long as progress is demonstrated during the initial waiver period. Separate guidance will be issued later on the timeline and criteria for requesting the waiver renewal.

## Overview of Background Check Implementation deadlines

Original deadline for implementation (658H(j)(1) of CCDBG Act): September 30, 2017

Initial one-year extension deadline (658H(j)(2) of CCDBG Act): September 30, 2018

One-year waiver deadline (45 CFR 98.19(b)(1)(i)): September 30, 2019

Waiver deadline one-year renewal (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Waiver approval for new (prospective) staff, existing staff or staff hired provisionally until background checks are completed, are subject to and contingent upon the OCC review and approval of responses to 5.4.9 that demonstrate that the state/territory requires: (1) the provider to submit the background check request before the staff person begins working; and (2) pending the results of the background check, the staff person must be supervised at all times by an individual who has completed the background check.

To submit a background check waiver request, complete the form below.

Check and describe each background check provision for which the Lead Agency is requesting a time-limited waiver extension.

- Appendix A.1:** In-state criminal registry or repository checks with fingerprints requirements for existing staff. (See related question at 5.4.1 (b))

Describe the provision from which the state/territory seeks relief.

**In accordance with the Law 254 of 27 July 1974, the Puerto Rico Police Department, is the agency charged with criminal background check of all citizens. This is done through a written request. This written request includes the social security number and an official identification of the person. This identification is corroborated with the Department of Transportation and Public Works, which is the agency that issues licenses, and other identification in Puerto Rico. The matching carried out by the Puerto Rico Police Department, is on the judgments issued by the courts of the Commonwealth of Puerto Rico. This certificate of criminal record does not include information on convictions in the federal jurisdiction or another country. Nor does it include the convictions legally removed from the criminal record and pardons, if any.**

**The requirement of the federal government on the local verification is done through the use of fingerprints, and the matter is under state law is not a requirement for at the moment.**

Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children

**This waiver will allow us to continue offering the services of care for our children on an expedite manner. ACUDEN as lead agency for CCDF does not have the power to make changes to the Puerto Rico law and/or procedures that govern the Puerto Rico Police Department. Although we understand that the fingerprints background suggested in this plan could be an effective method, we have to consider that promote and/or require this change in another agency would involve legislative changes and proceedings which would take a long time and the identification of state funds in the Puerto Rico Police Department to run the process. Not being able to accept the background check as it currently is provided, would stop the services through all the centers licensed homes licensed, and non-family exempt providers. This action would limited the opportunity to families receive quality services that are currently provided and will limit them to having to use their families as the only alternative for child care services for their children.**

Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver.

**The health and safety of children will not be compromised by the application of this waiver. In addition to the currently state criminal background; we are performing another background history check through fingerprints with the FBI Crime Information Center. This is requested through a written request and the check cover abuse and sexual assault at national and local level. This process ensures that the records are complete and verified, this minimizes the risk of exposing the children to inappropriate situations. Also, the National Crime Information Center collects information about all state criminal information and for what a person was sentenced. Puerto Rico is part of this verification network and, hence going into this double background process a person criminal history will be verified.**