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Child Care and Development Fund (CCDF) Plan for

New Mexico
FFY 2019–2021

This Plan describes the Child Care and Development Fund program to be administered by the State or Territory for the period from 10/1/2018 to 9/30/2021, as provided for in the applicable statutes and regulations. The Lead Agency has the flexibility to modify this program at any time, including amending the options selected or described.

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

Child Care and Development Fund (CCDF) .............................................................................................................. 1

Introduction and How to Approach Plan Development ........................................................................................................... 1

1 Define CCDF Leadership and Coordination With Relevant Systems .......................................................... 3
  1.1 CCDF Leadership .............................................................................................................................................. 3
  1.2 CCDF Policy Decision Authority .................................................................................................................. 4
  1.3 Consultation in the Development of the CCDF Plan .................................................................................... 7
  1.4 Coordination With Partners To Expand Accessibility and Continuity of Care ............................................. 11
  1.5 Optional Use of Combined Funds, CCDF Matching and Maintenance-of-Effort Funds ............................ 19
  1.6 Public-Private Partnerships .......................................................................................................................... 21
  1.7 Coordination With Local or Regional Child Care Resource and Referral Systems .................................... 22
  1.8 Disaster Preparedness and Response Plan ................................................................................................. 24

2 Promote Family Engagement Through Outreach and Consumer Education ............................................ 27
  2.1 Outreach to Families With Limited English Proficiency and Persons With Disabilities ............................. 27
  2.2 Parental Complaint Process ....................................................................................................................... 28
  2.3 Consumer Education Website .................................................................................................................... 29
  2.4 National Website and Hotline ..................................................................................................................... 35
  2.5 Additional Consumer and Provider Education ............................................................................................ 35
  2.6 Procedures for Providing Information on Developmental Screenings ..................................................... 40
  2.7 Consumer Statement for Parents Receiving CCDF Funds ......................................................................... 42

3 Provide Stable Child Care Financial Assistance to Families ............................................................................ 43
  3.1 Eligible Children and Families .................................................................................................................... 43
  3.2 Increasing Access for Vulnerable Children and Families .......................................................................... 52
  3.3 Protection for Working Families .................................................................................................................. 54
  3.4 Family Contribution to Payments ............................................................................................................... 58

4 Ensure Equal Access to Child Care for Low-Income Children ........................................................................ 62
  4.1 Parental Choice in Relation to Certificates, Grants, or Contracts ............................................................... 62
  4.2 Assessing Market Rates and Child Care Costs ........................................................................................... 64
  4.3 Setting Payment Rates ................................................................................................................................ 67
  4.4 Summary of Facts Used To Determine That Payment Rates Are Sufficient To Ensure Equal Access 68
  4.5 Payment Practices and the Timeliness of Payments ................................................................................... 70
  4.6 Supply-Building Strategies To Meet the Needs of Certain Populations .................................................... 73

5 Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings .............................................................................................................. 76
  5.1 Licensing Requirements ............................................................................................................................... 76
  5.2 Health and Safety Standards and Requirements for CCDF Providers ....................................................... 77
  5.3 Pre-Service or Orientation Training Requirements ..................................................................................... 91
  5.4 Ongoing Training Requirements .................................................................................................................. 94
5.5 Monitoring and Enforcement Policies and Practices for CCDF Providers .............................................. 104
5.6 Criminal Background Checks .................................................................................................................. 108

6. Recruit and Retain a Qualified and Effective Child Care Workforce .................................................... 119
   6.1 Professional Development Framework .................................................................................................. 119
   6.2 Training and Professional Development Requirements ........................................................................ 123
   6.3 Early Learning and Developmental Guidelines ..................................................................................... 128

7 Support Continuous Quality Improvement .................................................................................................. 131
   7.1 Quality Activities Needs Assessment for Child Care Services ................................................................. 132
   7.2 Use of Quality Funds .............................................................................................................................. 132
   7.3 Supporting Training and Professional Development of the Child Care Workforce With CCDF Quality Funds .......................................................................................................................... 133
   7.4 Quality Rating and Improvement System ................................................................................................ 135
   7.5 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers .... 137
   7.6 Child Care Resource and Referral ........................................................................................................ 138
   7.7 Facilitating Compliance With State Standards ......................................................................................... 138
   7.8 Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services .... 139
   7.9 Accreditation Support ............................................................................................................................ 140
   7.10 Program Standards ............................................................................................................................... 140
   7.11 Other Quality Improvement Activities .................................................................................................. 141

8 Ensure Grantee Program Integrity and Accountability .................................................................................. 142
   8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity ....................... 142
Introduction and How to Approach Plan Development

The Child Care and Development Fund (CCDF) program provides resources to state, territory, and tribal grantees that enable low-income parents to work or pursue education and training so that they can better support their families while at the same time promoting the learning and development of their children. The CCDF program also provides funding to enhance the quality of child care for all children. On November 19, 2014, the Child Care and Development Block Grant (CCDBG) Act of 2014 was signed into law (Pub. L. 113-186). The law reauthorizes and significantly revises the purposes of the CCDF program and requirements for state and territory grantees. In September 2016, the final rule was released. The final rule makes regulatory changes to the CCDF program based on the CCDBG Act of 2014. These changes strengthen requirements to protect the health and safety of children in child care; help parents make informed consumer choices and access information to support child development; provide equal access to stable, child care for low-income children; and enhance the quality of child care and the early childhood workforce.

The Plan is the primary mechanism that the Administration for Children and Families (ACF) uses to determine state and territory compliance with the requirements of the law and rule. The Preprint provides a tool for states and territories to describe to ACF their progress on the following sections:

1. Define CCDF Leadership and Coordination With Relevant Systems
2. Promote Family Engagement Through Outreach and Consumer Education
3. Provide Stable Child Care Financial Assistance to Families
4. Ensure Equal Access to Child Care for Low-Income Families
5. Establish Standards and Monitoring Processes To Ensure the Health and Safety of Child Care Settings
6. Recruit and Retain a Qualified and Effective Child Care Workforce
7. Support Continuous Quality Improvement
8. Ensure Grantee Accountability

These organizational categories reflect key functions of an integrated system of child care for low-income working families. Although the Plan is divided into sections for reporting and accountability purposes, ACF encourages Lead Agencies to approach the Plan in a cross-cutting, integrated manner. The intention is that grantees and the federal government will be able to use this information to track and assess progress, determine the need for technical assistance (TA), and determine compliance with specific requirements and deadlines.

**CCDF Plan Submission**

States and territories will submit their Plans electronically through the ACF-118 electronic submission site. The ACF-118 site will include all language and questions included in the final CCDF Plan Preprint template approved by the Office of Management and Budget. Please note that the format of the questions on the ACF-118 site could be modified from the Word version of the document to ensure compliance with Section 508 policies regarding accessibility to electronic and information technology for individuals with disabilities. (See [http://www.section508.gov/](http://www.section508.gov/) for more information.)
In responding to questions, states and territories are asked to provide brief, specific summaries and/or bullet points only with specific language that responds to the question. Do not use tables or copy and paste charts, add attachments, or paste manuals into the Plan. All information and materials developed to support CCDF implementation and information reported in the CCDF Plan are subject to review by ACF as part of ongoing oversight and monitoring efforts.
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. Coordination with child care resource and referral (CCR&R) systems are explained, and Lead Agencies outline the work they have done on their disaster preparedness and response plans.

1.1 CCDF Leadership

The Governor of a state or territory must designate an agency (which may be an appropriate collaborative agency) or establish a joint interagency 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)).

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: Children, Youth and Families Department
Address: 1120 Paseo de Peralta, Santa Fe, NM 87502
Website: https://cyfd.org/

Lead Agency or Joint Interagency Official Contact Information:
Lead Agency Official First Name: Monique
Lead Agency Official Last Name: Jacobson
Title: Cabinet Secretary
Phone Number: 505-827-7602
Email Address: Monique.Jacobson@state.nm.us

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: Alejandra
Last Name: Rebolledo Rea
Title of the CCDF Administrator: Early Childhood Services Division, Acting Director

Address for the CCDF Administrator (if different from the Lead Agency):
Same as above
Phone Number: 505-827-7499
Email Address: alejandra.rebolledo@state.nm.us

b) CCDF Co-Administrator Contact Information (if applicable)
CCDF Co-Administrator First Name: Kimberly
CCDF Co-Administrator Last Name: Brown
Title of the CCDF Co-Administrator: Child Care Services Bureau Chief

Address of the CCDF Co-Administrator (if different from the Lead Agency):
Street Address:
City:
State:
ZIP Code:
Phone Number:
Email Address:
Description of the role of the Co-Administrator: Provides oversight and coordination of the Child Care Licensing and Child Care Assistance.

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(j)(3)). Check one.

☑ All program rules and policies are set or established at the state or territory level.
☐ 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 other program rules and policies and describe (e.g., quality rating and improvement systems [QRIS], payment practices):
The Tiered Quality Rating and Improvement System Standards are set by the State

1.1.2 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
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.

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.

1.2.3 What processes will the Lead Agency use to monitor administrative and implementation responsibilities performed by agencies other than the Lead Agency as indicated above, such as through written agreements or monitoring and auditing processes (98.11(a)(3))? Describe those processes and any indicators or measures used to assess performance.

   CYFD as the Lead Agency and responsible for the duties listed above, follows procedures based on regulations to monitor and audit cases to determine administrative errors and improper payments.

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.

CYFD utilizes the Family Automated Tracking System (FACTS) to maintain accurate child care provider and subsidized family data. For the past couple of years, New Mexico has been developing a new service delivery system for CYFD – Early Childhood Services Division (ECS). The new system is named Enterprise Provider Information and Constituent Services (EPICS). EPICS is a robust web-based data system that would encompass all ECS programs. With EPICS, as our new database system, ECS will now have the ability to track programs and their services along with the children receiving those services in one location. In addition, the Child and Adult Care Food Program (CACFP), Summer Food Service Program (SFSP), and Child Care Assistance (CCA) have been integrated with the SHARE financial system to generate payments. Starting March 1, 2018, the Child Care Assistance program staff begun entering all child care assistance contracts for new clients and clients due for their annual recertification in three phases:

- Phase 1 – Go live date: March 1, 2018 – Santa Fe and Española Offices
Phase 2 – Go live date: April 1, 2018 – Anthony Office
Phase 3 – Go live date: May 1, 2018 – all other offices throughout the state

Over the next 14 months, ECS will gradually phase all childcare assistance contracts into EPICS. During this timeframe, childcare assistance reimbursement will be generated from our old FACTS database and the new EPICS database. In addition, non-identifiable information related to the child care data can be requested by the public through the Children, Youth and Families Department pursuant to the Inspection of Public Records Act.

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.

NMAC - 8.15.2.25 CONFIDENTIALITY: Client files are established and maintained solely for use in the administration of the child care assistance program. Information contained in the records is confidential and is released only in the following limited circumstances:

A. to the client upon request;
B. to an individual who has written authorization from the client;
C. to department employees and agents who need it in connection with program administration, including program auditors; or
D. to other agencies or individuals including law enforcement officers who satisfy the following conditions:
   (1) agency or individual is involved in the administration of a federal or a federally-assisted program, which provides assistance in cash, in kind or in services directly to individuals on the basis of need;
   (2) information is to be used for the purpose of establishing eligibility, determining amount of assistance or for providing services for applicants or recipients;
   (3) agency or individual is subject to standards of confidentiality comparable to those contained herein; and
   (4) agency or individual has actual or implied consent of the applicant or recipient to release the information; in an emergency, information may be released without permission, but the client must be informed of its release immediately thereafter; consent may be considered as implied if the client has made application to the inquiring agency for a benefit of service;
   E. as requested in a subpoena or subpoena duces tecum.

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.
(2) The State Advisory Council (SAC) on Early Childhood Education and Care (pursuant to
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.

Meetings have been taken place with New Mexico Fire Marshall to define and identify the local implementation of the NM fire code in collaboration with the county and local authorities. This is to ensure that the fire safety standards are implemented across different counties in a consistent manner. Representatives of general purpose local government were invited to be part of the regional planning meetings pertaining to their regions and the invitation for the public hearing was sent directly to them for input and participation.

b) Describe how the Lead Agency consulted with the State Advisory Council.

CYFD-ECS initiated dialogue with the New Mexico Early Learning Advisory Council during their quarterly meeting of March 2018. The purpose of the dialogue was to solicit interest for the working planning session of April 19. Members of the Council participating in a statewide stakeholder planning session and had an opportunity to review and provide input to the plan. The initial draft with information regarding the statewide planning and regional planning sessions as well as meetings with other representatives such as state-local government, advocacy groups and tribal programs, was presented to the full body for final ELAC input at the May 22 Council meeting.

c) Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state.

CYFD has been participating in the CCDF monthly tribal calls that were initiated in January 2018. Since then, there have been several events where discussion and input from the tribal programs have taken place. On May 15 during the Tribal-State Child Care Partnership meeting, CYFD-Early Childhood Services team led the conversation and the opportunity for tribal input on the State Child Care Plan. Identifying strengths, barriers and providing recommendations to the state on ways to ensure the New Mexico state CCDF program is well integrated within the diverse communities and ensures support to the tribal programs in their implementation of a comprehensive child care system.

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

CYFD-ECS is the grantee for the Head Start Collaboration Office (HSCO) for New Mexico, as part of the HSCO strategic planning, a coordinated meeting took place during the planning session of April 19 to ensure that the CCDF State Plan and the HSCO Strategic Plan are aligned and the priorities for both programs are taking into consideration. Head Start grantees were able to provide input.

Representatives from New Mexico Voices for Children, Olé (Advocacy group for New
Mexico’s Working Families), Asociación del Cuido y Aprendizaje en Nuevo Mexico (NM Early Care and Education Association), BEFORE (Advocacy organization) participated and provided valuable input in the Regional meetings that took place during the week of May 7 – 11, 2018. Other organizations were invited and provided input through the Survey and small group meetings including the New Mexico Child Care Association and the New Mexico Association for the Education of Young Children.

Meetings are taking place with the New Mexico Coalition to End Homeless (NMCEH), a statewide association of agencies and individuals responsible for the system of housing and services. NMCEH is the Collaborative Applicant for New Mexico Balance of State Region for the federal Continuum of Care Homeless Assistance program. The purpose of the meetings are two-fold: to provide input in each other’s implementation plans and include processes for ongoing collaboration and communication.

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(s) of notice of a public hearing. 
Reminder: Must be at least 20 calendar days prior to the date of the public hearing.
   On May 29, 2018 the Notice for Public Hearing, was posted on NM Register, Albuquerque Journal and Las Cruces Sun.

b) How was the public notified about the public hearing, including how notice was accessible for people with disabilities? Please include specific website links if used to provide notice. Public Hearing notices were posted on the www.NewMexicoKids.org, www.earlylearningnm.org, and www.cyfd.org websites. Public hearing announcements were also placed in the New Mexico Register, Albuquerque Journal and Las Cruces Sun. On May 25, 2018, letters regarding the CCDF Plan availability and Public Hearing were also mailed to registered child care providers, all families receiving child care subsidy, local government, tribal government and other stakeholdes. The following language was included with the Public Hearing notices: If you are a person with a disability and you require this information in an alternative format or require special accommodations to participate in the public hearing, please contact Early Childhood Services at 800-832-1321. CYFD requests at least 10 days advance notice to provide requested alternative formats and special accommodations. Letters were drafted in English and Spanish.

c) Date(s) of the public hearing(s). 
Reminder: Must be no earlier than January 1, 2018, which is 9 months prior to the October 1, 2018, effective date of the Plan.
   The Public Hearing will take place June 19, 2018.

d) Hearing site(s) or method(s), including how geographic regions of the state or territory were addressed. 
The Public Hearing being held on Tuesday, June 19, 2018, from 9:00 a.m. to 12:00 p.m., is taking place in the Apodaca Hall on the second floor of the PERA Building located at 1120 Paseo de Peralta, Santa Fe, New Mexico.
e) How the content of the Plan was made available to the public in advance of the public hearing(s).
Before the plan was developed, CYFD lead fifteen regional meetings, both in English and Spanish, across the state, where participants had an opportunity to provide input in the CCDF child care plan. — including the preprint draft at https://www.acf.hhs.gov/occ/resource/ccdf-plan-preprint-2019-2021-draft. Invitation was sent to all providers, parents and early childhood advocates and other early childhood organizations to make them aware of this opportunity.

CYFD also developed a survey to be completed online for those that were not able to attend the meetings. The survey was open for two weeks so that everyone had an opportunity to provide input.

The initial draft of the CCDF State Plan for input was posted on May 29 at www.newmexicokids.org, individuals could also request a copy by calling 800-832-1321. Interested persons may testify at the hearing or submit written comments no later than 5:00 p.m. Tuesday, June 19, 2018. Written comments will be given the same consideration as oral testimony given at the hearing. Written comments should be addressed to: Early Childhood Services, Children, Youth and Families Department, PO Drawer 5160, Santa Fe, NM 87502; Fax: 505-827-9978.

f) How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan?
Based on the input provided through the meetings and the surveys (including some face to face surveys), CYFD put together the plan utilizing the required areas specified in the CCDF Plan Template. Once assembled, it will be posted for 20 days for public comment. Based on the feedback received both during public comment and the Public Hearing, the plan will be revised before submitted to the Office of Child Care.

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)).
   a) Provide the website link to where the plan, any plan amendments, and/or waivers are available
      The final Plan, waivers and amendments will be posted replacing the initial Draft at www.newmexicokids.org.

   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:
      The Early Learning Advisory Council (ELAC) is set to be repealed July 1, 2018. Governor Susana Martinez has issued the Executive Order to establish the Governor’s Early Learning Advisory Council, commencing July 1, 2018. The CCDF Plan will be part of the orientation to the newly formed Governor’s ELAC.
Working with child care resource and referral agencies. Describe:

CYFD contracts with The Early Childhood Services Center at the University of New Mexico (UNM-ECSC) to ensure supports to early learning programs are in place. Services include training, consultation, resource and referral, data and website support for CYFD, Early Childhood Services programs. The UNM-ECSC New Mexico Kids Resource and Referral Hub is the holder of the Newmexicokids.org website where the CCDF plan, waivers and amendments are posted.

Providing translation in other languages. Describe:

The current initial draft is being translated into Spanish, it is the goal to have the finalized document translated and posted in Spanish at the same time as the English Version.

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

A link to the www.newmexicokids.org will be posted at the https://pulltogether.org/ website under the Child Care tab.

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

A link to the www.newmexicokids.org will be shared with other provider, parents, organizations and groups through the diverse networks partnering with CYFD. Including those that were part of the input process.

Other. Describe:

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 entities 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; linking comprehensive services to children in child care settings; or developing the supply of quality care for vulnerable populations. Check who you 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
Meetings will be taking place in an ongoing manner between the staff at Early Childhood Services Division and the New Mexico Fire Marshall to define and identify the local implementation of the NM fire code in collaboration with the county and local authorities ensuring barriers are identified and a solution is taking place to ensure that child care settings are safe and successful at obtaining their child care licensing. In addition, ongoing meetings will continue with local environmental health agencies to align local and state requirements for the Department with federal and state child care, CACFP and Head Start requirements.

(RIGHT) 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:

The Early Learning Advisory Council is set to be repealed July 1, 2018. Governor Susana Martinez has issued the Executive Order to establish the Governor’s Early Learning Advisory Council, commencing July 1, 2018. The Council is administratively attached to CYFD, and CYFD Cabinet Secretary or Designee is ex-officio member of the Council.

The highlights of the Governor’s ELAC include:

- Expanded the scope of responsibility and accountability to include Public Education Department, Department of Health and Children, Youth and Families
  - SB120 (the Early Childhood Care and Education Act of 2011) only included CYFD
  - This will make sure the scope reflects the comprehensive Early Learning System in New Mexico
- Membership is set at 13 members (SB120 included 15 members)
  - Eight categories are specifically identified to reflect the Head Start Act
  - Four categories that provide flexibility in membership, including current parents
  - One member at large
- Allows for the flexibility of forming subcommittees and taskforces on behalf of the Governor’s ELAC with members and non-members of the seating Council
- Provides targeted duties of the Council – in addition to those listed in the Head Start Act
  - Tasks the Council to develop a Comprehensive Community Needs Assessment and a Strategic Plan to delineate activities for the Council and Committees, including reporting on performance measures and recommendations
  - Expands the areas for Council recommendations to improve the whole Early Learning System, including alignment and coordination of programs, assessing the higher education system, improvements in the Early Learning Guidelines, and ways to support the Departments with participation and outreach of under-represented populations.

Does the Lead Agency have official representation and a decision-making role in the State Advisory Council (or similar coordinating body)?

- No
- Yes

(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:

In addition to the monthly call that started in January 2018, CYFD and the CCDF Tribal programs for New Mexico participated in a face to face planning meeting. The vision for
this meeting was to build and strengthen sustainable and meaningful relationships between CCDF tribal programs and CYFD-ECS in New Mexico. A plan for continued discussion, cooperation and collaboration for the group is being developed as a result of this meeting. This will include ongoing face-to-face, telephonic and web-based meetings to ensure ongoing collaboration and coordination. The main topics identified at the meeting include:

- Ongoing training support: ensuring a qualified workforce sharing opportunities and resources
- Background checks: state and individual tribal procedures to ensure the safety of New Mexico’s children
- Policies and Procedures for implementation of a consistent program

(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 Section 619 for preschool).

Describe the coordination goals and process:
The NM Part C Family Infant Toddler (FIT) Program is a statewide program that provides home and community based early intervention services to infants and toddlers (birth to age 3) who have or are at risk for developmental delays and disabilities and their families. Early intervention provides therapy and developmental services that are family focused and teach families activities and strategies to promote their child's development throughout the day at home and in other settings (child care / Early Head Start etc.). An individualized plan is developed with the family regarding the services they will receive.

The FIT program is housed at the NM Department of Health (DOH), and along with the Early Childhood and Literacy Programs (PED PreK, 619, Title I) at the Public Education Department (PED) and the Early Childhood Services Division for Children, Youth and Families Department (CYFD) have developed a strategy of coordinated governance. This strategy places accountability for the Early Learning System across these three agencies. The membership for this Executive leadership group is comprised by Cabinet Secretaries (or designees) Division Directors and Bureau Chiefs representing each agency as defined by each organization. The main focus of this structure is to create systems for management, leadership, planning, coordination, collaboration, alignment and data review related to the Early Learning System.

(required) State/territory office/director for Head Start state collaboration. Describe the coordination goals and process:

CYFD-ECS is the grantee for the Head Start Collaboration Office (HSCO) for New Mexico, as part of the HSCO strategic planning, a coordinated meeting took place during the planning session of April 19 to ensure that the CCDF State Plan and the HSCO Strategic Plan are aligned and the priorities for both programs are taking into consideration. Head Start grantee representatives were able to provide input.

(required) State agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals and process:

In collaboration with New Mexico Children, Youth and Families Department (CYFD), Human Services Department (HSD), Medicaid programs, is implementing an evidence-based home visiting pilot project for eligible pregnant women that focuses on pre-natal care, post-partum care and early childhood development. The goal is to ensure that families served by the CYFD eligible Home Visiting programs received Medicaid required services including:

- Diet and nutritional education;
• Tobacco use screening and cessation education;
• Alcohol and other substance misuse screening and counseling;
• Depression screening;
• Domestic and intimate partner violence screening and education;
• Breastfeeding support and education (NFP may refer beneficiaries out to a lactation specialist, but the lactation consultant services are not covered as a home-visiting service);
• Guidance and education with regard to well woman visits to obtain recommended preventive services;
• Medical assessment of the postpartum mother and infant (NFP only);
• Maternal-infant safety assessment and education e.g. safe sleep education for Sudden Infant Death Syndrome (SIDS) prevention
• Timely and ongoing Immunizations
• Assistance for the family in establishing a primary source of care and a primary care provider (i.e. ensure that the mother/infant has a postpartum/newborn visit scheduled);
• Parenting skills and confidence building.

With CYFD overseeing the programmatic aspects of this program, the specific process for immunization and other related services will be part of the aligned early learning system.

