NOMB Control Number: 0970-0114

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Child Care and Development Fund (CCDF) Plan

for

State/Territory New Mexico

FFY 2022 – 24

This Plan describes the Child Care and Development Fund program to be administered by the state or territory for the period from 10/1/2021 to 9/30/2024, 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.

Table of Contents

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.

The CCDF Plan is how states and territories apply for CCDF funding (658E (a)) and 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 (98.16). ACF acknowledges that in the FY 2022 – 2024 Plan, states and territories may still be operating under approved waivers related to the COVID-19 pandemic and where appropriate plan responses should reflect the approved waivers. The CCDF Plan allows states and territories to describe their implementation of the CCDF program and it is organized into the following sections:

1. Define CCDF Leadership and Coordination with Relevant Systems and Funding Sources

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 Children

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 Program Integrity and Accountability

These organizational categories reflect key goals 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.

Citations

ACF recognizes that Lead Agencies use different mechanisms to establish policies, such as state statute, regulations, administrative rules, or policy manuals or policy issuances. When asked to provide a citation in the CCDF Plan, Lead Agencies should list the citation(s) for the policy that clearly identifies and establishes the requirement and that allows the Lead Agency to enforce the requirement. Lead Agencies may list multiple sources as needed to cover all types of providers receiving CCDF (e.g., policies for licensed providers may be established in licensing regulations, and policies for license-exempt providers may be in subsidy rules). These citations are intended to provide documentation to support the requested information but not replace requested responses or descriptions. Complete answers must include citations, responses, and descriptions.

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/ 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 Leadership and Coordination with Relevant Systems and Funding Sources

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. Respondents are asked to identify how match and maintenance-of-effort (MOE) funds are used. Lead Agencies explain their coordination with child care resource and referral (CCR&R) systems and describe their efforts on their disaster preparedness and response plans to support continuity of operations in response to emergencies.

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) and 98.16 (a)). Note: An amendment to the CCDF State Plan is required if the Lead Agency changes or if the Lead Agency official changes.

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

Identify the Lead Agency or joint interagency office designated by the state or territory. ACF will send official grant correspondence, such as grant awards, grant adjustments, Plan approvals, and disallowance notifications, to the designated contact identified here (658D(a) and 98.16(a)).

a.   Lead Agency or Joint Interagency Office Information:

Name of Lead Agency: New Mexico Early Childhood Education and Care Department

Street Address: 1120 Paseo de Peralta

City: Santa Fe

State: New Mexico

ZIP Code: 87505

Web Address for Lead Agency: www.nmececd.org

b.   Lead Agency or Joint Interagency Official Contact Information:

Lead Agency Official First Name: Elizabeth

Lead Agency Official Last Name: Groginsky

Title: Cabinet Secretary

Phone Number: 505-231-2997

Email Address: Elizabeth.Groginsky@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: Claire

CCDF Administrator Last Name: Dudley Chavez

Title of the CCDF Administrator: Division Director

Phone Number: 505-690-7239

Email Address: Claire.DudleyChavez@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

Phone Number: 505-331-3577

Email Address: Kimberly.Brown@state.nm.us

Description of the Role of the Co-Administrator: The role of the co-administrator is to support the administrator with general oversight of the CCDF program.

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 the Lead Agency retains overall responsibility for the administration of the program (658D(b) and 98.16 (d)(1)). 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(d)(1)). Check one.

☒ a. All program rules and policies are set or established at the state or territory level. If checked, skip to question 1.2.2.

☐ b. Some or all program rules and policies are set or established by local entities or agencies. If checked, indicate which entities establish the following policies. Check all that apply.

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

☐ State or territory. Identify the entity. *Click or tap here to enter text.*

☐ Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the eligibility policies the local entity(ies) can set. *Click or tap here to enter text.*

☐ Other. Describe: *Click or tap here to enter text.*

ii. Sliding-fee scale is set by the:

☐ A. State or territory. Identify the entity. *Click or tap here to enter text.*

☐ B. Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the sliding fee scale policies the local entity(ies) can set. *Click or tap here to enter text.*

☐ C. Other. Describe: *Click or tap here to enter text.*

iii. Payment rates and payment policies are set by the:

☐ A. State or territory. Identify the entity. *Click or tap here to enter text.*

☐ B. Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the payment rates and payment policies the local entity(ies) can set. *Click or tap here to enter text.*

☐ C. Other. Describe: *Click or tap here to enter text.*

iv. Licensing standards and processes are set by the:

☐ A. State or territory. Identify the entity. *Click or tap here to enter text.*

☐ B. Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of licensing standards and processes the local entity(ies) can set. ***Click or tap here to enter text.***

☐ C. Other. Describe. *Click or tap here to enter text.*

v. Standards and monitoring processes for license-exempt providers are set by the:

☐ A. State or territory. Identify the entity. *Click or tap here to enter text.*

☐ B. Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of standards and monitoring processes for license-exempt providers the local entity(ies) can set. *Click or tap here to enter text.*

☐ C. Other. Describe: *Click or tap here to enter text.*

vi. Quality improvement activities, including QRIS are set by the:

☐ A. State or territory. Identify the entity. *Click or tap here to enter text.*

☐ B. Local entity (e.g., counties, workforce boards, early learning coalitions). If checked, identify the entity and describe the type of quality improvement activities the local entity(ies) can set. *Click or tap here to enter text.*

☐ C. Other. Describe: *Click or tap here to enter text.*

vii. Other. List and describe any other program rules and policies that are set at a level other than the state or territory level: **Click or tap here to enter text.**

1.2.2 The Lead Agency has broad authority to operate (i.e., implement activities) through other agencies, as long as it retains overall responsibility. Complete the table below to identify which entity(ies) implements or performs CCDF services.

a. Check the box(es) to indicate which entity(ies) implement or perform CCDF services.

CCDF Activity	CCDF Lead agency	TANF agency	Local government agencies	CCR&R	Community-based organizations
Who conducts eligibility determinations?	☒	☐	☐	☐	☐
Who assists parents in locating child care (consumer education)?	☒	☐	☐	☒	☐
Who issues payments?	☒	☐	☐	☐	☐
Who monitors licensed providers?	☒	☐	☐	☐	☐
Who monitors license-exempt providers?	☒	☐	☐	☐	☐
Who operates the quality improvement activities?	☒	☐	☐	☒	☒

b. Other. List and describe any other state or territory agencies or partners that implement or perform CCDF services and identify their responsibilities. *Click or tap here to enter text.*

1.2.3 Describe the processes the Lead Agency uses to oversee and monitor CCDF administration and implementation responsibilities performed by other agencies as reported above in 1.2.1 and 1.2.2 (98.16(b)). In the description include:

- Written agreements. Note: The contents of the written agreement may vary based on the role the agency is asked to assume or type of project but must include at a minimum the elements below (98.11(a)(3)).
  - Tasks to be performed
  - Schedule for completing tasks
  - Budget which itemizes categorical expenditures in accordance with CCDF requirements
  - Monitoring and auditing procedures
  - Indicators or measures to assess performance of those agencies

- Any other processes to oversee and monitor other agencies.

As the Lead Agency, the New Mexico Early Childhood Education and Care Department ("Lead Agency" or "ECECD") provides oversight and monitoring of CCDF administration and implementation, including those responsibilities performed by other agencies and entities. Each entity that conducts business on behalf of ECECD is required to enter into an agreement, which includes the following: (1) tasks to be performed; (2) a schedule for completion of tasks; (3) a budget which itemizes categorical expenditures in accordance with CCDF requirements; (4) monitoring and auditing procedures; and (5) indicators or measures to assess agency performance. ECECD meets regularly (weekly or monthly) with executives of each agency to receive task updates and to ensure that expectations and deliverables as outlined in their respective Scopes of Work are met. ECECD requires that agencies submit quarterly reports detailing task completion and budget expenditures. If concerns are identified, ECECD will develop a performance improvement plan and monitor the agency's adherence to the plan.

1.2.4   Upon request, and to the extent practicable and appropriate, Lead Agencies must ensure 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 to other public agencies. This includes 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 (e.g., subsidy, registry, and QRIS systems) available to public agencies in other states. The Lead Agency ensures any code or software for CCDF information systems can be made available to public agencies within New Mexico through an Enterprise Memorandum of Understanding (MOU) with a number of New Mexico State agencies to share CCDF data to support the overall objectives and the mission to improve outcomes for the children of New Mexico. The MOU specifically outlines the data sharing requirements. The agreement establishes protocols on data element standardization, data security, data encryption during transit and rest, agency responsibility around Information for Inspection of Public Records Act (IPRA) and the overall objective of data interoperability.   For public agencies in other states, the Lead Agency makes available information that is developed using CCDF funds through an Inspection of Public Records Act (IPRA) request which are processed by the Office of General Counsel Public Records Custodian. The most efficient way to place an official request to inspect ECECD records is to fill out the request to inspect public records form and email it to ececd.records@state.nm.us for processing. ECECD will respond the written request seeking child care information systems within THREE business days and provide the requester with the information/data/systems sought, or provide the date it will be sent to the requestor.

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. The Lead Agency adheres to all state and federal regulations regarding the use and disclosure of Personally Identifiable Information, including information protected under the Health Insurance Portability and Accountability Act (HIPAA) and other applicable state and federal laws. The policies governing the use and disclosure of confidential and Personally Identifiable Information regarding program participants and child care providers is outlined in New Mexico state regulation (the New Mexico Administrative Code): **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 642B(b)(I)(A)(i) of the Head Start Act) (658E(c)(2)(R); 98.15(b)(1)) or similar coordinating body pursuant to 98.14(a)(1)(vii).

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

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

1.3.1 Describe the Lead Agency's consultation efforts in the development of the CCDF Plan. Note: Lead Agencies must describe in a. – c. consultation efforts with required partners listed in Rule and Statute. ACF recognizes that there is great value in consulting with other entities and has provided element d. for Lead Agencies to identify consultation efforts with other agencies or organizations.

a. Describe how the Lead Agency consulted with appropriate representatives of general purpose local governments. ECECD consulted with appropriate representatives of general purpose local governments by inviting executive leaders from local governments to participate in regional and stakeholder meetings on the CCDF plan. Meetings were held with representatives of the two largest municipalities in the state (Albuquerque and Las Cruces) to discuss the CCDF Plan and collaborate in an effort to expand access to child care. Additionally, a letter was sent to all county managers for each of New Mexico's 33 counties inviting them to attend the CCDF Plan public hearing. ECECD also extended its outreach efforts to the leadership of the New Mexico Association of Counties as well as the New Mexico Municipal League to promote efforts to jointly collaborate in expanding statewide access to child care.

b. Describe how the Lead Agency consulted with the State Advisory Council or similar coordinating body. The Lead Agency consulted with and presented the CCDF Planning process to the New Mexico Early Learning Advisory Council during their quarterly meeting held on March 11, 2021. Members of the Advisory Council had an opportunity to provide input into the planning process and development of the CCDF Plan. The Lead Agency also shared the CCDF Plan with advocacy groups and sovereign nations.

c. Describe, if applicable, how the Lead Agency consulted with Indian tribes(s) or tribal organizations(s) within the state. Note: The CCDF regulations recognize the need for states to conduct formal, structured consultation with Tribal governments, including Tribal leadership. Many states and tribes have consultation policies and procedures in place. The ECECD Assistant Secretary for Native American Early Education and Care convened a forum on March 23, 2021 with tribal leaders and offered a comment period for tribal leadership. ECECD also engaged with tribal leaders through dedicated bi-weekly meetings. Representation from New Mexico's 23 Tribes, Pueblos and Nations participated at each meeting. ECECD also sought input from tribal leaders on improving child care in tribes, pueblos, and nations throughout the state. There were approximately 50 participants in attendance during the consultation meetings.

d. Describe any other entities, agencies, or organizations consulted on the development of the CCDF Plan. ECECD engaged with many early childhood stakeholders on the development of the CCDF

Plan as possible. Nine regional sessions and 15 stakeholder meetings were held to share information about the CCDF Plan and provide entities with the opportunity to submit feedback and comments. Three of the nine sessions were conducted in Spanish. ASL interpretation and Spanish translation were provided at all meetings to ensure accessibility. Participants represented child care and early childhood service providers, institutions of higher education, professional development providers, early childhood coaches, consultants, trainers, local government, and community representatives. Stakeholder meetings included the following groups: The Early Learning Advisory Council; the Early Childhood Higher Education Task Force; the Disaster Preparedness Plan Review (including FEMA); Child Care Licensing; Child Care Assistance; the NM Public Education Department, Resource and Referral; CCDF tribal Administrators; tribal leaders; the Pritzker Children's Initiative Prenatal to Three Steering Committee; early childhood care providers; Part C Interagency Coordinating Council; NM Head Start Association; Transition Steering Committee; and the NM Out of School Time Network.

1.3.2 Describe the statewide or territory-wide public hearing process held to provide the public with an opportunity to comment on the provision of child care services under this Plan (658D(b)(1)(C); 98.16(f)). Reminder: Lead Agencies are required to hold at least one public hearing in the state or territory, with sufficient statewide or territory-wide distribution of notice prior to such a hearing to enable the public to comment on the provision of child care services under the CCDF Plan. At a minimum, this description must include:

a. Date of the public hearing. June 4, 2021
Reminder: Must be no earlier than January 1, 2021, which is 9 months prior to the October 1, 2021, effective date of the Plan. If more than one public hearing was held, please enter one date (e.g., the date of the first hearing, the most recent hearing or any hearing date that demonstrates this requirement).

b. Date of notice of public hearing (date for the notice of public hearing identified in a. May 14, 2021
Reminder: Must be at least 20 calendar days prior to the date of the public hearing. If more than one public hearing was held, enter one date of notice (e.g., the date of the first notice, the most recent notice or any date of notice that demonstrates this requirement).

c. How was the public notified about the public hearing? Please include specific website links if used to provide notice. Notice of the public hearing was posted through various methods: (1) On the Lead Agency's website (www.nmececd.org); (2) ECECD published the notice of public hearing in three publications -- the Albuquerque Journal (www.abqjournal.com), Santa Fe New Mexican (www.thenewmexican.com), and the Las Cruces Sun-News (www.lcsun-news.com); (3) This information was also shared with child care providers during weekly calls with the Lead Agency's Cabinet Secretary, weekly e-mail communications to the early childhood care community, and regional and stakeholder meetings in the months leading up to the posting of the notice and the plan.

d. Hearing site or method, including how geographic regions of the state or territory were addressed. Due to COVID-19 pandemic restrictions, public hearings are being conducted via the Zoom platform and are recorded.

e. How the content of the Plan was made available to the public in advance of the public hearing. (e.g., the Plan was made available in other languages, in multiple formats, etc.) The content of the draft Plan was posted on ECECD's website. The notice of public hearing and the link to the website was shared broadly through listservs, weekly calls, stakeholder meetings, and the ECECD weekly communication e-blast. ECECD will provide the Plan in Spanish.

f. How was the information provided by the public taken into consideration regarding the provision of child care services under this Plan? Input and comments from each regional session and stakeholder meeting was obtained and considered in development of the CCDF Plan. Ideas shared during consultation were addressed throughout the plan development process to incorporate joint collaboration efforts, networking, professional development, family engagement, equity, and access.

1.3.3   Lead Agencies are required to make the submitted and final Plan, any Plan amendments, and any approved requests for temporary relief (i.e., waivers) publicly available on a website (98.14(d)). Please note that a Lead Agency must submit Plan amendments within 60 days of a substantial change in the Lead Agency's program. (Additional information may be found at https://www.acf.hhs.gov/occ/resource/pi-2009-01.)

a. Provide the website link to where the Plan, any Plan amendments, and/or waivers are available. Note: A Plan amendment is required if the website address where the Plan is posted is changed. https://www.nmececd.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: Strategies that the Lead Agency utilized in working with advisory committees include the following: (1) The establishment of the ECECD Advisory Council was mandated by the Early Childhood Education and Care Act to: (a) develop outcomes for children and families receiving services through early childhood programs; (b) develop goals and objectives with corresponding indicators that measure whether each of those objectives is reached; and (c) develop a workforce plan to include a career ladder, wage structure, and professional development plan that applies to the full continuum of programs. Of 300 applications received for membership of the ECECD Advisory Council, 41 individuals were selected from across the state. The Advisory Council members are early childhood care providers, health professionals, workforce development professionals, higher education experts, and fully represent New Mexico's ethnic, geographic, and cultural diversity. Final report and recommendations from the Advisory Council can be found at: https://www.nmececd.org/new-mexico-early-childhood-education-and-care-department-advisory-council/ In addition to collaborating with the Advisory Council, ECECD consulted with several advisory committees including the Interagency Coordinating Council (ICC) and the Pritzker Prenatal to Three Steering Committee. The ICC is federally mandated under the Individuals with Disabilities Education Act (IDEA) Part C to advise and assist in the administration of a statewide system of early intervention through the state's Family Infant (FIT) Program. The role of the ICC is to address the needs of families of infants and toddlers with, or at risk for, developmental delay and assists in the implementation of a coordinated and family-centered early childhood service system. The draft CCDF Plan was shared with the ICC on April 15, 2021. ECECD also consulted with the Pritzker Prenatal to Three Steering Committee whose mission is to improve outcomes for young children by equitably increasing the availability and use of affordable, high quality programs and services for infants, toddlers, expectant parents, and multi-generational families. The Plan was shared with the Pritzker Steering Committee on April 1, 2021.

☒ Working with child care resource and referral agencies. Describe: ECECD shared the Plan with the child care resource and referral agency. Staff of the resource and referral agency attended regional and stakeholder meetings to discuss the development of the Plan. The resource and referral agency posted the plan on its website (https://www.newmexicokids.org) and sent an e-mail with a link to the Plan to its listserv.