☐ (REQUIRED) State agency responsible for employment services/workforce development.
Describe the coordination and goals and process:

CYFD has met with the Department of Workforce Solutions (DWS) to coordinate efforts on assisting families receiving child care assistance. To ensure our eligibility interviewers are knowledgeable of the comprehensive services offered by DWS, they have agreed to provide presentations to all eligibility interviewers and provide the eligibility interviewers with the opportunity to visit/tour their local one-stop center within their community. To provide employment resources offered by DWS to our child care assistance families, the DWS mobile unit will be scheduled to set-up at four of our child care offices throughout the state on a quarterly basis.

☐ (REQUIRED) State/territory agency responsible for public education, including prekindergarten (PreK). Describe the coordination goals and process:

The Early Childhood and Literacy Programs (PED PreK, 619, Title I) at the Public Education Department (PED), the FIT program at the NM Department of Health (DOH), and the Early Childhood Services Division for Children, Youth and Families Department (CYFD) have developed a strategy of coordinated governance. This strategy places accountability for the Early Learning System across these three agencies. The membership for this Executive leadership group is comprised by executives from each agency as defined by each organization. The main focus of this structure is to create systems for management, leadership, planning, coordination, collaboration, alignment and data review related to the Early Learning System.

In addition, the Children, Youth and Families Department (CYFD) oversees PreK services offered for three and four year olds provided by community programs. The New Mexico Public Education Department (PED) is the New Mexico State agency that oversees the
PreK programs provided in the public schools. In New Mexico, the PreK program is collaboratively administered by CYFD and PED.

(REQUIRED) State/territory agency responsible for child care licensing. Describe the coordination goals and process:
Children, Youth and Families Department, Early Childhood Services administers child care licensing and regulatory oversight. This organizational structure ensures the alignment and coordination of the Child Care Assistance, Regulatory Oversight and Quality, as they are all under the same umbrella.

(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:
CYFD is the lead agency for the USDA CACFP and other relevant programs. The funds provided through the Child and Adult Care Food Program (CACFP) help ensure eligible children and adults receive nutritious meals that meet USDA meal pattern requirements. Institutions eligible to participate in the program include school food authorities, local government entities, private non-profit organizations (such as faith-based organizations, Boys & Girls Clubs and community action agencies), Head Start programs and certain for-profit institutions that meet eligibility requirements. Through agreements with community-based non-profit organizations and eligible for-profit organizations, CACFP provides reimbursement to child care providers for nutritious meals and snacks served to low-income children in child care settings.

(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:
CYFD has met with the state McKinney-Vento liaison with the Public Education Department, to discuss access to child care services for homeless children. The goal of these conversations was to determine how to work together to improve access to child care for homeless children, and to ensure there is a communication process in place to address needs that arise for homeless children, and lastly, to build collaboration in addressing the needs of homeless children and their families.

(REQUIRED) State/territory agency responsible for the Temporary Assistance for Needy Families program. Describe the coordination goals and process:
CYFD been coordinating with the Human Services Department (HSD) liaison and the Deputy Cabinet Secretary, to improve access to child care for TANF clients. Through a series of meetings and negotiations, CYFD was able to improve access to HSD’s data management system for child care staff, and to minimize the number of hard copy documents clients were required to bring to their appointments with child care eligibility interviewers. This has resulted in a streamlined process that allows TANF clients to more quickly gain access to child care services for which they are eligible. CYFD continues to coordinate and collaborate with the New Mexico Human Services Department’s (NMHSD) on an ongoing basis. CYFD continues to work with HSD to improve data flow from HSD to CYFD in order to streamline processes and eliminate undue burden on TANF clients. NMHSD provides CYFD access to specific information in their database to verify approval status of TANF benefits, work participation requirements, additional benefits received by client, reported household composition and relationship between household members, absent parent summary, and reported income. CYFD has collaborated with NMHSD to ensure TANF clients are afforded the opportunity to be eligible for child care services for 12 months.
(REQUIRED) Agency responsible for Medicaid and the state Children’s Health Insurance Program. Describe the coordination goals and process:

In collaboration with New Mexico Children, Youth and Families Department (CYFD) and New Mexico Department of Health (DOH), Human Services Department (HSD), Medicaid programs, is implementing an evidence-based home visiting pilot project for eligible pregnant women that focuses on pre-natal care, post-partum care and early childhood development. The goal is to ensure that families served by the CYFD eligible Home Visiting programs received Medicaid required services including:

- Diet and nutritional education;
- Tobacco use screening and cessation education;
- Alcohol and other substance misuse screening;
- Domestic and intimate partner violence screening and education;
- Breastfeeding support and education
- Guidance and education with regard to well woman visits
- Maternal-infant safety assessment and education e.g. safe sleep education for Sudden Infant Death Syndrome (SIDS) prevention
- Timely and ongoing Immunizations
- Counseling regarding postpartum recovery, family planning, needs of a newborn;
- Assistance for the family in establishing a primary source of care and a primary care provider
- Parenting skills and confidence building.

With CYFD overseeing the programmatic aspects of this program, the specific process children’s participation in Medicaid and other related services will be part of the aligned early learning system.

(REQUIRED) State/territory agency responsible for mental health. Describe the coordination goals and process:

The Children’s Behavioral Health Services (BHS), serves children prenatal to age 18, the division is housed in the Children, Youth and Families Department. BHS is leading efforts for the BH Collaborative Children’s Behavioral Health Strategic Plan, integrating Behavioral Health Services for all ages throughout the state. Early Childhood Services has been meeting with BHS in facilitated focus groups to discuss and address the needs and experiences and provide recommendations for the children’s behavioral health system. During these meetings, the early childhood staff (including Child Care, PreK, Home Visiting, Quality) provided details about the different programs and the support needed (or available) for children and families with Social-Emotional/Mental Health Needs.

(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 Children, Youth and Families Department (CYFD), oversees the CCR&R. The New Mexico Kids Child Care Resource &Referral maintains a statewide database of child care providers that are licensed or registered by the Children, Youth and Families Department (CYFD), and continue to maintain their status with their respective regulatory agency. This database is used to provide referrals to anyone who requests referrals at no cost to either child care providers or referral clients. Child care providers share the information that is included in the database and that information is used to help refer families to providers that might meet the needs of
their children. Child care providers and their information appear on this list on a voluntary basis. The New Mexico Children, Youth and Families Department’s Comprehensive Early Learning Training and Consultation System supports programs across all early learning settings, ensuring that early childhood practitioners are highly effective in supporting the development and learning of each and every child served in early care and learning programs in New Mexico.

☑️ (REQUIRED) Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals and process:

New Mexico Afterschool Association Quality Committee is part of the New Mexico Out of School Time Network (NMOST), coordinated by PED. This group is working with CYFD in the development, piloting, providing feedback and revising the Out of School FOCUS criteria. This network as a non-profit collaboration of public and private organizations and community members. They bring together policymakers, educators, childcare providers, youth development workers, and other stakeholders interested in ensuring positive youth development opportunities and outcomes through Out of School programs.

☑️ (REQUIRED) Agency responsible for emergency management and response. Describe the coordination goals and process:

CYFD will be coordinating with the New Mexico Department of Homeland Security and Emergency Management (DHSEM) to ensure direction, support, and guidance to implement current national emergency management and homeland security strategies in early learning programs. This includes necessary training for consultants, coordinated efforts and ongoing communication.

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 Head Start Collaboration Office, the Child Care Quality Program, and the Children, Youth and Families Department Child Care Licensing Bureau support local partnerships between Early Head Start programs and child care programs to increase the number of infants and toddlers in high quality early learning programs. Early Head Start-Child Care Partners are being supported as they start participating in FOCUS-TQRIS.

☑️ State/territory institutions for higher education, including community colleges. Describe:

The Children, Youth and Families Department’s (CYFD) Office of Child Development (OCD) works collaboratively with the State Department of Education, New Mexico Department of Health, New Mexico Department of Labor, and higher education and community programs to establish a five-year plan for Early Care, Education and Family Support Professional Development. The OCD was created by statute in 1989, funded July of 1990, and became operational in November 1990. Since 1990, CYFD coordinates the New Mexico Higher Education Taskforce. The Taskforce has one representative from each university and college in New Mexico responsible for providing coursework to early childhood professionals following the New Mexico Early Childhood Career Path.

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

Early Childhood Services works in collaboration with CYFD’s Juvenile Justice Services
(JJS) Division to ensure that involved youth who are parents, have the necessary supports from early learning programs and contribute to a successful positive outcome for both the youth and their child. This includes recruitment-outreach, cross training, child care services and support for the child care setting serving families with youth involved in the JJS system.

- **State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant.** Describe:
  
  In 2009, New Mexico’s Children, Youth and Families Department (CYFD) was designated as the "lead agency" for Home Visiting. Rather than adopt a single existing model of Home Visiting, the CYFD led a process to review Home Visiting research and best practices to establish long-term outcomes and program standards that could provide a common framework of service delivery and accountability across all programs. The New Mexico Home Visiting Program is administered by the CYFD in accordance with the New Mexico Home Visiting Accountability Act (2013, Chapter 118). According to the New Mexico Home Visiting Accountability Act, "home visiting" is defined as a program strategy that delivers a variety of informational, educational, developmental, referral and other support services for eligible families who are expecting or who have children who have not yet entered kindergarten, and is designed to promote child well-being and prevent adverse childhood experiences. Part of this definition includes "comprehensive home visiting standards that ensure high quality service delivery and continuous quality improvement." New Mexico's Home Visiting program is funded through Federal (The Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) and State (State General Fund and TANF) funds. Regardless of the funding source, New Mexico Home Visiting Programs are required to follow the New Mexico Home Visiting Program Standards. The Home Visiting Programs are required to partner with community agencies and groups that may work with the same families to ensure collaboration, avoid duplication of services, and work with community partners to ensure each family's access to the necessary continuum of family support services.

- **Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment.** Describe:
  
  Health (including vision and hearing) and developmental (including social and emotional) screenings are incorporated in the FOCUS Criteria. Children, Youth and Families Department programs refer families to the local Human Services Department offices for assistance in accessing Medicaid Services, if needed. In addition, the Home Visiting Program works with the local and Regional Human Services Department offices for training and certification to become Presumptive Eligibility / Medicaid On-Site Application Assistance Determiners.

- **State/territory agency responsible for child welfare.** Describe:
  
  CYFD Early Childhood Services has been working on coordinating with New Mexico’s child welfare agency, also in the same department, the Protective Services Division (PSD) of CYFD. CYFD ECS has designed and implemented the At-risk Child Care program in partnership with CYFD PSD. During the past year this program has been implemented statewide and ECS has partnered with PSD to ensure it is managed and implemented responsibly and effectively. The goal is to ensure that the clients qualifying for child care are being engaged effectively. ECS is in the process of completing a statewide initiative to design and implement a warm hand-off protocol between child welfare and child care to assist in the engagement of child welfare...
clients. Fifteen of twenty-five child welfare offices are already collaborating with child care services in this warm hand-off process. ECS also continues to partner with PSD around the management of their PSD child care program.

☑️ State/territory liaison for military child care programs. Describe:
CYFD is currently working with the different New Mexico military bases liaisons to support and develop processes that will allow the Department to verify background clearances and ensure families receiving subsidies may continue to have the military child care programs as an option.

☑️ Provider groups or associations. Describe:
The Children, Youth and Families Department (CYFD) collaborates with the New Mexico Association for the Education of Young Children (NMAEYC), Asociación del Cuidado y Aprendizaje en Nuevo Mexico (NM Early Care and Education Association), BEFORE (Advocacy organization) New Mexico Child Care and Education Association (NMCCEA), the New Mexico Early Learning Advisory Council (NMELAC) throughout the year on many projects and conferences pertaining to Early Childhood and Public Policy. Each year the NMAEYC holds its annual conference and representatives from CYFD participate, provide presenters and keynote speakers, and translation services. This collaboration promotes the development of local alliances of early childhood professionals, parents, and community partners working together to create community networks of support for young children and their families.

☑️ Parent groups or organizations. Describe:
Representatives from Parents Reaching Out participate in The Children, Youth and Families Department's statewide efforts such as SpecialQuest, Early Learning Advisory Council, and Communication Stakeholder meetings in the collaboration and coordination of numerous important efforts. Parents Reaching Out is a non-profit organization that works with parents, caregivers, educators, and other professionals to promote healthy, positive and caring experiences for families and children.

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 funding for CCDF child care services with funding for any of the required programs listed 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, homeless children, 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 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 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 the 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).

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.
☐ 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

*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 child care program (98.55(f)).

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)? Check all that apply.

*Note:* The Lead Agency must check at least public and/or private funds as matching, even if preK funds also will be used.

☐ 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.
   o If checked, identify the source of funds: **State General Fund**
If known, identify the estimated amount of public funds that the Lead Agency will receive:

<table>
<thead>
<tr>
<th>Public-Private Partnerships</th>
<th>MOE</th>
<th>State Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>CCDF Required</td>
<td>$2,895,259</td>
<td>$2,895,259</td>
</tr>
<tr>
<td>State Matching</td>
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<td>$4,358,870</td>
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<tr>
<td>8% Quality</td>
<td>$5,339,572</td>
<td>$7,143,098</td>
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<tr>
<td>3% Infant/Toddler</td>
<td>$2,002,339</td>
<td>$8,775,453</td>
</tr>
</tbody>
</table>

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)).

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)).

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 section 7.6 to address how quality set-aside funds, if applicable, are used to support a statewide CCR&R system.
1.1.1 Does the Lead Agency fund a system of local or regional CCR&R organizations?

☐ No. The state/territory does not fund a CCR&R system 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 system?

The Children, Youth and Families Department (CYFD), oversees the CCR&R. The New Mexico Kids Child Care Resource & Referral maintains a statewide database of child care providers that are licensed or registered by the Children, Youth and Families Department (CYFD), and continue to maintain their status with their respective regulatory agency. This database is used to provide referrals to anyone who requests referrals at no cost to either child care providers or referral clients. Child care providers share the information that is included in the database and that information is used to help refer families to providers that might meet the needs of their children. Child care providers and their information appear on this list on a voluntary basis. The New Mexico Children, Youth and Families Department’s Comprehensive Early Learning Training and Consultation System supports programs across all early learning settings, ensuring that early childhood practitioners are highly effective in supporting the development and learning of each and every child served in early care and learning programs in New Mexico. The objectives in the agreement for NM Kids CCR&R system are as follows:

- Ensure staff are knowledgeable about child growth and development, elements of quality child care and best practices in the field of early care and education, are culturally sensitive and linguistically appropriate, able to understand different child care options, programs and finances, and are able to provide information about these topics through telephone consultation and by email.
- Maintain the National Association of Child Care Resource and Referral Agencies license (NACCRRAware) statewide server. This includes providing training and technical assistance when requested, maintaining the standard data collection available through NACCRRAware, and ensuring the accuracy of the information in the database.
- Provide consumer education regarding child care and referrals for child care services by establishing a comprehensive referral system that can be accessed through parental web search and through personal phone consultation.
- Continue the Warm Line functions by maintaining a centralized clearing house for families that includes information about community agencies, parent education and other appropriate information materials, and by establishing computer links to other appropriate sites. This includes IDEA Part B and Part C services provided to children.
- Maintain current information of licensed and registered child care programs listed on the referral database and county resources links that are listed on the New MexicoKids.org website.
- Advertise the New MexicoKids.org website and the statewide centralized resource and referral services to include virtual media options as a form of advertisement, press releases and other innovative marketing strategies; and report what means of advertisement have been explored and employed.
- Maintain an adequate inventory of child care resource and referral fliers, brochures and marketing materials.

b) How the CCR&R system is operated, including how many agencies and if there is a statewide network and how the system is coordinated.

The Children, Youth and Families Department has a financial agreement contract with the University of New Mexico's Continuing Education Department for statewide CCR&R
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)(I)(A)(i) of the Head Start Act (42 U.S.C. 9837b(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 Statewide Child Care Disaster Plan was developed in collaboration with Department of Homeland Security, New Mexico Human Services Department, New Mexico Department of Health, New Mexico Kids Resource and Referral Agency, New Mexico Tribal Liaison, Department of Defense, and Licensing staff. The Statewide Child Care Disaster Plan is complimentary to the departments’ and CYFD’s Continuity of Operations Plans (COOP), and works with the overall statewide mitigation, preparedness, and response and recovery activities provided by the New Mexico Emergency Operations Plan (EOP). By coordinating with local, state, and federal agencies, the plan assists New Mexico in minimizing the impact of disasters and emergencies on children, families, and Providers. The plan was developed by Davis Innovations, Inc. and CYFD, Early Childhood Services with guidance from the federal Office of Child Care and federal Emergency Management staff at the Administration for Children and Families.

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:

CYFD utilizes the Family Automated Tracking System (FACTS) to maintain accurate child care provider and subsidized family data. New Mexico maintains two (2) FACTS servers, one in Santa Fe, New Mexico and one in Albuquerque, New Mexico. All data is replicated minute-by-minute in both servers to ensure all provider, family and child data is collected and accessible during and after a disaster. The FACTS data integrity ensures continuing payments to providers in the event of a disaster. The "Fail Over to the Disaster Recovery" site ensures the availability of the central databases if a disaster occurs at the site where the central databases are housed. The CYFD has policies in place to pay child care providers on a monthly basis, according to standard practice for the child care industry. Payment is based upon the child’s enrollment with the provider as reflected in the child care services.
placement agreement, rather than daily attendance. CYFD also has policies to allow for temporary absences. During a disaster, in order to continue services to families who are unable to submit necessary documentation at the time of eligibility re-determination, CYFD will accept handwritten verification from the families certifying their need for care and may follow-up at a later time to verify accurate information was provided. CYFD has the capability to determine eligibility and create handwritten contract agreements in case of a system outage. Child Care Subsidy staff also have the capability to determine eligibility and create contract agreements at alternative sites outside of the regular office setting such as those locations set up as an emergency management facilities or through voluntary organizations. In addition, the need for services may be verified and approved through alternative methods such as phone conference if a person is unable to meet with Subsidy staff directly. In the event of an emergency, temporary operating standards may be granted to accommodate providers that need to relocate and/or provide temporary child care in alternate facilities, such as shelters. When temporary waiver provisions are needed, CYFD Licensing staff will provide the facility with a Waiver/Variance Request Form in order to relocate and provide temporary shelter for children. If a temporary unlicensed provider is needed, the licensing authority will verify the new location meets health and safety requirements, and provide a temporary license to the new provider. The Child Care Assistance staff determines eligibility and issues a contract agreement.

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

Management officials from agencies including, but not limited to, Emergency Management, Housing Authority, CYFD Licensing Authority, and Environmental and Public Health offices will assess damaged facilities and authorize the affected facility for continued use. Providers are responsible for immediately reporting to CYFD Licensing any damage to their facility, and for contacting the appropriate agencies to arrange for assessments. The FEMA Disaster Public Assistance (PA) Program for Child Care Services identifies services that are eligible for reimbursement during a federally declared major disaster and emergency. Specific information is provided in the FEMA Disaster Assistance Fact Sheet. The New Mexico All-Hazard Emergency Operations Plan (EOP) states “The Secretary of the Department of Homeland Security and Management is authorized to represent the state in all matters relating to emergency management and to coordinate state support and assistance during emergency or disaster events”. CYFD and FEMA regional offices will work together to clarify child care services that are available for reimbursement under the PA Grant Program. CYFD is familiar with the FEMA Disaster Public Assistance (PA) Program for Child Care Services, which identifies services that are eligible for reimbursement during federally declared major disasters and emergencies. This PA program includes, but is not limited to, reimbursement for the following costs: emergency sheltering, labor, facility, supplies and commodities, temporary relocation facilities, and repair, restoration, or replacement of public and private nonprofit facilities.

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 CYFD Statewide Licensing Department distributes a Disaster Planning Protocol for Licensed Child Care Centers to all licensed providers as a guideline to develop an individualized plan. CYFD licensing regulations include requirements for licensed providers to have an up to date emergency evacuation and a disaster preparedness plan, which shall
include steps for evacuation, relocation and reunification with parents, and individual plans for children with special needs. The plans are approved annually by the CYFD Licensing Department. In addition, CYFD licensing regulations require child care providers to prepare a parent handbook to communicate emergency procedures, safety policies and disaster preparedness plans.

The CYFD Disaster Planning Protocol for Licensed Child Care Centers, which is distributed to licensed and registered providers, includes a plan for evacuation, relocation, shelter-in-place and reunification with families, and accommodation of children with special needs.

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):

Pursuant to 8.16.2.23B(2)(a)(iii), 8.16.2.33 B (1)(g), 8.16.2.42 C (2)(f), and 8.17.2.10 G (7) NMAC, CYFD requires the directors of all licensed child facilities to develop and document an orientation and training plan for new staff members and volunteers, and to provide information on training opportunities. The provider/director will have on file a signed acknowledgment of completion of orientation by employees, volunteers and substitutes as well as the director. New staff members will participate in an orientation before working with children. In addition to other topics, the initial orientation will include training on the disaster preparedness plans. Pursuant to 8.16.2.29 H (1), 8.16.2.38 G (3), and 8.16.2.47 G (1) NMAC, CYFD requires providers to conduct emergency preparedness practice drills at least quarterly beginning January of each calendar year. The provider must keep a record of the emergency preparedness practice drills with the date, time, number of adults and children participating, and any problems encountered during the fire drill.

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

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 Describe how the Lead Agency or partners provide outreach and services to eligible families for whom English is not their first language

The Pulltogether.org is a movement and website dedicated to provide outreach to families and community partners including those whose language is not English in finding resources in their community. Through this process the Am I Eligible page-survey is created to assist families in identifying possible resources available and the eligibility possibilities.

2.1.2 Describe how the Lead Agency or partners provide outreach and services to eligible families with a person(s) with a disability:

If a person with a disability require information in an alternative format or require special
accommodations to participate in the child care program, they contact Early Childhood Services at 800-832-1321. Working with community partners such as DOH-Developmental Disabilities Supports Division (DDSD) as part of the Early Learning Governance Team, to assist with resources and outreach for persons with a disability that may need child care.

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:

A parent may submit complaints about child care providers by calling the State Centralized Intake at 1-855-333-SAFE (7233) or #SAFE from a cell phone; or the parent may call directly to their local child care office.

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

All complaints in which the health, safety, or welfare of a child could be in danger will be reviewed and prioritized immediately according to the nature and severity of the complaint. Established protocols and procedures for prioritizing, tracking, initiating and reporting of complaints and complaint investigations are followed. If a complaint is substantiated, CYFD will make the complaint part of the CCDF provider’s file and the following actions will, at the discretion of the licensing authority, be taken: require the CCDF provider to submit and comply with written corrective action plan; or sanction the CCDF provider administratively including, without limitation, suspension, revocation, or restriction of a license; or, file criminal charges or pursue civil remedies. Additional monitoring visits to the CCDF provider will be conducted to ensure correction of deficiencies cited in relation to the substantiated complaint.

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

All complaints in which the health, safety, or welfare of a child could be in danger will be reviewed and prioritized immediately according to the nature and severity of the complaint. Established protocols and procedures for prioritizing, tracking, initiating and reporting of complaints and complaint investigations are followed. If a complaint is substantiated, it will make the complaint part of the non-CCDF provider’s file and the following actions will, at the discretion of the licensing authority, be taken: require the non-CCDF provider to submit and comply with written corrective action plan; or sanction the non-CCDF provider administratively including, without limitation, suspension, revocation, or restriction of a license; or, file criminal charges or pursue civil remedies. Additional monitoring visits to the non-CCDF provider will be conducted to ensure correction of deficiencies cited in relation to the substantiated complaint.
2.2.4 Certify by describing how the Lead Agency maintains a record of substantiated parental complaints:

All complaints and incidents are entered into a centralized statewide database, which contains substantiated complaints and their priority levels. Documentation relating to substantiated complaints against a facility are kept with the local child care office, but are available for review by the public pursuant to an Inspection of Public Records Request. In addition, the health and safety monitoring surveys to include substantiated parental complaints are posted on the Children, Youth and Families Department website and made available to the public. There is a five year retention for all provider records.

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:

Substantiated complaint survey reports are posted on the www.newmexicokids.org website. Survey reports are maintained on the website for two years. There is a seven year retention for all records. Information may also be requested through the Children, Youth and Families Department pursuant to the Inspection of Public Records Act.