☒ Providing translation in other languages. Describe: The Plan will be published in Spanish. The Notice was translated into Spanish. The Lead Agency will also provide translation services at the Public Hearing.

☒ Sharing through social media (e.g., Twitter, Facebook, Instagram, email). Describe: ECECD posted the proposed Plan on an array of social media platforms including Twitter, Facebook, Instagram and included a link to the Plan on its weekly e-mail communications.

☒ Providing notification to stakeholders (e.g., parent and family groups, provider groups,

advocacy groups). Describe: The Lead Agency provided notification to two child care associations (New Mexico Child Care and Education Association and New Mexico Early Care and Learning Association) as well a number of advocacy groups (Growing Up New Mexico, New Mexico Voices for Children, and the New Mexico Association for the Education of Young Children). Each of these groups posted the draft Plan on their website and shared it with their memberships.

☒ Working with statewide afterschool networks or similar coordinating entities for out-of-school time. Describe: ECECD met with the staff and leadership team of the New Mexico Out-of-School Time Network to discuss the development of the CCDF Plan and methods of working together to increase access to child care and out-of-school time opportunities statewide. Members of the Network discussed the nine guiding principles and specific steps toward high-quality out-of-school time. The Out-of-School Time Network posted the CCDF Plan on its website and invited its membership to attend the public hearing.

☒ Other. Describe: ECECD met with members of the Eight Northern Indian Pueblos and the New Mexico Head Start Association to discuss the development of the CCDF Plan and to engage in methods of jointly working toward expanding access to child care. Each of these organizations posted the CCDF Plan on their respective websites and invited their members to attend the public meeting where the Plan was presented. In addition, ECECD partnered with Regional Educational Cooperative #10. This partnership is a collaboration between ECECD, the New Mexico Public Education Department, and the New Mexico Regional Education Cooperatives Association (NMRECA). NMRECA is comprised of ten regional education cooperatives situated throughout the state supporting 89 school districts, charter schools, and state-supported schools with direct services to 68 member school districts. This system of collaboration ensures that all New Mexico children, families, schools, and communities receive high-quality and comprehensive education and health services.

1.4 Coordination with Partners to Expand Accessibility and Continuity of Care

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

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

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

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

- extending the day or year of services for families.

- smoothing transitions for children between programs or as they age into school.

- enhancing and aligning the quality of services for infants and toddlers through school- age children.

- linking comprehensive services to children in child care or school-age settings.

- developing the supply of quality care for vulnerable populations (as defined by the Lead Agency) in child care and out-of-school time settings.

a. The Lead Agency is required to coordinate with the following agencies. Provide a description for how coordination occurred.

i. Appropriate representatives of the general purpose local government, which can include counties, municipalities, or townships/towns. Describe the coordination goals, processes, and results: ECECD consulted with representatives of general purpose local governments by inviting executive leaders from local governments to participate in regional and stakeholder meetings on the CCDF Plan. Meetings were held with representatives of the two largest municipalities in the state (Albuquerque and Las Cruces) to discuss the CCDF Plan and coordinate efforts to expand access to child care. Additionally, a letter was sent to all county managers for each of New Mexico's 33 counties inviting them to attend the CCDF Plan public hearing. ECECD extended its outreach to the New Mexico Association of Counties and the New Mexico Municipal League to promote increased access to child care.

ii. State Advisory Council on Early Childhood Education and Care or similar coordinating body (pursuant to 642B(b)(I)(A)(i) of the Head Start Act). Describe the coordination goals, processes, and results: The Lead Agency coordinates with the Early Learning Advisory Council (ELAC), which was created pursuant to the New Mexico Early Childhood Care and Education Act ("Act"), enacted in 2011. The Act establishes a comprehensive early childhood care and education system through an aligned continuum of state and private programs. The ELAC was created to ensure implementation of the Act. The scope of responsibility and accountability of ELAC was administratively attached to the NM Children, Youth and Families Department, Public Education Department and Department of Health. That responsibility transitioned to ECECD when it was created on July 1, 2020. ELAC is charged to lead the development or enhancement of a high quality, comprehensive system of early childhood development and care that ensures statewide coordination and collaboration among the wide range of early learning programs and services within the state, including child care, home visitation, Early Head Start, Head Start, federal Individuals with Disabilities Education Act (Part C and 619 Part B) programs for preschool, toddlers, infants, families, and pre-kindergarten programs and services. Membership of ELAC is comprised of 13 individuals. The duties of the ELAC, in addition to those listed in the NM Head Start Act, are to develop a comprehensive community needs assessment and strategic plan to delineate activities for the council and committees, including reporting on performance measures and recommendations for improving the whole Early Learning System; alignment and coordination of programs; assessing the higher education system; making improvements to the Early Learning Guidelines; and, conducting outreach to underrepresented populations.

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

iii. Indian tribe(s) and/or tribal organization(s), at the option of individual tribes. Describe the coordination goals, processes, and results, including which tribe(s) was (were) consulted: The New Mexico State Tribal Collaboration Act was enacted in 2009 and requires cabinet-level agencies to develop policies that promote a consistent approach through which the state and tribes can work to better collaborate and communicate on issues of mutual concern while respecting tribal sovereignty. This Act designated agency tribal liaisons, provides for culturally appropriate training to state agency employees who work with tribes, annual reporting on each agency's accomplishments, and mandates an annual summit with the State's Governor to address issues of mutual concern. The Lead Agency's coordination goals are to work with Tribes to develop successful programs and services to benefit New Mexico's Native American citizens. ECECD's coordination goals are to conduct

consultations with the tribal leaders of all of New Mexico's 23 tribes, pueblos, and nations by December 31, 2021. The consultation process will include providing an overview of ECECD operations, identify mutual goals, promote positive relations through mutual respect, and strive for programmatic actions to be culturally relevant and developed and implemented with cultural and linguistic competence. Through each consultation, an agency brief is shared with participants showcasing state-funded early childhood services performed within the counties of the individual Tribes. On March 23, 2021, ECECD hosted a comment session with the pueblos, tribes and nations. Fifty participants collectively spoke to the continued importance of multicultural environments for children to learn in. Of the 23 tribes, pueblos, and nations in New Mexico, 15 are direct CCDF grantees. Since the establishment of ECECD, government-to-government consultation began with tribal governors and presidents with bi-weekly communications commencing in the Fall of 2020. These sessions provide continued opportunities for all stakeholders to connect with ECECD to promote awareness and expansion of early childhood services. During the comment session held in March 2021, ECECD was informed that the urban Native population and the connection to community services involved an estimated population of 26,000. Other guidance received from this collaboration included: (1) understanding the landscape of Native American families and identifying access points for child care services; (2) that all educators have a multicultural understanding of the diversity of children in their care; (3) training on utilizing safe sleeping of traditional cradle boards; (4) educational degree pathways to increase the number of Native American early childhood educators; (5) background checks that can be conducted through tribal courts or other commissions located on tribal lands; (6) access to equipment and resources for early childhood centers; and (7) increased collaboration with institutes of higher education and monthly professional development. In addition to these efforts, formal communication was sent to tribal governors and presidents to provide comment on how to strengthen child care services in New Mexico. This plan provides an opportunity to truly collaborate on child care services for Native American children.

☐ N/A—Check here if there are no Indian tribes and/or tribal organizations in the state.

iv. 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 Part B, Section 619 for preschool). Describe the coordination goals, processes, and results: The Lead Agency's coordination goals are to ensure a seamless transition between IDEA Part C and Part B services. In New Mexico, there are 33 local transition teams consisting of Part C and Part B representatives, local school officials, Head Start and Early Head Start representatives who meet regularly to discuss strengths and/or challenges they are experiencing during the transition from Part C to Part B services. Each of these teams includes a transition coach who is an expert in the Part C to Part B transition. These teams also make recommendations to local Part C and Part B providers to assist in moving the transition forward. The coordination between Part C to Part B transition is a critical part of IDEA service delivery. Under Part C, the Family Infant Toddler (FIT) Program administered by ECECD provides early intervention services to infants & toddlers (under the age of three) who have, or are at-risk for, developmental delays. Early intervention services may begin at any time between birth and age three. Supports and services include evaluations of a child's strengths and needs; individualized learning experiences; specialized therapies, such as physical, occupational, and/or speech and language therapy; family supports, such as home visits; family service coordination; and transition supports to facilitate a smooth change from early intervention to preschool programs. These services may be provided in the home, child care centers, Early Head Start programs, or other early childhood settings. The foundation for early intervention services is the development and implementation of an Individualized Family Service Plan (IFSP). The child's caregiver(s) will work in coordination with a team of professionals who will determine needs and individualized outcomes for the child and family and the services necessary to meet those outcomes. Children deemed eligible for services must receive an IFSP within 45 days. All children must transition to other programs at age three. Transition planning will ensure a smooth and

effective transition of the child and family from the FIT Program to other programs in the community, such as public school preschool special education services, Head Start, or community care and education programs. Transition planning is a multistep process and will be finalized at an annual IFSP or transition conference meeting which occurs at least 90 days but not more than 9 months prior to the child's third birthday. Under Part B of IDEA, 619, children are referred for an early childhood special education evaluation from a variety of different referral sources, such as the FIT Program (Part C of IDEA), local pediatricians, child care, PreK, and Head Start/Early Head Start. The eligibility criteria are significantly different in Part C and Part B, with Part B requiring that the child exhibit an educational disability in one or more disability categories based on the results of a variety of educational and developmental evaluations. Once found eligible, an Individual Education Plan (IEP) is developed with the family and services are provided in the most inclusive setting possible such as a community-based preschool setting, Head Start, public school PreK or in some cases, in a classroom designed for children with IEPs. Children are evaluated every three years for continued eligibility and may or may not continue to have an IEP when they transition into kindergarten.

v. State/territory office/director for Head Start state collaboration. Describe the coordination goals, processes, and results: The Lead Agency oversees the New Mexico Head Start State Collaboration Office (HSSCO). The HSSCO Director serves as a liaison between Head Start Programs, state agencies, and other agencies within the community. The following coordination goals were developed based on the results of the Annual Report and Annual Head Start Needs Assessment (https://www.nmececd.org/wp-content/uploads/2021/04/NM-Head-Start-Annual-Needs-Assessment-Report-2021.pdf): (1) Implement and launch the media plan for the Opioid/Substance Misuse campaign; (2) Increase participation of Tribal Head Start programs in state initiatives; (3) Increase oral health promotion with the support of Oral Health Liaison from the Department of Health; (4) Strengthen collaboration with tribal and non-tribal social welfare programs; (5) Develop an MOU/MOA with the NM Head Start Association; (6) Deepen collaboration with the new Migrant Seasonal Head Start grantee; (7) Host the first New Mexico Transition Summit by Summer of 2021; (8) Increase Infant Mental Health Consultants; and (9) Strengthen collaboration with state McKinney-Vento Liaison to support families experiencing homelessness.

vi. State/territory agency responsible for public health, including the agency responsible for immunizations. Describe the coordination goals, processes, and results:
The New Mexico Department of Health (DOH) is the state agency responsible for immunizations. The Lead Agency's goals are to promote greater health and well-being in collaboration with the DOH by conducting joint trainings to ensure children are immunized in a timely manner. The DOH Vaccine Advisory Committee includes members of ECECD staff. Due to training efforts, the immunization rate for New Mexico children in child care is one of the highest in the nation. ECECD also works with DOH on statewide prevention and promotion activities. For example, our goal is to increase participation in the Women, Infants, and Children Program (WIC), which offers free healthy foods, nutrition education, breastfeeding support, and community connections to other services. The Home Visiting Program, administered by the Lead Agency, also provides education for families to promote greater health and well-being through home visits and offers referrals to other types services to assist families in need, including immunizations. The overarching goal of Home Visiting is to improve maternal and child health outcomes for children and families. Lastly, through the Family Connects New Mexico nurse home visiting program, families of newborns are connected with nurses to assess 13 domains of wellness and are given a warm hand-off for additional supports at no cost. Through inter- and intra-agency coordination of services, New Mexico saw an increase in the number of women who breastfed and participated in the WIC program.

vii. State/territory agency responsible for employment services/workforce development. Describe the coordination goals, processes, and results: The Lead Agency's coordination goals in conjunction with the New Mexico Department of Workforce Solutions (DWS) are to: (1)

Focus on workforce development for families who wish to become employed or are seeking training or education opportunities; and (2) Develop an early education apprenticeship program. The Lead Agency's processes included regular engagement with the DWS to ensure that families seeking employment and workforce development services were also aware that child care assistance was available to eligible families in pursuit of employment, education, and training opportunities. Through this coordination, an apprenticeship program for aspiring early childhood education and care professionals was established that included a community branch of a state university, local child care organizations, and a local workforce development board.

viii. State/territory agency responsible for public education, including Prekindergarten (PreK). Describe the coordination goals, processes, and results: The New Mexico Public Education Department (PED) oversees the state's public education system. ECECD is responsible for administering PreK programs. The coordination goal of ECECD was to ensure that all PreK programs have a transition plan in place for each child entering Kindergarten. This goal was accomplished in collaboration with the New Mexico PED. Head Start programs also worked jointly with public schools to develop and implement a transition plan. The Lead Agency's processes include monitoring PreK programs for compliance and initiating administrative action, including corrective action when appropriate. The Lead Agency's focus areas are school readiness, teacher preparation and family engagement.

ix. State/territory agency responsible for child care licensing. Describe the coordination goals, processes, and results: The Lead Agency is responsible for administering child care licensing functions, including the development and enforcement of standards and procedures for the licensing of facilities and educators who provide child care. Goals are to: (1) establish minimum requirements for licensing facilities providing non-residential care to children in order to protect the health, safety, and development of children; (2) monitor facility compliance through surveys to identify any areas that could be dangerous or harmful to children or staff members; (3) monitor and survey out of school time programs; and (4) encourage the establishment and maintenance of child care centers, homes, and facilities for children that provide a humane, safe, and developmentally appropriate environment.

x. State/territory agency responsible for the Child and Adult Care Food Program (CACFP) and other relevant nutrition programs. Describe the coordination goals, processes, and results:
The Lead Agency administers the USDA CACFP and other relevant nutrition programs. The coordination goals of the Lead Agency are to ensure eligible children and adults receive nutritious meals that meet USDA meal pattern requirements. The Lead Agency oversees the programs of eligible institutions, school food authorities, local government entities, faith-based organizations, private non-profit organizations such as Boys and Girls Clubs, Head Start programs, and certain for-profit institutions that meet eligibility requirements. There are 112 organizations overseeing 630 facilities. The Lead Agency's processes are to provide reimbursement to child care providers for nutritious meals and snacks served to low-income children in child care settings. Thirty-five sponsoring organizations provided summer food service meals during the 2020-2021 school year. An average of 670,000 CACFP and 870,000 SFSP meals and snacks provided each month (or about 1.5 million). The Lead Agency piloted a program to deliver shelf stable meals to rural or isolated families and is also working with the Department of Health to implement a Farm to Preschool program to encourage the purchase of fresh, local produce.

xi. 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, processes, and results: The Lead Agency partners with state McKinney-Vento liaisons within the Public Education Department to improve access to child care services for homeless children. Coordination goals entail working jointly to improve access to services and addressing the unique needs of homeless

children and their families. The Head Start State Collaboration Director held monthly meetings with McKinney-Vento liaisons to develop a joint process for referrals and outreach. The Lead Agency distributed program brochures to liaisons to support their referral and outreach efforts. A survey of liaisons was also conducted to gauge the level of awareness of the CCDP and child care assistance.

xii. State/territory agency responsible for the Temporary Assistance for Needy Families (TANF) program. Describe the coordination goals, processes, and results: The New Mexico Human Services Department (HSD) administers TANF and also funds PreKindergarten, home visiting, and child care. The Lead Agency and HSD's coordination goals are to eliminate barriers for TANF recipients in accessing prenatal to five, and early childhood education services. The agencies' processes include improving information and data sharing for families receiving TANF benefits. The Cabinet Secretary and CIO of ECECD are active members of HSD's data integration project. ECECD is a member of the control board and the executive steering committing that monitors the progress on this project. The goal is to have the health and human service agencies' child and family data fully integrated by 2024.

xiii. Agency responsible for Medicaid and the state Children's Health Insurance Program. Describe the coordination goals, processes, and results: The New Mexico Human Services Department (HSD) administers the state's Medicaid and Children's Health Insurance Programs. Coordination goals are to ensure that all eligible uninsured individuals become enrolled for healthcare benefits. The agencies' processes will include information and data sharing to improve access to healthcare. The Cabinet Secretary and CIO of ECECD are active members of HSD's data integration project. ECECD is a member of the control board and the executive steering committing that monitors the progress on this project.

xiv. State/territory agency responsible for mental health. Describe the coordination goals, processes, and results: The New Mexico Human Services Department (HSD) administers mental health services under its Medicaid program and hosts the New Mexico Behavioral Health Collaborative, which includes several state agencies. The coordination goal of the Lead Agency is to collaborate with HSD and the Behavioral Health Collaborative in increasing access to behavioral health services and improving those services through a single, statewide behavioral health delivery system. The Lead Agency's processes, through the Preschool Development Grant B-5, established a statewide Infant Early Childhood Mental Health (IECMH) Task Force which included five subcommittees: (1) Program Model; (2) Equity; (3) Workforce Development; (4) Policy & Financing; and (5) Data & Evaluation. The Task Force was charged with developing a plan that balanced New Mexico's longstanding, broad-based efforts and accomplishments in early childhood and infant mental health with expansion and integration of evidence-based practices in the subspecialty of IECMH Consultation. The Lead Agency hosted the task force in consultation with the University of New Mexico's Project ECHO and the National Center of Excellence in IECMH Consultation. This work was also informed by New Mexico's Birth-Five Needs Assessment and the related Native American Perspectives report, which included feedback from thousands of New Mexicans. The Lead Agency partnered with the New Mexico Association for Infant Mental Health to provide technical assistance to support early childhood professionals, specifically home visiting staff, to become endorsed in a Level I or Level II specializations for infant mental health. Ongoing reflective supervision support is provided by the home visiting system to ensure the workforce has the necessary tools to support families and their children's psychological, social, and emotional well-being in relation to their caregivers, environment, and culture.