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)(ii)(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. Please note that any changes made to the web links provided below in this section after the CCDF Plan is approved are considered substantial changes and CCDF Plan Amendments will be required.
2.3.1 Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible:

Funded by the State of New Mexico Children, Youth and Families Department (CYFD), the NMKids CCR&R maintains a statewide database of child care providers that are licensed or registered by recognized regulatory agencies in New Mexico, and who continue to maintain their status with their respective regulatory agency. This database is used to provide courtesy referrals to anyone who requests them, at no cost to either child care providers or referral clients. Child care providers share the information that is included in the database, and this information is used to help refer families to providers that might meet the needs of their children.

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 NM Kids CCR&R also has information in Spanish available to parents, providers, and the general public.

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

The NM Kids CCR&R provides information via phone and offers accommodations for persons with disabilities. CYFD also provides parents information about the full diversity of child care services through the intake process meetings with front line personnel, and through the CYFD websites: www.cyfd.org and www.newmexikokids.org.

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:

http://164.64.110.239/nmac-parts/title08/08.016.0002.htm

http://164.64.110.239/nmac-parts/title08/08.017.0002.htm - NMAC TITLE 8 SOCIAL SERVICES
CHAPTER 17 NON-LICENSED CHILD CARE - PART 2 REQUIREMENTS GOVERNING REGISTRATION OF NON-LICENSED FAMILY CHILD CARE HOMES

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

NMAC 8.16.2.17 - http://164.64.110.239/nmac-parts/title08/08.016.0002.htm

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 5.4.6:

http://164.64.110.239/nmac/parts/title08/08.008.0003.htm

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 should be searchable by ZIP Code.

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

https://www.newmexicokids.org/parents-and-families/childcare-search/ccnr/

b) Which providers are included in the searchable list of child care providers:

- [x] Licensed CCDF providers
- [x] Licensed non-CCDF providers
- [x] License-exempt center-based CCDF providers
- [x] License-exempt family child care (FCC) CCDF providers
- [x] License-exempt non-CCDF providers
- [ ] Relative CCDF child care providers
- [x] Other. Describe: PreK Programs in Private centers and Public Schools

c) Describe what information is available in the search results. Specify if the information is different for different types of providers:

- PROGRAM INFORMATION: Name, Address and Phone Number, Email Address and if available, website
- LICENSE INFORMATION: License ID, Inspection Reports
- TYPE OF CARE: Center, Home, FCC, etc.
- MEALS CACFP Yes/No what Meals are provided
- FINANCIAL ASSISTANCE (Including Child Care Assistance Program)
- ANIMALS / PETS
- TRANSPORTATION
- QUALITY RATING – STAR Level
- AGES SERVED
- HOURS OF OPERATION
- SCHEDULE
- ENVIRONMENT
- SPECIAL NEEDS
- LANGUAGES
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
   - ☐ Other. Describe:

b) For what types of providers are quality ratings or other indicators of quality available?
   - ☑ Licensed CCDF providers. Describe the quality information: STAR FOCUS Level
   - ☑ Licensed non-CCDF providers. Describe the quality information: 5 STAR Accredited Program
   - ☐ License-exempt center-based CCDF providers. Describe the quality information:
   - ☐ 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.

Certify by describing:

a) How monitoring and inspection reports are in plain language. Include a website link to a sample monitoring report, or if reports are not in plain language, describe how plain-language summaries are used to meet the regulatory requirements. Include a link to a sample report and summary.

The newmexcikids.org website provides a link for parents to search the Children, Youth and Families Department SansWrite Public Portal to review any provider’s most recent site survey inspection report. The surveys are updated upon the completion of each provider inspection and the report is posted on the newmexcikids.org website. Clearly outlined in plain language in the inspection report are the area(s) in which the provider was in non-compliance, what the deficiency is, and the corrective action plan with timeline for completion. Survey reports are maintained on the website for three
b) How monitoring and inspection reports and/or their plain-language summaries prominently display any health and safety violations, including any fatalities or serious injuries.

Prominently displayed on the right hand column is the compliance status of each regulation. Regulations that are found to be in non-compliance will be indicated as such. In plain language the survey will outline the health and safety violation, including any fatalities or serious injuries, that was found and the corrective action plan with timeline for completion.

c) The process for correcting inaccuracies in reports.

Upon completion of a monitoring visit, findings are discussed with the provider. Any inaccuracies will be addressed at that time, and corrections will be made to the report prior to obtaining signature and giving the provider a copy of the official written survey report. To ensure integrity of a report, any inaccuracies found later must be corrected through an amended survey. The report purpose will be entitle amended and the comment section will indicate which portion of the report is being amended. The amended report must be reviewed and signed by the provider.

d) The process for providers to appeal the findings in the reports, including the time requirements.

There is no official appeal to findings in the reports. Upon the completion of a monitoring visit, findings will be discussed with the provider or their representative. At such time, the provider has the opportunity to appeal the findings in the report.

e) 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.

The Children, Youth and Families Department (CYFD) posts all survey reports timely. CYFD defines timely as no later than 45 days upon completion of each provider inspection. On the 5th of each month, the supervisor receives a report outlining all pending surveys that must be made public on the SansWrite portal. The supervisor has 10 days from the receipt of the report to review and publicize each survey onto the SansWrite Public Portal which may be accessed at www.newmexicokids.org.

f) How many years of reports that the state/territory posts on its website, if any, beyond the required minimum of 3 years, where available (98.33(a)(4)(iv)).

Survey reports are maintained on the www.newmexicokids.org website for three years.

g) The policy for removing reports after a certain amount of time has passed (e.g., after 7 years).

There is a seven year retention for all records. Information may also be requested through the Children, Youth and Families Department pursuant to the Inspection of Public Records Act.

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. The information on serious injuries and deaths should be organized by category of care and licensing status, however, Lead Agencies are not required to breakdown the instances of substantiated child abuse by category of care and licensing status.

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 Children, Youth and Families Department tracks number of deaths, number of serious injuries and incidences of substantiated child abuse in child care settings. All complaints and incidents are entered into a centralized statewide database, which contains complaints and their priority levels. The aggregate information regarding injuries or deaths of children occurring in child care is provided on an annual basis on our NM Kids website.

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

The Children, Youth, and Families Department defines “substantiated child abuse” as any act or failure to act, performed intentionally, knowingly or recklessly, which causes or is likely to cause harm to a child, including: physical contact that harms or is likely to harm a child; inappropriate use of physical restraint, isolation, medication or other means that harms or is likely to harm a child; and an unlawful act, a threat or menacing conduct directed toward a child that results or might be expected to result in fear or emotional or mental distress to a child.

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

The Children, Youth, and Families Department defines “serious injury” as the death of a child or accident, illness, or injury that requires treatment by a medical professional or hospitalization.

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

This aggregate information is provided on an annual basis on www.newmexicokids.org website.

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:

The UNM New Mexico Kids is the statewide Resource and Referral Agency. Newmexicokids.org is the Consumer Education Website under the Parents and families page: https://www.newmexicokids.org/parents-and-families/ and also the Resource and Referral Website: https://www.newmexicokids.org/parents-and-families/childcare-search/ccrnr/

2.3.10 The consumer education website should include information on how parents can contact the Lead Agency, 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:

https://www.newmexicokids.org/our-partners/ In this section users can find the program
information and the link to the website https://cyfd.org/child-care-services which contains all the contact information and description to the lead agency. In addition, all websites are linked to one-another, including Pulltogether.org for the Am I Eligible Survey: https://eligibility.cyfd.org/eligibility/public/survey/survey.page?dswid=-8372. This survey provides a quick and easy way for New Mexico residents to determine if they are eligible for any of the below programs:

- Child Care Assistance
- Home Visiting
- Pre Kindergarten
- Summer Food
- Boys & Girls Club
- Head Start
- Family Infant Toddler (FIT)

At the end of the survey, a list of possible programs with contact information (and in the case of Child Care, a referral to the Child Care, PreK and Home Visiting CYFD office and coming up an online application for Child Care Assistance).

2.3.11 Provide the website link to the Lead Agency’s consumer education website.
https://www.newmexicokids.org/parents-and-families/

2.4 National Website and Hotline
The CCDBG Act of 2014 required the U.S. Department of Health and Human Services to establish a national website at ChildCare.gov, which includes a ZIP Code-based search of available child care providers, provider-specific information about the quality of care and health and safety compliance, referrals to local CCR&R organizations, and information about child care subsidy programs and other financial supports available to families (658L(b)). Lead Agencies must also provide a description of how they will respond to complaints submitted through the national website and hotline (98.16(hh)).

2.4.1 Describe how the Lead Agency responds to complaints submitted through the national website and hotline regarding both licensed and license-exempt child care providers.

All complaints received in which the health, safety, or welfare of a child could be in danger will be reviewed and prioritized immediately according to the nature and severity of the complaint. Established protocols and procedures for prioritizing, tracking, initiating and reporting of complaints and complaint investigations are followed.

2.4.2 Identify the designee responsible for receiving and responding to complaints submitted through the national website and hotline.

The national website lists New Mexico’s statewide hotline number as well as the direct phone number to our four regional regulatory oversight offices. All staff are trained to receive, review and prioritize all complaint received in which health, safety, or welfare of a child could be in danger.

2.5 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 2.5.1 through 2.5.4, certify by describing:

2.5.1 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.  

Funded by the State of New Mexico Children, Youth and Families Department (CYFD), the New Mexico Kids Child Care Resource & Referral (NMKids CCR&R) maintains a statewide database of child care providers that are licensed or registered by recognized regulatory agencies in New Mexico, and who continue to maintain their status with their respective regulatory agency. This database is used to provide courtesy referrals to anyone who requests them, at no cost to either child care providers or referral clients. Child care providers share the information that is included in the database, and this information is used to help refer families to providers that might meet the needs of their children. The NM Kids CCR&R also has information in Spanish available to parents, providers, and the general public.

CYFD also provides parents information about the full diversity of child care services through the intake process meetings with front line personnel, and through the CYFD websites: www.cyfd.org, www.newmexickids.org, and www.pulltogether.org using the Am I Eligible app. The Am I Eligible app is an online survey in which a parent may take to learn about the Family Services programs for which he/she may be qualified. The eligibility survey currently screens for Child Care Assistance, Home Visiting, Pre-Kindergarten, Summer Food, Boys & Girls Club, Head Start, and the Family Infant Toddler program. All websites listed above link to each other. All help families find Child Care Centers, Preschool Programs, Head Start, New Mexico Pre-K, School Age Care, Faith Based Programs, Family In-Home Care, and other Family Resources.

The Children, Youth and Families Department has developed a booklet entitled "The Parents Guide to Selecting Quality Child Care," which is available to parents at child care assistance offices. Parents applying for child care assistance are also provided with a brochure on the services offered by the NMKids CCR&R office. A link to the NMKids CCR&R is clearly provided at www.NewMexicoKids.org and www.cyfd.org. Parents can search for child care online or by calling the NMKids CCR&R office at 1-800-691-9067. Parents may also access child care providers' inspection surveys on either website referenced above. Information in the websites listed above describes the state's TQRIS.

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

The Children, Youth and Families Department (CYFD) has established a large network of partners to facilitate the communication of child care options available through CYFD. These partners include the University of New Mexico, the New Mexico Public Education Department, the New Mexico Department of Health, and the New Mexico Human Services Department. Additional information can be found at http://www.earlylearningnm.org/.
2.5.3 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:**
  Information regarding TANF is shared with eligible parents through the child care intake process. Parents are also referred to the New Mexico Human Services Department (NMHSD) at [www.yes.state.nm.us](http://www.yes.state.nm.us). A link to the NMHSD website is also provided at [www.pulltogther.org](http://www.pulltogther.org).

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

- **Low Income Home Energy Assistance Program (LIHEAP):**
  Information regarding the New Mexico LIHEAP Program is shared with parents through the child care intake process. Parents are also provided LIHEAP information through the New Mexico Human Services Department (NMHSD) at [www.yes.state.nm.us](http://www.yes.state.nm.us). A link to the NMHSD website is also provided at [www.pulltogther.org](http://www.pulltogther.org).

- **Supplemental Nutrition Assistance Programs (SNAP) Program:**
  Information regarding the SNAP program is shared with parents through the child care intake process. Parents are also provided SNAP information through the New Mexico Human Services Department (NMHSD) at [www.yes.state.nm.us](http://www.yes.state.nm.us). A link to the NMHSD website is also provided at [www.pulltogther.org](http://www.pulltogther.org).

- **Women, Infants, and Children Program (WIC) program:**
  Information regarding WIC is shared with parents through the child care intake process. Parents seeking information on WIC are referred to the New Mexico Department of Health (NMDOH) website at [www.nmhealth.org](http://www.nmhealth.org).

- **Child and Adult Care Food Program (CACFP):**
  The Children, Youth and Families Department (CYFD) sends out a statewide news release containing information on food service participation, websites and phone numbers to call for additional information. CACFP receives information from child care licensing regarding new centers and homes, and CYFD staff work with new participants to ensure they have access to CACFP. In addition the Summer Food Service Program provides information on where the children can receive nutritious meals in the summer at various locations around the state. The Summer Food Service Program sends flyers home with children to give to parents to inform them of this service. The flyer contains websites and phone numbers to help parents identify the closest meal site.

  The link to FNB for the general information regarding summer food and CACFP can be located at [www.cyfd.org](http://www.cyfd.org).
Parents seeking information on summer food meal sites are referred to www.pulltogether.org.

Medicaid and Children’s Health Insurance Program (CHIP):
Parents seeking information on Medicaid and CHIP is shared with parents through the child care intake process. Parents are also provided Medical Assistance information through the New Mexico Human Services Department (NMHSD) at www.yes.state.nm.us. A link to the NMHSD website is also provided at www.pulltogether.org.

Programs carried out under Section 619 and Part C of the Individuals with Disabilities Education Act (IDEA)
The New Mexico Department of Health (NMDOH) manages IDEA Part C (Family Infant-Toddlers Program/FIT) and the New Mexico Public Education Department (NMPED) manages the IDEA Part B Section 619 activities. The NMDOH-FIT Developmental Wheels are available for families and include contact information for the local Part C Program. Parents seeking information on IDEA Part B Section 619 are referred to the NMPED Special Education Bureau website at http://ped.state.nm.us/ped/SEB_laws.html. In addition, the DOH- IDEA Part C (Family Infant-Toddlers Program/FIT), is a partner with the PullTogether “Am I Eligible” Survey. Eligibility staff have the website available to assist families identify if they may have a need for Part C services through the portal, they also teach families how to use this resource at interviews and outreach events.

2.5.4 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.

CYFD oversees the Child-Adult Care Food Program (CACFP), using USDA federal dollars to provide nutritious meals and snacks to low-income children in childcare centers and family childcare homes. The program promotes healthy eating, improved dietary quality, and decreased risk of overweight among children. Seeing that CACFP could be strengthened to more effectively improve children's nutrition and further reduce obesity, Family Nutrition Bureau collaborated in 2012 with the New Mexico Department of Health’s Healthy Kids, Healthy Preschool initiative. The initiative reached out to childcare centers and homes who voluntarily expressed a desire to develop a wellness policy which incorporates within their curriculum increased structured and unstructured physical activities. This initiative supports healthy family behaviors, eliminates confusion for parents by setting consistent standards, and strengthens partnerships between center and family.

More than 160 licensed childcare centers (including Head Start centers) have put into place wellness policies that increase opportunities for physical activity, decrease screen time, improve nutrition, and encourage staff wellness and family engagement. This year, four family engagement booklets have been developed by the Department of Health. These take-home booklets are entitled Family 5-2-1-0. Each child will be encouraged at home by the parent for one week to daily: eat 5 fruits and vegetables; decrease screen time to 2 hours or less; get at least 1 hour of physical activity; and, drink
lots of water. The curriculum covered in the classroom about fruits and vegetables, physical activities, screen time, and water will be reinforced at home with the Family 5-2-1-0 booklets. The child will then return the completed booklet signed by the parent to his teacher. Stickers and certificates will be awarded. Statistical analysis will be performed to evaluate the effectiveness of the new family engagement curriculum as to the effectiveness of positively changing eating habits and increasing physical activity.

The collaboration between departments is improving health outcomes for our New Mexico children in the childcare environment. Family Nutrition Bureau appreciates the free nutrition education, wellness policy, and family engagement training to our participating CACFP centers and homes as well as ongoing support provided by the Department of Health.

Also, the Children, Youth and Families Department has developed a booklet entitled "The Parents Guide to Selecting Quality Child Care," which is available to parents at child care assistance offices. Parents applying for child care assistance are also provided with a brochure on the services offered by the New Mexico Kids Child Care Resource and Referral (NMKids CCR&R) office. A link to the NMKids CCR&R is clearly provided at www.NewMexicoKids.org, www.cyfd.org, and www.pulltogether.org. Parents can search for child care online or by calling the NMKids CCR&R office at 1-800-691-9067.

2.5.5 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 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.

CYFD outlines requirements for licensed and non-licensed child care providers regarding providing a positive social-emotional responsive environment. Licensed and non-licensed providers must also have policies and procedures in place for expulsion of children which shall include how the provider will maintain a positive environment and will focus on preventing the expulsion children birth to five. The policies must include clear, appropriate, consistent expectations, and consequences to address disruptive children behaviors; and ensure fairness, equity, and continuous improvement. Licensed facilities must include the expulsion policy in their parent handbook and be shared with parents. These requirements are outlined in 8.16.2 and 8.17.2 NMAC and are monitored by the CYFD regulatory oversight unit for ongoing compliance.

2.5.6 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.

CYFD requires licensed and non-licensed providers to have policies and procedures in place for expulsion of children which shall include how the provider will maintain a positive environment and will focus on preventing the expulsion children birth to five. The policies must include clear, appropriate, consistent expectations, and consequences to address disruptive children behaviors; and ensure fairness, equity, and continuous improvement. Licensed facilities must include the expulsion policy in their parent
handbook and be shared with parents. These requirements are outlined in 8.16.2 and 8.17.2 NMAC and are monitored by the CYFD regulatory oversight unit for ongoing compliance.

CYFD Shares this information with the following:
Parents: The Communications workgroup for the New Mexico Pyramid Partnership is developing parent materials that explain and provide guidance for parents for strategies that promote the social emotional competence of children birth to age five in the context of nurturing relationships.
Providers: Through FOCUS/TQRIS, consultation and training is being provided in the implementation of the evidenced based practices developed by the Center on the Social Emotional Foundations of Early Learning (CSEFEL).
General public: The New Mexico Pyramid Partnership has adopted the evidenced based practices developed by the Center on the Social Emotional Foundations of Early Learning (CSEFEL). The pyramid framework developed by CSEFEL is used to promote the social emotional competence of children from birth to age five in the context of nurturing relationships and quality learning environments. The Pyramid framework also provides strategies to prevent and address the challenging behavior of young children and that help prevent children from being expelled from preschool.

2.6 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 Section 619 and Part C of the Individuals with Disabilities Education Act (IDEA), 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)).

2.6.1 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)).

The New Mexico Department of Health, Public Health Division, administers and coordinates the Early Childhood Comprehensive Systems (ECCS) grant for New Mexico. The ECCS goal is to build and integrate early childhood service systems that address the critical components of access to comprehensive health services and medical homes; social-emotional development and mental health of young children; early care and education; parenting education; and family support. The ECCS Grant concentrates on the developmental screening activities in early care and education settings statewide by connecting pediatric and other child health leaders with child care health consultants and child care providers to link training and referrals among medical homes, early intervention services, child care programs, and families. The target service population is children from birth to age three.
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.).

Health (including vision and hearing) and developmental (including social and emotional) screenings are incorporated in the FOCUS Criteria. Children, Youth and Families Department programs refer families to the local Human Services Department offices for assistance in accessing Medicaid Services, if needed. In addition, the Home Visiting Program works with the local and Regional Human Services Department offices for training and certification to become Presumptive Eligibility / Medicaid On-Site Application Assistance Determiners.

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 Children, Youth and Families Department’s intake offices have available computers and provide technical assistance to families in how to access the “Am I Eligible” portal through PullTogether.org, in this website, families can find resources and information related to development screenings including referral process in the event of a developmental concern.

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 Children, Youth and Families Department’s intake offices have available computers and provide technical assistance to families in how to access the “Am I Eligible” portal through PullTogether.org, in this website, families can find resources and information related to development screenings including referral process in the event of a developmental concern.

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

The FOCUS - TQRIS Essential Elements of Quality, require that children entering the program, and following the established schedule, receive a Well Child Check according to the Academy of Pediatric Schedule and an age-specific developmental screening. The Children, Youth and Families Department (CYFD) partners with the New Mexico Department of Health (NMDOH) in the training and implementation of the Ages and Stages (ASQ) and ASQ Social Emotional screening tools in early childhood programs. Procedures, including timelines for when infants, toddlers and preschoolers should be screened through the FOCUS-TQRIS Essential Elements of Quality program, require that children entering the program follow the established schedule, receive a Well Child Check according to the Academy of Pediatric Schedule and an age-specific developmental screening.

CYFD partners with NMDOH in the training and implementation of the Ages and Stages (ASQ) and ASQ Social Emotional screening tools in early childhood programs. The New Mexico PreK and Early PreK Standards require that PreK and Early PreK-funded child care programs conduct a developmental screening prior to the third month of the program’s start date. The programs are also required to perform
screenings for vision, hearing, dental, and a general physical within the first month of the program. These additional screenings may be done by the child care program; however, parents are often referred to local resources to have the screenings done. Programs are monitored to determine whether the screenings are completed for each child. CYFD recommends that programs consider using Ages and Stages as a developmental screening tool because it involves parents in the process.

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

8.16.2.24 – E (1), 8.16.2.34 – E (1), 8.16.2.43 – E (1).

2.7 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.

2.7.1 Certify by describing:

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

CYFD provides parents receiving CCDF funds are provided with a consumer statement in a hard copy.

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

Included in the consumer statement is clients right to select a provider of their choice and the contact information for New Mexico Kids Resource and Referral to seek assistance in selecting a child care provider. In addition, the consumer statement includes the website, www.pulltogether.org, in which the client may find additional information about child care provider to include, the health and safety compliance history, date the provider was last inspected, and providers quality star level. The consumer statement also includes how to submit a complaint through the child abuse and neglect hotline. The consumer statement is provided upon intake and each recertification.

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

CYFD’s consumer statement reads as follows:

You have the right to select a provider of your choice. Visit www.pulltogether.org or call New Mexico Kids Resource and Referral at 505.277.7900 in Albuquerque or 1.800.691.9067 statewide for a list of providers. To view health and safety requirements met by the provider, please visit www.pulltogether.org. Any concerns regarding your child care provider, to include abuse or neglect, please call #SAFE (#7233) from a cell phone, or 1.855.333.SAFE, or contact your local child care office.
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, 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 6 weeks (weeks/months/years) to 12 years (through age 12). 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 ages 13 and older but below age 19 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 or mental incapacity:

The Children, Youth and Families Department defines physical or mental capacity as a child with a medically documented condition, which results in physical or mental incapacity requiring care and supervision by an adult. Special Supervision: Child care benefits may be provided to children between the ages of thirteen and eighteen, not to exceed 19, who are under the supervision of a court of law, or who are determined by a medical professional to require supervision because of a diagnosis of a physical, emotional, or neurobiological impairment, or who are physically or mentally incapable of caring for themselves. Children with special needs are prioritized relative to budget availability.
c) Does the Lead Agency allow CCDF-funded child care for children ages 13 and older but below age 19 who are under court supervision (658P(3); 658E(c)(3)(B))?

☐ No
☒ Yes, and the upper age is 18 (may not equal or exceed age 19).

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

"residing with":

The Children, Youth and Families Department defines "residing with" as living in a household, which provides shelter and care for a child during the non-working hours of the child's parent(s) or guardian(s).

"in loco parentis":

The Children, Youth and Families Department defines "in loco parentis" as a blood relative or legal guardian who have taken custody/guardianship of children.

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 Children, Youth and Families Department (CYFD) Child Care Assistance requirements defines "working" as employment of any type, including self-employment. For TANF recipients, this includes work experience and/or community service or any other activity that meets the TANF work activity requirements. CYFD will reimburse for care provided for as little as an average of 5 or less hours per week per month.

“Job training”:

The Children, Youth and Families Department (CYFD) Child Care Assistance requirements defines "job training and educational program" as participation in a short or long term educational or training program which provides specific job skills which allow the participant to enter the workforce and/or directly relate to enhancing job skills, including but not limited to the acquisition of a general equivalency diploma (GED), English as a second language, literacy training, vocational education training, secondary education including adult basic education and accredited high school programs, and post-secondary institutions. CYFD will reimburse for care provided for as little as an average of 5 or less hours per week per month.