xv. 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, processes, and results: The Lead Agency oversees the Child Care Resource and Referral (CCRR). Coordination goals are to maintain an up-to-date statewide database of childcare providers licensed or registered by the Lead Agency. The CCRR's processes

include maintaining a database containing provider licensing information and Star Level as they progress through the state's early intervention Tiered Quality Rating and Improvement System (known as FOCUS). This database provides the public with accurate and current child care provider information. The Lead Agency also oversees a training and development system designed to support programs across all early learning settings. A comprehensive and detailed training catalogue was made available to all providers to foster professional development in early childhood education. The Lead Agency partnered with Quorum, an online professional development membership program for early educators. Additionally, the Lead Agency assisted Out-of-Time school providers achieve licensure status.

xvi.   Statewide afterschool network or other coordinating entity for out-of-school time care (if applicable). Describe the coordination goals, processes, and results: New Mexico's Out-of-School Time care network (NMOST) works in partnership with the Public Education Department. NMOST, as a non-profit collaboration of public and private organizations and community members, brings together policymakers, educators, child care providers, youth development workers, and other stakeholders interested in ensuring positive youth development opportunities and outcomes through out-of-school programs. To support coordination goals, staff from the Lead Agency attend monthly meetings. Out-of-school time programs who participate in the NMOST, such as the Boys and Girls Club of Central New Mexico, YMCA, and Children's Choice are licensed by ECECD and support children on subsidy.

xvii. Agency responsible for emergency management and response. Describe the coordination goals, processes, and results: The Lead Agency is responsible for emergency management and response. Coordination goals for the Lead Agency were to develop a comprehensive statewide disaster preparedness plan to address emergency preparedness, response, and recovery efforts specific to child care. On March 16, 2021, the Lead Agency hosted a statewide planning session with state agencies, child care providers, and PreK educators to obtain input on the plan. A follow-up session to finalize the plan is scheduled for May 12, 2021.

b. The following are examples of optional partners a state might coordinate with to provide services. Check which optional partners the Lead Agency coordinates with and describe the coordination goals, processes and results.

☒   i.   State/territory/local agencies with Early Head Start – Child Care Partnership grants. Describe: The coordination goal of the Lead Agency's Head Start State Collaboration Office is to partner with New Mexico's Early Head Start-Child Care Partnership grantees to ensure they meet the highest standards of quality for the care of infants and toddlers. There are five Early Head Start Child Care Partnerships in New Mexico. The Head Start State Collaboration Director reached out to programs involved in partnership agreements to initiate collaboration and support. A meeting was held on May 5, 2021 with Early Head Start Grantees and child care partners to plan initial collaborative activities. The outcome of that meeting was to continue its monthly meetings and encourage participation from state agencies and other entities that have a key role in early childhood education, health, early intervention, and social services.

☒   ii.   State/territory institutions for higher education, including community colleges. Describe: The coordination goal of the Lead Agency and the New Mexico Early Childhood Higher Education Task Force is to build a stronger workforce through higher education. Public post-secondary institutions participated in the process of improving access to higher education, developing a quality curriculum, and recruiting dedicated early childhood educators. The participants represented the following: Central NM Community College, Clovis Community College, Eastern NM University, Luna Community College, Mesalands Community College, Navajo Technical University, NM Highlands University, NM Junior College, NM State University, Northern NM College,

San Juan College, Southwestern Indian Polytechnic Institute, University of NM, and Western NM University. As a result of coordination efforts, an articulation agreement for degrees and credits and career lattice were developed.

☐ iii. Other federal, state, local, and/or private agencies providing early childhood and school-age/youth-serving developmental services. Describe: *Click or tap here to enter text.*

☒ iv. State/territory agency responsible for implementing the Maternal and Child Home Visitation programs grant. Describe: The Lead Agency is responsible for implementing and administering the Maternal and Child Home Visitation program grant. Its coordination goal was to successfully transition MIECHV home visiting from the Children, Youth and Families Department to ECECD. This process included integrating MIECHV home visiting services within a larger home visiting program and early childhood system. This larger home visiting system (State and MIECHV funded) allows the Lead Agency to provide the most integral needed home visiting services to families in almost every part of the state. As a result of the program integration, 31 out of 33 counties now have home visiting services. New Mexico is well equipped to continue implementing evidence-based home visiting services in the state's most at-risk communities to strengthen Local Implementing Agencies' continuous quality improvement with a focus on improving MIECHV benchmark measures. MIECHV Local Implementing Agencies have provided services for 433 families in seven communities identified with high needs.

☒ v. Agency responsible for Early and Periodic Screening, Diagnostic, and Treatment Program. Describe: The New Mexico Human Services Department (HSD) oversees the state's EPSDT services. The coordination goals are to ensure periodic developmental screenings are performed accordingly and families are referred to the appropriate professional so that services may begin early in the most optimal years of development. Through, processes implemented by the Lead Agency's Family Support and Early Intervention Division, the three early childhood prevention and intervention programs (home visiting, Family Infant Toddler (FIT) IDEA Part C early intervention, and perinatal case management (Families FIRST) work with families to ensure the delivery of early intervention services. The Lead Agency partnered with HSD and the NM Department of Health (DOH), as well as other state agencies to ensure alignment, collaboration, and bridging of systems to best support children and families in the state. The results of these efforts are published annually in HSD's annual EPSDT report.

☒ vi. State/territory agency responsible for child welfare. Describe: The New Mexico Children, Youth and Families Department (CYFD) oversees the state's child welfare services. The Lead Agency's coordination goal is to work closely with the Protective Services agency to provide child care services to families who are deemed at-risk of Protective Services involvement, have recently had their child(ren) returned to their custody by CYFD, and to young adults transitioning out of CYFD custody who have a child(ren). The coordination and process involved the design and implementation of the At-Risk Child Care program. In addition, the Lead Agency partners with CYFD through the

home visiting program to provide primary prevention services, through a streamlined referral process to provide early intervention for families who have been identified as at risk. In some cases home visitors are part of CYFD family-centered meetings for more intensive intervention services. Home Visiting is a prevention strategy used to support pregnant mothers and new parents to promote infant and child well-being, foster educational development and school readiness, and prevent child abuse and neglect. One result of agency and community collaboration was the development of a comprehensive Statewide Infant Early Childhood Mental Health Consultation Report and Three-Year Plan. With the involvement of child welfare and health care professionals, six goals were identified to expand the infant mental health workforce. Those goals are: (1) Develop a model of IECMH consultation that draws on exiting frameworks, knowledge, and expertise within the broader early childhood system; (2) Commit to equity and diversity informed practices in the planning and implementation for infant and early childhood health consultation; (3) Build the capacity of the early childhood mental health workforce to provide consultation by developing an integrated and sustainable IECMH consultation training system; (4) Develop an equitable and stable funding model that supports implementations of statewide IECMH consultation; (5) Develop the infrastructure needed to support and scale IECMH consultation; and (6) Develop an implementation and impact evaluation using a mixed methods design (e.g. qualitative and quantitative).

☒ vii. Provider groups or associations. Describe:
The Lead Agency's coordination goals are to ensure information for providers is distributed, adequate supports are accessible, and to address identified needs. The process of ensuring providers receive support is to conduct frequent and open communication with the New Mexico Child Care Educational Association, the New Mexico Early Care and Learning Association, the New Mexico Association for the Education of Young Children, and the Partnership for Community Action. Regular meetings will be conducted to solicit input on Lead Agency policy development.

☒ viii. Parent groups or organizations. Describe:
The Lead Agency's coordination goals are to ensure that parent groups and advocates are included in agency communications and have input into rulemaking processes. One of the processes in achieving productive and meaningful communication is to collaborate with parents, caregivers, educators, and advocacy groups such as Parents Reaching Out to promote healthy, positive, and caring experiences for children and their families. In addition, parents are key members of the state's Interagency Coordinating Council.

☐ ix. Other. Describe: *Click or tap here to enter text.*

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

Optional Use of Combined Funds: States and territories have the option to combine CCDF funds with any required program in 1.4.1. These programs include those operating at the federal, state, and local levels for children in preschool programs, tribal early childhood programs, and

other early childhood programs, including those serving infants and toddlers with disabilities, children experiencing homelessness, and children in foster care (658E(c)(2)(O)(ii)).

Combining funds could include blending multiple funding streams, pooling funds, or layering funds together from multiple funding streams to expand and/or enhance services for infants, toddlers, preschoolers, and school-age children and families to allow for the delivery of comprehensive quality care that meets the needs of children and families. For example, state/territory agencies may use multiple funding sources to offer grants or contracts to programs to deliver services; a state/territory may allow a county/local government to use coordinated funding streams; or policies may be in place that allow local programs to layer CCDF funds with additional funding sources to pay for full-day, full-year child care that meets Early Head Start/Head Start Program Performance Standards or state/territory Prekindergarten requirements in addition to state/territory child care licensing requirements.

As a reminder, CCDF funds may be used in collaborative efforts with Head Start programs to provide comprehensive child care and development services for children who are eligible for both programs. In fact, the coordination and collaboration between Head Start and CCDF is strongly encouraged by sections 640(g)(1)(D) and (E); 640(h); 641(d)(2)(H)(v); and 642(e)(3) of the Head Start Act in the provision of full working day, full calendar year comprehensive services. To implement such collaborative programs, which share, for example, space, equipment, or materials, grantees may layer several funding streams so that seamless services are provided (Policy and Program Guidance for the Early Head Start – Child Care Partnerships: https://www.acf.hhs.gov/sites/default/files/occ/acf_im_ohs_15_03.pdf).

1.5.1   Does the Lead Agency choose to combine funding for CCDF services for any programs identified in 1.4.1 (98.14(a)(3))?

☒   No (If no, skip to question 1.5.2)

☐   Yes. If yes, describe at a minimum:

    a. How you define "combine"*Click or tap here to enter text.*
    b. Which funds you will combine? *Click or tap here to enter text.*
    c. What is 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? Note: Responses should align with the goals, processes and results describe in 1.4.1. *Click or tap here to enter text.*
    d. How you will be combining multiple sets of funding, such as at the state/territory level, local level, program level? *Click or tap here to enter text.*
    e. How are the funds tracked and method of oversight *Click or tap here to enter text.*

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: Lead Agencies that use Prekindergarten funds to meet matching requirements must check Prekindergarten funds and public and/or private funds. 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 Prekindergarten funds as no

more than 20 percent of the state's or territory's maintenance of effort or 30 percent of its matching funds in a single fiscal year (FY) (98.55(h)). If expenditures for PreK services are used to meet the maintenance-of-effort requirement, the state/territory must certify that it has not reduced its level of effort in full-day/full-year child care services (98.55(h)(1); 98.15(a)(6)).

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

☐ a. N/A—The territory is not required to meet CCDF matching and MOE requirements.

☒ b. 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.

   i. If checked, identify the source of funds: State General Fund

☐ c. 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)).

   i. If checked, are those funds:

      ☐ A. Donated directly to the state?
      ☐ B. Donated to a separate entity(ies) designated to receive private donated funds?

   ii. If checked, identify the name, address, contact, and type of entities designated to receive private donated funds: *Click or tap here to enter text.*

☐ d. 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 Prekindergarten expenditures (not to exceed 30 percent): *Click or tap here to enter text.*

   i. If the percentage is more than 10 percent of the matching fund requirement, describe how the state will coordinate its Prekindergarten and child care services:
   Click or tap here to enter text.

   ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents:
   Click or tap here to enter text.

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

   i. Assure by describing how the Lead Agency did not reduce its level of effort in full-day/full-year child care services, pursuant to 98.55(h)(1) and 98.15(a)(6).
   Click or tap here to enter text.

   ii. Describe the Lead Agency efforts to ensure that Prekindergarten programs meet the needs of working parents: *Click or tap here to enter text.*

iii. Estimated percentage of the MOE Fund requirement that will be met with Prekindergarten expenditures (not to exceed 20 percent):
Click or tap here to enter text.

iv. If the percentage is more than 10 percent of the MOE requirement, describe how the state will coordinate its Prekindergarten and child care services to expand the availability of child care: *Click or tap here to enter text.*

☐ f. The same funds are used to meet at least some of the CCDF MOE and TANF MOE requirements.

i. If known, what percent of funds used to meet CCDF MOE also is used to meet TANF MOE requirements? *Click or tap here to enter text.*

1.6   Public-Private Partnerships

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

1.6.1   Identify and describe any public-private partnerships encouraged by the Lead Agency to leverage public and private resources to further the goals of the CCDBG Act. Include in the response any public-private partnerships that have emerged from the response to the COVID-19 pandemic (98.16(d)(2)) and if applicable, how those partnerships will be continued post-pandemic. The Lead Agency encourages public-private partnerships to leverage public and private resources to further the goals of the CCDBG Act. The Lead Agency works directly with a diverse group of public and private entities including Growing Up New Mexico, the Pritzker Children's Initiative, the Los Alamos National Laboratories Foundation as well as the New Mexico Early Childhood Funders Group. Established in 2009, Growing Up New Mexico works closely with the Lead Agency to build public awareness and political will for investments in early childhood education and care so that every New Mexico child and their families will have equitable access to quality early learning opportunities and the supports they need to thrive. The Lead Agency works with Growing Up New Mexico to advance the Pritzker Children's Initiative Implementation Grant to increase access to high-quality prenatal to three services. The Pritzker Children's Initiative is a national effort to increase the capacity of early childhood organizations as well as state and local governments to build and deliver high-quality systems of care for young children. The Lead Agency partners with the Los Alamos National Laboratories Foundation to support early childhood education and care workforce development, specifically a tribal cohort to pursue an Associate degree in early childhood from the New Mexico Southwestern Indian Polytechnic Institute. The Lead Agency also worked closely with the New Mexico Early Childhood Funders Group, especially in response to the COVID-19 pandemic. The New Mexico Early Childhood Funders Group consists of private and public charitable foundations dedicated to improving the lives of babies, young children and their families in New Mexico. During the COVID-19 pandemic, the Lead agency collaborated to provide financial supports as well as the distribution of personal protective equipment to early childhood education and care providers. These partnerships will continue post pandemic. The Lead Agency will continue to have an active role in the partnerships described and will encourage the development of additional partnerships to further the goals of the CCDBG Act.

1.7   Coordination with Child Care Resource and Referral Systems

Lead Agencies may use CCDF funds to establish or support a system or network 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 Part B, Section 619 and Part C of the Individuals with Disabilities Education Act.

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

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

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

Note: Use 1.7.1 to address if a state/territory funds a CCR&R organization, describe what services are provided and how it is structured. Use subsection 7.5 to address the services provided by the local or regional child care resource and referral agencies and the indicators of progress met by CCR&R organizations if they are funded by quality set-aside funds.

1.7.1   Does the Lead Agency fund local or regional CCR&R organizations?

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

☒   Yes. The state/territory funds a CCR&R organization(s) with all the responsibilities outlined above. If yes, describe the following:

How are CCR&R services organized? Include how many agencies, if there is a statewide network, and if the system is coordinated: The Lead Agency contracts with the University of New Mexico's Early Childhood Services Center (UNM ECSC) for the provision and maintenance of Child Care Resource and Referral services statewide. The New Mexico Kids Child Care Resource & Referral maintains a statewide database of child care providers that are licensed or registered by ECECD 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. During the COVID-19 pandemic, New Mexico Kids Child Care Resource and Referral developed and provided the health and safety training that the Lead Agency required all providers to complete; assisted in the distribution of PPE and supplies; and, provided technical assistance to childcare providers as they applied for childcare stabilization grants and incentives. Families can call 1 (800) 691-9067. The call will be personalized to their specific needs and takes approximately 15 minutes to complete. Referrals will be provided to families via an e-mail or over the phone. Calls are returned Monday through Friday, 8 a.m. to 5 p.m. ECECD, in partnership with UNM Early Childhood Services 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 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 : (1) 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 childcare options, programs and finances, and are able to provide information about these topics through telephone consultation and by email; (2) Maintain the National Association of Child Care Resource and Referral Agencies license (NACCRR Aware) statewide server. This includes providing training and technical assistance when requested, maintaining the standard data collection available through NACCRR Aware, and ensuring the accuracy of the information in the database; (3) 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; (4) 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; (5) Maintain current information of licensed and registered child care programs listed on the referral database and county resources links that are listed on the NewMexicoKids.org website; (6) 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; (7) Maintain an adequate inventory of child care resource and referral fliers, brochures and marketing materials. Families can also access a centralized website, "Am I Eligible" at https://eligibility.ececd.state.nm.us/eligibility/public/home.page;jsessionid=dGSWWYWITNTQd7wjQjjYrfXkxZjCmlUWhAEWsBub.alb-wit-amie2prod?dswid=-4253. This online resource allows families to complete a survey to determine eligibility for various assistance programs. Families may apply directly for services or request referrals to programs.