“Education”:

The Children, Youth and Families Department (CYFD) Child Care Assistance requirements defines "job training and educational program" as participation in a short or long term educational or training program which provides specific job skills which allow the participant to enter the workforce and/or directly relate to enhancing job skills, including but not limited to the acquisition of a general equivalency diploma (GED), English as a second language, literacy training, vocational education training, secondary education including adult basic education and accredited high school programs, and post-secondary institutions. The Department will reimburse for care provided for as little as an average of 5 or less hours per week per month.

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, define the job-search time limit, keeping in mind a minimum of 3 months is required to be provided when a parent experiences a non-temporary loss or cessation of eligible activity:

The Children, Youth and Families Department (CYFD) Child Care Assistance requirements defines "job training and educational program" as participation in a short or long term educational or training program which provides specific job skills which allow the participant to enter the workforce.

c) Does the Lead Agency consider engaging in a job search or seeking employment an eligible activity at initial eligibility determination (at application) and at the 12-month eligibility redetermination (must provide a minimum of 3 months)?

☐ No.
☒ Yes. If yes, describe the policy or procedure.

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”:

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.

The Children, Youth and Families Department (CYFD) defines "Protective services child care" as child care services for children placed in the custody of the Protective Services system throughout the state: Children Youth and Families Department, Protective Services Division, the New Mexico Tribal Child Welfare Programs, and out of state placements according to the Interstate Compact for the Placement of Children (placement referral through CFYD Protective Services Division). The department pays for “at-risk child care” as approved by the department. Child care benefits are provided for a minimum of six months to support the family. Income requirements and copayments are waived for clients in this priority. At-risk child care" means the program for families at-risk of child protective services involvement as determined by the department.

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

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

The Children, Youth and Families Department (CYFD) defines "Earned Income" as income received as wages from employment or as profit from self-employment. "Unearned Income" is defined as income in the form of benefits such as TANF, workmen's compensation, social security, supplemental security income; child support, pensions, contributions, gifts, loans, and grants, which does not meet the definition of earned income.

b) Provide the CCDF income eligibility limits in the table below. 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, 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)).

The Income eligibility limits are statewide.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a) 100% of SMI ($/Month)</th>
<th>(b) 85% of SMI ($/Month)</th>
<th>(c) (IF APPLICABLE) ($/Month) Maximum “Entry” Income Level if Lower Than 85% of Current SMI</th>
<th>(IF APPLICABLE) (% of SMI) [Divide (c) by (a), multiply by 100] Income Level if Lower Than 85% of Current SMI</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$3,291.67</td>
<td>$2,797.92</td>
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<td>N/A</td>
</tr>
<tr>
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<td>$3,194.58</td>
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<tr>
<td>5</td>
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<td>$4,313.75</td>
<td>$4,716.67</td>
<td>92.94%</td>
</tr>
</tbody>
</table>

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 U. S. Department of Housing and Urban Development 2017

e) What was the date that these eligibility limits in column (c) became effective? April 14, 2017

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

https://www.huduser.gov/portal/datasets/il/il17/HUD-sec8-FY17.pdf
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)(iii)).

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

The Children, Youth and Families Department (CYFD) certifies that family assets do not exceed $1,000,000 by having the family member check off “yes” or “no” to the applicable question on the Child Care Assistance Application.

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, please identify the policy or procedure:

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

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)). Examples include partnering with Head Start, prekindergarten, or other high-quality programs to create a package of arrangements that accommodates parent’s work schedules; providing more intensive case management for families with children with multiple risk factors; and including in the eligibility determination process a question about whether a child has an Individualized Education Program or Individual Family Service Plan. Describe the Lead Agency’s policies and procedures that take into consideration children’s development and learning and that promote continuity of care when authorizing child care services.

3.1.7 Graduated phase-out of assistance.

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.

Lead Agencies that establish initial family income eligibility below 85 percent of SMI must provide a graduated phase-out by implementing a two-tiered eligibility threshold, with the second tier of eligibility (used at the time of eligibility redetermination) to be set at:

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)).

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 level at 85 percent of SMI and, therefore, is not required to provide a graduated phase-out period.
- The Lead Agency sets the second eligibility threshold at 85 percent of SMI.
  - Describe the policies and procedures. Based on budget availability, new clients may be eligible based on 0% to 150% of the federal poverty level (FPL). Existing clients who recertify will maintain eligibility up to 200% FPL. New Mexico uses state funds to pay for clients who exceed 85% SMI up to 200% FPL.
  - Provide the citation for this policy or procedure. 8.15.2.9 NMAC Priorities for Assistance.

- The Lead Agency sets the second eligibility threshold 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 eligibility level for a family of three.
  - Describe how the second eligibility threshold:
    - Takes into account the typical household budget of a low-income family:
    - 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:
    - Reasonably allows a family to continue accessing child care services without unnecessary disruption:
    - Provide the citation for this policy or procedure:

b) Does the Lead Agency gradually adjust copays for families eligible under the graduated phase-out period?

- No
- Yes
  - If yes, describe how the Lead Agency gradually adjusts copays for families under a graduated phase-out. Copayments for families are based upon size and income of the household. Copayments increase as income
increases (not to exceed 200% of FPL).

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)).

Describe the Lead Agency’s policy related to the fluctuation in earnings requirement, including 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. Income eligibility for benefits is determined by the number of members in the household and the total countable gross earned and unearned income. Eligibility determinations will take into account irregular fluctuations of earnings to income based on the client’s individual circumstances. Income calculations may be averaged over a period of time to better reflect the household’s earnings.

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 Children, Youth and Families Department requests a driver's license or photo ID.

☒ Applicant’s relationship to the child. Describe:

The Children, Youth and Families Department requires proof of the applicant's relationship with the child and may include a birth certificate or other hospital record, paternity papers, or Human Services scans. To establish custody, CYFD requires a durable power of attorney, court order, or notarized statement.

☒ Child’s information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe:

The Children, Youth and Families Department requires the child's information for determining eligibility such as a birth certificate, numident, social security card, military ID, resident alien card, naturalization certificate, or Human Services Department scan.

☒ Work. Describe:

The Children, Youth and Families Department requires current proof of employment or participation in the TANF program.

☒ Job training or educational program. Describe:

The Children, Youth and Families Department requires current proof of participation in the TANF program or school schedule.

☒ Family income. Describe:
The Children, Youth and Families Department requires current proof of earned and unearned income: current check stubs, statement from employer, payroll history, divorce papers, unemployment benefit stubs, child support verification, worker's compensation stubs, suspension statement, rental income information, self-employment information, Human Services Department scans or Department of Labor scans, Social Security benefits and work study benefits.

- Household composition. Describe
  The Children, Youth and Families Department requires an application that lists all household members counted in the household composition.

- Applicant residence. Describe:
  The Children, Youth and Families Department requires proof of the applicant's residence such as Human Services Department scans or any document verifying physical address

- Other. Describe:
  N/A

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
  Eligibility determinations are made once all required documentation is provided. This includes in-person meetings or applications provided by mail, fax or scan. If a client does not have required documentation a notice of action is given to the client and the client has 14 days to provide the requested information. Clients may be given up to 30 days to provide information upon approval from CYFD. Once the client has provided all required documentation, the case worker will discuss rights and responsibilities and other policy requirements. This may be done through a scheduled appointment or by phone. The case worker will initiate an agreement to obtain signatures from the client and provider. All offices have the same procedures.

- Track and monitor the eligibility determination process

- Other. Describe
  In larger Children, Youth and Families Department offices, applicants are seen on the day they come into the office to apply. In smaller offices, applicants are seen on the same day but, in certain circumstances, may be required to make an appointment. If applicants have all the necessary documentation, they are approved immediately. If not, they are given 14 calendar days during which they can provide the information.

- 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:
   New Mexico Human Services Department

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

   • “Appropriate child care”:
     TANF defines "appropriate child care" as child care that is provided by a facility or an individual that is licensed or registered with CYFD, provides care and supervision to a child, meets the health and safety standards established by CYFD, is able to address the special needs of a child, provides care that meets the child's age and development, and is available during the recipients hours of work, education or training.

   • “Reasonable distance”:
     TANF defines "reasonable distance" as travel to a facility located in the community or surrounding community in which the TANF recipient resides, which takes into account parental or caretaker choice and availability of transportation.

   • “Unsuitability of informal child care”:
     TANF defines Informal child care that is deemed to be unsuitable based on The Children, Youth and Families Department's (CYFD) determination that the care and supervision does not meet the minimum health and safety standards established by CYFD.

   • “Affordable child care arrangements”:
     Affordable child care arrangements are defined as services that are subsidized by The Children, Youth and Families Department, or those arrangements that are not subsidized and are made directly with a facility or an individual by the parent or caretaker, taking into account parental or caretaker choice.

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

   - [x] In writing
   - [ ] Verbally
   - [ ] Other. Describe:
     The New Mexico Human Services Department administers TANF and is responsible for informing the parents.

d) Provide the citation for the TANF policy or procedure:
   NMAC 8.102.110 is the General Operating Policy for the TANF application process. NMAC 8.102.120 is the Eligibility Policy for Case Administration, and NMAC 8.102.460 is the Recipient Policy for Compliance Requirements.
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 will prioritize or target child care services for the following children and families.

a) How does the Lead Agency define “children with special needs” and include a description of how services are prioritized:

The Children, Youth and Families Department (CYFD) defines a child with special needs as a child with an identified disability, health, or mental health conditions requiring early intervention, special education services, or other specialized services and supports; or children without identified conditions, but requiring specialized services, supports, or monitoring. The Children, Youth and Families Department prioritizes child care services for children with special needs based on budget availability. Clients with children that have special needs are not placed on a waitlist.

b) How does the Lead Agency define of “families with very low incomes” and include a description of how services are prioritized:

The Children, Youth and Families Department defines low income as those families at are below 100% of FPL. These services are prioritized as a priority one B. If the number of eligible clients in this priority exceeds budget availability, the department may maintain a waiting list.

c) Describe how services are prioritized for children experiencing homelessness, as defined by the CCDF:

The Children, Youth and Families Department prioritizes children experiencing homelessness as a Priority one B. If the number of eligible clients in this priority exceeds budget availability, the department may maintain a waiting list.

d) Describe 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)):

The New Mexico Human Services Department determines eligibility for TANF and TANF Transitional Child Care. The Children, Youth and Families Department assists families who are transitioning off TANF if the client received TANF for at least one month in the past 12 months in order to qualify. Only clients whose TANF cases are closed at least in part due to increased earnings or loss of earned income deductions or disregards are eligible for priority two. Priority two clients do not have to meet income eligibility requirements during their 12 consecutive month period of eligibility for priority two child care.

3.2.2 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.

As outlined in 8.15.2 and 8.16.2 NMAC, The Children, Youth and Families Department (CYFD) allows providers a grace period of a maximum of 30 days to obtain an up-to-date immunization record or a public health division approved exemption from the requirement for homeless children and youth. CYFD will work with homeless families to obtain missing immunization records by coordinating with Homeless Education liaisons when appropriate.

b) Describe the procedures to conduct outreach for children experiencing homelessness (as defined by the CCDF) and their families.

Meetings are taking place with the New Mexico Coalition to End Homeless (NMCEH), a statewide association of agencies and individuals responsible for the system of housing and services. NMCEH is the Collaborative Applicant for New Mexico Balance of State Region for the federal Continuum of Care Homeless Assistance program. The purpose of the meetings are two-fold: to provide input in each other’s implementation plans and include processes for ongoing collaboration and communication.

In addition, The Children, Youth and Families Department (CYFD) is working with the New Mexico Public Education Department (NMPED), McKinney Vento representative to collaborate on providing outreach to New Mexico's homeless families. This includes posters, flyers, referrals, brochures, posting on CYFD/NMPED websites, and mutual webinars. New Mexico has two child care centers that target the homeless population. One in Albuquerque, NM and one in Las Cruces, NM.

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)).

3.2.3 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)(ii); 98.41(a)(1)(ii)(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 CCDF). Provide the citation for this policy and procedure.

As outlined in 8.15.2 and 8.16.2 NMAC, The Children, Youth and Families Department (CYFD) allows providers a grace period of a maximum of 30 days to obtain an up-to-date immunization record or a public health division approved exemption from the requirement for homeless children and youth. CYFD will work with homeless families to obtain missing immunization records by coordinating with Homeless Education liaisons when appropriate.

Children who are in foster care. Provide the citation for this policy and procedure.

The Children, Youth and Families Department (CYFD) Child Protective Services determines child care eligibility for foster care. As outlined in 8.15.2 and 8.16.2 NMAC, CYFD allows a 30 day grace period to comply with immunization requirements.
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)).

The Children, Youth and Families Department (CYFD) coordinates with the New Mexico Public Education Department Homeless Liaison and New Mexico Department of Health Immunization Program to provide support to help families with children receiving services during a grace period comply with immunization and other health and safety requirements. CYFD Licensing staff participate in the New Mexico Department of Health’s Vaccine Advisory Committee who provides recommendations annually in regards to the School and Daycare Immunization Requirements. Also, New Mexico Department of Health administers a Statewide Immunization Information System (NMSIIS). NMSIIS is a confidential, computerized repository of individual immunization records that integrates information from birth and death records, public and private health care providers, and parental records. CYFD has coordinated with New Mexico Department of Health to provide child care provider’s access to NMSIIS.

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; any changes in age, including turning 13 years old during the 12-month eligibility period; 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.

Eligibility period is based upon the client meeting all eligibility requirements, a 12-month certification period will be granted. Clients must recertify for services at the end of their eligibility period by complying with all requirements of initial certification.
The client will remain eligible if a temporary change of activity occurs.

b) How does the Lead Agency define “temporary change”?

The Children, Youth and Families Department (CYFD) defines a “temporary change of activity” as one of the following events that does not exceed three months: (1) limited absence from work for employed parents for periods of family leave (including parental leave) or sick leave; (2) interruption in work for a seasonal worker who is not working between regular industry work seasons; (3) student holiday or break for a parent participating in training or education; (4) reduction in work, training or education hours, as long as the parent is still working or attending training or education; and (5) cessation of work or attendance at a training or education program less than 90 days.

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

8.15.2.7 CC. NMAC and 8.15.2.11 B (3).

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:

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

   The Children, Youth and Families Department will discontinue assistance during the 12-month eligibility period if a parent experiences a non-temporary change in activity, the client will no longer be eligible to receive assistance if another activity is not obtained within the three-month grace period.
iv. Describe what specific actions/changes trigger the job-search period,
The Children, Youth and Families Department allots a family a three month grace period when a parent experiences a non-temporary change in activity. A non-temporary change in activity means the family has experienced a change in activity that does not meet the definition of a “temporary change in activity”. A temporary change of activity means one of the following events that does not exceed three months: (1) limited absence from work for employed parents for periods of family leave (including parental leave) or sick leave; (2) interruption in work for a seasonal worker who is not working between regular industry work seasons; (3) student holiday or break for a parent participating in training or education; (4) reduction in work, training or education hours, as long as the parent is still working or attending training or education; and (5) cessation of work or attendance at a training or education program less than 90 days.

v. How long is the job-search period (must be at least 3 months)?
The Children, Youth and Families Department allots a family a three month grace period when a parent experiences a non-temporary change in activity.

vi. Provide the citation for this policy or procedure.
8.15.2.7 O; 8.15.2.7 CC; and 8.15.2.11 B (4)

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:
  ii. Provide the citation for this policy or procedure:

☒ A change in residency outside of the state, territory, or tribal service area. Provide the citation for this policy or procedure:
8.15.2.14 C. (3) NMAC

☐ 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.

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:
       - ☒ Changes that impact the Lead Agency’s ability to contact the family. Describe:
       - ☒ Changes that impact the Lead Agency’s ability to pay child care providers. Describe:
         In the event funding is not available to continue paying families at the current FPL, including entry and exit and families need to go on waiting list.

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
   - ☒ Fax
   - ☒ In-person
   - ☐ Extended submission hours
   - ☐ 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. The Children, Youth and Families Department requires families to notify the department of changes that affect the need for care, which include but are not limited to any non-temporary change in activity, or household members moving in or out, within five business days of the change.

ii. Provide the citation for this policy or procedure. 8.15.2.13 G

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 in families 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 that information 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.

a) Describe 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. List relevant policy citations.

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

☒ Mail
☒ Email
☐ Online forms
☒ Fax
☒ In-person
☐ 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 3.1.4 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).

<table>
<thead>
<tr>
<th>Family Size</th>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lowest “Entry” Income Level Where Family Is First Charged Co-Pay (Greater Than $0)</td>
<td>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (a)?</td>
<td>The Co-Payment in Column (b) is What Percentage of the Income in Column (a)?</td>
<td>Highest “Entry” Income Level Before a Family Is No Longer Eligible</td>
<td>What Is the Monthly Co-Payment for a Family of This Size Based on the Income Level in (d)?</td>
<td>The Co-Payment in Column (e) is What Percentage of the Income in Column (d)?</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>N/A</td>
<td>N/A</td>
<td>0</td>
<td>N/A</td>
<td>0.00</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>451</td>
<td>7</td>
<td>1.6%</td>
<td>2,057.50</td>
<td>141.00</td>
<td>6.9%</td>
</tr>
<tr>
<td>3</td>
<td>551</td>
<td>8</td>
<td>1.5%</td>
<td>2,597.50</td>
<td>172.00</td>
<td>6.6%</td>
</tr>
<tr>
<td>4</td>
<td>701</td>
<td>11</td>
<td>1.6%</td>
<td>3,137.50</td>
<td>211.00</td>
<td>6.7%</td>
</tr>
<tr>
<td>5</td>
<td>801</td>
<td>12</td>
<td>1.5%</td>
<td>3,677.50</td>
<td>249.00</td>
<td>6.8%</td>
</tr>
</tbody>
</table>

b) What is the effective date of the sliding-fee scale(s)? 04/01/2018

c) Provide the link to the sliding-fee scale:
https://cyfd.org/docs/Copay_Table_Effective_April_2018__thru_March_2019_.pdf

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

3.3.2 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:

3.1.3 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:
  Co-payments for children in part-time care are determined based upon the block of time that the child is in care
☐ 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. The poverty level used by the Lead Agency for a family size of 3 is $
☒ 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.

  The department pays for at-risk protective services child care as approved by the department. Child care benefits are provided for a minimum of six months to support the family. Income requirements and copayments are waived for clients in this priority “At-risk child care” means a program for families at-risk of child protective services involvement as determined by the department.
☐ 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.

3.4.5 Does the Lead Agency 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:
  a) 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?
3.4.6 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? 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 describe.

☒ 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 3.1.5. Describe:

☒ Other. Describe:

Child care providers accept the rate the Children, Youth and Families Department (CYFD) pays for child care and are not allowed to charge families receiving child care assistance at a rate above the CYFD rate for the hours listed on the placement agreement.
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.

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 Placement Agreement is an agreement between CYFD, the parent or guardian, and the provider. Information included in the agreement includes: applicants demographic information, child(ren) name and date of birth, provider information, effective dates of agreement, priority type, number of hours of care and units of service approved, and parents co-pay responsibility. On the back side of the agreement, the parent or guardian and provider must sign acknowledgment of the terms and conditions contained in the agreement. The agreement is issued to parents after they have selected a provider of their choice. The parent or guardian of each eligible child has the option to select a provider of their choice.

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
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. 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:

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

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

iv. The process for accessing grants or contracts:

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

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

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

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. N/A

☐ 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

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)).

The Children, Youth and Families Department has licensing policies and procedures in place requiring providers to include in their parent handbook a statement to support family involvement that includes an open door policy, and unlimited access to their child's classroom and in the licensee's home where their child is located.

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:

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

☒ MRS
☐ Alternative methodology. Describe:
☐ Both. Describe:

4.1.2 Prior to developing and conducting the MRS or alternative methodology, the Lead Agency is required to consult with the (1) State Advisory Council or other state-designated cross-agency body if there is no SAC, local child care program administrators, local child care resource and referral agencies, and other appropriate entities and (2) organizations representing caregivers, teachers, and directors prior to developing and conducting the MRS or alternative methodology.

Describe how the Lead Agency consulted with the:

a) State Advisory Council or other state-designated cross-agency body:
The Children, Youth and Families Department consulted with the New Mexico’s Early Learning Advisory Council at their quarterly meeting prior to developing and conducting the MRS.

b) Local child care program administrators:
The Children, Youth and Families identified local child care program administrators and consulted with them prior to conducting the MRS.

c) Local child care resource and referral agencies:
The New Mexico Child Care Resource and Referral agency was part of the team to develop the MRS. The Child Care Resource and Referral also conducted the survey on behalf of the NM Children, Youth and Families Department

d) Organizations representing caregivers, teachers, and directors: The New Mexico Children, Youth and Families Department identified organizations representing caregivers, teachers, and directors such as NMAEYC and NMECLA and consulted with them prior to conducting the Market Rate Survey.

e) Other. Describe:

4.1.3 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 2018 market rate study analyzes the prices charged by child care facilities according to type of care (licensed centers, licensed group homes, licensed family homes, and registered homes); age of children served (infant, toddler, preschool, and school age); and geographic distribution (metropolitan or rural areas served).

Age categories are defined for the purpose of assigning child care provider reimbursement rates as follows: infant, 0-23 months; toddler, 24-35 months; preschool, 3-5 years old; school age, 6 years old and older. Metropolitan (metro) counties in New Mexico are Bernalillo, Doña Ana, Los Alamos, Sandoval, Santa Fe, San Juan and Valencia. All other counties are considered rural. Data was also analyzed by quality level. New Mexico’s licensed child care providers participate in FOCUS, a 5-STAR level Tiered Quality Rating and Improvement System (TQRIS) designed to ensure acceptance of children receiving subsidy in high quality settings. Reimbursement rates begin with 2 STAR providers and increase with each STAR level up to 5 STAR providers. FOCUS offers a 2+ STAR level rating for participating programs.
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 geographic distribution was conducted based on metropolitan or rural areas served. Metropolitan (metro) counties in New Mexico are Bernalillo, Doña Ana, Los Alamos, Sandoval, Santa Fe, San Juan and Valencia. All other counties are considered rural.

b) Type of provider. Describe: The 2018 market rate study analyzes the prices charged by child care facilities according to type of care: licensed centers; licensed group homes; licensed family homes; and registered homes.

c) Age of child. Describe: The 2018 market rate study includes age of children served. Age categories are defined for the purpose of assigning child care provider reimbursement rates as follows: infant, 0-23 months; toddler, 24-35 months; preschool, 3-5 years old; school age, 6 years old and older.

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

The 2018 market rate survey included data analyzed by quality level. New Mexico’s licensed child care providers participate in FOCUS, a 5-STAR level Tiered Quality Rating and Improvement System (TQRIS).

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. The Lead Agency must make the report with these results widely available no later than 30 days after completion of the report, including posting the results on the Lead Agency website. The Lead Agency must describe in the detailed report how the Lead Agency took into consideration the views and comments of the public.

The market rate survey will be available at www.NewMexicoKids.org website.

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)).

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).

The Market Rate Survey Report will be approved after public comment is received during the CCDF State Plan Public Hearing.

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

The draft market rate survey was posted on May 29, 2018.

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

The MRS will be available at www.NewMexicoKids.org website.