1.8 Disaster Preparedness and Response Plan

In past disasters, and in response to the COVID-19 pandemic, the provision of emergency child care services and rebuilding and restoring of child care infrastructure has emerged as an essential service. 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. The effective date for the establishment of this Statewide Disaster Plan was October 1, 2018.

1.8.1 Did you make any updates to the Statewide Disaster Plan since the FY 2019-2021 CCDF Plan was submitted? Please consider any updates that were made as a result of the Lead Agency's experiences in responding to the COVID-19 pandemic. (Note: It is a Lead Agency decision on how often a plan should be updated and which entities, if any, should be collaborated with in the updating process.)

☐ No

☒ Yes. If yes, describe the elements of the plan that were updated: The Statewide Disaster Plan was updated to reflect ECECD as the Lead Agency. In addition, the following elements were updated based on ECECD's experience in responding to the COVID-19 pandemic: Section 2, Planning for Continuation of Services to CCDF Families: updated to reflect the new service delivery database system, Enterprise Provider Information and Constituent Services (EPICS), online application through Am I Eligible, implementation of a Call Center, provide consideration to request a waiver from the

ACF Office of Child Care to waive parent's copayments and provide full-time contracts to first responders, health care providers, and essential staff; Section 3, Coordination with Emergency Management Agencies and Key Partners: updated to include the Health and Safety Guidance for New Mexico Child Care Centers and Early Childhood Professionals and COVID-19 safety plan required to be followed by child care providers, and the coordination with PED Regional Education Collaboratives to secure child care for school-aged children in response to school closures, distribution of PPE to child care providers , and coordination of securing cleaning supplies, and food for distribution to providers; Section 4, Regulatory Requirements and Technical Assistance for Child Care Providers: updated to reflect training and technical assistance on COVID-safe practices and rapid response protocol; and Section 5, Provisions of Temporary Child Care Services After a Disaster: updated to reflect the implementation of the Family, Friend and Neighbor (FFN) child care home provider to increase access to child care.

1.8.2 To demonstrate continued compliance with the required elements in the Statewide Disaster Plan, certify by checking the required elements included in the current State Disaster Preparedness and Response Plan.

☒ a. The plan was developed in collaboration with the following required entities:

    ☒ i. State human services agency

    ☒ ii. State emergency management agency

    ☒ iii. State licensing agency

    ☒ iv. State health department or public health department

    ☒ v. Local and state child care resource and referral agencies

    ☒ vi. State Advisory Council on Early Childhood Education and Care or similar coordinating body

☒ b. The plan includes guidelines for the continuation of child care subsidies.

☒ c. The plan includes guidelines for the continuation of child care services.

☒ d. The plan includes procedures for the coordination of post-disaster recovery of child care services.

☒ e. The plan contains requirements for all CCDF providers (both licensed and license-exempt) to have in place:

    ☒ i. Procedures for evacuation

    ☒ ii. Procedures for relocation

    ☒ iii. Procedures for shelter-in-place

    ☒ iv. Procedures for communication and reunification with families

    ☒ v. Procedures for continuity of operations

    ☒ vi. Procedures for accommodations of infants and toddlers

    ☒ vii. Procedures for accommodations of children with disabilities

    ☒ viii. Procedures for accommodations of children with chronic medical conditions

☒ f. The plan contains procedures for staff and volunteer emergency preparedness training.

☒ g. The plan contains procedures for staff and volunteer practice drills.

1.8.3 If available, provide the direct URL/website link to the website where the statewide child care disaster plan is posted: www.nmeced.org

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. OCC expects that Lead Agencies are using targeted strategies for each group to ensure tailored consumer education information. In this section, Lead Agencies will address how information is made available to families, the general public and child care providers 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.

This section also covers the parental complaint process and the consumer education website that has been developed by the Lead Agency. Finally, this section addresses the consumer statement that is provided to parents supported with CCDF funds.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals, or policy issuances. See the Introduction on page 4 for more detail.

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 child care providers with disabilities in the CCDF program (98.16(dd)). Lead Agencies are required to develop policies and procedures to clearly communicate program information, such as requirements, consumer education information, and eligibility information, to families and child care providers of all backgrounds (81 FR 67456).

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

☒ a. Application in other languages (application document, brochures, provider notices)

☒ b. Informational materials in non-English languages

☒ c. Website in non-English languages

☐ d. Lead Agency accepts applications at local community-based locations

☒ e. Bilingual caseworkers or translators available

☒ f. Bilingual outreach workers

☒ g. Partnerships with community-based organizations

☒ h. Collaboration with Head Start, Early Head Start, and Migrant Head Start

☒ i. Home visiting programs

☒ j. Other. Describe: All written materials are translated into Spanish and simultaneous interpretation services are provided for webinars, meetings, and presentations.

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

☐ a. Applications and public informational materials available in Braille and other communication formats for access by individuals with disabilities

☒ b. Websites that are accessible (e.g., Section 508 of the Rehabilitation Act)

☐ c. Caseworkers with specialized training/experience in working with individuals with disabilities

☒ d. Ensuring accessibility of environments and activities for all children

☒ e. Partnerships with state and local programs and associations focused on disability-related topics and issues

☒ f. Partnerships with parent associations, support groups, and parent-to-parent support groups, including the Individuals with Disabilities Education Act (IDEA) federally funded Parent Training and Information Centers

☒ g. Partnerships with state and local IDEA Part B, Section 619 and Part C providers and agencies

☒ h. Availability and/or access to specialized services (e.g., mental health, behavioral specialists, therapists) to address the needs of all children

☒ i. Other. Describe: If a person with a disability requires information in an alternative format or require special accommodations to participate in the child care program, they may contact ECECD at 1-800-832-1321. ECECD will work internally and with community partners to assist with resources and outreach to help meet the needs of the individual or family.

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 (s); 98.32(d)).

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: Parents may submit complaints about child care providers by calling the Early Childhood Education and Care Intake Center at 1-888-351-0037 or via email: ChildCare.Complaint@state.nm.us. The contact information to report complaints is also posted on the consumer website: https://www.newmexicokids.org/home/parents-and-families-3/. Any person may report suspected child abuse or neglect to the state's child protective services by calling 1-855-333-SAFE (7233) or #SAFE from a cell phone, to law enforcement, or the appropriate tribal entity. This line is staffed 24 hours day/7 days a week.

2.2.2   For complaints regarding all providers, including CCDF providers and non-CCDF providers, describe the Lead Agency's process and timeline for screening, substantiating, and responding to complaints. Describe whether the process includes monitoring, and highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers: All complaints come through the Lead Agency either through the Early Childhood Education and Care Intake Center or directly through field offices. All complaints and incidents are investigated by ECECD according to the established timelines. Complaints will be investigated in a timely manner as follows: Priority 1 complaints: investigation will be initiated within 24 hours. Priority 2 complaints: investigation will be initiated within three working days. Priority 3 complaints: investigation will be initiated within five working days. Initiation timeframes for investigations may be shortened based on the severity and nature of the complaint, but timeframes may not be extended. All complaints involving the health, safety, or welfare of a child 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, ECECD will make the complaint part of the provider's file and the following actions will, at the discretion of the licensing authority, be taken: require the provider to submit and comply with written corrective action plan; or sanction the provider administratively including, without limitation, suspension, revocation, or restriction of a license; or, referral to law enforcement for criminal investigation or pursuit of civil remedies. Additional monitoring visits to the provider will be conducted to ensure correction of deficiencies cited in relation to the substantiated complaint.

2.2.3   Certify by describing how the Lead Agency maintains a record of substantiated parental complaints. Highlight any differences in processes for CCDF and non-CCDF providers and licensed and license-exempt providers: All complaints and incidents are entered into a centralized statewide database, which contains a record of referrals, substantiated complaints and their priority levels. Documentation relating to substantiated complaints against a facility are also kept with the local child care office.

2.2.4   Certify by describing how the Lead Agency makes information about substantiated parental complaints available to the public; this information can include the consumer education website discussed in section 2.3: The Lead Agency posts substantiated complaint survey reports on its website: www.NewMexicoKids.org. Survey reports are maintained on the website for three years. There is a 10-year retention requirement for all records. Information may also be requested from ECECD pursuant to the Inspection of Public Records Act.

2.2.5   Provide the citation to the Lead Agency's policy and process related to parental complaints: 8.16.2.18 NMAC and 8.17.2.18 NMAC.

2.3   Consumer Education Website

States and territories are required to provide information to parents, the general public, and when applicable, child care providers through a state website, which is consumer-friendly and easily accessible (658E(c)(2)(E)(i)(III) and 98.33 (a)). The website must include information to assist families in understanding the Lead Agency's policies and procedures, including licensing child care providers. The website information must also include monitoring and inspection reports for each provider, and the quality of each provider (if such information is available for the provider) (658E(c)(2)(D); 98.33(a)). The website should also provide access to a yearly statewide report on the aggregate number of deaths, serious injuries, and the number of cases of substantiated child abuse that have occurred in child care settings. To help families access additional information on finding child care, the website must include contact information for local child care and resource referral organizations. It must also include information on how parents can contact the Lead Agency and other organizations to better understand 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 direct URL/website link to the consumer education website 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 will require a CCDF Plan amendment.

2.3.1   Describe how the Lead Agency ensures that its website is consumer-friendly and easily accessible. (Note: While there is no Federal CCDF definition for easily accessible, Lead Agencies may consider easily accessible websites to be searchable, simple to navigate, written in plain language, and easy to understand.): New Mexico's consumer education website redesign project has been explicitly geared toward user experience and simple navigation design features using formats to support wide access. The website is accessible using a PC, MAC, tablet, or smart phone with internet connection. The web design is responsive and content automatically adjusts to fit the device. All webpages are designed to be viewed in a user's browser and operating system, and all webpages, documents and links are tested in development prior to being added to the production site. Information is readable with Screen Reader, and audio and video files include captions. Feedback for the website is accepted via email or telephone, contact information is easily accessible, and posted documents are available in multiple formats, including PDF and Word. A print option is also available on all pages and links. In addition, the website includes a translation feature for individuals with a home language other than English. Information is also written in plain language on the website.

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 Child Care Resource and Referral (CCR&R) website and consumer education website redesign project both have a translation feature for the preferred language of the consumer. Written materials are readily available in Spanish for parents, providers, and the general public. In addition, the NM Kids CCR&R telephone line is staffed by at least one person who speaks both English and Spanish.

2.3.3 Describe how the website ensures the widest possible access to services for persons with disabilities: New Mexico's consumer education website redesign project has been explicitly geared toward user experience design features using formats to support wide access for individuals with disabilities. All staff are informed of website accessibility policies and procedures, with appropriate staff trained on policies and procedures to ensure implementation. NewMexicoKids.org is accessible using a PC, MAC, tablet, or smart phone with internet connection. The web design is responsive and content automatically adjusts to fit the device. All webpages are designed to be viewed in a user's browser and operating system, and all webpages, documents and links are tested in development prior to being added to the production site. Information is readable with Screen Reader, and audio and video files include captions. Feedback for the website is accepted via email or telephone; contact information is easily accessible, and posted documents are available in multiple formats, including PDF and Word. A print option is also available on all pages and links. The website is tested weekly for ADA compliance percentage based on current content and content changes.

2.3.4 Provide the specific website links to the descriptions of the Lead Agency's 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 direct URL/website link to how the Lead Agency licenses child care providers, including the rationale for exempting certain providers from licensing requirements, as described in subsection 5.2: http://www.newmexicokids.org/caregivers-and-educators/nm-state-child-care-regulations/ and http://164.64.110.134/parts/title08/08.016.0002.pdf

b. Provide the direct URL/website link to the processes for conducting monitoring and inspections of child care providers, as described in subsection 5.4: http://www.newmexicokids.org/caregivers-and-educators/nm-state-child-care-regulations/ http://164.64.110.134/parts/title08/08.016.0002.pdf

c. Provide the direct URL/website link to the policies and procedures related to criminal background checks for staff members of child care providers, as described in 5.5.2. http://www.newmexicokids.org/caregivers-and-educators/nm-state-child-care-regulations/ http://164.64.110.134/parts/title08/08.008.0003.pdf

d. Provide the direct URL/website link to the offenses that prevent individuals from being employed by a child care provider or receiving CCDF funds, as described in questions 5.5.4: http://164.64.110.134/parts/title08/08.008.0003.pdf

2.3.5 How does the Lead Agency post a localized list of providers searchable by zip code on its website?

The consumer education website must include a list of all licensed providers (98.33 (a)(2)). At the discretion of the Lead Agency, all providers eligible to deliver CCDF services, identified as either licensed or license-exempt, can be included. Providers caring for children to whom they are related do not need to be included. The list of providers must be searchable by ZIP Code.

a. Provide the website link to the list of child care providers searchable by ZIP code:
https://www.newmexicokids.org/parents-and-families-3/child-care-search/

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

    ☒   i. License-exempt center-based CCDF providers

    ☒   ii. License-exempt family child care (FCC) CCDF providers

    ☒   iii. License-exempt non-CCDF providers

    ☐   iv. Relative CCDF child care providers

    ☒   v. Other. Describe: PreK programs in private centers and public schools.

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

Provider Information Available in Searchable Results					
	All Licensed Providers	License-Exempt CCDF Center-based Providers	License-Exempt CCDF Family Child Care Home Providers	License-Exempt Non-CCDF Providers	Relative CCDF Providers
Contact Information	☒	☐	☐	☐	☐
Enrollment capacity	☐	☐	☐	☐	☐
Hours, days and months of operation	☐	☐	☐	☐	☐
Provider education and training	☐	☐	☐	☐	☐
Languages spoken by the caregiver	☒	☐	☐	☐	☐
Quality information	☒	☐	☐	☐	☐
Monitoring reports	☒	☐	☐	☐	☐
Willingness to accept CCDF certificates.	☒	☐	☐	☐	☐
Ages of children served	☒	☐	☐	☐	☐

d. Other information included for:

☒   i.   All Licensed providers. Special skills, map of location, hours of operation, brief overview of environment, meals offered, financial assistance available, and transportation details.

☐   ii.   License-exempt CCDF center-based providers. *Click or tap here to enter text.*

☐   iii.   License-exempt CCDF family child care providers. *Click or tap here to enter text.*

☐   iv.   License-exempt, non-CCDF providers. *Click or tap here to enter text.*

☐   v.   Relative CCDF providers. *Click or tap here to enter text.*

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.   What information does the Lead Agency provide on the website to determine quality ratings or other quality information?

☒   i.   Quality rating and improvement system

☒   ii.   National accreditation

☐   iii.   Enhanced licensing system

☐   iv.   Meeting Head Start/Early Head Start Program Performance Standards

☐   v.   Meeting Prekindergarten quality requirements

☐   vi.   School-age standards, where applicable

☐   vii.   Other. Describe: *Click or tap here to enter text.*

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

☒   i. Licensed CCDF providers. Describe the quality information:
        FOCUS-TQRIS Star Level

☒   ii. Licensed non-CCDF providers. Describe the quality information:
        FOCUS-TQRIS Star Level

☐   iii. License-exempt center-based CCDF providers. Describe the quality information:
        Click or tap here to enter text.

☐   iv. License-exempt FCC CCDF providers. Describe the quality information:
        Click or tap here to enter text.

☐   v. License-exempt non-CCDF providers. Describe the quality information:
        Click or tap here to enter text.

☐   vii. Relative child care providers. Describe the quality information:
        Click or tap here to enter text.

☐   viii. Other. Describe: *Click or tap here to enter text.*

2.3.7   Lead Agencies must 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. These reports must include the 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. A full report covers everything in the monitoring visit, including areas of compliance and non-compliance. If the state does not produce any reports that include areas of compliance, the website must include information about all areas covered by a monitoring visit (e.g., by posting a blank checklist used by monitors).

The reports must be in plain language or provide a plain language summary, as defined by the state or territory, 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.

Certify by responding to the questions below:

a.   Does the Lead Agency post? (check one):

     ☒   i. Full monitoring reports that include areas of compliance and non-compliance.
     ☐   ii. Monitoring reports that include areas of non-compliance only, with information about all areas covered by a monitoring visit posted separately on the website (e.g., a blank checklist used by monitors). Note: This option is only allowable if the state/territory does not produce monitoring reports that include both areas of compliance and non-compliance. If checked, provide a direct URL/website link to the website where a blank checklist is posted. *Click or tap here to enter text.*

b. Check to certify that the monitoring and inspection reports and, if necessary, their plain language summaries include:

☒   Date of inspection

☒   Health and safety violations, including those violations that resulted in fatalities or serious injuries occurring at the provider. Describe how these health and safety violations are prominently displayed: The compliance status for each regulation is prominently displayed on the form. Violations of regulations will be noted. In plain language, the survey outlines the health and safety violation, including any fatalities or serious injuries, that were found and the corrective action plan with timeline for completion.

☒   Corrective action plans taken by the state and/or child care provider. Describe: The licensing authority will conduct a survey at least twice a year in each childcare facility using these regulations as criteria and will formulate corrective action plans depending on any deficiencies found. The licensing authority will conduct additional surveys or visit the childcare facility additional times to provide technical assistance, to check progress on correction of deficiencies found on previous surveys and corrective action plans, or to investigate complaints.

☒   A minimum of 3 years of results, where available.