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

The Market Rate Survey Report will be approved after public comment is received during the CCDF State Plan Public Hearing.
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. If the Lead Agency conducted an MRS (only or in combination with an alternative methodology), also report the percentiles based on the most recent MRS. 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).

a) Infant (6 months), full-time licensed center care in the most populous geographic region
   Rate $720.00 per month/unit of time (e.g., hourly, daily, weekly, monthly)
   Percentile of most recent MRS: 71%

b) Infant (6 months), full-time licensed FCC home in the most populous geographic region
   Rate $566.98 per monthly unit of time (e.g., hourly, daily, weekly, monthly)
   Percentile of most recent MRS: 31%

c) Toddler (18 months), full-time licensed center care in the most populous geographic region
   Rate $589.55 per monthly unit of time (e.g., hourly, daily, weekly, monthly)
   Percentile of most recent MRS: 40%

d) Toddler (18 months), full-time licensed FCC care in the most populous geographic region
   Rate $463.50 per monthly unit of time (e.g., hourly, daily, weekly, monthly)
   Percentile of most recent MRS: 10%

e) Preschooler (4 years), full-time licensed center care in the most populous geographic region
   Rate $490.61 per monthly unit of time (e.g., hourly, daily, weekly, monthly)
   Percentile of most recent MRS: 10%

f) Preschooler (4 years), full-time licensed FCC care in the most populous geographic region
   Rate $411.62 per monthly unit of time (e.g., hourly, daily, weekly, monthly)
   Percentile of most recent MRS: 12%

g) School-age child (6 years), full-time licensed center care in most populous geographic region
   Rate $436.27 per monthly unit of time (e.g., hourly, daily, weekly, monthly, etc.)
   Percentile of most recent MRS: 35%

h) School-age child (6 years), full-time licensed FCC care in the most populous geographic region
   Rate $406.83 monthly per unit of time (e.g., hourly, daily, weekly, monthly)
   Percentile of most recent MRS: 27%

i) Describe how part-time and full-time care were defined and calculated.
   Full time care is an average of 30 or more hours per week per month; Part time 1 pays 75% of full time rate, care is an average of 8-29 hours per week per month; Part time 2 (only for split custody or in cases where a child may have two providers) pays 50% of full time rate, care is an average of 6-19 hours per week per month; Part time 3 pays 25% of full time rate, care is an average of 7 or less hours per week per month.
j) Provide the effective date of the current payment rates (i.e., date of last update based on most recent MRS). September 2016

k) Provide the citation or link, if available, to the payment rates.
   8.15.2. NMAC http://164.64.110.239/nmac/parts/title08/08.015.0002.htm

l) 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: The Children, Youth and Families Department (CYFD) pays a differential rate to providers who provide care during non-traditional hours as follows: 5% for 1-10 hours per week; 10% for 11-20 hours per week; and 15% for 21 or more hours per week
☐ Differential rate for children with special needs, as defined by the state/territory. Describe:
☐ Differential rate for infants and toddlers. Describe:
☐ Differential rate for school-age programs. Describe:
☐ Differential rate for higher quality, as defined by the state/territory. Describe: The Children, Youth and Families Department (CYFD) pays a differential rate to FOCUS providers achieving higher Star levels for full time care above the base reimbursement rates as follows: 2+ Star licensed centers, group homes and family homes for all age categories is $88.00; 3-Star licensed centers, group homes and family homes for all age categories is $100.00; 4-Star group and family homes for all age categories is $180.00; 4-Star centers for infant and toddler care is $280.00; 4-Star centers for pre-school care is $250.00; 4-Star centers for school-age care is $180.00; 5-Star group and family homes for all age categories is $250.00; 5-Star centers for infant and toddler care is $550.00; 5-Star centers for pre-school care is $350.00; 5-Star centers for school-age care is $250.00.
☐ 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 pursuant to 98.30(e)(1) is made available; the extent to which child care providers participate in the CCDF system; and any barriers to participation, including barriers related to payment rates and practices
   b) Describe how payment rates are adequate and have been established based on the most recent MRS or alternative methodology
As funding permits, the New Mexico Children, Youth and Families Department (NM CYFD) uses the most recent market rate survey when adjusting base rates. For ease of use and reference when raising base rates, the NM CYFD market rate survey is always categorized by age of child and care type, consistent with NM CYFD’s policy rate structure. To incentivize and increase access for the infant and toddler categories, rate increases are prioritized for these age groups if adequate funding does not permit increases for the older age groups.

When funding does not permit base rate increases up to the 75th percentile for the respective category, NM CYFD increases base rates to the extent possible

c) Describe how base payment rates enable providers to meet health, safety, quality, and staffing requirements under CCDF
   Base rates take into account the basic licensing requirements at a 2 STAR level as required by NM Regulations. All training and consultation is free of cost to the provider.

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
   The State pays a differential rate to provide incentive for child care programs to progress through the tiered quality rating improvement system. Utilizing the Provider Cost of Quality Calculator (PCQC), in addition to internal analysis, it was determined that the previous differential rates for quality were insufficient to cover the cost of quality. The current quality model is based on STAR level and age of children in that quality setting. The State believes that these differential rates properly reimburse child care providers for the quality care they provide to low income children.
   FOCUS is the Tiered Quality Rating and Improvement System for New Mexico

e) How co-payments based on a sliding fee scale reported in 3.4.1 are affordable (response provided in 3.4.6)
   Minimizing 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. In addition, Child care providers accept the rate the Children, Youth and Families Department (CYFD) pays for child care and are not allowed to charge families receiving child care assistance at a rate above the CYFD rate for the hours listed on the placement agreement.

f) Describe how Lead Agencies’ payment practices described in 4.5 support equal access to a range of providers
   CYFD pays child care providers on a monthly basis, according to standard practice for the child care industry. Payment is based upon the child’s enrollment with the provider as reflected in the child care placement agreement, rather than daily attendance. CYFD will pay full payment if child attends at least 85 percent of the authorized time approved on their child care placement agreement. This incentivizes providers to provide care for children in subsidy

g) Describe how and on what factors the Lead Agency differentiates payment rates. Check all that apply.
   - Geographic area. Describe:
   - Type of provider. Describe: Home, Center, etc.
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 describing the payment practices 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. If implemented describe the policy or procedure. N/A
- Paying within no more than 21 calendar days of the receipt of a complete invoice for services. If implemented describe the policy or procedure. N/A

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:
Paying based on a child’s enrollment rather than attendance. If implemented describe the policy or procedure.

The Children, Youth and Families Department (CYFD) pays child care providers on a monthly basis, according to standard practice for the child care industry. Payment is based upon the child's enrollment with the provider as reflected in the child care placement agreement, rather than daily attendance.

Providing full payment if a child attends at least 85 percent of the authorized time. If implemented describe the policy or procedure.

CYFD pays child care providers on a monthly basis, according to standard practice for the child care industry. Payment is based upon the child's enrollment with the provider as reflected in the child care placement agreement, rather than daily attendance. CYFD will pay full payment if child attends at least 85 percent of the authorized time approved on their child care placement agreement.

Providing full payment if a child is absent for 5 or fewer days in a month. If implemented describe the policy or procedure.

CYFD pays child care providers on a monthly basis, according to standard practice for the child care industry. Payment is based upon the child's enrollment with the provider as reflected in the child care placement agreement, rather than daily attendance. If authorized child care has not been used for five consecutive scheduled days without a reason such as illness, sudden death, or family medical emergency, payment may discontinue to the provider and the client will remain eligible for the remainder of the eligibility period. The provider or the client shall notify the department within three business days after the fifth day of non-attendance. Providers shall be paid through the 14th day following the first day of nonattendance provided the department was notified within the timeframe prescribed above. If the department is not notified within the prescribed timeframe, the provider shall be paid through the last date of attendance.

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. N/A

c) Reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies, which 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(I)(3)).

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).

The Children, Youth and Families Department (CYFD) pays 100% for full time care (30 or more hours per week per month); 75% of full time rate for Part-time 1 (8-29 hours per week per month); 50% of full time rate for Part-time 2 (6-19 hour per week per month is only for joint custody or in cases where a child may have two providers); and 25% of full time rate for Part-time 3 (7 or less hours per week per month).
Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure.

As outlined in 8.15.2 NMAC, providers may charge a registration/educational fee to a child care assistance family comparable to but not to exceed that charged to private pay families. The registration/educational fee shall be charged no more than once every six months and shall be limited to materials and supplies. If the department determines that the provider is charging fees that are unreasonable and pose an undue burden to child care assistance families, the department may suspend the child care assistance contract.

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:

As outlined in 8.15.2 NMAC, CYFD pays child care providers on a monthly basis, according to standard practice for the child care industry. Payment is based upon the child’s enrollment with the provider as reflected in the child care placement agreement, rather than daily attendance. As a result, most placements reflect a month of service provision and are paid on this basis. Payments are made by the 5th day of the following month. Payment rates are outlined in 8.15.2 NMAC to include differential rates according to the license or registration status of the provider, national accreditation status of the provider if applicable, and star level status of the provider 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:

CYFD’s child care assistance workers perform all casework functions, including the processing of payments and notifications of case actions on an ongoing basis. Ensuring that once all document is received, notification of action is provided within 14 days. Child care assistance workers notify clients and providers in writing of all actions, which affect services, benefits, or provider payments or status, citing the applicable policy.

f) The Lead Agency has a timely appeal and resolution process for payment inaccuracies and disputes. Describe:

The request for a fair hearing must be made in writing within 30 calendar days from the date the department took the adverse action affecting the claimant’s benefits. The department conducts the fair hearing within 60 calendar days of receipt of the letter requesting the hearing and notifies the claimant of the date of the hearing no less than 14 calendar days prior to the hearing. The hearing officer reviews all of the relevant information and makes a final decision within 30 calendar days of the hearing.

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 For each of the following types of providers, identify any shortages in the supply of quality child care providers, the data sources used to identify shortages, and the method of tracking progress to support equal access and parental choice.
   a) Children in underserved areas:
   b) Infants and toddlers:
   c) Children with disabilities (include the Lead Agency definition in the description):
   d) Children who received care during non-traditional hours:

   e) Other. Please describe any other shortages in the supply of high-quality providers.

Due to concerns expressed by child care bureau staff, child protection staff, and other community members and providers, we have organized a series of Pull Together meetings in the following New Mexico locations: Deming, Lordsburg, Taos, Santa Fe, Gallup, Alamogordo, and Roswell. Pull Together meetings have been requested for the following additional communities in New Mexico: Moriarty, Hobbs, and Carlsbad.

The purpose of these meetings is to get sister agencies together in the same room to conduct a community assessment around the child care services and needs, and to identify community-based strategies that might bolster recruitment efforts for child care providers. Interestingly, all of the communities that are identifying a need for additional child care providers and placements are in rural New Mexico.

In some of these communities, namely Deming and Lordsburg, community meetings were organized and marketed to invite potential interested parties to learn about how to become child care providers in their community of residence. These meetings were lightly attended and none of the interested applicants followed through with the application process.

In Gallup, participants decided to participate in a community-sponsored job fair. A multidisciplinary team including child care bureau staff sponsored a booth highlighting the need for more child care providers, providing information to those attending that expressed interest. A number of applicants followed through with the process to become providers.

Santa Fe and Taos determined that they would partner with the local child care centers providing care at the local high schools (GRADS programs), and would contact each of the registered homes to inquire about their interest in becoming licensed to increase their capacity.

In other communities such as Alamogordo and Roswell, a partnership with child welfare was developed to do joint recruitment. Child welfare was already recruiting for foster and adoptive parents. Child care is now being invited to participate in existing recruitment events and efforts to ensure inquiring community members can also choose to become child care providers to assist children in their community, should that be the best fit for them. This increased collaboration across rural New Mexico is also proving to be fruitful as child welfare staff learn that they can engage relatives of the children they are striving to protect these same children by engaging them to become child care providers for their relative children. Many child welfare offices across New Mexico are now instituting this strategy to help solve the challenge of too few child care providers.

4.3.2 Based on the analysis in 4.6.1, describe what method(s) is used to increase supply and to improve quality for the following.
a) Infants and toddlers. Check all that apply.
- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- ☒ Technical assistance support
- ☒ Recruitment of providers
- ☒ Tiered payment rates (as discussed in 4.3.2)
- ☒ Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
- ☐ Other. Describe:

b) Children with disabilities. Check all that apply.
- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- ☒ Technical assistance support
- ☐ Recruitment of providers
- ☒ Tiered payment rates (as discussed in 4.3.2)
- ☒ Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
- ☐ Other. Describe:

c) Children who receive care during non-traditional hours. Check all that apply.
- Grants and contracts (as discussed in 4.1.3)
- Family child care networks
- Start-up funding
- Technical assistance support
- ☐ Recruitment of providers
- ☒ Tiered payment rates (as discussed in 4.3.2)
- ☒ Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging
- ☐ Other. Describe:

d) Other. Check and describe:
- 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)
- Support for improving business practices, such as management training, paid sick leave, shared services, and leveraging. Describe:
- ☐ Other. Describe:
4.1.3 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?

New Mexico’s Children, Youth and Families Department (CYFD established Early Childhood Investment Zones in 2010. Since that time CYFD has prioritized funding for these communities when new funding streams have become available for early childhood services. A taskforce from the New Mexico Department of Health, Public Education Department, and Children Youth and Families Department used epidemiological data to compare levels of risk and resiliency across New Mexico’s communities to rank these geographical areas by levels of risk. Those with the highest aggregated need were identified as Investment Zones. These Early Childhood Investment Zones touch every region and every border of New Mexico, and range from frontier to urban population centers covering 11 counties and 35 school districts.

Data were gathered and analyzed from all New Mexico’s counties and school districts. The combined county and school district data allowed a broad look at indicators associated with health, family environment, poverty levels, child development, and factors that support literacy and school readiness. Also included were indicators related to school success, including graduation rates, resource investment at the school district level, and support for pregnant and parenting teens.

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.

The intent is that these communities establish community-specific capacity building, infrastructure development and comprehensive integrated early childhood care, health and education services in ways that can be used as models by other communities across the state. CYFD continues working with communities for capacity building, enhanced consultation and prioritization of funding and infrastructure.
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 child care services in the state/territory. States and territories may allow licensing exemptions, but they must describe how such exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care. Lead Agencies also must certify that there are in effect health and safety requirements applicable to providers serving CCDF children. 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 to ensure that providers are complying with the health and safety requirements.

This section covers licensing requirements, health and safety requirements and training, and monitoring and enforcement procedures to ensure that child care providers comply with licensing and health and safety requirements (98.16(n)) as well as exemptions (98.16(l)). This section also addresses group size limits; child-staff ratios; and required qualifications for caregivers, teachers, and directors (98.16(m)). Criminal background check requirements are included in this section (98.16(o)).

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 CCDF 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); 98.409(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory and note if 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)).

As outlined in 8.16.2 NMAC, The Children, Youth and Families Department (CYFD) has statutory authority to govern the licensing of public or private facilities and homes that provide care, education, services, and supervision to children less than 24 hours of any day, come within the statutory definition of “health facilities” set out in Section 24-1-2 (D) of the Public Health Act. Child care facilities operated by the federal government (military installations) are exempt from licensure. These facilities are required to maintain and submit copies of their Department of Defense certificate and Accreditation (if applicable) in order to receive CCDF funds.

5.1.2 Which providers in your state/territory are subject to licensing under this CCDF category? Check all that apply and provide a citation to the licensing rule.
Center-based child care. Provide a citation:
A center required to be licensed under regulations in 8.16.2.21 NMAC through 8.16.2.29 NMAC is one that provides care, education, services and supervision to children for less than 24 hours a day to children in a non-residential setting, and is not exempted from regulation under any of the exceptions listed in 8.16.2.9 NMAC.

Family child care. Provide a citation:
A private dwelling, such as a family child care home which provides care, services, and supervision to at least five but no more than six children for a period of less than 24 hours of any day, is required to be licensed under regulations in 8.16.2.31 NMAC through 8.16.2.38 NMAC.

In-home care. Provide a citation:

5.1.3 Are any providers in your state/territory that fall under this CCDF category exempt from licensing (98.40(2)(i) through (iv))? If so, describe exemptions based on length of day, threshold on the number of children in care, or any other factors applicable to the exemption.
- Center-based child care. If checked, describe the exemptions.
  Child care facilities operated by the federal government (military installations) are exempt from licensure.
- Family child care. If checked, describe the exemptions.
- In-home care. If checked, describe the exemptions.

5.1.4 Describe how any exemptions identified above do not endanger the health, safety, or development of children in:
- Center-based child care if checked in 5.1.3.
  These facilities are required to maintain and submit copies of their Department of Defense certificate and Accreditation (if applicable) in order to receive CCDF funds.
- Family child care if checked in 5.
  These facilities are required to maintain and submit copies of their Department of Defense certificate and Accreditation (if applicable) in order to receive CCDF funds.
- In-home care if checked in 5.1.3.

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.

- Licensed CCDF center-based care
  1. Infant
    - How does the State/territory define infant (age range):
      "Infant" is defined as a child age six weeks to 12 months.
2. Toddler

- How does the State/territory define toddler (age range):
  "Toddler" is defined as a child age 12 months to 24 months.
- Ratio: 6:1
- Group size: 12
- Teacher/caregiver qualifications:
  No credential required for licensing, minimum age 18. For Licensing requirements, within six months of employment, all educators must complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department (8.16.2.23 B (2) (b) NMAC).

3. Preschool

- How does the State/territory define preschool (age range):
  "Preschool" is defined as a child age 3 years to 5 years.
- Ratio: 14:1
- Group size: 28
- Teacher/caregiver qualifications:
  No credential required for licensing, minimum age 18. For Licensing requirements, within six months of employment, all educators must complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department (8.16.2.23 B (2) (b) NMAC).

4. School-age

- How does the State/territory define school-age (age range):
  "School-age" is defined as a child age 5 to 18 years.
- Ratio: 15:1
- Group size: 30
- Teacher/caregiver qualifications:
  No credential required for licensing, minimum age 18. For Licensing requirements, within six months of employment, all educators must complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department (8.16.2.23 B (2) (b) NMAC).
5. If any of the responses above are different for exempt child care centers, describe which requirements apply to exempt centers. Child care facilities operated by the federal government (military installations) are exempt from licensure. These facilities are required to maintain and submit copies of their Department of Defense certificate and Accreditation (if applicable) in order to receive CCDF funds.

6. Describe, if applicable, ratios, group sizes, and qualifications for classrooms with mixed age groups.
   - Infant Staffing - one adult to every six children or fraction of group thereof. Group size: 12
   - Toddler Staffing - one adult to every 12 children or fraction of group thereof. Group size: 24
   - Three through five years. Staffing - one adult to every 14 children or fraction thereof. Group size: 28
   - Six years and older. Staffing - one adult to every 15 children or fraction of group thereof. Group size: 30
   - If a center groups toddler’s ages 18 to 24 months with children ages 24 through 35 months, the staff/child ratio shall be maintained at one staff per six children. Group size: 12.
   No credential required for licensing, minimum age 18. For Licensing requirements, within six months of employment, all educators must complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department (8.16.2.23 B (2) (b) NMAC).

7. Describe the director qualifications for licensed CCDF center-based care.
   A child care center will have a director who is at least 21 years old and at a minimum the first of three AA-level Early Childhood Program Administration courses in the Early Childhood Program Administration career pathway: Program Management 1, or the National Administrator Credential (NAC) and successful completion in a Child Development/Early Childhood Education course; and at least two year of experience in an early childhood growth and development setting.

b) Licensed CCDF family child care provider
   1. Infant
      - How does the State/territory define infant (age range): "Infant" is defined as a child age six weeks to 12 months.
      - Ratio: 2:1
        A home licensed to provide care for six or fewer children will have at least one educator in the home at all times. A home licensed to provide care for more than two children under the age of two will have at least two educators in the home at all times.
      - Group size: 2
        A family child care home may not exceed more than 2 children under age 2. A home licensed to provide care for more than two children under the age of two will have at least two educators in the home at all times. In such case, the maximum group size is 4.
Teacher/caregiver qualifications:  
No credential required for licensing, minimum age 18. The primary educator will complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department prior to or within six months of employment. Educators working for a home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

2. Toddler  
- How does the State/territory define toddler (age range):  
"Toddler" is defined as a child age 12 months to 24 months.
- Ratio: 2:1  
A home licensed to provide care for six or fewer children will have at least one educator in the home at all times. A home licensed to provide care for more than two children under the age of two will have at least two educators in the home at all times.
- Group size: 2  
A family child care home may not exceed more than 2 children under age 2. A home licensed to provide care for more than two children under the age of two will have at least two educators in the home at all times. In such case, the maximum group size is 4.
- Teacher/caregiver qualifications:  
No credential required for licensing, minimum age 18. The primary educator will complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department prior to or within six months of employment. Educators working for a home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

3. Preschool  
- How does the State/territory define preschool (age range):  
"Preschool" is defined as a child age 3 years to 5 years.
- Ratio: 6:1  
A family child care home licensed to provide care for six or fewer children will have at least one educator in the home at all times.
- Group size: 6  
The maximum number of children allowed in a family child care home is 6. If the family child care home has 4 children under age 2 present, 2 is the maximum group size.
• Teacher/caregiver qualifications:
  No credential required for licensing, minimum age 18. The primary educator will complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department prior to or within six months of employment. Educators working for a home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

4. School-age

• How does the State/territory define school-age (age range):
  "School-age“ is defined as a child age 5 to 18 years.
• Ratio:
  6:1
  A family child care home licensed to provide care for six or fewer children will have at least one educator in the home at all times.
• Group size:
  6
  The maximum number of children allowed in a family child care home is 6. If the family child care home has 4 children under age 2 present, 2 is the maximum group size.

• Teacher/caregiver qualifications:
  No credential required for licensing, minimum age 18. The primary educator will complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department prior to or within six months of employment. Educators working for a home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

5. If any of the responses above are different for exempt family child care homes, please describe which requirements apply to exempt homes.
  Child care facilities operated by the federal government (military installations) are exempt from licensure. These facilities are required to maintain and submit copies of their Department of Defense certificate and Accreditation (if applicable) in order to receive CCDF funds.
c) In-home CCDF providers: N/A

1. Describe the ratios.
2. Describe the group size.
3. Describe the threshold for when licensing is required.
4. Describe the maximum number of children that are allowed in the home at any one time.
5. Describe if the state/territory requires related children to be included in the child-to-provider ratio or group size.
6. Describe any limits on infants and toddlers or additional school-age children that are allowed for part of the day.

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)).

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.)
   - CYFD requires providers to maintain a copy of the children’s up-to-date immunization record or a public health division approved exemption from the requirement.
   - List the citation for these requirements.
     8.16.2 and 8.17.2 NMAC
   - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
     N/A
   - Describe any variations based on the age of the children in care.
     N/A
   - Describe if relatives are exempt from this requirement.
     N/A
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.)
     CYFD requires child care providers to provide a crib for each infant. Cribs must meet federal standards and be kept in good repair. The provider will not use plastic bags or lightweight plastic sheeting to cover a mattress and will not use pillows in cribs. Children under the age of 12 months shall be placed on their backs when sleeping unless otherwise authorized in writing by a physician. Educators shall ensure that nothing covers the face or head of a child aged 12 months or younger when the child is laid down to sleep and while the child is sleeping. Educators must be physically available to sleeping children at all times. Children must not be isolated for sleeping or napping in an un-illuminated room unless attended by an educator. No child will be allowed to sleep in a playpen, car seat, stroller or swings.
   - List the citation for these requirements.
     8.16.2 and 8.17.2 NMAC
   - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
     N/A
   - Describe any variations based on the age of the children in care.
     This regulations are not applicable to providers who do not care for infants.
   - Describe if relatives are exempt from this requirement.
     N/A

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.)
     CYFD requires that all medications are labeled. A child care provider will keep all medications in a locked and identified container inaccessible to children and will refrigerate medications when necessary. If the refrigerator is inaccessible to children, medications do not need to be in a locked container in the refrigerator. Child care providers will give medication only with written permission from a parent or guardian, to be administered according to written directions from the prescribing physician. In the case of non-prescription medication, written instructions must be provided by the parent or guardian. For the purpose of this requirement only, non-prescription medications include sunscreen, insect repellent and diaper creams or other over the counter medications. With written authorization from the child’s parent or guardian, sunscreen and insect repellent may be shared. Diaper cream shall not be shared. A designated staff member will be responsible for giving medication to children. The designated staff member will ensure non-prescription and prescription medications have a label with the child’s name and the date the medication was brought to the facility. Providers must keep non-prescription and prescription medication in the original container with written instructions, including the name of medication, the dosage, and the hours and dates the child should receive the medicine. The designated staff member will keep and sign a written record of the dosage, date and time a child is given medication with the signature of the staff who administered the medication. This information will be provided to the parent or guardian who will initial/date acknowledgment of information received on the day the medication is given. When the medication is no longer needed, it shall be
returned to the parents or guardians or destroyed. The provider shall not administer expired medication.