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

i.   Provide the direct URL/website link to where the reports are posted. https://www.nmececd.org/child-care-services/child-care-licensed-and-registered-provider-inspection-surveys/

ii. Describe how the Lead Agency defines timely posting of monitoring reports. ECECD 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 public website portal. The supervisor has 10 days from the receipt of the report to review and publicize each survey onto the portal which can be accessed through www.nmececd.org and www.newmexicokids.org.

d. Monitoring and inspection reports or the summaries must be in plain language to meet the CCDF regulatory requirements (98.33 (a)(4)).

i.   Provide the Lead Agency's definition of plain language. The Lead Agency defines plain language as it relates to monitoring and inspection reports as information that can be read and understood by a wide variety of audiences and organized in a logical manner using common language. The New Mexico Kids website (www.newmexicokids.org) provides a link for families and the public to search the Department's database to review any provider's most recent site survey inspection report.

ii. Describe how the monitoring and inspection reports or the summaries are in plain language. The Lead Agency posts the full report containing areas of compliance and non-compliance. The areas of non-compliance include: The Identified Deficiency; Corrective Action Plan; and Timeline for Completion. On the website is a statement with instructions on how families or the public can contact the childcare resource and referral office to better understand the report as well as to offer suggestions for improvement. The following statement is included in the

inspections report website: "If you have trouble reading this report or have suggestions for improvement, please contact New Mexico Kids Child Care Resource and Referral at 1-800-691-9067."

e. Describe the process for correcting inaccuracies in reports (98.33 (a)(4)).
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 a signature. When the report has been finalized, the provider will receive 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. This report will be identified as an amendment 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.

f. Describe the process for providers to appeal the findings in reports. Description of the process should include the time requirements and timeframes for:

- filing the appeal
- conducting the investigation
- removal of any violations from the website determined on appeal to be unfounded.
  ECECD ensures that upon the completion of a monitoring visit, findings will be discussed with the provider or their representative. At that time, the provider is afforded the opportunity to review the findings contained in the written survey report and an amendment can be made as set forth in the answer immediately above. Formal appeal procedures are available for providers any time adverse actions, such as suspensions, revocations, or the imposition of conditions of operation, are imposed. Those adverse actions, however, are separate from monitoring visit reports.

g. Describe the process for maintaining monitoring and inspection reports on the website. Specifically, provide the minimum number of years reports are posted and the policy for removing reports (98.33(a)(4)(iv)). Survey reports are maintained on the ECECD website for three years. There is a 10-year retention requirement for all records. Information may also be requested from ECECD pursuant to the Inspection of Public Records Act.

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 by Lead Agencies on the consumer education website (98.33(a)(5)). The serious incident aggregate data should include information about any child in the care of a provider eligible to receive CCDF, not just children receiving subsidies.

This aggregate information on serious injuries and deaths must be separated by category of care (e.g. centers, family child care homes, and in-home care) and licensing status (i.e. licensed or license-exempt) for all eligible CCDF providers in the state. The information on instances of substantiated child abuse does not have to be organized by category of care or licensing status. Information should also include the total number of children regulated to be cared for by provider type and licensing status (81 FR, p. 67477), so that families can view the serious injuries, deaths, and substantiated cases of abuse data in context. The aggregate report should not include individual provider-specific information or names.

a. Certify by providing:

i. 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. Child care providers are required to report any serious injury or death of a child occurring in the child care ECECD, which tracks the number of

deaths, number of serious injuries, and incidents of substantiated child abuse in child care settings by category of care, including licensing status. All complaints and incidents are entered into a centralized statewide database, Enterprise Provider Information and Constituent Services (EPICS). The aggregate information regarding injuries or deaths of children occurring in child care is provided on an annual basis on www.newmexicokids.org or www.nmececd.org.

ii. The definition of "substantiated child abuse" used by the Lead Agency for this requirement. Substantiated child abuse is defined as any act or failure to act, performed intentionally, knowingly or recklessly, which causes or is likely to cause harm to a child, including but not limited to: 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.

iii. The definition of "serious injury" used by the Lead Agency for this requirement. Serious injury is defined as an illness or injury that requires treatment by a medical professional or hospitalization.

b. Certify by checking below that the required elements are included in the Aggregate Data Report on serious incident data that have occurred in child care settings each year.

☒ i. the total number of serious injuries of children in care by provider category/licensing status

☒ ii. the total number of deaths of children in care by provider category/licensing status

☒ iii. the total number of substantiated instances of child abuse in child care settings

☒ iv. the total number of children in care by provider category/licensing status

c. Provide the website link to the page where the aggregate number of serious injuries, deaths, and substantiated instances of child abuse are posted. https://www.newmexicokids.org/parents-and-families-3/

2.3.9 The consumer education website must include contact information on referrals to local child care resource and referral organizations (98.33 (a)(6)). 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 University of New Mexico Early Childhood Services Center (UNM-ECSC), the entity that oversees the New Mexico Kids website, is the state's Resource and Referral Agency. New Mexico's consumer education website: (https://www.newmexicokids.org/home/parents-and-families-3/) is managed by UNM-ECSC, as is the Resource and Referral website (https://search.newmexicokids.org/).

2.3.10 The consumer education website must include information on how parents can contact the Lead Agency, or its designee, or other programs that can help the parent understand information included on the website (98.33 (a)(7)). Describe and include a website link to this information: The University of New Mexico Early Childhood Services Center (UNM-ECSC), the entity that oversees the New Mexico Kids website, is also the state's Resource and Referral Agency. New Mexico's consumer education website is managed by UNM-ECSC, as is the Resource and Referral website. The consumer education website contains the phone number to the Resource and Referral team so parents, caregivers, or family members can call for additional support with information they are reviewing on the website. The statement with contact information is included on the home page and in numerous areas throughout the website (https://www.newmexicokids.org/home/).

2.3.11   Provide the website link to the Lead Agency's consumer education website. Note: An amendment is required if this website changes. https://www.newmexicokids.org/home/parents-and-families-3/

2.4   Additional Consumer and Provider Education

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

In questions 2.4.1 through 2.4.5, certify by describing:

2.4.1   How the Lead Agency shares information with eligible parents, the general public, and where applicable, child care providers about the availability of child care services provided through CCDF and other programs for which the family may be eligible, such as state Prekindergarten, 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. 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 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. In addition, the NM Kids CCR&R contains information in Spanish. The Lead Agency also provides parents information about the full diversity of child care services through the intake process meetings with front line personnel, through websites (www.nmececd.org and www.newmexicokids.org) and 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 qualify. The eligibility survey currently screens for Child Care Assistance, Home Visiting, PreKindergarten, Summer Food Program, Boys & Girls Club, Head Start, and the FIT program. All websites listed above link to each other. Each of these websites help families find Child Care Centers, Preschool Programs, Head Start, PreK, School Age Care, Faith Based Programs, Family In-Home Care, and other resources. The Lead Agency provides a brochure entitled, "The Parents Guide to Selecting Quality Child Care," which is available 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.nmececd.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. NMKids (https://www.newmexicokids.org/home/resources/) provides a link to the Am I Eligible Survey: (https://eligibility.ececd.state.nm.us/eligibility/public/home.page?dswid=-3200). This survey provides a quick and convenient way for New Mexico residents to determine if they are eligible for any of the following programs: New Mexico Child Care Assistance, Home Visiting, Pre-Kindergarten, Summer Food, Head Start/Early Head Start, or Family Infant Toddler (FIT)   At the end of the survey, an application for Child Care Assistance can be submitted online and a referral to the PreK, Part C, Home Visiting program is generated. In addition, a list of possible programs with contact information is provided.

2.4.2   How does the Lead Agency provide the required information about the following programs and benefits to the parents of eligible children, the general public, and where applicable, providers? Certify by describing for each program listed below, at a minimum, what information is provided, how the information is provided, and how the information is tailored to a variety of audiences. Include any partners who assist in providing this information.

a. Temporary Assistance for Needy Families program: The Lead Agency provides information regarding TANF eligibility through the child care intake process. Parents and caregivers are also referred to the New Mexico Human Services Department (NMHSD) at www.yes.state.nm.us to apply for TANF benefits.

b. Head Start and Early Head Start programs: Information regarding the New Mexico Head Start and Early Head Start Programs is shared with parents through the application and intake process as well as through the recruiting process, brochures, and community partnerships. Early Head Start and Head Start create community partnerships with local agencies such as health clinics, public assistance offices, mental health providers, early intervention, developmental delay preschools, businesses, and more. Head Start program information is also available to parents through the New Mexico Head Start Collaboration Office website: https://eclkc.ohs.acf.hhs.gov/programs/new-mexico-head-start-collaboration-office

c. 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 information to apply for LIHEAP benefits through the New Mexico Human Services Department at www.yes.state.nm.us.

d. Supplemental Nutrition Assistance Program (SNAP): Information regarding the SNAP program is shared with parents through the child care intake process. Parents are also provided information to apply for SNAP benefits through HSD at www.yes.state.nm.us.

e. Women, Infants, and Children Program (WIC) program: : Information regarding the WIC program is shared with parents through the child care intake process. Parents seeking information on WIC are referred to the New Mexico Women, Infants, and Children Program website at: https://www.nmwic.org/.

f. Child and Adult Care Food Program (CACFP): The Lead Agency issues a statewide news release containing information on food service participation that includes websites and phone numbers for additional information. CACFP receives information from child care licensing regarding new centers and homes, and ECECD 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. General information regarding summer food and CACFP can be located at https://www.nmececd.org/information-for-parents/.

g. Medicaid and Children's Health Insurance Program (CHIP): Information about Medicaid and CHIP benefits 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.

h. Programs carried out under IDEA Part B, Section 619 and Part C:
The New Mexico Public Education Department (PED) manages the IDEA Part B Section 619 activities. The 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 PED Special Education Bureau website at http://ped.state.nm.us/ped/SEB_laws.html.

2.4.3   Describe how the Lead Agency makes information available to parents, providers and the general public on research and best practices concerning children's development, including physical health and development, particularly healthy eating and physical activity and information about successful parent and family engagement. The description should include:

- what information is provided
- how the information is provided
- how the information is tailored to a variety of audiences, including:
  - parents
  - providers
  - the general public
- any partners in providing this information

Description: The Lead Agency oversees the Child-Adult Care Food Program (CACFP), using USDA funds to provide nutritious meals and snacks to low-income children in child care centers and family child care homes. The program promotes healthy eating, improved dietary quality, and decreased health risks to overweight 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 child care centers and homes that 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 centers and families. More than 275 licensed child care 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 vegetable: 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 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 child care environment. Also, ECECD's brochure, entitled "The Parents Guide to Selecting Quality Child Care," 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 provided at www.NewMexicoKids.org and www.nmececd.org. Parents can search for child care online or by calling the NMKids CCR&R office at 1-800-691-9067.

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

- what information is provided,
- how the information is provided, and
- how information is tailored to a variety of audiences, and
- include any partners in providing this information.

Description: The Lead Agency outlines requirements for licensed and non-licensed child care providers in providing a positive social-emotional responsive environment in its child care regulations. Licensed and non-licensed providers must also have policies and procedures in effect which shall include how the provider will maintain a positive environment while preventing the expulsion of children. The policies must include clear, appropriate, consistent expectations, and consequences to address disruptive behaviors; and ensure fairness, equity, and continuous improvement. Licensed facilities must include the expulsion policy in their parent handbook. These requirements are detailed in 8.16.2 and 8.17.2 NMAC and are monitored by the ECECD regulatory oversight unit for ongoing compliance. Child care providers develop their policies in accordance with the regulations and with consideration to their community, families, and children served. Information is adapted to be relevant to specific programs and services and is provided to families in the parent handbook. For child care providers participating in FOCUS, New Mexico's Tiered Quality Rating and Improvement System, the policies and handbook are reviewed with their consultant and support is provided if any revisions are needed. FOCUS consultants also support programs through training and coaching on direct classroom practices to enhance services with attention to social-emotional development, addressing challenging behaviors (supports to educators and families, including assessment of the classroom environment and classroom management). New Mexico home visitors are trained in strategies to support positive interactions between caregivers and their infants through play, by fostering regular feeding routines, and by educating caregivers about how to read their infants' cues and respond appropriately. New Mexico home visiting programs use the Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (PICCOLO) observational tool (Roggmann et al., 2013a, 2013b), designed for home visiting programs to measure healthy parenting practices and relationships.   Based on the results, home visitors help families implement specific strategies to foster daily nurturing parenting behaviors that are known to support children's early development. Home visiting's strength-based approach helps parents to value the interactions they have with their child and validates their important role in their child's development. Home visitors are also trained to recognize potential signs that a young child's social and emotional development are at risk or that a parent suffers from depression. When these risks are identified, home visitors connect families with appropriate community services.   The primary indicator used to measure healthy parenting practices is: Caregiver progress in practice positive parent-child interactions, as measured by the PICCOLO observational tool. New Mexico home visiting uses the PICCOLO to guide practice, as well as measure and report parental capacity outcomes. The national home visiting field has recommended that all states implement the PICCOLO or another validated observational measurement tool to best capture home visits impact on parental capacity, which is a known predictor of healthy child development (Daro, Klein and Burkhardt, 2017). One state-supported home visiting program model, Nurse-Family Partnership, uses an alternative observational tool, called the DANCE (Dyadic Assessment of Naturalistic Caregiver-Child Experiences); data are not reported here. NM PreK programs seek to promote the social-emotional competence of young children by implementing consistent, attuned, safe, and responsive interactions. NM PreK staff also provide parent training and information related to attachment and social-emotional support. This includes sharing information on experiences, interactions, activities, and strategies that support the social-emotional dimensions of young children and with the believe that each person has the opportunity to positively influence a child's development. This includes strategies and trainings on developing children's capacity for self-confidence, self-efficacy, self-regulation/self-control, self-esteem, persistence, conflict resolution, versatile communication skills, empathy, and social skills.

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

The Lead Agency requires licensed and non-licensed providers to have policies and procedures in place which shall include how the provider will maintain a positive environment and will focus on preventing expulsion. The policies must include clear, appropriate, consistent expectations, and consequences to address disruptive behaviors and ensure fairness, equity, and continuous improvement. Licensed facilities must include an expulsion policy in their parent handbook and shared with parents. These requirements are outlined in 8.16.2 and 8.17.2 NMAC and are monitored by the ECECD regulatory oversight unit for ongoing compliance. ECECD shares this information with the following: Parents: UNM Training and Development Consultants coach educators in developing relationships and connections with the children and families in their programs. Consultants provide guidance related to family engagement including resources to support children and promote success in creating a community. Providers: Through consultation, educators are encouraged to utilize resources from the National Center Pyramid Model and/or Conscious Discipline. Educators also utilize this information for family engagement opportunities. Consultants created a training to assist educators in how to utilize strategies from the classroom to foster home-to-school continuity. General public: ECECD funds resources made available to the public through the University of New Mexico Early Childhood Services Center (UNM ECSC).

2.5 Procedures for Providing Information on Developmental Screenings

Lead Agencies are required to provide information on developmental screenings to parents, the general public and, when applicable, child care providers. Information should include:

- Existing resources and services that the state can use in conducting developmental screenings and providing referrals to services for children who receive child care assistance.

- 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)).

This information about the resources can include the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act and developmental screening services available under IDEA Part B, Section 619 and Part C, in conducting those developmental screenings and in providing referrals to services for children who receive subsidies. Lead Agencies are required to provide this information to eligible families during CCDF intake and to child care providers through training and education (98.33(c)). Information on developmental screenings, as other consumer education information, should be accessible for individuals with limited English proficiency and individuals with disabilities.

2.5.1 Certify by describing:

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

The Lead Agency collects and disseminates information on developmental screenings through its Family Infant Toddler (FIT) program, which provides early intervention services for children birth to age three who are at risk for or have a developmental delay. Referrals are received directly from parents or from other community resources. Children referred to the FIT program receive a

comprehensive developmental evaluation which includes five developmental domains, vision, and hearing screenings. Early intervention provider agencies reach out to child care centers, other community programs and provide them with information on how to make a referral. Each agency receives Child Find/Public Awareness materials which they disseminate to local, state partners, and community agencies to ensure information regarding early intervention Part C services are available. Early intervention providers must complete a Child Find plan that is approved at the state level. These plans identify the outreach activities in each community and include outreach to child care centers.

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

The state's Medicaid program regularly informs parents of EPSDT services available to them to ensure that their children are receiving appropriate screenings and treatment. If a provider suspects that child is at risk or exhibits signs of developmental delay, they may initiate family engagement and provide resources and information on how to access supportive services.

c. How the Lead Agency gives information on developmental screenings to parents receiving a subsidy as part of the intake process. Include the information provided, ways it is provided, and any partners in this work. Child care providers who are trained to administer developmental screenings and make appropriate referrals for early intervention services. A family may self-refer for early intervention services, Part C or Part B.

d. How CCDF families or child care providers receiving CCDF can use the available resources and services to obtain developmental screenings for CCDF children at risk for cognitive or other developmental delays. Through a comprehensive referral network, early intervention provider agencies reach out to child care centers and community programs and provide them with information on how to make a referral. Each agency receives Child Find/Public Awareness materials which they disseminate to local, state partners, and community agencies; and ensure information regarding early intervention Part C services are available. Also, child care providers engage with their local early intervention programs to involve and partner with agencies to provide community awareness. It is through these partnerships that families become familiar with available resources, make meaningful connections, and build trust.

e. How child care providers receive this information through training and professional development. Child care providers participating in the Tiered Quality Rating and Improvement System (FOCUS) are required to complete a developmental screening for each enrolled child. The University of New Mexico Early Childhood Services Center is contracted by the state to provide Training and Development Consultants who give support throughout service implementation. Consultants offer guidance to programs in the selection of the developmental screening tool that best fits the needs and culture of the center. These consultants can then provide training and professional development on how to use the selected tool, share results with families, and make appropriate referrals. Such guidance is provided to the administrators and educational staff. ECECD also collaborates with the Department of Health for training on the Ages and Stages Questionnaire; trainers are available statewide for any early childhood professionals requesting training.

f. Provide the citation for this policy and procedure related to providing information on developmental screenings. 8.9.8 NMAC

2.6   Consumer Statement for Parents Receiving CCDF Funds

Lead Agencies must provide CCDF parents with a consumer statement in hard copy or electronically (such as referral to a consumer education website) that contains specific information about the child care provider they select (98.33 d). Please note that if the consumer statement is provided electronically, Lead Agencies should consider ensuring the statement is accessible to parents, including parents with limited access to the internet, and that parents have a way to contact someone to address their questions.