- List the citation for these requirements.
  8.16.2 and 8.17.2 NMAC
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - CYFD requires licensed providers to have written policies and procedures for the handling of medications. These policies and procedures must be included in the parent and staff handbook. Parents and staff must sign acknowledgment that they have read and understand the handbook.
  - CYFD requires non-licensed providers to obtain written permission from a parent or guardian for the caregiver to administer medication prescribed by a physician or requested by the parent. The administration of medication must will be consistent with standards for parental consent.
- Describe any variations based on the age of the children in care.
  N/A
- Describe if relatives are exempt from this requirement.
  N/A

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.)
  CYFD requires child care providers to maintain a child’s record on each child with information on any allergies or medical conditions suffered by the child; the name and telephone number of two people to contact in the local area in an emergency when a parent or guardian cannot be reached (emergency contact numbers must be kept up to date at all times); the name and telephone number of a physician or emergency medical center authorized by a parent or guardian to contact in case of illness or emergency; a document giving the child care provider permission to transport the child in a medical emergency; and an authorization for medical treatment signed by a parent or guardian.
- List the citation for these requirements.
  8.16.2 8.17.2 NMAC
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  CYFD only requires one emergency contact in non-licensed homes.
- Describe any variations based on the age of the children in care.
  N/A
- Describe if relatives are exempt from this requirement.
  N/A

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.)
  A child care provider will keep the premises, including furniture, fixtures, floors, drinking fountains, toys and equipment clean, safe, and in good repair. Facilities and premises will be free of debris and potential hazards. In regards to electrical
cords and outlets, a child care provider will use U/L approved equipment only and will properly maintain this equipment. All electrical outlets within reach of children will be safety outlets or will have protective covers. Each child will have written permission from a parent or guardian before the child enters a pool. If a child care provider has a portable wading pool, they will drain and fill the wading pool with fresh water daily and disinfect pool before and after each use; will empty a wading pool when it is not in use and remove it from areas accessible to children; and will not use a portable wading pool placed on concrete or asphalt. If a child care provider has a built in or above ground swimming pool, ditch, fishpond or other water hazard; the fixture will be constructed, maintained and used in accordance with applicable state and local regulations; the fixture will be constructed and protected so that, when not in use, it is inaccessible to children; and when in use, children will be constantly supervised and the number of adults present will be proportional to the ages and abilities of the children and type of water hazard in use. A child care provider will enclose the outdoor play area with a fence at least four feet high and with at least one latched gate available for an emergency exit.

- List the citation for these requirements.
  8.16.2 and 8.17.2 NMAC

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - The use of multi-prong or gang plugs is prohibited only in licensed facilities.
  - Licensed Out-of-School-Time providers do not have requirements in regards to having safety outlets or having protective covers on electrical outlets within reach of children.
  - Child care centers must observe specific lower staff to child ratios for swimming pools more than two feet deep.
  - In non-licensed homes, the provider is only required to fence the outside play area when it is next to a highway, busy street, ditch or arroyo, hazardous area or when determined to be necessary for safety by the registered authority. The fence will have one latched gate for emergency exits.

- Describe any variations based on the age of the children in care.
  N/A

- Describe if relatives are exempt from this requirement.
  N/A

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.)
  Guidance will be consistent and age appropriate. Guidance shall be positive and include redirection and clear limits that encourage the child’s ability to become self-disciplined. The use of physical or mechanical restraints is prohibited unless due to documented emergencies or medically documented necessity. Child care providers are prohibited to use the following disciplinary practices: physical punishment of any type, including shaking, biting, hitting, pinching or putting anything on or in a child’s mouth; withdrawal of food, rest, bathroom access, or outdoor activities; abusive or profane language, including yelling; any form of
public or private humiliation, including threats of physical punishment; or unsupervised separation. Providers are required to provide a social-emotional responsive environment.

- List the citation for these requirements.
  8.16.2 and 8.17.2 NMAC

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - CYFD requires licensed providers to have written policies and procedures clearly outlining guidance practices. Providers give this information to all parents and staff who sign a form to acknowledge that they have read and understand these policies and procedures.
  - CYFD is more descriptive in the licensing requirements regarding how to provide a social-emotional responsive environment. CYFD requires educators to remain calm in stressful situations. Educators will be actively engaged with children. Educators will talk, actively listen and respond to children appropriately by responding to children’s questions and acknowledging their comments, concerns, emotions and feelings. Educators will help children communicate their feelings by providing them with language to express themselves. Educators will model appropriate social behaviors, interactions and empathy. Educators will respond to children that are angry, hurt, or sad in a caring and sensitive manner. Educators will make appropriate physical contact to comfort children who are distressed.

- Describe any variations based on the age of the children in care.
  N/A

- Describe if relatives are exempt from this requirement.
  N/A

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.)
  CYFD requires providers to maintain an up to date emergency evacuation and disaster preparedness plan, which shall include steps for evacuation, relocation, shelter in place, lock-down, communication, reunification with parents, individual plans for children with special needs and children with chronic medical conditions, accommodations of infants and toddlers, and continuity of operations. The plan shall be approved annually by CYFD and the department will provide guidance on developing these plans.

- List the citation for these requirements.
  8.16.2 and 8.17.2 NMAC
Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). Licensed providers are required to include the emergency evacuation and disaster preparedness plan in the parent and staff handbook. Parents and staff are required to sign acknowledgment that they have read and understand the handbook.

Describe any variations based on the age of the children in care. N/A

Describe if relatives are exempt from this requirement. N/A

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.)
CYFD requires providers to keep their premises, including furniture, fixtures, floors, drinking fountains, toys and equipment clean, safe, and in good repair. Facilities and premises will be free of debris and potential hazards. Materials dangerous to children must be secured in a manner making them inaccessible to children and away from food storage or preparation areas.
- List the citation for these requirements.
8.16.2 and 8.17.2 NMAC
- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
N/A
- Describe any variations based on the age of the children in care.
N/A
- Describe if relatives are exempt from this requirement.
N/A

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.)
CYFD requires providers who provide transportation to children to be responsible for the care of children from the time of pick up to delivery to a responsible adult. A provider will license all vehicles used for transporting children and will meet all applicable state vehicle laws. A child shall be transported only if the child is properly secured in a child passenger restraint device or by a safety belt. Vehicles used for transporting children will be enclosed and properly maintained. Vehicles shall be cleaned and inspected inside and out. No one will smoke in a vehicle used for transporting children. Children may be transported only in vehicles that have current registration and insurance coverage. All drivers must have current driver’s license and comply
with motor vehicle and traffic laws. Persons who have been convicted in the last seven years of a misdemeanor or felony DWI/DUI cannot transport children. At least one adult transporting children shall be currently certified in cardiopulmonary resuscitation (CPR).

- List the citation for these requirements.
  8.16.2 and 8.17.2 NMAC

- Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  - Licensed providers are required to obtain parent or guardian’s written permission to transport their child.
  - In licensed facilities, all vehicles used for transportation of children will have an operable fire extinguisher, first-aid kit, first-aid manual, water and blanket. Licensed providers are required to load and unload children at the curbside of the vehicle or in a protected parking area or driveway. The providers will ensure children do not cross a street unsupervised after leaving the vehicle.
  - School buses that are not equipped with passenger restraint devices are exempt from the passenger restraint requirements.
  - Vehicles operated by licensed center providers to transport children shall be air-conditioned whenever the outside air temperature exceeds 82 degrees Fahrenheit. If the outside air temperature falls below 50 degrees Fahrenheit the center will ensure the vehicle is heated.

- Describe any variations based on the age of the children in care.
  - Licensed center providers are required to have a second adult to accompany the driver of the vehicle when a center transports five or more children under age five years.
  - Passenger restraint requirements are specific to age:
    1. Children less than one year of age shall be properly secured in a rear-facing child passenger restraint device that meets federal standards, in the rear seat of a vehicle that is equipped with a rear seat. If the vehicle is not equipped with a rear seat, the child may ride in the front seat of the vehicle if the passenger-side air bag is deactivated or if the vehicle is not equipped with a deactivation switch for the passenger-side air bag.
    2. Children one year of age through four years of age, regardless of weight, or children who weigh forty pounds, regardless of age, shall be properly secured in a child passenger restraint device that meets federal standards.
    3. Children five years of age through six years of age, regardless of weight, or children who weigh less than 60 pounds, regardless of age, shall be properly secured in either a child booster seat or an appropriate child passenger restraint device that meets federal standards.
    4. Children seven years of age through 12 years of age shall be secured in a child passenger restraint device or by a seat belt.

- Describe if relatives are exempt from this requirement.
  N/A

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.)
  All educators in licensed facilities must be certified in first aid and cardiopulmonary resuscitation (CPR). Online first aid and CPR training will not be approved.
• List the citation for these requirements.
  8.16.2 and 8.17.2 NMAC
• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  N/A
• Describe any variations based on the age of the children in care.
  N/A
• Describe if relatives are exempt from this requirement.
  N/A

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.)
  CYFD requires providers to report abuse or neglect of a child immediately to children’s protective services and local law enforcement. After making a report to children’s protective services and local law enforcement, the provider shall notify the regulatory oversight unit as soon as possible but no later than 24 hours after the incident occurred. A report should first be made by telephone and followed with written notification.
• List the citation for these requirements.
  8.16.2 and 8.17.2 NMAC
• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
  • Additional requirements specific to licensed providers are as follows:
    • Maintain a record of observations of recent bruises, bites or signs of potential abuse or neglect, which must be reported to CYFD. Records will be kept at the facility for 12 months after the child’s last day of attendance.
    • Written child abuse/neglect reporting procedures. These procedures must be included in the parent and staff handbook. Parents and staff are required to sign acknowledgment that they have read and understand the handbook.
    • Licensed center directors will develop and document an orientation and training plan for new staff members and volunteers and will provide information on training opportunities. The director will have on file a signed acknowledgment of completion of orientation by employees, volunteers and substitutes as well as the director. New staff members will participate in an orientation before working with children. Initial orientation will include training on recognition of childhood illness and indicators of child abuse; policies regarding guidance, child abuse and neglect reporting, and handling of complaints.
b) The Lead Agency may also include optional standards related to the following:

1. Nutrition

   The Healthy, Hungry-Free Kids Act of 2010 (HHFKA), Public Law 111–96, amended section 17 of the Richard B. Russell National School Lunch Act (NSLA), 42 U.S.C. 1766, to require the U.S. Department of Agriculture (USDA), through the Child and Adult Care Food Program (CACFP), to promote health and wellness in child care settings via guidance and technical assistance that focuses on nutrition, physical activity, and limiting electronic media use. Specifically, it required USDA’s Food and Nutrition Service (FNS) to review the CACFP meal patterns and make them more consistent with: (a) The most recent version of the Dietary Guidelines for Americans (Dietary Guidelines), (b) the most recent and relevant nutrition science, and (c) appropriate authoritative scientific agency and organization recommendations. Revisions to the CACFP meal patterns are to occur no less frequently than every 10 years.

   - Provide a brief summary of how this standard is defined (i.e., what is the standard, content covered, practices required, etc.)
   - List the citation for these requirements.
   - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
   - Describe if relatives are exempt from this requirement.

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.)
   - CYFD requires licensed providers to provide full-time children a minimum of 60 minutes of physical activity daily, preferably outside. Part-time children shall have a minimum of 30 minutes of physical activity daily, preferably outside.
   - List the citation for these requirements.
   - Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
   - Describe if relatives are 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.)
   - All CYFD health and safety requirements apply to caring for children with special needs. Additional requirements include staff awareness of community resources for children with disabilities, and the family education rights and privacy act will be respected at all times. Staff awareness with ADA as it relates to enrolling and caring for children with special needs is required.
   - List the citation for these requirements.
• Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt). N/A
• Describe if relatives are exempt from this requirement. N/A

4. Any other areas determined necessary to promote child development or to protect children’s health and safety (98.44(b)(1)(iii)). Describe:
   N/A
   • Provide a brief summary of how the standard(s) is defined (i.e., what is the standard, content covered, practices required, etc.)
   • List the citation for these requirements.
   • Describe any variations by category of care (i.e., center, FCC, in-home) and licensing status (i.e., licensed, license-exempt).
   • Describe if relatives are exempt from this requirement.

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.

5.3 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:
      2. Licensed FCC
      3. In-home care:
      4. Variations for exempt provider settings:

   b) Provide the length of time that providers have to complete trainings subsequent to being hired (must be 3 months or fewer)

   All new educators regardless of the number of hours per week will complete the following training within three months of their date of hire. All current educators will have three months to comply with the following training from the date these regulations are promulgated:

      (i) prevention and control of infectious diseases (including immunization);
      (ii) prevention of sudden infant death syndrome and use of safe sleeping practices;
      (iii) administration of medication, consistent with standards for parental consent;
      (iv) prevention of and response to emergencies due to food or other allergic reactions;
      (v) building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of
water, and vehicular traffic;
  (vi) prevention of shaken baby syndrome and abusive head trauma;
  (vii) emergency preparedness and response planning for emergencies resulting from natural or man-caused disasters;
  (viii) handling and storage of hazardous materials and the appropriate disposal of bio contaminants;
  (ix) precautions in transporting children (if applicable);
  (x) first aid and cardiopulmonary resuscitation (CPR) certification; and
  (xi) recognition and reporting of child abuse and neglect

c) 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.
     NMAC 8.16.2.23.B.2.(b)(i)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     □ Yes
     ☒ No

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
   - Provide the citation for this training requirement.
     NMAC 8.16.2.23.B.2.(b)(ii)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     □ Yes
     ☒ No

3. Administration of medication, consistent with standards for parental consent
   - Provide the citation for this training requirement.
     NMAC 8.16.2.23.B.2.(b)(iii)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     □ Yes
     ☒ No

4. Prevention and response to emergencies due to food and allergic reactions
   - Provide the citation for this training requirement.
     NMAC 8.16.2.23.B.2.(b)(iv)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     □ Yes
     ☒ No

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.
  
  **NMAC 8.16.2.23.B.2.(b)(v)**

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised? □ Yes  
  ☒ No

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide the citation for this training requirement.
  
  **NMAC 8.16.2.23.B.2.(b)(vi)**

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised? □ Yes  
  ☒ No

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.
  
  **NMAC 8.16.2.23.B.2.(b)(vii)**

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised? □ Yes  
  ☒ No

8. Handling and storage of hazardous materials and the appropriate disposal of bio contaminants

- Provide the citation for this training requirement.
  
  **NMAC 8.16.2.23.B.2.(b)(viii)**

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised? □ Yes  
  ☒ No

9. Appropriate precautions in transporting children (if applicable)

- Provide the citation for this training requirement.
  
  **NMAC 8.16.2.23.B.2.(b)(ix)**

- Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised? □ Yes  
  ☒ No
10. Pediatric first aid and CPR certification
   - Provide the citation for this training requirement.
     NMAC 8.16.2.23.B.2.(b)(x)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     ☑ Yes
     ☐ No

11. Recognition and reporting of child abuse and neglect
   - Provide the citation for this training requirement.
     NMAC 8.16.2.23.B.2.(b)(xi)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     ☑ Yes
     ☐ No

12. Child development (98.44(b)(1)(iii))
   - Provide the citation for this training requirement.
     NMAC 8.16.2.23.B.2.(c)
   - Does the state/territory require that this training topic be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     ☑ No
     ☐ Yes

13. Describe other requirements
   - Provide the citation for other training requirements.
   - Does the state/territory require that this training topic(s) be completed before caregivers, teachers, and directors are allowed to care for children unsupervised?
     ☑ Yes
     ☐ No

5.4 Ongoing Training Requirements

5.4.1 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:
      24
   b) Licensed FCC homes:
      12
   c) In-home care:
      N/A
   d) Variations for exempt provider settings: N/A
5.4.2 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.
   8.16.2 and 8.17.2 NMAC
   • How often does the state/territory require that this training topic be completed?
     □ Annually.
     □ Other. Describe

   All new educators regardless of the number of hours per week will complete training in the prevention and control of infectious diseases (including immunization) within three months of their date of hire.

   Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

   Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

   Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

2. Prevention of sudden infant death syndrome and the use of safe-sleep practices
   • Provide the citation for this training requirement.
   8.16.2 and 8.17.2 NMAC
   • How often does the state/territory require that this training topic be completed?
     □ Annually.
     □ Other. Describe

   All new educators regardless of the number of hours per week will complete training in the prevention of sudden infant death syndrome and the use of safe-sleep practices within three months of their date of hire.
Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

3. Administration of medication, consistent with standards for parental consent

- Provide the citation for this training requirement.

8.16.2 and 8.17.2 NMAC

- How often does the state/territory require that this training topic be completed?
  - ☑ Annually.
  - ☐ Other. Describe

All new educators regardless of the number of hours per week will complete training in the administration of medication, consistent with standards for parental consent within three months of their date of hire.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be...
within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

4. Prevention and response to emergencies due to food and allergic reactions

- Provide the citation for this training requirement.

8.16.2 and 8.17.2 NMAC
- How often does the state/territory require that this training topic be completed?

☐ Annually.
☒ Other. Describe

All new educators regardless of the number of hours per week will complete training in the prevention and response to emergencies due to food and allergic reactions within three months of their date of hire.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.
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.

8.16.2 and 8.17.2 NMAC
- How often does the state/territory require that this training topic be completed?

☐ Annually.
☒ Other. Describe

All new educators regardless of the number of hours per week will complete training in building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic within three months of their date of hire.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

6. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment

- Provide the citation for this training requirement.

8.16.2 and 8.17.2 NMAC
- How often does the state/territory require that this training topic be completed?

☐ Annually.
☒ Other. Describe

All new educators regardless of the number of hours per week will complete training in the prevention of shaken baby syndrome, abusive head trauma, and child maltreatment within three months of their date of hire.
Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

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. 8.16.2 and 8.17.2 NMAC
- How often does the state/territory require that this training topic be completed?

☐ Annually.
☒ Other. Describe

All new educators regardless of the number of hours per week will complete training in emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event within three months of their date of hire.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.
Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

8. Handling and storage of hazardous materials and the appropriate disposal of bio-contaminants

- Provide the citation for this training requirement.
  8.16.2 and 8.17.2 NMAC
- How often does the state/territory require that this training topic be completed?
  ☑ Annually.
  ☐ Other. Describe

All new educators regardless of the number of hours per week will complete training in the handling and storage of hazardous materials and the appropriate disposal of bio-contaminants within three months of their date of hire.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5)
learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

9. Appropriate precautions in transporting children (if applicable)
   - Provide the citation for this training requirement.
   8.16.2 and 8.17.2 NMAC
   - How often does the state/territory require that this training topic be completed?
     □ Annually.
     ☒ Other. Describe
     All new educators regardless of the number of hours per week will complete training in the appropriate precautions in transporting children (if applicable) within three months of their date of hire.

   Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

   Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

   Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

10. Pediatric first aid and CPR certification
   - Provide the citation for this training requirement.
   8.16.2 and 8.17.2 NMAC
   - How often does the state/territory require that this training topic be completed?
     □ Annually.
     ☒ Other. Describe
All new educators regardless of the number of hours per week will complete training in pediatric first aid and CPR certification within three months of their date of hire.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

11. Recognition and reporting of child abuse and neglect

- Provide the citation for this training requirement.
  
  8.16.2 and 8.17.2 NMAC

- How often does the state/territory require that this training topic be completed?

  ☒ Annually.

  ☐ Other. Describe

All new educators regardless of the number of hours per week will complete training in the recognition and reporting of child abuse and neglect within three months of their date of hire.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training
during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

12. Child development (98.44(b)(1)(iii))

- Provide the citation for this training requirement.
  8.16.2 and 8.17.2 NMAC

- How often does the state/territory require that this training topic be completed?

☐ Annually.
☒ Other. Describe

New staff members working directly with children regardless of the number of hours per week will complete the 45-hour entry level course or approved three-credit early care and education course or an equivalent approved by the department prior to or within six months of employment. Substitutes are exempt from this requirement.

In non-licensed homes, primary and substitute caregivers caring for infants shall receive two hours of infant or toddler specific training within six-months of registration.

Each staff person working directly with children and more than 20 hours per week in a licensed center or out of school time facility, including the director, is required to obtain at least 24 hours of training each year. Training must address all seven competency areas within two years. The competency areas are 1) child growth, development, and learning; 2) health, safety, nutrition, and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism. Substitutes, volunteers, and educators routinely employed in a center but working 20 hours or fewer a week, will complete half the required training hours.

Educators working for a licensed home will receive at least 12 documented hours of training during each year, including six hours in child growth and development and three hours in health, safety, nutrition, and infection control. The three remaining training hours must be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.
Primary and substitute caregivers in non-licensed homes are required to attend six hours of training annually. Training shall be within the seven competency areas. The competency areas are: 1) child growth, development and learning; 2) health, safety, nutrition and infection control; 3) family and community collaboration; 4) developmentally appropriate content; 5) learning environment and curriculum implementation; 6) assessment of children and programs; and 7) professionalism.

13. Describe other requirements. N/A

- Provide the citation for other training requirements.
- How often does the state/territory require that this training topic be completed?
  - ☐ Annually.
  - ☐ Other. Describe

5.5 Monitoring and Enforcement Policies and Practices for CCDF Providers

5.5.1 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.

8.16.2 NMAC

5.5.2 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.
1. Describe your state/territory’s requirements for annual, unannounced inspections of licensed CCDF child care center providers.
Licensing inspectors perform at least two unannounced inspections per year for compliance with health, safety and fire standards for licensed facilities (8.16.2.17 A. and F. NMAC).

3. Identify the frequency of unannounced inspections:

☐ Once a year
☒ More than once a year. Describe
Licensing inspectors perform at least two unannounced inspections per year for compliance with health, safety and fire standards for licensed facilities (8.16.2.17 A. NMAC).

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.
The licensing authority will conduct a survey at least twice a year in each child care facility using licensing regulations as criteria which include health, safety, and fire standards. Upon the completion of a survey, the licensing authority will discuss the findings with the licensee or their representative and will provide the child care facility with an official written report of the findings and a request for a plan or plans of correction, if appropriate. The corrective action plan will be specific on how and when the child care facility will correct the deficiency or deficiencies. By applying for either a new license or a license renewal, the licensee grants the licensing authority representative the right to enter the premises and survey the child care facility, including inspection and copying of child care facility records, both while the application is being processed and, if licensed, at any time during the licensure period (8.16.2.17 NMAC).

5. List the citation(s) for your state/territory’s policies regarding inspections for licensed CCDF center providers
The Children, Youth and Families Department (CYFD) requires all licensed providers to comply with the health and safety requirements outlined in 8.16.2 NMAC. There are no regulations specific to CCDF center providers only.

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.
The Children, Youth and Families Department (CYFD) licensed providers are required by policy one pre-licensure inspection for compliance with health, safety, and fire standards (8.16.2.31 A. (4) & (6) NMAC).

2. Describe your state/territory’s requirements for at least annual, unannounced inspections of licensed CCDF family child care providers.
Licensing inspectors perform at least two unannounced inspections per year for compliance with health, safety and fire standards for licensed facilities and homes (8.16.2.17 A. and F. NMAC).
3. Identify the frequency of unannounced inspections:

☐ Once a year
☒ More than once a year. Describe

Licensing inspectors perform at least two unannounced inspections per year for compliance with health, safety and fire standards for licensed facilities and homes (8.16.2.17 A. NMAC).

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.

The licensing authority will conduct a survey at least twice a year in each child care facility using licensing regulations as criteria which include health, safety, and fire standards. Upon the completion of a survey, the licensing authority will discuss the findings with the licensee or their representative and will provide the child care facility with an official written report of the findings and a request for a plan or plans of correction, if appropriate. The corrective action plan will be specific on how and when the child care facility will correct the deficiency or deficiencies. By applying for either a new license or a license renewal, the licensee grants the licensing authority representative the right to enter the premises and survey the child care facility, including inspection and copying of child care facility records, both while the application is being processed and, if licensed, at any time during the licensure period (8.16.2.17 NMAC).

5. List the citation(s) for your state/territory’s policies regarding inspections for licensed CCDF family child care providers

The Children, Youth and Families Department (CYFD) requires all licensed providers to comply with the health and safety requirements outlined in 8.16.2 NMAC. There are no regulations specific to CCDF center providers only.

c) Licensed in-home CCDF child care  N/A

i. In-home CCDF child care (care in the child’s own home) is not licensed in the State/Territory. Skip to

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 at least annual, unannounced inspections of licensed CCDF in-home child care 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.
5.5.3 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)(j)(IV); 98.42(b)(2)(iii)). 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. The Children, Youth and Families Department (CYFD) recognizes military providers as license-exempt CCDF providers. These providers do not receive monitoring visits by CYFD. The military providers are monitored by the Department of Defense whose standards are more stringent; and therefore do not endanger the health, safety, and development of children receiving CCDF who are cared for by these military providers.

Provide the citation(s) for this policy or procedure. 8.16.2.9 NMAC

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. The Children, Youth and Families Department (CYFD) policy citations for License-Exempt CCDF Providers is 8.17.2 NMAC. Licensed Exempt providers are required by policy one pre-licensure inspection for compliance with health and safety standards. Inspectors perform one annual inspection for compliance with health and safety standards.

Provide the citation(s) for this policy or procedure. 8.16.2.9 NMAC

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. N/A

Provide the citation(s) for this policy or procedure. ________

5.5.4 Licensing inspectors.

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors 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)(j)(I); 98.42(b)(1)).

a) To certify, describe how the Lead Agency ensures that licensing inspectors 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)).

The Children, Youth and Families Department (CYFD) policy citations for Licensing Inspectors define qualifications for inspectors and training as follows: State Personnel Office minimum qualifications: High School Diploma or GED and two (2) years of experience in investigations, regulation, policy, statutory, and/or contract compliance. On the job training is provided upon hire in all aspects of the State’s licensure requirements, and all licensing inspectors receive ongoing relevant training, to include training related to the language and cultural diversity of the providers.

b) Provide the citation(s) for this policy or procedure. www.spo.state.nm.us
5.5.5 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 providers 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.

The Children, Youth and Families Department (CYFD) follows the practice of utilizing a ratio of 60:1 licensed providers to inspectors.

b) Provide the policy citation and state/territory ratio of licensing inspectors.

This practice is part of the procedures and training for child care licensing staff.

5.5.6 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.

☐ 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.

5.6 Criminal Background Checks

5.6.1 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 and apply for the time-limited waiver by responding to questions 5.4.1a through 5.4.1h below.

As a reminder, 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 providers 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). 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. 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. This requirement does not apply to individuals who are related to all children for whom child care services are provided.

A criminal background check must include 8 specific components, which encompass 3 in-state checks, 2 national checks, and 3 inter-state checks:

1. Criminal registry or repository using fingerprints in the current state of residency (in-state);
2. Sex offender registry or repository check in the current state of residency (in-state);
3. Child abuse and neglect registry and database check in the current state of residency (in-state);
4. FBI fingerprint check (national);
5. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) (national);
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 (inter-state);
7. Sex offender registry or repository in any other state where the individual has resided in the past 5 years (inter-state); and
8. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years (inter-state).

**Milestone Prerequisites for Time-Limited Waivers**

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 45 CFR 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.

If the milestone prerequisites are met, then time-limited waivers may be requested for the components as outlined in the table below.

<table>
<thead>
<tr>
<th>Background Check Components</th>
<th>If milestone is met, time-limited waiver allowed for:</th>
</tr>
</thead>
</table>

109
| 1) In-state criminal w/fingerprints | Conducting background checks on backlog of current (existing) staff only |
| 2) In-state sex offender registry | Establishing requirements and procedures AND/OR Conducting background checks on all new (prospective) child care staff AND/OR Conducting background checks on backlog of current (existing) staff |
| 3) In-state state-based child abuse and neglect registry | |
| 4) FBI fingerprint check | |
| 5) NCIC National Sex Offender Registry (NSOR) | |
| 6) Inter-state state criminal registry | |
| 7) Inter-state state sex offender registry | |
| 8) Inter-state child abuse and neglect registry | |

States and Territories will apply for the initial waiver for a one-year period (starting October 1, 2018 and ending September 30, 2019) as part of the submission of this Plan. 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. Additional 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 renewal deadline (45 CFR 98.19(b)(1)(ii)): September 30, 2020

Use questions 5.4.1a through 5.4.1d below to describe achievement of the milestone components, use questions 5.4.1e through 5.4.1h to provide the status for the remaining checks, and as applicable, use questions 5.4.1a through 5.4.1h to request a time-limited waiver for any allowable background check requirement.

a) Briefly summarize the requirements, policies and procedures for the search of the state criminal registry or repository, with the use of fingerprints required in the state where the staff member resides.

The Children, Youth and Families General Provisions Governing Background Check and Employment History (8.8.3 NMAC) are the State of New Mexico’s regulations that serve to implement the Child Care and Development Fund (CCDF) background check requirements. These background checks are completed by the Children, Youth and Families Department (CYFD) background check unit (BCU).

All applicants must submit an electronic fingerprint submission receipt and the required forms for all direct providers of care, household members in licensed and registered child care homes, or...
any staff member, employee, or volunteer present while care recipients are present, or other adult as required by the applicable regulations prior to the commencement of service, whether employment or, contractual, or volunteer. (See 8.8.3.10B NMAC) This fingerprint submission results in State of New Mexico and FBI Next Generation Identification criminal records

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o). All licensed child care homes, licensed child care centers and registered child care homes must comply with the regulations described above. (See 8.8.3.75 and 8.8.3.8 NMAC)

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 and 98.16(o). See above.

iii. Has the search of the state criminal registry or repository, with the use of fingerprints, been conducted for all current (existing) child care staff?

☐ Yes.
☐ No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement.

☐ Describe the status of conducting the search of the state criminal registry or repository, with the use of fingerprints for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

iv. List the citation:
NMAC 8.8.3

b) Briefly summarize the requirements, policies and procedures for the search of the state sex offender registry or repository in the state where the staff member resides.

A search of the New Mexico Department of Public Safety Sex Offender Registry is conducted on all applicants. In addition, our applicant database (EPICS) is linked to the New Mexico Sex Offender Registry. When an applicant is entered into EPICS, we are electronically notified immediately if the person is listed in the New Mexico 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 and 98.16(o). All licensed child care homes, licensed child care centers and registered child care homes must comply with the regulations described above. (See 8.8.3.75 and 8.8.3.8 NMAC)

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 and 98.16(o).

See above.

iii. Has the search of the state sex offender registry or repository been conducted for all current (existing) child care staff?

☑ Yes
☐ No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement.

Describe the status of conducting the search of the state sex offender registry or repository for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

iv. List the citation: 8.8.3.7S and 8.8.3.8 NMAC

c) Briefly summarize the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in the state where the staff member resides.

A search of the CYFD FACTS database is conducted on all applicants. FACTS contains New Mexico abuse and neglect investigations and findings.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

All licensed child care homes, licensed child care centers and registered child care homes must comply with the regulations described above.

ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(o).

See above.

iii. Has the search of the state-based child abuse and neglect registry and database been conducted for all current (existing) child care staff?

☑ Yes
☐ No. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement.

Describe the status of conducting the search of the state-based child abuse and neglect registry and database for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

iv. List the citation: 8.8.3.7S and 8.8.3.8 NMAC

d) Briefly summarize the requirements, policies and procedures for the FBI fingerprint check using Next Generation Identification.

Fully implemented. All applicants must submit an electronic fingerprint submission receipt and the required forms for all direct providers of care, household members in
licensed and registered child care homes, or any staff member, employee, or volunteer present while care recipients are present, or other adult as required by the applicable regulations prior to the commencement of service, whether employment or, contractual, or volunteer. (See 8.8.3.10B NMAC) This fingerprint submission results in State of New Mexico and FBI Next Generation Identification criminal records. In addition, the BCU receives Rap Back, a component of FBI Next Generation Identification, notification of criminal activity that occurs after the initial processing of background check eligibility. Once received, this information is reviewed to determine continued eligibility. If warranted, the new criminal activity may result in the suspension of eligibility.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(0).

All licensed child care homes, licensed child care centers and registered child care homes must comply with the regulations described above. (See 8.8.3.7S and 8.8.3.8 NMAC)

ii. Describe how these requirements apply to all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43 and 98.16(0).

See above.

iii. Has the search of the FBI fingerprint check using Next Generation Identification been conducted for all current (existing) child care staff?

☐ No

☐ Yes

☐ No Check here to indicate request for time-limited waiver for this requirement ☐ and enter the expected date of full implementation of this requirement. Describe the status of conducting the FBI fingerprint check using Next Generation Identification for current (existing) child care staff. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

iv. List the citation:

NMAC 8.8.3.8

e) Describe the status of the requirements, policies and procedures for the search of the NCIC’s National Sex Offender Registry.

Fully implemented for all prospective and existing required child care providers. DPS has confirmed that the NCIC’s National Sex Offender Registry results are included within the New Mexico and FBI rap sheets received on all applicants.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(0).

All licensed child care homes, licensed child care centers and registered child care homes must comply with the regulations described above. (See 8.8.3.7S and 8.8.3.8 NMAC)

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 and 98.16(0).

See above.
iii. List the citation:
NMAC 8.8.3.8

f) Describe the status of the requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states.

☒ No - Not implemented. (See below)
☐ Fully implemented for all prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state criminal registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

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 and 98.16(o).

iii. List the citation:
☒ In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. Describe the status of implementation of requirements, policies and procedures for the search of the criminal registries or repositories in other states where the child care staff member resided during the preceding 5 years, with the use of fingerprints being optional in those other states. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

BCU staff are currently making contact with states that do not participate in the National Fingerprint File (NFF) program in order to develop protocol for receiving criminal history from those states. A problem that has already arisen is that some of the contact information for states is either incorrect, nonexistent or the links are inoperable. Additional challenges include determining how the applicant is required to print and whether the results may be sent to the BCU or must be sent directly to the applicant. If results must be sent to the applicant, there are concerns regarding potential alteration or falsification by the applicant. In addition, there is also a risk of applicants providing outdated records that were originally obtained for other purposes. Finally, states may charge significant fees for fingerprint results which may ultimately be passed down to the parents and thus increasing the already exorbitant cost of child care. There are also concerns regarding the ability to complete checks in other states within 45 days. The time to obtain the criminal history results from other states or the applicant may be significant and there may also be further delay if dispositions for arrests are required.

Another significant challenge involves fulfilling this requirement for existing providers. Finally, a waiver is needed to allow sufficient time to make Regulation changes to implement this requirement.
g) Describe the status of the requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years.

Fully implemented for all prospective and existing required child care providers. The state sex offender registry or repository in each state where the applicant resided during the previous 5 years is checked as a component of the background check process.

Fully implemented for all required child care providers (all licensed, regulated or registered; and all (prospective and existing) child care providers eligible to provide care for children receiving CCDF assistance). This means that the State/Territory has requirements and procedures in effect, and has conducted the inter-state state sex offender registry check on all new and existing child care staff.

i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

All licensed child care homes, licensed child care centers and registered child care homes must comply with the regulations described above.

ii. Describe how these requirements, policies and procedures apply to all providers eligible to care for children receiving CCDF, in accordance with 98.43 and 98.16(o).

See above.

iii. List the citation: 8.8.3.7S and 8.8.3.8 NMAC

☐ In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. Describe the status of implementation of requirements, policies and procedures for the search of the state sex offender registry or repository in each state where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all providers eligible to provide care for children receiving CCDF; 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

h) Describe the status of the requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years.

Fully implemented for all prospective and existing required child care providers. A search of the state-based child abuse and neglect registry in each state where the applicant resided during the previous 5 years is attempted as a component of the background check process. However, federal guidance is necessary because not all states have developed an “abuse and neglect registry” and some states are prohibited from sharing this information for child care purposes.

☑ Fully implemented for all child care providers. prospective and existing required child care providers (all licensed, regulated or registered; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers)). This means that the State/Territory has requirements and procedures in effect, and has conducted the state-based child abuse and neglect registry check on all new and existing child care staff.
i. Describe how these requirements, policies and procedures apply to all licensed, regulated, or registered child care providers, in accordance with 98.43 and 98.16(o).

All licensed child care homes, licensed child care centers and registered child care homes must comply with the regulations described above. (See 8.8.3.7S and 8.8.3.8 NMAC)

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 and 98.16(o).

See above.

iii. List the citation: See 8.8.3.7S and 8.8.3.8 NMAC

☐ In progress. Check here to indicate request for time-limited waiver for this requirement and enter the expected date of full implementation of this requirement. Describe the status of implementation of requirements, policies and procedures for the search of the state-based child abuse and neglect registry and database in each State where the staff member resided during the previous 5 years. At a minimum, the description should briefly summarize: 1) efforts to date to implement the requirement for all (prospective and existing) licensed, regulated and registered providers; and all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers); 2) key activities planned toward implementation of this requirement; 3) key challenges to implementing this requirement; and 4) strategies used to address challenges:

5.4.2 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 child care staff members, prior to the date an individual becomes a child care staff member and at least once every 5 years thereafter. A prospective child care staff member may begin to work on a provisional basis for a child care provider after completing either a Federal Bureau of Investigation (FBI) fingerprint check or a search of the state/territory criminal registry or repository using fingerprints (in the state/territory where the staff member resides. However, the child care staff member must be supervised at all times pending completion of all the background check components (98.43(d)(4)).

5.4.3 Does the state/territory allow prospective staff members to begin work on a provisional basis (if supervised at all times) after completing the FBI fingerprint check or a fingerprint check of the state criminal registry or repository in the state where the child care staff member resides?

☒ No. Current regulations allow prospective staff members to begin work on a provisional basis (if supervised at all times) until the entire background check process is completed. A waiver is needed to allow sufficient time to make Regulation changes to implement a two-step eligibility process, a provisional clearance followed by a final clearance decision. Federal guidance is also needed regarding what constitutes a satisfactory fingerprint check to allow for provisional employment. Additional time is also required to implement procedural changes to allow for a two-step eligibility process both within the BCU and in licensed homes and child care centers.

☐ Yes. Describe:

5.4.4 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.

5.4.5 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 CYFD BCU receives requests for abuse and neglect information by fax and e-mail and provides responses via e-mail or fax as expeditiously as possible. Any requests for criminal histories are referred to the New Mexico Department of Public Safety Department. Contact information has been provided as requested by Early Childhood National Center on Subsidy Innovation and Accountability.

5.4.6 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)).

5.4.7 Does the state/territory disqualify child care staff members based on their conviction for other crimes not specifically listed in 98.43(h)?

☐ No.
☒ Yes. Describe: The CYFD BCU currently disqualifies child care staff members based on their convictions for other crimes not specifically listed above. The BCU weighs all the evidence about an applicant to determine whether the applicant poses an unreasonable risk to care recipients. (See 8.8.3.14 NMAC (Unreasonable Risk).)

5.4.8 The state/territory has a process for a child care staff member to appeal 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)).

The CYFD BCU currently has a review process for applicants that were denied based on a felony drug offense(s) pursuant to 8.8.3.15 NMAC (Rehabilitation Petition). This section allows a person with such a conviction(s) to provide evidence that they are rehabilitated and do not pose an unreasonable risk and should therefore be granted eligibility. The BCU also has an appeal process (8.8.3.17 NMAC) which allows the applicant to challenge a denial of eligibility.
The privacy of child care staff members is protected pursuant to Section 32A-15-3 C, D, NMSA 1978, and the BCU is in compliance with the statute. The BCU provides the employer with the results of the criminal background check without revealing any disqualifying information. Ineligible staff members are provided with disqualifying information and are advised of their right to appeal pursuant to 8.8.3.17 NMAC (Appeal Rights).

5.4.9 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)).

The CYFD BCU does not collect any fees for processing a background check. The provider or the applicant is required to pay for fingerprinting and all fingerprinting fees are collected by the fingerprinting authority. In the event that other states charge a fee to process an abuse and neglect screen, the provider or the applicant will be required to pay this fee.

5.4.10 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 relatives, as defined by CCDF, must meet. 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 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)). 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 Describe how the state/territory developed its training and professional development Each State or Territory must describe their professional development framework for training, professional development, and post-secondary education, which is developed in consultation with the State Advisory Council on Early Childhood Education and Care. 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. Describe how the state/territory’s framework for training and professional development addresses the following required elements:

- State/territory professional standards and competencies. Describe:
  New Mexico has identified seven (7) Standards and Competencies for early childhood practitioners:
  1. Child Growth
  2. Development & Learning
  3. Health, Safety & Nutrition
  4. Family and Community Collaboration
  5. Assessment of Children and Evaluation of Programs
  6. Developmentally Appropriate Content

The Common Core and Competencies for personnel in Early Care, Education and Family Support in New Mexico Entry Level through Bachelors Level were developed by the Higher Education Taskforce in 2002 and revised in 2011. The common core content describes the minimum expected level of competence for individuals that exit preparation programs at each level of the career lattice. It describes what early childhood professionals must know and be able to do when they complete the entry level, the certificate/ associate degree level, and the bachelor’s level in each degree pathway. At each level, content is based on the same set of competencies, but the
indicators of competence represent increasing depth and breadth at each ascending level. All institutions of higher education in the State of New Mexico include the common core content in their coursework.

- **Career pathways. Describe:**

NEW MEXICO’S CAREER LATTICE FOR EARLY CARE, EDUCATION, AND FAMILY SUPPORT

The levels of the Common Core Content and Competencies that follow correspond to levels of certification and licensure available from the state of New Mexico. Altogether, this spiraling system of professional development is referred to as the New Mexico Early Care, Education and Family Support Career Lattice. The term career lattice is meant to create the vision of a trellis that provides multiple pathways for growth and development, as opposed to a career ladder that enables only vertical movement along a single track.

Because the New Mexico Early Care, Education and Family Support Professional Development System encompasses all systems serving children birth through third grade and their families, the term career lattice is the most appropriate way to describe how individuals can move horizontally, vertically, and/or diagonally within a single system, or across systems as positions become available and/or as professional preparation enables them to seek and move into positions with more responsibility and increased compensation.

The special features of New Mexico’s career lattice are as follows:
- Individuals can enter the career lattice at any point in their growth and development as professionals. Depending on their professional aspirations, individuals may remain where they are or pursue multiple opportunities for their future professional development.
- Professional preparation and corresponding certification and licensure within the career lattice are recognized by a number of different systems, enabling individuals to move between systems.
- Each level of certification and/or licensure is based upon study that builds upon and increases skills and knowledge in the same competency areas. As a result, all professional preparation "counts" toward work at the next level.
- All personnel build upon the same core content with the opportunity to pursue areas of concentration. Early Childhood Teacher - Birth through Age 4 (PreK), Early Childhood Teacher - Age 3 (PreK) through Grade 3, Family, Infant Toddler Studies (FIT), or Early Childhood Program Administration.

The levels of the career lattice are as follows:
- 45-Hour Entry Level Course - a basic course that introduces the areas of competency at the awareness level. The certification of completion is awarded by the Office of Child Development, Children, Youth and Families Department.
- New Mexico Child Development Certificate - a state-issued certificate that is equivalent to a CDA credential and approved by the federal Office of Head Start. The requirements for this certificate includes the completion of four (4) specifically identified courses in early childhood education. The certificate of completion is awarded by the Children, Youth and Families Department Office of Child Development.
- 1-Year Certificate - certificate earned after completion of 29 credits in early childhood education toward an associate degree program. The certificate indicates completion of the early childhood "vocational" courses within an...
approved associate degree program, most often completed in the student's first year. The Children, Youth and Families Department Office of Child Development awards a state certificate upon completion of this vocational course of study.

- Associate Degree - a two-year program consisting of approximately 65 credits, including both early childhood content (29 credits as described above) and general education content (approximately 35 credits) available at all two-year and some four-year institutions. The degree is awarded by the institution, and the certificate of completion is awarded by the Children, Youth and Families Department Office of Child Development.

- Bachelor's Degree Licensure Option - a four-year program consisting of approximately 128 credits, available at some public four-year institutions in the state. Approved Bachelor's degree programs lead to the New Mexico Early Childhood License: Birth through Age 4 (PreK) or Age 3 (PreK) through Grade 3. The degree is issued by the institution and the license is awarded by the New Mexico Public Education Department.

- Bachelor's Degree Non-Licensure Option - a four-year program consisting of approximately 128 credits, available at some public four-year institutions in the state. Approved Bachelor's degree programs lead to a certificate issued by the Children, Youth and Families Department Office of Child Development in Birth through Age 4 (PreK), or Age 3 (PreK) through Grade 3, or Early Childhood Program Administration or Family, Infant and Toddler Studies (FIT). The Degree is issued by the institution.

- Master's Degree - consisting of 36 to 42 hours of graduate work in early childhood and related areas, available at graduate universities in the state. The degree is awarded by the institution.

- Doctoral Degree - consisting of 66 to 72 hours of graduate work in early childhood education or related areas and additional degree completion requirements (comprehensive exam, doctoral dissertation, etc.). This degree is available at some 4-year universities in the state. The degree is awarded by the institution.

The career lattice is designed so that each level fully articulates with the next level. That is, for example, the New Mexico Child Development Certificate counts toward work for the certificate; a certificate constitutes the equivalent of the first year of work toward an associate degree; and an associate degree transfers to any early childhood program at four-year institutions as the first two years of work toward a bachelor's degree. The Early Childhood Higher Education Task Force, a standing task force of the New Mexico Office of Child Development, has developed a common catalogue of coursework with common course titles and content for all institutions of higher education in the state.

- Articulation. Describe:
  The career lattice is designed so that each level fully articulates with the next level. For example, the New Mexico Child Development Certificate counts toward work for the certificate; a certificate constitutes the equivalent of the first year of work toward an associate degree; and an associate degree transfers to any early childhood program at four-year institutions as the first two years of work toward a bachelor's degree. The Early Childhood Higher Education Task Force, a standing task force of the New Mexico Office of Child Development, has developed a common catalogue of coursework with common course titles and content for all institutions of higher education in the state.
• Workforce information. Describe: New Mexico offers a myriad of training opportunities available to early care and education staff, families and interested community members. Training sessions offered meet the New Mexico Core Competency Areas for Early Care, Education and Family Support and are provided by qualified trainers from the New Mexico Early Childhood Trainer Registry.

The following phrases 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: The Children, Youth and Families Department (CYFD) coordinates the New Mexico's Higher Education Taskforce. The Taskforce has one representative from each University and College in New Mexico responsible for providing coursework to early childhood professionals following the New Mexico Early Childhood Career Path. The Taskforce meets once per month to assess the New Mexico's Early Childhood workforce, their needs, status and set up goals to meet those needs, and serves as a standing Committee for the New Mexico Early Learning Advisory Council. Beginning SFY18, through an open and competitive State procurement process, CYFD has established the New Mexico Comprehensive Early Learning Training and Consultation Center (NM-ELTCC), with history of providing an effective and proven outcome training, technical assistance to early care and education programs, and with the experience in the field of family engagement, mental health, culturally relevant practices, curriculum, assessment and working with early care and learning programs.

Other. Describe:

6.1.2 Describe how the state/territory developed its training and professional development requirements in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or with another state or state-designated cross-agency body if there is no SAC that addresses the professional development, training, and education of child care providers and staff. The New Mexico Early Childhood Education Higher Education Task Force is an official standing committee of the New Mexico Early Learning Advisory Council. The Higher Education Taskforce has been involved in Strategic Planning to ensure that the needs of the early childhood community are being met.

6.1.3 Identify how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)). Check and describe all that apply.

☒ Financial assistance to attain credentials and post-secondary degrees. Describe:
The Children, Youth and Families Department funds the CYFD Comprehensive Scholarship program. The Scholarship program works with the FOCUS TQRIS program, the STARS quality rating improvement system (QRIS), NM PreK, and other statewide efforts to increase the overall quality of care and education for New Mexico’s most vulnerable children. The CYFD Comprehensive Scholarship program gives individuals the opportunity to attend college and provides scholarship support and financial incentives to make it possible.

- Financial incentives linked to educational attainment and retention. Describe:

☐ Financial incentives and compensation improvements. Describe: ___________
  ☐ Registered apprenticeship programs. Describe: ______
  ☐ Outreach to high school (including career and technical) students. Describe: ______
  ☐ Policies for paid sick leave. Describe: ______
  ☐ Policies for paid annual leave. Describe: ______
  ☐ Policies for health care benefits. Describe: ______
  ☐ Policies for retirement benefits. Describe: ______
  ☐ Support for providers’ mental health, such as training in reflective practices and stress-reduction techniques and health and mental health consultation services. Describe: ______
  ☐ Other. Describe: ______

6.2 Training and Professional Development Requirements

The state/territory must develop training and professional development requirements, including pre-service or orientation training (to be completed within 3 months) and ongoing requirements 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 requirements (98.44(b)(2)(ii)).