2.6.1   Certify by describing:

a. How and when the Lead Agency provides parents receiving CCDF funds with a consumer statement identifying the requirements for providers and the health and safety record of the provider they have selected. The Lead Agency provides parents who are receiving CCDF funds with a consumer statement in hard copy. If intake is being conducted outside of a face-to-face interview, the consumer statement will be reviewed over the phone and then provided either by mail or email. This consumer statement is located on the child care assistance application and the client's rights and responsibilities document.

b. Certify by checking below the specific information provided to families either in hard copy or electronically. Note: The consumer statement must include the eight requirements listed in the table below.

☒   Health and safety requirements met by the provider

☒   Licensing or regulatory requirements met by the provider

☒   Date the provider was last inspected

☒   Any history of violations of these requirements

☒   Any voluntary quality standards met by the provider

☒   How CCDF subsidies are designed to promote equal access

☒   How to submit a complaint through the hotline

☒   How to contact a local resource and referral agency or other community-based organization to receive assistance in finding and enrolling in quality child care

c. Provide a link to a sample consumer statement or a description if a link is not available. The Lead Agency's consumer statement reads as follows: "ECECD promotes equal access. You have the right to select a provider of your choice. Visit www.newmexicokids.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, history of violations of these requirements, and quality rating met by the provider, please visit www.newmexicokids.org. Any concerns regarding your child care provider, to include abuse or neglect, please call 1-888-351-0037 or emailing at ChildCare.Complaint@state.nm.us."

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 period, 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 no fewer than 3 months if the Lead Agency exercises the option to discontinue assistance, and policies for the graduated phase-out of assistance. In addition, the Lead Agency is also required to describe procedures for the enrollment of children experiencing homelessness and, if applicable, children in foster care.

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 or, similarly, parents enrolled in school can have eligibility extended to allow parents to finish their school 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.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

3.1   Eligible Children and Families

At the time when eligibility is determined or redetermined, children must (1) be younger than age 13; (2) reside with a family whose income does not exceed 85 percent of the state's median income for a family of the same size and whose family assets do not exceed $1,000,000 (as certified by a member of said family); and (3)(a) reside with a parent or parents who are working or attending a job training or educational program or (b) receives, or needs to receive, protective services and resides with a parent or parents not described in (3)(a) (658P(4); 98.20(a)).

3.1.1   Eligibility criteria: Age of children served

a. The CCDF program serves children from six weeks (weeks/months/years) through 12 years (under age 13). *Note:* Do not include children incapable of self-care or under court supervision, who are reported below in (b) and (c).

b. Does the Lead Agency allow CCDF-funded child care for children 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 and/or mental incapacity:
Pursuant to regulation 8.15.2.7(BB) NMAC, ECECD defines physical and/or mental incapacity as a child in need of Special Supervision. Special Supervision is defined as children between the ages of 13 and 18 who are under the supervision of a court of law, or who are determined by a medical or treatment professional to require supervision.

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?

   i. "residing with": The Lead Agency defines this term 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 legal guardian(s).

   ii. "in loco parentis": The Lead Agency defines this term as a blood relative or legal guardian who has taken custody/guardianship of children.

3.1.2 Eligibility criteria: Reason for care

a. How does the Lead Agency define the following terms for the purposes of determining CCDF eligibility?

   i. Define what is accepted as "Working" (including activities and any hour requirements): The Lead Agency defines "working" as employment of any type, including self-employment and teleworking. For TANF recipients, this includes work experience and/or community service or any other activity that meets the TANF work activity requirements. ECECD will reimburse for care provided for as little as an average of 5 or less hours per week per month.

   ii. Define what is accepted as "Job training" (including activities and any hour requirements): The Lead Agency defines "job training and educational program" as participation in a short or long term educational or training program including online programs that provide 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. ECECD will reimburse for care provided for as little as an average of 5 or less hours per week per month.

   iii. Define what is accepted as "Education" (including activities and any hour requirements): The Lead Agency defines "job training and educational program" as participation in a short or long term educational or training program including online programs that provide 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. ECECD will reimburse for care provided for as little as an average of 5 or less hours per week per month.

   iv. Define what is accepted as "Attending" (a job training or educational program) (e.g. travel time, hours required for associated activities such as study groups, lab experiences, time for outside class study or completion of homework): In terms of what is accepted as "attending," clients and caseworkers negotiate a reasonable amount of "study" and "travel time" during the application or recertification process, as set forth in the regulations. In terms of what is considered "study" time, the Department will consider and approve associated time in study groups, lab experiences, and time out of class for the completion of homework. 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 without additional work requirements?
⊠ Yes
☐ No. If no, describe the additional work requirements. *Click or tap here to enter text.*

c. Does the Lead Agency provide child care to children who receive, or need to receive protective services?

☒ No

☐ Yes. If yes:

    i. Provide the Lead Agency's definition of "protective services": *Click or tap here to enter text.*

    Note: Federal requirements allow other vulnerable children identified by the Lead Agency not formally in child protection to be included in the Lead Agency's definition of protective services for CCDF purposes. A Lead Agency may elect to provide CCDF-funded child care to children in foster care when foster care parents are *not* working or are *not* in education/training activities, but this provision should be included in the protective services definition above.

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

        ☐ No
        ☐ Yes

    iii. Does the Lead Agency waive the income eligibility requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis (98.20 (a)(3)(ii)(A))?

        ☐ No
        ☐ Yes

    iv. Does the Lead Agency waive the eligible activity (e.g., work, job training, education, etc.) requirements for cases in which children receive, or need to receive, protective services on a case-by-case basis?

        ☐ No
        ☐ Yes

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

        ☐ No
        ☐ Yes

3.1.3 Eligibility criteria: Family Income Limits

Note: The questions in 3.1.3 relate to initial determination. Redetermination is addressed in 3.1.8 and 3.2.5.

a. How does the Lead Agency define "income" for the purposes of eligibility at the point of initial determination? The Lead Agency defines "Earned Income" as gross 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, grants, and other income which does not meet the definition of earned income. "Household income" is defined as the household's gross monthly or annual average countable earned and unearned income, taking into account any fluctuation(s) of earnings, and will always be calculated in favor of eligibility. Household income does not include any earned and unearned income received by grandparents who are not legal guardians,

and any legal dependents of the biological parents, stepparents, or legal guardians of the child(ren) for whom child care assistance is sought, living in the household.

b. Provide the CCDF income eligibility limits in the table below **at the time of initial determination**. Complete columns (i) and (ii) based on maximum eligibility at initial entry into CCDF. Complete columns (iii) and (iv) *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. If the income eligibility limits are not statewide, please complete the chart below using the most populous area of the state or territory (defined as the area serving highest number of CCDF children) and respond to c. below the table.

	(i)	(ii)	(iii)	(iv)
Family Size	100% of SMI ($/Month)	85% of SMI ($/Month) [Multiply (a) by 0.85]	(IF APPLICABLE) ($/Month) Maximum Initial or First Tier Income Limit (or Threshold) if Lower than 85% of Current SMI	(IF APPLICABLE) (% of SMI) [Divide (iii) by (i), multiply by 100] Income Level if Lower than 85% of Current SMI
1	$3,608.33	$3,067.08	N/A	N/A
2	$4,125.00	$3,506.25	N/A	N/A
3	$4,641.67	$3,945.42	N/A	N/A
4	$5,158.33	$4,384.58	N/A	N/A
5	$5,575.00	$4,738.75	N/A	N/A

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

d. SMI source and year. U.S. Department of Housing and Urban Development 2020

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-im-2020-02-state-median-income-estimates-for-optional-use-fy2020-and-mandatory-use-fy2021?utm_medium=rss .

e. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart in 3.1.3 b. Albuquerque Metropolitan Area

f. What is the effective date for these eligibility limits reported in 3.1.3 b?
April 1, 2020

g. Provide the citation or link, if available, for the income eligibility limits.
https://www.nmececd.org/wp-content/uploads/2020/06/Poverty_Guidelines_2020_to_include_250FPL_.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)(ii)).

a.   Describe how the family member certifies that family assets do not exceed $1,000,000 (e.g., a checkoff on the CCDF application). ECECD certifies that family assets do not exceed $1,000,000 by having the family member answer "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, describe the policy or procedure and provide citation:
Click or tap here to enter text.

3.1.5   Describe any additional eligibility conditions or rules, which are applied by the Lead Agency (98.20(b)) during:

a.   eligibility determination. N/A

b.   eligibility redetermination. N/A

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)). Lead Agencies are reminded that authorized child care services are not required to be strictly based on the work, training, or education schedule of the parent (98.21 (g)). Check the approaches, if applicable, that the Lead Agency uses when considering children's development and promoting continuity of care when authorizing child care services.

☒   a.   Coordinating with Head Start, Prekindergarten, other early learning programs, or school-age programs to create a package of arrangements that accommodates parents' work schedules

☒   b.   Inquiring about whether the child has an Individualized Education Program (IEP) or Individual Family Services Plan (IFSP)

☐   c.   Establishing minimum eligibility periods longer than 12 months

☒   d.   Using cross-enrollment or referrals to other public benefits

☒   e.   Working with IDEA Part B, Section 619 and Part C staff to explore how services included in a child's IEP or IFSP can be supported and/or provided onsite and in collaboration with child care services

☐   f.   Working with entities that may provide other child support services.

☒   g.   Providing more intensive case management for families with children with multiple risk factors

☐   h.   Implementing policies and procedures that promote universal design to ensure that activities and environments are accessible to all children, including children with sensory, physical, or other disabilities

☐   i.   Other. Describe: Click or tap here to enter text.

3.1.7   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) and 98.21(c)). 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 state median income (SMI) (calculated on a monthly basis) from seasonal employment or other temporary work schedules, do not affect eligibility or family co-payments (98.21(c)). Check the processes that the Lead Agency uses to take into account irregular fluctuations in earnings.

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

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

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

☒   d. Other. Describe: As part of its definition of "household income" the Lead Agency considers the household's gross monthly or annual average countable earned and unearned income, taking into account any fluctuation(s) of earnings, and will always be calculated in favor of eligibility.

3.1.8   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)). Lead Agencies should note that there are no federal requirements for specific documentation or verification procedures. Check the information that the Lead Agency documents and verifies at initial determination and redetermination and describe, at a minimum, what information is required and how often. Check all that apply.

Required at Initial Determination	Required at Redetermination	Information and Description
X		a. Applicant identity. Describe: Photo identification such as a driver's license is requested.
X		b. Applicant's relationship to the child. Describe: Proof of the applicant's relationship with the child is required. This may include a birth certificate or other hospital record, paternity papers, or NM Human Services Department scans. To establish custody, the Lead Agency requires a durable power of attorney, court order, or notarized statement.
X		c. Child's information for determining eligibility (e.g., identity, age, citizen/immigration status). Describe: Birth certificate, Numident, Social Security card, resident alien card, naturalization certificate, or Human Services Department scan, refugee/asylee letter from US Secretary of State or from Homeland Security, or other authoritative document showing a child's immigration status that qualifies the child for assistance.

X	**X**	d. Work. Describe: Proof of employment, self-employment, or participation in the TANF program.
X	**X**	e. Job training or educational program. Describe: Proof of school schedule, verification of an educational or job training program or participation in the TANF program.
X	**X**	f. Family income. Describe: Proof of earned or unearned income: current check stubs, statement from employer, payroll history, self-employment information, divorce decree, worker's compensation stubs, retirement and pension documentation, rental income information, Social Security benefits, Human Services Department scans or Department of Labor scans.
X	**X**	g. Household composition. Describe: Application requires disclosure of all household members counted in the household composition. The household includes biological parents, stepparents, legal guardians of the child(ren) for whom child care assistance is sought, and any legal dependents of the aforementioned, living]in the household, thereby constituting an economic unit. Grandparents who are not legal guardians living in the household are counted as members of the household, but their earned and unearned income is excluded from the eligibility calculations. Periods of absences: A household member may be absent from the home and will be considered as living in the home and be counted in the household composition as long as the absent household member plans to return to the home. Any parent or legal guardian who remains in the home must be working, attending school, or participating in a job training or educational program. Temporary absence may include, but are not limited to, attending school, working, training, medical or other treatment, or military service.
X		h. Applicant residence. Describe: Proof of the applicant's residence such as Human Services Department scans or any document verifying a physical address within the state.
X	**X**	i. Other. Describe: The Lead Agency may, in its discretion, exempt a client or applicant from the work/education requirement upon submission of a demonstration of incapacity. Demonstration of incapacity means written documentation that an individual is unable to fulfill an eligibility requirement, such as work, school, or the ability to provide child care, and should otherwise be excluded, in whole or in part, from eligibility determination. Written documentation of incapacity includes, but is not limited to: statements or letters on a physician's/medical professional's/treatment provider's letterhead stationery; statements, records or letters from a federal government agency that issues or provides disability benefits; statements, records or letters from a state vocational

		rehabilitation agency counselor; records or letters from a treatment facility/counselor; certification from a private vocational rehabilitation or other counselor that issues or provides disability benefits.

3.1.9 Which strategies, if any, will the Lead Agency use to ensure the timeliness of eligibility determinations upon receipt of applications? Check all that apply.

☒ a. Time limit for making eligibility determinations. Describe length of time:
Eligibility Interviewers perform all eligibility and recertification determinations within 10 working days upon receipt of all required documentation from the client. Eligibility determinations are made once all required documentation is provided. This includes in-person meetings or applications provided by the online application portal, mail, fax or email. 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 ECECD. 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, virtually or by phone.

☒ b. Track and monitor the eligibility determination process

☒ c. Other. Describe: The Lead Agency implemented a Call Center and statewide service intake process to streamline, expedite and improve timeliness of the application process. The Call Center reviews applications and supporting documentation to ensure all required information is received. If applicants have all the necessary documentation, they are referred to an eligibility interviewer for eligibility determination and approval. If not, they are given 14 calendar days, through a notice of action, for which they can provide the information. If, after 14 calendar days the documentation is not received, they are referred to an eligibility interviewer to complete the application process within 30 days. Applications are processed statewide, and not dependent on location of the client to serve clients more efficiently. If applicants demonstrate barriers to this process exist, in-person and on-site eligibility may occur.

☐ d. None

3.1.10 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:

   i. "Appropriate child care": TANF program rules define "appropriate child care" as child care that is provided by a facility or an individual that is licensed or registered with ECECD, provides care and supervision to a child, meets the health and safety standards established by ECECD, 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.

   ii. "Reasonable distance": TANF program rules define "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.

   iii. "Unsuitability of informal child care": TANF program rules define informal child care that is deemed to be unsuitable based on the ECECD determination that the care and supervision does not meet the minimum health and safety standards established by ECECD.

   iv. "Affordable child care arrangements": Affordable child care arrangements are defined as services that are subsidized by the Lead Agency, 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?

   ☒ i. In writing

   ☒ ii. Verbally

   ☒ iii. Other. Describe: The New Mexico Human Services Department, which administers the TANF program, notifies program participants of work requirements and responsibilities. Participants are also kept informed by the NM Works contractor.

d. Provide the citation for the TANF policy or procedure: 8.102.110 NMAC outlines the General Operating Policy for the TANF application process. 8.102.120 NMAC contains the Eligibility Policy for Case Administration. 8.102.460 NMAC contains the Recipient Policy for Compliance Requirements.

3.2   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 co-payments (98.45(k)(2)). Questions 3.2.1 through 3.2.4 address co-payments during the initial/entry-eligibility period.

To help families transition off child care assistance, Lead Agencies may gradually adjust co-pay amounts for families determined to be eligible under a graduated phase-out. Question 3.2.5 addresses co-payments during the graduated phase-out period.

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

    a. Complete the chart based on the most populous area of the state or territory (defined as the area serving the highest number of CCDF children, aligned to the response provided in 3.1.3 e).

	(a)	*(b)*	*(c)*	*(d)*	*(e)*	*(f)*
Family size	Lowest initial or First Tier Income Level where family is first charged co-pay (greater than $0)	What is the monthly co-payment for a family of this size based on the income level in (a)?	What percentage of income is this co-payment in (b)?	Highest initial or First Tier Income Level before a family is no longer eligible.	What is the monthly co-payment for a family of this size based on the income level in (d)?	What percentage of income is this co-payment in (d)?
1	*N/A*	*N/A*	*N/A*	*N/A*	*N/A*	*N/A*
2	*$451*	*$6*	*1.33%*	*$2,873.33*	*$259*	*9.01%*
3	*$551*	*$8*	*1.45%*	*$3,620.00*	*$328*	*9.06%*
4	*$701*	*$10*	*1.43%*	*$4,366.67*	*$397*	*9.09%*
5	*$801*	*$12*	*1.50%*	*$5,113.33*	*$466*	*9.11%*

    b. If the sliding-fee scale is not statewide (i.e., county-administered states):

        i. ☒ N/A. Sliding fee scale is statewide

        ii. Identify the most populous area of the state (defined as the area serving the highest number of CCDF children) used to complete the chart above.
Albuquerque, NM

        iii. Describe how many jurisdictions set their own sliding-fee scale (98.16(i)(3)).
N/A

    c. What is the effective date of the sliding-fee scale(s)? April 1, 2020
    d. Provide the link(s) to the sliding-fee scale: https://www.nmececd.org/wp-content/uploads/2020/06/Copay_Calculation_Table_April_2020_through_March_2021-1.pdf

3.2.2 How will the family's contribution be calculated, and to whom will it be applied? Check all that apply under a. or b.