New Mexico’s early learning guidelines serve as a framework to capture the important aspects of development in the early years. The guidelines describe what young children know and can do during the early years of development. The guidelines are designed to give reasonable expectations for children at different ages so that teachers and others have criteria to refer to as they observe children in action, determine their levels of performance and plan curricular interventions to help them grow, develop, and learn to their fullest potential.
6.2.2 Describe how the state/territory’s training and professional development requirements are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)).

In addition to the monthly call that started in January 2018, CYFD and the CCDF Tribal programs for New Mexico participated in a face to face planning meeting. The vision for this meeting was to build and strengthen sustainable and meaningful relationships between CCDF tribal programs and CYFD-ECS in New Mexico. A plan for continued discussion, cooperation and collaboration for the group is being developed as a result for this meeting. This will include ongoing face-to-face, telephonic and web-based meetings to ensure ongoing collaboration and coordination. The main topics identified at the meeting include:
- Ongoing training support: ensuring a qualified workforce sharing opportunities and resources
  - Training Hubs have been established in five regions through The New Mexico Comprehensive Early Learning Training and Consultation Center will be comprised of five (5) Regional Early Learning Consultation Hubs plus satellite sites that will ensure coordination, alignment and responsiveness to each early learning program in New Mexico, paying special attention to underserved and un-served communities.
  - This Training and Consultation Hubs are task with serving all programs including tribal programs. Information has been provided to CCDF Tribal Partners.

6.2.3 Describe how the state/territory will recruit and facilitate the participation of providers with limited English proficiency and persons with disabilities (98.16(dd)).

The Children, Youth and Families Department recruits providers whose first language is not English by extending invitations to participate in community dialogues, the utilization of community advocates and local coalitions such as those in the Early Childhood Investment Zones.

6.2.4 If the Lead Agency provides information or services to providers in other non-English languages, please identify the three primary languages offered or specify that the State has the ability to have translation/interpretation in primary and secondary languages.

Voiance Service provides interpretation from English to other languages. Spanish is the primary language.

6.2.5 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 Competencies established by the State (New Mexico PreK Standards, New Mexico FOCUS Criteria, New Mexico Child Care Licensing requirements, New Mexico Home Visiting Standards, Head Start Performance Standards, etc.) will define the consultation and technical assistance services that will be provided in conjunction with the accountability and Continuous Quality Improvement efforts of the state. These competencies define what trainers, consultants and technical assistance providers should know and be able to do when identifying the content of the professional development, including:
Strategies for collaborating and communicating with early childhood teachers and providers based on effective models of consultation and technical assistance,

High quality early childhood practices and specialized instructional strategies (including tiered approaches) that are matched to children’s individual needs and that supported professional-family partnerships,

Information on program quality standards and the state’s QRIS criteria, including provisions related to serving children with disabilities and their families, and Knowledge and skills related to measuring and documenting both general program quality and quality inclusive practices.

To ensure that trainers, consultants and technical assistance providers acquire core knowledge and skills and have the support they need to implement high quality technical assistance services, New Mexico has developed a standardized and centralized approach to professional development.

Intensive professional development opportunities have been designed to ensure that participants understand program quality standards, recommended early childhood practices (both general and specialized), methods of documenting program quality, and effective models for working collaboratively with early childhood practitioners in a variety of programs and settings.

These opportunities include but are not limited to: Orientation to the New Mexico Comprehensive Training and Consultation System: What to Expect

1. Access to the New Mexico Early Childhood Training and Consultation Hub
2. Integrated Learning Approach intensive courses
3. The NM Pyramid for Social-Emotional Support, Module training
4. Dual Language Learners training
5. Infant Mental Health Endorsement Process
6. Circle of Security
7. Other opportunities depending on system needs including Communities of Practice

The Children, Youth and Families Department’s FOCUS New Mexico’s Tiered Quality Rating and Improvement System (TQRIS) was developed to foster program leadership, cultivate teacher quality, and support positive outcomes for all children. FOCUS has established Standards of Quality for Early Learning and Development Programs.

One of the essential elements of quality specified in the FOCUS Standards is the provision of full participation of each child including practices for children with developmental delays or disabilities.

- **Definition:** Early childhood inclusion embodies the values, policies, and practices that support the right of every infant and young child and his or her family, regardless of ability to participate in a broad range of activities and contexts as full members of families, communities, and society (DEC/NAEYC, 2009).

- **Rationale:** Children with disabilities should experience the same quality preschool classroom program (presumably high quality) as typically developing children (Bailey et al., 1998), become members of the classroom community through participation in class activities (Schwartz, 1996), and develop positive social relationships with class members and teachers (Guralnick, 1999; Storey, 1993).
The New Mexico Partnership Guide for Inclusion supports the alliance among early care and education practitioners and administrators working together to assist young children under the age of five in attaining their joint goal of positive developmental outcomes for children.

The New Mexico Partnership Guide provides a roadmap for direct service delivery partners and administrators in building more coordinated service delivery for children. This guide can be used by the partners to:

- Communicate effectively with each other and with families.
- Work together in planning and implementing for Individual Family Service Plans (IFSPs) for children from birth to age three, and Individual Educational Programs (IEPs) for children age three to age five.
- Work together to support a child's access and full participation in center-based care, activities, and routines.
- Support individual children and families in developing skills to be active participants in their community.
- Work together to build infrastructure and systems needed to support inclusive services.

In New Mexico, Part C early intervention services are provided under the Department of Health Family Infant Toddler (FIT) Program. The FIT Program is a state and federally funded entitlement program for families whose child is under the age of three and has or is at risk for a developmental delay or disability. Early intervention services are provided in natural environments (where the child lives, learns and plays), and includes the child care setting.

6.2.6 The Lead Agency must provide training and technical assistance to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving homeless children and families (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).

The New Mexico Council to End Homelessness (NMCEH) and The Early Childhood Services Division within the New Mexico Children Youth and Families Department are working together to provide better access to child care services and housing for families with young children experiencing homelessness.

NMCEH and the Division is meeting on an ongoing basis to evaluate the effectiveness of the cooperation and determine next steps in helping homeless families in the most effective ways.

NMCEH will provide training to Division Eligibility staff and Early Childhood Consultants about the statewide Coordinated Entry System operated by NMCEH, which provides access to most government funded housing programs in the state for people who are homeless and how to serve them. The goal is to make sure Division Eligibility staff and Early Childhood Consultants are familiar enough with the system to be able to assist homeless families they come in contact with in accessing the system quickly. The Early Childhood Services Division will provide training to case managers at NMCEH member agencies that serve families with children in the process for helping homeless children to quickly access child care services.

b) Describe the state/territory’s training and TA efforts for Lead Agency (or designated entity)
staff in identifying and serving homeless children and their families (connects to question 3.2.2).

The New Mexico Council to End Homelessness (NMCEH) and The Early Childhood Services Division within the New Mexico Children Youth and Families Department are working together to provide better access to child care services and housing for families with young children experiencing homelessness.

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6.2.7 The 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
- The type of check-ins, including the frequency. Describe
- Other. Describe:

6.2.8 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.

- Identify the strategies that the state/territory is developing and implementing for training and TA.

  Beginning SFY18, through an open and competitive State procurement process, CYFD has established the New Mexico Comprehensive Early Learning Training and Consultation Center (NM-ELTCC), with history of providing an effective and proven outcome training, technical assistance to early care and education programs, and
with the experience in the field of family engagement, mental health, culturally relevant practices, curriculum, assessment and working with early care and learning programs.

The New Mexico Children, Youth and Families Department’s Comprehensive Early Learning Training and Consultation System supports programs across all early learning settings, ensuring that early childhood practitioners are highly effective in supporting the development and learning of each and every child served in early care and learning programs in New Mexico.

b) Check the topics addressed in the state/territory’s strategies. Check all that apply.

- [ ] Fiscal management
- [ ] Budgeting
- [x] Recordkeeping
- [ ] Hiring, developing, and retaining qualified staff
- [x] Risk management
- [x] Community relationships
- [ ] Marketing and public relations
- [x] 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 New Mexico Early Learning Guidelines (NMELG) serve as a framework for children’s growth, development, and learning in the early years. They are designed to provide reasonable expectations for children at different ages so that educators have criteria to refer to as they observe children in action, determine their levels of performance, and plan curricular interventions to help them grow, develop, and learn to their fullest potential.
The NMELGs were developed by educators from a variety of programs and settings. They provide a common vocabulary to describe children’s growth, development, and learning. They are formatted as a continuum to remind us that children do not all develop at the same rate or pace. Rather, each child develops in his or her unique way.

The NMELGs reflect current brain development research and early childhood education best practices. They represent the growing consensus among educators that a greater emphasis be placed on young children’s conceptual learning, social and emotional development, and active participation in culturally and linguistically relevant and meaningful learning experiences.

b) Describe how the state/territory’s early learning and developmental guidelines are appropriate for all children from birth to kindergarten entry. Both the Infant and Toddler and the Preschool and Kindergarten Early Learning Guidelines are organized into domains or broad areas of growth, development, and learning. There are five domains for infants and toddlers (children from birth to 36 months) and seven domains for preschoolers and kindergartners.

c) Check the domain areas included in the state/territory’s early learning and developmental guidelines. Check all that apply.

☐ 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 other state or state-designated cross-agency body if there is no SAC.

In the 2018 Early Learning Advisory Council Governor’s Executive Order Section 7.6.v, it states that: recommend improvements in state Early Learning standards and undertake efforts to develop high-quality and comprehensive early learning standards, as appropriate.

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 posted version is dated July 2014. Currently updates have concluded for the preschool rubrics and sections and are being piloted with PreK programs. During calendar year 2017 the Infant and Toddler guidelines were revised and are being reviewed. Once completed, the revised Early Learning Guidelines will be published in the Fall of 2018.

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.

6.3.3 If quality funds are used to develop, maintain, or implement early learning 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)).
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)).

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)).

CYFD, Early Childhood Services is currently undergoing assessment of quality implementation and the impact in the programs. The current methods for assessment is the verification for STAR level that is being done on a yearly basis for each program by the CYFD Office of Child Development team. In addition, surveys of programs and face to face dialogues provide information to make an informed assessment of the quality of programs and their impact in the outcomes for children.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified.

Some of the information gathered includes:
- The Verification process and Tool must be revised to ensure a comprehensive approach
- Consultation was fragmented and contradicting at times, creating confusion on programs
- The training needs to be aligned to ensure a continuum with consultation

As a result CFYD is revising the tool and process, has implemented a cohesive aligned training and consultation system and is aligning training and onsite consultation.

### 7.2 Use of Quality Funds

7.2.1 Check the quality improvement activities in which the state/territory is investing.

- [x] 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.
  
  - [x] CCDF funds
  
  - [x] Other funds

- [ ] 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

- [x] 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.
  
  - [x] CCDF funds
  
  - [x] Other funds

- [x] 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
☐ 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

7.7 Facilitating compliance with state/territory requirements for inspection, monitoring, training, and health and safety standards (as described in section 5). If checked, respond to and indicate which funds will be used for this activity. Check all that apply.
☐ CCDF funds
☐ Other funds
☐ 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
☐ 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
☐ 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

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:

☑ 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 5 for such behaviors. (See also section 2.5.) Describe:

☑ 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:

☑ 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:

☑ 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:

☑ Caring for and supporting the development of children with disabilities and developmental delays. Describe:

☑ 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:

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.
7.4 Quality Rating and Improvement System

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.

7.4.1 Does your state/territory have a quality rating and improvement system?

☑ Yes, the state/territory has a QRIS operating statewide or territory-wide. Describe how the QRIS is administered (e.g., statewide or locally through CCR&R entities) and any partners and provide a link, if available.

☐ 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.

☑ If Yes, 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.

☐ No, but the state/territory is in the QRIS development phase.

☐ No, the state/territory has no plans for QRIS development.

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: Home Visiting Programs
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 7.4.7.

Do the state/territory’s quality improvement standards align with or have reciprocity with any of the following standards?

- [ ] No.
- [x] 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).
- [ ] Other. Describe:
  - [ ] None.

7.4.4 Do the state/territory’s quality standards build on its licensing requirements and other regulatory requirements?

- [ ] No.
- [x] 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:
  - [ ] Not linked.

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.
- [x] 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:
  - None

7.4.6 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.

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.

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.

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
- Establishing or expanding the operation of community- or neighborhood-based family child care networks. Describe
  - Providing training and professional development to enhance child care providers’ ability to provide developmentally appropriate services for infants and toddlers. Describe
  - 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
  - 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
☐ 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
☐ 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.

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 (§8.53(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 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.

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:
The New Mexico Children, Youth and Families Department (CYFD) established a New Mexico Comprehensive Early Learning Training and Consultation Center to ensure that the aligned system provides culturally and linguistically appropriate professional development services to early learning programs within New Mexico, including cross-cultural communication and respect for the linguistic, ethnic, and gender-based differences that contribute to cultural identity. Helping early care and education programs continuously improve their quality and meet the New Mexico Child Care Licensing, PreK and FOCUS-TQRIS standards. Understanding
that the voices and opinions of culturally diverse members must shape the development of programs, systems, and evaluation strategies.
The Comprehensive Early Learning Training and Consultation Center will be expected to work collaboratively at the local, regional and state levels to support the establishment of a comprehensive and aligned quality early care, education and family support system that is equitably available to all children and their families in New Mexico.

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 Child Assessment information at the Kindergarten Entry Assessment process will be used to evaluate programming. In addition to the yearly verification of each program and summary result of verification outcomes, a reliability-validity check will start on FY19 to evaluate the effectiveness of the revised tool and process as a result of Child Trends Evaluation and feedback from the field.

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 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.

New Mexico is creating a graphic representation of the New Mexico Early Childhood system. FOCUS-TQRIS includes a strong component of Continuous Quality Improvement and discussions about the approach and process for implementation- from Self-Assessment to developing a Continuous Quality Improvement Plan-will identify common elements across the New Mexico Early Childhood System.

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 within the state/territory and the data on the extent to which the state or territory has met these measures.
In 2013, Web-based Early Learning System (WELS) was identified to design and implement a system to capture data regarding the creation of a trainer registry, educator registry, training calendar and TQRIS component. The FOCUS Pilot Project is using WELS to provide a system for data collection, management and reporting to track young children's development and progress as they are increasingly ready for school, and to measure the quality of and support positive outcomes for all children. The Pilot Project will become part of the longitudinal data system (EPICS) that is being established by the Children, Youth and Families Department. Continuous quality improvement and leadership development are critical components of New Mexico's new TQRIS. WELS will provide consultation and professional development in the areas of both continuous quality improvement and leadership development.

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. 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 as a pilot-test or in a few localities but not statewide or territory-wide. Describe

The New Mexico Children, Youth and Families Department (CYFD) uses the current National Association for the Education of Young Children (NAEYC) Program Standards and Accreditation Criteria (© 2007 NAEYC) as well as NAEYC's current accreditation process criteria as the quality benchmark for the recognition of national early childhood accreditation entities for 5 STAR licensing status.

☐ No, but the state/territory is in the accreditation development phase.

☐ 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.

CYFD contracted with a research entity to conduct a crosswalk between the established standards for New Mexico and the different Accredited entities recognized by the state.

7.10 Program Standards

7.10.1 How does the state/territory support state/territory or local efforts to develop or adopt high-quality program standards relating to:

☒ Health. Describe the supports:
Mental health. Describe the supports:
The NM Pyramid Partnership has adopted the evidenced based practices developed by the Center on the Social Emotional Foundations of Early Learning (CSEFEL). The Pyramid framework developed by CSEFEL is used to promote the social emotional competence of children from birth to age five in the context of nurturing relationships and quality learning environments. The Pyramid framework also provides strategies to prevent and address the challenging behavior of young children and that help prevent children from being expelled from preschool.

Nutrition. Describe the supports:

Physical activity. Describe the supports:

Physical development. Describe the supports:

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.

Cross Sector FOCUS Leadership works in a collaborative effort between Early Childhood Leaders and Consultants from Children, Youth and Families Department, New Mexico Department of Health and the New Mexico Public Education Department. The Cross Sector Leadership workgroup has been created to ensure that the early learning system is developing a TQRIS for each sector, the system is aligned. The goal is to provide a coordinated early learning system that supports children and families from prenatal to kindergarten.

7.11 Other Quality Improvement Activities

7.11.1 List and describe any other activities that the state/territory provides to improve the quality of child care services, which may include consumer and provider education activities, and describe the measureable indicators of progress 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.
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.

8.1 Internal Controls and Accountability Measures To Help Ensure Program Integrity

8.1.1 Describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program are informed and trained regarding program requirements and integrity. Check all that apply.

- Issue policy manual
- Issue policy change notices
- Staff training. Describe:

Child Care Assistance regional managers and supervisors conduct orientations, onsite training, and online training to staff members to ensure they are informed and trained regarding program requirements and integrity.

- Ongoing monitoring and assessment of policy implementation. Describe: ________

Child Care Assistance regional managers and supervisors conduct regular staff meetings to ensure consistency with current policy and training on any new policy changes. In addition, the Improper Payment Unit conducts 276 case file reviews for the federal year and off year as well as 12-15 file reviews based on the workers sixth and twelfth month employee evaluation to provide child care management valuable data for program integrity, training and consistency throughout the state.

- 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 follow generally accepted accounting principles (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, including the following:

- Verifying and processing billing records to ensure timely payments to providers. Describe: ________

- Fiscal oversight of grants and contracts. Describe: ________

- Tracking systems to ensure reasonable and allowable costs. Describe: CYFD conducts audits on 100 % of the child care assistance payments prior to releasing any payments. The following are methods used in conducting the payment

- Other. Describe: ________
8.1.3 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program. Activities can include, but are not limited to, the following:

- Conduct a risk assessment of policies and procedures. Describe:
- Establish checks and balances to ensure program integrity. Describe:
  Department (CYFD) runs system reports that flag errors to identify unintentional or intentional program violations with the following process: Generate exception reports which identify all duplicate payments and all payments over a set dollar amount; Excel tools are used to cross check and validate that the calculated payments are correct and accurate; CYFD generates a number of other monthly and weekly reports from which major fluctuation in trends can be identified in addition to individual administrative errors.

- Use supervisory reviews to ensure accuracy in eligibility determination. Describe:
- Other. Describe:

8.1.4 Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include intentional and unintentional client and/or provider violations, as defined by the Lead Agency. Administrative errors refer to areas identified through the error-rate review process. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a) Check which activities that the Lead Agency has chosen to conduct to identify unintentional or intentional program violations.

- 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)).

- Run system reports that flag errors (include types). Describe:
  The Children, Youth and Families Department (CYFD) runs system reports that flag errors to identify unintentional or intentional program violations by conducting audits on 100% of the child care assistance payments prior to releasing any payments. The following are methods used in conducting the payment audits:
  - Generate exception reports which identify all duplicate payments and all payments over a set dollar amount.
  - Excel tools are used to cross check and validate that the calculated payments are correct and accurate.
  - CYFD generates a number of other monthly and weekly reports from which major fluctuation in trends can be identified in addition to individual administrative errors.

- Review enrollment documents and attendance or billing records.

- Conduct supervisory staff reviews or quality assurance reviews.

- Audit provider records.

- Train staff on policy and/or audits.

- Other. Describe:
  The Children, Youth and Families Department (CYFD) conducts data mining to identify trends. Data mining is conducted when errors are flagged through a system report and further investigation is required. CYFD has incorporated numerous edits within our delivery system that prohibit a caseworker from making administrative errors, or at least
warn the caseworker of situations he or she should be aware of before moving forward in the system. CYFD has invested substantial resources into making "front end" improvements toward the prevention of fraud and administrative errors. Some of the investments are through our Improper Payment Unit and Child Care Supervisors conducting additional staff reviews on case files. CYFD has implemented several measures to address program integrity, as described above.

b) Check which activities the Lead Agency has chosen to conduct to identify administrative 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).

☐ Run system reports that flag errors (include types). Describe: ___

The Children, Youth and Families Department (CYFD) runs system reports that flag errors to identify unintentional or intentional program violations by conducting audits on 100% of the child care assistance payments prior to releasing any payments. The following are methods used in conducting the payment audits:

☐ Generate exception reports which identify all duplicate payments and all payments over a set dollar amount.

☐ Excel tools are used to cross check and validate that the calculated payments are correct and accurate.

☐ CYFD generates a number of other monthly and weekly reports from which major fluctuation in trends can be identified in addition to individual administrative errors.

☐ Review enrollment documents and attendance or billing records.

☐ Conduct supervisory staff reviews or quality assurance reviews.

☐ Audit provider records.

☐ Train staff on policy and/or audits.

☐ Other. Describe:

The Children, Youth and Families Department (CYFD) conducts data mining to identify trends. Data mining is conducted when errors are flagged through a system report and further investigation is required. CYFD has incorporated numerous edits within our delivery system that prohibit a caseworker from making administrative errors, or at least warn the caseworker of situations he or she should be aware of before moving forward in the system. CYFD has invested substantial resources into making "front end" improvements toward the prevention of fraud and administrative errors.

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. Check and describe any activities that the Lead Agency uses to investigate and recover improper payments due to program violations or administrative errors, as defined by your state/territory.

a) Check activities that the Lead Agency uses to investigate and recover improper payments due to intentional program violations or fraud. 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: Full Amount

☐ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).

☐ Recover through repayment plans.
Reduce payments in subsequent months.
Recover through state/territory tax intercepts.
Recover through other means.
Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
Other. Describe:

b) Describe the results of the Lead Agency activities regarding the investigation and recovery of fraud or intentional program violations. ______

c) Check any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. 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: Full Amount
☐ Coordinate with and refer to the other state/territory agencies (e.g., state/territory collection agency, law enforcement agency).
☐ Recover through repayment plans.
☐ Reduce payments in subsequent months.
☐ Recover through state/territory tax intercepts.
☐ Recover through other means.
☐ Establish a unit to investigate and collect improper payments. Describe: ______
☐ Other. Describe:

d) Check any activities that the Lead Agency will use to investigate and recover improper payments due to administrative errors.

☒ Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount. Describe: Full Amount
☐ Coordinate with and refer to the other state/territory agency(ies) (e.g., state/territory collection agency, law enforcement agency).
☐ Recover through repayment plans.
☐ Reduce payments in subsequent months.
☐ Recover through state/territory tax intercepts.
☐ Recover through other means.
☐ Establish a unit to investigate and collect improper payments and describe the composition of the unit below.
☐ 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?

☒ Disqualify the client. If checked, describe this process, including a description of the appeal process for clients who are disqualified.

The Children, Youth and Families Department (CYFD) has policies in place to sanction clients and providers to help reduce improper payments due to program violations. If a client or provider fails to meet programmatic requirements that affect benefits and result in an overpayment, sanctions may be imposed according to the severity of the
infraction as determined by the department. Types of sanctions may include recoupment of overpayments, written warnings, suspension or disqualification from the program, and include permanent disqualification. In addition, clients who have been denied benefits, whose benefits have been reduced, suspended, or terminated, or who have been sanctioned or disqualified from the program, may request a fair hearing. The request for a fair hearing must be made in writing within 30 calendar days from the date the department took the adverse action affecting the claimant's benefits. CYFD will review the request for hearing and determine if the matter can be resolved without proceeding to a fair hearing. If the matter cannot be resolved without a fair hearing, the department conducts the fair hearing within 60 calendar days and notifies the claimant of the date of the hearing no less than 14 calendar days prior to the hearing. The claimant is notified in writing of the hearing officer’s decision within 14 calendar days of the hearing decision.

Disqualify the provider. If checked, describe this process, including a description of the appeal process for providers who are disqualified.

The Children, Youth and Families Department (CYFD) has policies in place to sanction clients and providers to help reduce improper payments due to program violations. If a client or provider fails to meet programmatic requirements that affect benefits and result in an overpayment, sanctions may be imposed according to the severity of the infraction as determined by the department. Types of sanctions may include recoupment of overpayments or disqualification from the program. The request for a fair hearing must be made in writing within 30 calendar days from the date the department took the adverse action affecting the claimant’s benefits. CYFD will review the request for hearing and determines if the matter can be resolved without proceeding to a fair hearing. If the matter cannot be resolved without a fair hearing, the department conducts the fair hearing within 60 calendar days of the hearing and notifies the claimant of the date of the hearing no less than 14 calendar days prior to the hearing. The claimant is notified in writing of the hearing officer’s decision within 14 calendar days of the hearing decision.

Prosecute criminally.