    ☒ a. The fee is a dollar amount and (check all that apply):

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

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

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

        ☐ iv. No additional fee is charged after a certain number of children.

        ☐ v. The fee is per family.

☐ vi. The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: *Click or tap here to enter text.*

☐ vii. Other. Describe: *Click or tap here to enter text.*

☐ b. The fee is a percent of income and (check all that apply):

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

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

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

☐ iv. No additional percentage is charged after a certain number of children.

☐ v. The fee is per family.

☐ vi. The contribution schedule varies because it is set locally/regionally (as indicated in 1.2.1). Describe: *Click or tap here to enter text.*

☐ vii. Other. Describe: *Click or tap here to enter text.*

3.2.3   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 co-payments (98.45(k)(2)).

☐ No

☒ Yes. If yes, check and describe those additional factors below.

☒   a. 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.

☐   b. Lower co-payments for a higher quality of care, as defined by the state/territory. Describe: *Click or tap here to enter text.*

☐   c. Other. Describe: *Click or tap here to enter text.*

3.2.4   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, on a case-by-case basis, 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. If yes, identify and describe which families have their family contributions/co-payments waived.

☐   a. Families with an income at or below the Federal poverty level for families of the same size. Describe the policy and provide the policy citation.
Click or tap here to enter text.

☐   b. Families who are receiving or needing to receive protective services on a case-by-case basis, as determined by the Lead Agency for purposes of CCDF eligibility.

Describe the policy and provide the policy citation. *Click or tap here to enter text.*

☒ c. Families meeting other criteria established by the Lead Agency. Describe the policy. Co-payments are paid by all clients receiving child care assistance benefits, except for at-risk child care and qualified grandparents or legal guardians as defined by the Lead Agency. "At-risk child care" means a program for families at-risk as determined by the Department (e.g., homeless or families referred by Child Protective Services). In addition, under approved waivers during a disaster or state emergency, ECECD may waive co-payments for families enrolled in the CCDF Child Care Assistance program. ECECD is currently waiving co-payments under the Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act fund for income eligible families through June 30, 2022.

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

Lead Agencies that establish initial family income eligibility below 85 percent of state median income (SMI) are required to provide 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 (98.21 (b)(1)). 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 provide a graduated phase-out must implement 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)). Note that once deemed eligible, the family shall be considered eligible for a full minimum 12-month eligibility period, even if their income exceeds the second tier of eligibility during the eligibility period, as long as it does not exceed 85 percent of SMI.

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

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

☐   N/A. The Lead Agency sets its initial eligibility threshold at 85 percent of SMI and therefore, is not required to provide a graduated phase-out period. (If checked, skip to subsection 3.3)

☐   The Lead Agency sets the second tier of eligibility at 85 percent of SMI.

 A. Describe the policies and procedures. *Click or tap here to enter text.*
 B. Provide the citation for this policy or procedure. *Click or tap here to enter text.*

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

 A. Provide the income level for the second tier of eligibility for a family of three: $4,525.00 monthly

 B. Describe how the second eligibility threshold:

  1. Takes into account the typical household budget of a low-income family: The second tier allows a family to remain eligible for services up to 250% of the Federal Poverty Level (FPL), which is higher than the initial eligibility allowance of up to 200% of the FPL. This allows a family to increase their household budget, support their child care needs, and still remain eligible while transitioning from the program.

  2. 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: The second tier allows a family to increase their household budget, support their child care needs and still remain eligible while transitioning from the program.

  3. Reasonably allows a family to continue accessing child care services without unnecessary disruption: The second tier allows a family extended time to complete the redetermination process, up to one month following the end of their previous certification period, and ECECD will qualify such families based on up to 250% of the FPL.

  4. Provide the citation for this policy or procedure related to the second eligibility threshold: 8.15.2.12 NMAC.

b. To help families transition from assistance, does the Lead Agency gradually adjust co-payments for families eligible under the graduated phase-out period?

☐   No
☒   Yes

 i. If yes, describe how the Lead Agency gradually adjusts co-payments for families under a graduated phase-out: Co-payments for families are based upon the size and income of the household. Copayments increase as income increases (not to exceed 250% 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 3.4.3 of the Plan.)

  ☒   No
  ☐   Yes. Describe: *Click or tap here to enter text.*

3.3 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. Other ways to give priority may include 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).

3.3.1   Describe how the Lead Agency defines:

a. "Children with special needs": The Lead Agency defines "children with special needs" as children with an identified disability, health, or mental health condition requiring early intervention, special education services under an Individualized Education Plan, or other specialized services and supports; or children without identified conditions, but requiring specialized services, supports, or monitoring. The Lead Agency prioritizes child care services for children with special needs based on budget availability. Clients with children that have special needs will not be placed on a waitlist if one is implemented.

b. "Families with very low incomes": The Lead Agency defines families with very low income as those families at or below 100% of the FPL. If the number of eligible clients in this priority exceeds budget availability, the Lead Agency may maintain a waiting list.

3.3.2   Identify how the Lead Agency will prioritize or target child care services for the following children and families:

Note: If waiving co-payments is checked, Lead Agencies will need to provide further information in question 3.2.4. Paying higher rates for accessing higher quality care is addressed in 4.3.3 and using grants or contracts to reserve spots is addressed in 4.1.6.

a. Complete the table below to indicate how the identified populations are prioritized or targeted.

Population Prioritized	Prioritize for enrollment in child care services	Serve without placing on waiting list	Waive co-payments (on a case-by-case basis). As described in 3.2.4.	Pay higher rate for access to higher quality care	Using grants or contracts to reserve spots
Children with special needs	☒	☒	☐	☐	☐
Families with very low incomes	☒	☒	☒	☐	☐
Children experiencing homelessness, as defined by the CCDF	☒	☒	☒	☐	☐
Families receiving TANF, those	☒	☒	☐	☐	☐

attempting to transition off TANF, and those at risk of becoming dependent on TANF (98.16(i)(4))					

    b. If applicable, identify and describe any other ways the identified populations in the table above are prioritized or targeted. If a family is identified as at-risk, they may be prioritized and targeted as eligible under the at-risk priority and the family may be exempt from income, work/education requirements, and co-payments waived. Families experiencing homelessness are targeted by working closely with Homeless Education liaisons within the Local Education Agency to provide child care services.

3.3.3   List and define any other priority groups established by the Lead Agency.
"At-risk child care" means a program for families at-risk as determined by ECECD.

3.3.4   Describe how the Lead Agency prioritizes services for the additional priority groups identified in 3.3.3. Income, work and education requirements and co-payments are waived for clients in the at-risk category. Families identified as at-risk may be prioritized for enrollment and may not be placed on a waiting list, if one is implemented depending on budget.

3.3.5   Lead Agencies are required to expend CCDF funds to (1) permit the enrollment (after an initial eligibility determination) of children experiencing homelessness while required documentation is obtained, (2) provide training and technical assistance to child care providers and the appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (addressed in section 6), and (3) conduct specific outreach to families experiencing homelessness(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 8.16.2.22(E)(1)(e) NMAC, the Lead Agency 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. ECECD will work with families experiencing homelessness to obtain missing immunization records by coordinating with Homeless Education liaisons when appropriate. Families experiencing homelessness may be served through the at-risk category. The income, work, and education requirements and co-payments are waived for clients in the at-risk category. This allows the family 12 months to acquire all required documentation.

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

        ☐   i. Lead Agency accepts applications at local community-based locations

        ☒   ii. Partnerships with community-based organizations

        ☒   iii. Partnering with homeless service providers, McKinney-Vento liaisons, and others who work with families experiencing homelessness to provide referrals to child care

        ☒   iv. Other: The Lead Agency meets regularly with the New Mexico Coalition to End Homelessness (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 twofold: to provide input in each other's implementation plans and include

processes for ongoing collaboration and communication. In addition, ECECD works with the New Mexico Public Education Department (PED) McKinney-Vento representative to collaborate on providing outreach to families experiencing homelessness. This includes posters, flyers, referrals, brochures, posting on ECECD and PED websites, and mutual webinars. There are two child care centers in New Mexico that serve the homeless population (Albuquerque and Las Cruces).

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)).

3.3.6 Lead Agencies must establish a grace period that allows children experiencing homelessness and children in foster care to receive CCDF assistance while providing their families with a reasonable time to take any necessary actions to comply with immunization and other health and safety requirements (as described in section 5). The length of such a grace period shall be established in consultation with the state, territorial, or tribal health agency (658E(c)(2)(I)(i)(I); 98.41(a)(1)(i)(C)).

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

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

 i. Children experiencing homelessness (as defined by the CCDF Final Rule). ECECD 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. ECECD will work with homeless families to obtain missing immunization records by coordinating with Homeless Education liaisons when appropriate. Provide the citation for this policy and procedure. 8.16.2.22(E)(1)(e), 8.16.2.32(D)(1)(e), and 8.17.2.24(H) NMAC

 ii. Children who are in foster care. The Children Youth and Families Department (CYFD) determines child care eligibility for foster care. ECECD allows a 30-day grace period to comply with immunization requirements.

 iii. Provide the citation for this policy and procedure. 8.16.2.22(E)(1)(e), 8.16.2.32(D)(1)(e), and 8.17.2.24(H) NMAC.

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 Lead Agency coordinates with the Public Education Department homeless liaison and the Department of Health Immunization Program to provide support to help families with children receiving services during a grace period to comply with immunization and other health and safety requirements. Licensing staff are members of the Department of Health's Vaccine Advisory Committee which provides annual recommendations with regard to School and Daycare Immunization Requirements. The Department of Health administers a Statewide Immunization Information System (NMSIIS) which is a confidential, computerized repository of individual immunization records that integrates information from birth and death records, public and private healthcare providers, and parental records. The Lead Agency has coordinated with the Department of Health to provide child care providers 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: *Click or tap here to enter text.*

3.4   Continuity for Working Families

3.4.1   Minimum 12-month eligibility.

The Lead Agency is required to establish a minimum 12-month eligibility and redetermination period:

- regardless of changes in income. Lead Agencies may not terminate CCDF assistance during the minimum 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 state median income (SMI).
- regardless of temporary changes in participation in work, training, or educational activities (658E(c)(2)(N)(i) and (ii)).

The Lead Agency may not terminate assistance prior to the end of the minimum 12-month period if a family experiences a temporary job loss or a temporary change in participation in a training or educational activity. Any temporary change cannot have a time limit (e.g. 60 days, 90 days, etc.). A temporary change in eligible activity includes, at a minimum:

1. 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

2. any interruption in work for a seasonal worker who is not working

3. any student holiday or break for a parent participating in a training or educational program

4. any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program

5. 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

6. a child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1)

7. any changes in residency within the state, territory, or tribal service area

a. Describe the Lead Agency's policies and procedures related to providing a minimum 12-month eligibility period at initial eligibility determination and redetermination and provide a citation for these policies or procedures.   In 8.15.2.11(B) NMAC, the eligibility period is based upon the client meeting all eligibility requirements and a 12-month certification period will be granted. The client will remain eligible if a temporary change of activity occurs as well as if a client experiences a non-temporary change in activity. The client, however, will no longer be eligible to receive assistance if another activity is not obtained within the three-month grace period. 8.15.2.12 NMAC requires clients to recertify for services at the end of their eligibility period by complying with all requirements of the initial certification. If completed, a 12-month certification period will be granted in accordance with eligibility requirements outlined in 8.15.2.11(B) NMAC.

b. Describe and provide the citation for each of the minimum required elements listed below that are included in the Lead Agency's definition of "temporary change".

Minimum Required Element	Citation
☒ i. 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. Describe or define your Lead Agency's policy: Limited absence from work for employed parents or legal guardians for periods of family leave (including parental leave) or sick leave are permitted for less than three (3) months.	8.15.2.7(HH)(1) NMAC
☒ ii. Any interruption in work for a seasonal worker who is not working. Describe or define your Lead Agency's policy: Interruption in work for a seasonal worker who is not working between regular industry work seasons is permitted for less than three (3) months.	8.15.2.7(HH)(2) NMAC
☒ iii. Any student holiday or break for a parent participating in a training or educational program. Describe or define your Lead Agency's policy: A student holiday or break for a parent or legal guardian participating in training or education is permitted is permitted for three (3) months or less.	8.15.2.7(HH)(3) NMAC
☒ iv. Any reduction in work, training, or education hours, as long as the parent is still working or attending a training or educational program. Describe or define your Lead Agency's policy: Reduction in work, training or education hours, as long as the parent or legal guardian is still working or attending training or education, is permitted for three (3) months or less .	8.15.2.7(HH)(4) NMAC
☒ v. 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. Describe or define your Lead Agency's policy: Cessation of work or attendance at a training or education program for three (3) months or less.	8.15.2.7(HH)(5) NMAC
☒ vi. A child turning 13 years old during the minimum 12-month eligibility period (except as described in 3.1.1). Describe or define your Lead Agency's policy: Eligibility determinations made prior to a child turning 13 years old may be granted for 12-month eligibility periods or a lesser period of time as determined by the Lead Agency for at-risk child care	8.15.2.11(F) NMAC
☒ vii. Any changes in residency within the state, territory, or tribal service area. Describe or define your Lead Agency's policy: A case is closed if a client permanently moves out of state. A client's 12-month eligibility will remain in place if a client changes residency within the state.	8.15.2.14(C)(3) NMAC

c. Provide any other elements included in the state's definition of "temporary change", including those implemented during the pandemic, and provide the citation. N/A

3.4.2   Continuing assistance for "job search" and a Lead Agency's option to discontinue assistance during the minimum 12-month eligibility period.

Lead Agencies have the option, but are not required, to discontinue assistance during the minimum 12-month eligibility period due to a parent's <u>non-temporary loss</u> of work or cessation of attendance at a job training or educational program, otherwise known as a parent's eligible activity.

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. This time period allows 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 state median income (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 consider seeking employment (engaging in a job search) an eligible activity at initial eligibility determination (at application) and at the minimum 12-month eligibility redetermination? (Note: If yes, Lead Agencies must provide a minimum of three months of job search.)

☐   No

☒   Yes. If yes, describe the policy or procedure (including any differences in eligibility at initial eligibility determination vs. redetermination of eligibility):
      Pursuant to 8.15.2.11(B)(3) NMAC, eligibility may be granted for up to three months for seeking employment. The eligibility may be closed if the client fails to obtain a qualifying activity within three months. The Department has the discretion to extend the job search period.

b.   Does the Lead Agency discontinue assistance during the minimum 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 discontinue assistance during the 12-month eligibility period due to a parent's *non-temporary* loss of work or cessation of attendance at a job training or educational program.

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

      i.   Provide a summary describing the Lead Agency's policies and procedures for discontinuing assistance due to a parent's non-temporary change: The family will remain eligible if a temporary change of activity occurs (three months or less). The Lead Agency allows a grace period (three months or less) after the temporary change for the parent to engage in a qualifying activity. The parent will no longer be eligible to receive assistance if another qualifying activity is not obtained within the three-month grace period. Between the temporary change (three months) and grace period (three months) the family

> can have up to six months to secure a qualifying activity and continue their participation in the Child Care Assistance program without interruption of eligibility.

ii. Describe what specific actions/changes trigger the job-search period after each such loss or cessation: A three-month grace period is granted when a parent experiences a non-temporary change in activity. This can happen after a temporary change in activity has been established (additional three months). 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 or legal guardians 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 or legal guardians participating in training or education; (4) reduction in work, training or education hours, as long as the parent or legal guardian is still working or attending training or education; and (5) cessation of work or attendance at a training or education program less than three months

iii. How long is the job-search period (must be at least 3 months)? A three-month grace period is granted when a parent experiences a non-temporary change in activity and this can be after temporary change in activity has been established (an additional three months).

iv. Provide the citation for this policy or procedure. 8.15.2.7(S); 8.15.2.7(HH); and 8.15.2.11(B)(4) and (5) NMAC

c. The Lead Agency may discontinue assistance prior to the next minimum 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 minimum 12-month redetermination. Check all that apply.

☐ i. Not applicable

☐ ii. 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.

   A. Define the number of unexplained absences identified as excessive: *Click or tap here to enter text.*
   B. Provide the citation for this policy or procedure: *Click or tap here to enter text.*

☒ iii. 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

☐ iv. 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. *Click or tap here to enter text.*

3.4.3 Change reporting during the minimum 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 (98.21 (e)).

Note: Responses should exclude reporting requirements for a graduated phase-out, which were described in question 3.2.5 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 3.4.2 of the Plan, they may require families to report a non-temporary change 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 minimum 12-month eligibility period must be limited to items that impact a family's eligibility (e.g., income changes over 85 percent of state median income (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 minimum 12-month eligibility period. Check all that apply.

☐ i. Additional changes that may impact a family's eligibility during the minimum 12-month period. Describe: *Click or tap here to enter text.*

☐ ii. Changes that impact the Lead Agency's ability to contact the family. Describe: *Click or tap here to enter text.*

☒ iii. 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, families may be placed on a waiting list.

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

☒ i. Phone
☒ ii. Email
☐ iii. Online forms
☐ iv. Extended submission hours
☒ v. Postal mail
☒ vi. Fax
☒ vii. In-person submission
☐ viii. Other. Describe: *Click or tap here to enter text.*

d. Families must have the option to voluntarily report changes on an ongoing basis during the minimum 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 Lead Agency allows families to report changes that may reduce the family's co-payment, which include but are not limited to, temporary and non-temporary changes in activity, household members moving in or out of the home, or changes in any countable household income.

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

3.4.4 Prevent the disruption of employment, education, or job training activities.

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

Examples include developing strategies to inform families and their providers of an upcoming redetermination and the information that will be required of the family, pre-populating subsidy renewal forms, having parents confirm that the information is accurate, and/or asking only for the information necessary to make an eligibility redetermination. In addition, states and territories can offer a variety of family-friendly methods for submitting documentation for eligibility redetermination that considers the range of needs for families in accessing support (e.g., use of languages other than English, access to transportation, accommodation of parents working non-traditional hours).

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

☒ i. Advance notice to parents of pending redetermination
☒ ii. Advance notice to providers of pending redetermination
☒ iii. Pre-populated subsidy renewal form
☐ iv. Online documentation submission
☐ v. Cross-program redeterminations
☐ vi. Extended office hours (evenings and/or weekends)
☒ vii. Consultation available via phone
☐ viii. Other: *Click or tap here to enter text.*

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. In addition to generally building the supply of child care for all families, this effort also supports equal access for CCDF eligible children to the priced child care market.

This section addresses strategies that the Lead Agency uses to promote parental choice, ensure equal access, and increase the supply of child care. Note: In responding to questions in this section, the Office of Child Care (OCC) recognizes that each state/territory identifies and defines its own categories and types of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories and types of care. For these questions, provide responses that closely match the CCDF categories of care.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

4.1   Maximize Parental Choice and Implement Supply Building Mechanisms

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 their 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 their 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 the Lead Agency, the parent or guardian, and the provider. Information included in the agreement includes applicant's 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 reverse side of the agreement, the parent or guardian and provider must sign the acknowledgment of the terms and conditions contained in the agreement. The agreement is issued to the parent(s) 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   Identify how the parent is informed that the child care 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.

☐   a. Certificate provides information about the choice of providers

☐   b. Certificate provides information about the quality of providers

☐   c. Certificate is not linked to a specific provider, so parents can choose any provider

☒   d. Consumer education materials are provided on choosing child care

☒   e. Referrals provided to child care resource and referral agencies

☐   f. Co-located resource and referral staff in eligibility offices

☒   g. Verbal communication at the time of the application

☒   h. Community outreach, workshops, or other in-person activities

☒   i. Other. Describe: A Consumer Statement is included on the application, along with parents' rights and responsibilities.

4.1.3   A core principle of CCDF is that families receiving CCDF-funded child care should have equal access to child care that is comparable to that of non-CCDF families (658E(c)(4)(A) and 98.45(a)).

a. Describe how parents have access to the full range of providers eligible to receive CCDF:
Parents have full access to all providers eligible to receive CCDF through the provider database maintained by the New Mexico Resource and Referral Agency. All providers receiving CCDF funds are listed within the database. Many child care providers in New Mexico are currently working with ECECD through a voluntary process of continuous improvement and verification to earn higher STAR ratings within FOCUS. 3-, 4-, and 5-STAR ratings signify that providers offer high-quality care, and also entitle them to higher rates of reimbursement through child care assistance. This is intended to incentivize a system in which high-quality care is available to low-income families. As of March 2021, 45% (1,005 providers out of the 2,246 number of certified providers) of child care providers serve children from CCDF. Of the licensed child care centers, 429 of the 623 providers (69%) served children with CCDF funds; of the licensed family homes, 75 of the 92 providers (82%) served children with CCDF funds; and of the licensed group homes, 111 of the 132 providers (84%) served children with CCDF funds. Of the registered homes, 332 of the 593 providers (56%) served children with CCDF funds; and of the registered homes exempt, 58 of the 98 providers (59%) served children with CCDF funds."

b. Describe state data on the extent to which eligible child care providers participate in the CCDF system: The Lead Agency provides data reports containing eligible child care providers to the New Mexico Resource and Referral on a monthly basis. New Mexico Resource and Referral uploads

the data and provides a searchable tool via the web, for families to search for providers in their area. In addition to location, families are able to search by the hours of care, type of care, quality level, and ages served by child care provider

c. Identify any barriers to provider participation, including barriers related to payment rates and practices – including for family child care and in-home providers - based on provider feedback and reports to the Lead Agency:

Based on provider feedback and reports, ECECD has identified the following barriers to participation: (1) The application process to participate in child care assistance can be extensive; some providers are unable to meet regulatory requirements due to the lack of resources. (2) Family child care providers have shared concerns that the per-child rate is too low to make a living. While New Mexico has tiered payment rates tied to the quality rating system, some providers have shared that the quality criteria requirements are intensive, ratios and smaller group sizes can be difficult to achieve, and the classroom/program requirements can be challenging to maintain. Based on those factors, some providers have chosen not to participate in the FOCUS program so payment rates are provided at a lower rate than those identified as a high-quality program.

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 Lead Agency requires that providers 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 or in the licensee's home where their child is located. However, during the public health emergency all child care facilities and homes were required to comply with COVID-safe practices outlined in the NM Health and Safety guidance which included limiting access to the child care programs.

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.

☐   a.   Restricted based on the minimum number of children in the care of the provider to meet the Fair Labor Standards Act (minimum wage) requirements. Describe: *Click or tap here to enter text.*

☒   b.   Restricted based on the provider meeting a minimum age requirement. Describe: The provider must be 18 years of age or older.

☐   c.   Restricted based on the hours of care (i.e., certain number of hours, non-traditional work hours). Describe: *Click or tap here to enter text.*

☐   d.   Restricted to care by relatives. (A relative provider must be at least 18 years of age based on the definition of eligible child care provider (98.2)). Describe: *Click or tap here to enter text.*

☒   e.   Restricted to care for children with special needs or a medical condition. Describe: In-home care is restricted to care for children with special needs or a medical condition, and the sibling(s) of qualifying child.

☐   f.   Restricted to in-home providers that meet additional health and safety requirements beyond those required by CCDF. Describe: *Click or tap here to enter text.*

☐　　g.　Other. Describe: *Click or tap here to enter text.*

4.1.6　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 4.1.7

☐　Yes, in some jurisdictions but not statewide. If yes, describe how many jurisdictions use grants or contracts for child care slots. *Click or tap here to enter text.*

☐　Yes, statewide. If yes, describe:

i.　How the Lead Agency ensures that parents who enroll with a provider who has a grant or contract have choices when selecting a provider: *Click or tap here to enter text.*

ii.　The entities that receive contracts (e.g., shared services alliances, CCR&R agencies, FCC networks, community-based agencies, child care providers) and how grants or contracts are promoted by the Lead Agency: *Click or tap here to enter text.*

iii.　How rates for contracted slots are set through grants and contracts and if they are viewed by providers as a vehicle for stabilizing payments. *Click or tap here to enter text.*

b.　Will the Lead Agency use grants or contracts for direct child care services to increase the supply or quality of specific types of care?

☐　No

☐　Yes. If yes, does the Lead Agency use grants or contracts to increase the supply and/or quality of child care programs serving the populations below? Check all that apply.

Grants or Contracts are used in Child Care Programs that Serve	*To increase the supply of care*	*To increase the quality of care*
i.　Children with disabilities	☐	☐
ii.　Infants and toddlers	☐	☐
iii.　School-age children	☐	☐
iv.　Children needing non-traditional hour care	☐	☐
v.　Children experiencing homelessness	☐	☐
vi.　Children with diverse linguistic or cultural backgrounds	☐	☐
vii.　Children in underserved areas	☐	☐

viii. Children in urban areas	☐	☐
ix. Children in rural areas	☐	☐
x. Other populations, please specify *Click or tap here to enter text.*	☐	☐

4.1.7 Lead Agencies must identify shortages in the supply of high-quality child care providers that meet parents' needs and preferences. List the data sources used to identify any shortages and declines in the supply of care types that meet parents' needs. Also describe the method of tracking progress to support equal access and parental choice (98.16(x)).

a. In child care centers. The Lead Agency identifies shortages in the supply of high-quality child care providers (child care centers, home and other settings) that meet parent needs and preferences using data sources provided by the At-Risk Child Care Program and the Child Care Resource and Referral System. This data is provided on a monthly basis. If necessary, changes in outreach policies and practices are implemented to support equal access and parental choice. The Lead Agency also engages with national research organizations, such as the Center for American Progress, to identify the shortages in the supply of high-quality child care providers. In April 2020, the Lead Agency engaged with the Center for American Progress to conduct research on New Mexico's licensed child care capacity. The analysis included a review of data on child care programs licensed to serve children birth through school age. Specifically, this analysis focused on the state's capacity for infants and toddlers and included a county-by-county breakdown. According to U.S. Census data, there are 154,355 children under age six in New Mexico, with 60% having all available parents in the labor force. Thus, there are 2.16 children under six for each slot of licensed child care, equating to enough licensed child care for 87% of children under six with all available parents in the labor force. 14 of New Mexico's 33 counties - comprising 21% of the state's population - would be classified as child care deserts. The Center for American Progress defines a child care desert as an area with three or more children per slot of licensed child care and at least 50 children under age six at the census tract or county level. Child care supply is much lower for infants and toddlers, (defined as children younger than two), with an estimated 3.71 children under two per licensed slot of infant-toddler child care. There are only enough licensed child care slots for just over half of infants and toddlers with all available parents in the labor force. The gap between infant-toddler supply and total supply is largest in medium metro counties but is also significant in small metro and micropolitan areas. The Lead Agency also engaged with the Bi-Partisan Policy Center to conduct a New Mexico Child Care Gap Assessment. This analysis included: estimates of (1) potential need, based on Census data on population age 5 and under with parents in labor force; (2) supply, based on data on child care facilities provided by state agencies; (3) the gap, or the difference between these two data sets based on distance from home to facility. The research team created maps showing how supply and need are distributed across the state, with breakdown by county, state legislative district, and Congressional District, as well as cross tabulation of child care gaps by socioeconomic characteristics like minority population, population in poverty, etc. The research identified that 89,386 children need child care in New Mexico. This need was determined by the number of children under the age of 5 with parents in the labor force. The gap was determined by the number of children who need child care that exceeds the child care capacity. In the state, the total gap is 23,042. The gap is higher in areas with a greater minority population, a higher percentage of limited English speaking population and a higher percentage of households with incomes lower than the state median income. The gap was the largest in the state's largest county (Bernalillo) where 30,064 children need child care and a gap of 3,921 child care slots are available. The Lead Agency will use the gap analysis to develop polices to address the need for child care in the state.

b. In child care homes. The Lead Agency identifies shortages in the supply of high-quality child care providers (child care centers, home and other settings) that meet parents' needs and preferences. The data sources that the Lead Agency uses to identify shortages and declines in the supply of care needs to meet the needs of parents includes data provided by the At-Risk Child Care Program as well as data provided by the Child Care Resource and Referral System. This data is provided on a monthly basis. If necessary, changes in outreach policies and practices are implemented to support equal access and parental choice. The Lead Agency also engages with national research organizations, such as the Center for American Progress, to identify the shortages in the supply of high-quality child care providers. In April 2020, the Lead Agency engaged with the Center for American Progress to conduct research on New Mexico's licensed child care capacity. The analysis included a review of data on child care programs licensed to serve children birth through school age. Specifically, this analysis focused on the state's capacity for infants and toddlers and included a county-by-county breakdown. According to U.S. Census data, there are 154,355 children under age six in New Mexico, with 60% having all available parents in the labor force. Thus, there are 2.16 children under six for each slot of licensed child care, equating to enough licensed child care for 87% of children under six with all available parents in the labor force. 14 of New Mexico's 33 counties - comprising 21% of the state's population - would be classified as child care deserts. The Center for American Progress defines a child care desert as an area with three or more children per slot of licensed child care and at least 50 children under age six at the census tract or county level. Child care supply is much lower for infants and toddlers, (defined as children younger than two), with an estimated 3.71 children under two per licensed slot of infant-toddler child care. There are only enough licensed child care slots for just over half of infants and toddlers with all available parents in the labor force. The gap between infant-toddler supply and total supply is largest in medium metro counties but is also significant in small metro and micropolitan areas..

c. Other. Click or tap here to enter text.

4.1.8 Lead Agencies are required to develop and implement strategies to increase the supply of and improve the quality of child care services (98.16 (x)). These strategies should address 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. Identify what method(s) is (are) used to increase supply and/or to improve quality for the following populations and indicate in the description if a strategy is focused more on building supply or on improving quality.

a. Children in underserved areas. Check and describe all that apply.

☐ i. Grants and contracts (as discussed in 4.1.6). Describe:
Click or tap here to enter text.

☐ ii. Targeted Family Child Care Support such as Family Child Care Networks. Describe: *Click or tap here to enter text.*

☐ iii. Start-up funding. Describe: *Click or tap here to enter text.*

☒ iv. Technical assistance support. Describe: Resource and Referral provides technical assistance and support to child care providers who serve children in underserved areas.

☐ v. Recruitment of providers. Describe: *Click or tap here to enter text.*

☐ vi. Tiered payment rates (as discussed in 4.3.3). Describe:

☒ vii. Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: Resource and Referral provides

management training to child care providers who serve children in underserved areas.

- ☐ viii. Accreditation supports. Describe: *Click or tap here to enter text.*
- ☐ ix. Child care health consultation. Describe: *Click or tap here to enter text.*
- ☒ x. Mental health consultation. Describe: Resource and Referral provides management training to child care providers who serve children in underserved areas.
- ☐ xi. Other. Describe: *Click or tap here to enter text.*

b. Infants and toddlers. Check and describe all that apply.

- ☐ i. Grants and contracts (as discussed in 4.1.6). Describe: *Click or tap here to enter text.*
- ☐ ii. Family Child Care Networks. Describe: *Click or tap here to enter text.*
- ☐ iii. Start-up funding. Describe: *Click or tap here to enter text.*
- ☒ iv. Technical assistance support. Describe: Resource and Referral provides technical assistance and support to child care providers who serve children in underserved areas.
- ☐ v. Recruitment of providers. Describe: *Click or tap here to enter text.*
- ☐ vi. Tiered payment rates (as discussed in 4.3.3). Describe: Click or tap here to enter text.
- ☒ vii. Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: Resource and Referral provides management training to child care providers who serve children in underserved areas.
- ☐ viii. Accreditation supports. Describe: *Click or tap here to enter text.*
- ☐ ix. Child care health consultation. Describe: *Click or tap here to enter text.*
- ☒ x. Mental health consultation. Describe: Resource and Referral provides management training to child care providers who serve children in underserved areas.
- ☐ xi. Other. Describe: *Click or tap here to enter text.*

c. Children with disabilities. Check and describe all that apply.

- ☐ i. Grants and contracts (as discussed in 4.1.6). Describe: *Click or tap here to enter text.*
- ☐ ii. Family Child Care Networks. Describe: *Click or tap here to enter text.*
- ☐ iii. Start-up funding. Describe: *Click or tap here to enter text.*
- ☒ iv. Technical assistance support. Describe: Resource and Referral provides technical assistance and support to child care providers who serve children in underserved areas.
- ☐ v. Recruitment of providers. Describe: *Click or tap here to enter text.*
- ☐ vi. Tiered payment rates (as discussed in 4.3.3). Describe: *Click or tap here to enter text.*

☒ vii. Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: Resource and Referral provides management training to child care providers who serve children in underserved areas.

☐ viii. Accreditation supports. Describe: *Click or tap here to enter text.*

☐ ix. Child care health consultation. Describe: *Click or tap here to enter text.*

☒ x. Mental health consultation. Describe: Resource and Referral provides management training to child care providers who serve children in underserved areas.

☐ xi. Other. Describe: *Click or tap here to enter text.*

d. Children who receive care during non-traditional hours. Check and describe all that apply.

☐ i. Grants and contracts (as discussed in 4.1.6). Describe: *Click or tap here to enter text.*

☐ ii. Family Child Care Networks. Describe: *Click or tap here to enter text.*

☐ iii. Start-up funding. Describe: *Click or tap here to enter text.*

☒ iv. Technical assistance support. Describe: Resource and Referral provides technical assistance and support to child care providers who serve children in underserved areas.

☒ v. Recruitment of providers. Describe: *Click or tap here to enter text.*

☐ vi. Tiered payment rates (as discussed in 4.3.3). Describe: *Click or tap here to enter text.*

☒ vii. Support for improving business practices for providers, such as management training, and shared services. Describe: Resource and Referral provides management training to child care providers who serve children in underserved areas.

☐ viii. Accreditation supports. Describe: *Click or tap here to enter text.*

☐ ix. Child Care health consultation. Describe: *Click or tap here to enter text.*

☒ x. Mental health consultation. Describe: Resource and Referral provides management training to child care providers who serve children in underserved areas.

☐ xi. Other. Describe: *Click or tap here to enter text.*

e. Other. Check and describe all that apply.

☒ i. Grants and contracts (as discussed in 4.1.6). Describe: In recognition of the profound impact of the COVID-19 pandemic on the child care industry and in recognition of the key role child care plays in supporting children, families, businesses and the economy as a whole, the Lead Agency implemented child care stabilization grants. These grants are designed to stabilize and rebuild the child care sector, to support the developmental and learning needs of children, to provide parent choice with equal access to high-quality child care, and to advance a professionalized workforce that is diverse, well-credentialed and well-compensated. The Lead Agency engaged with an intermediary to administer and

process the child care stabilization grants. The Lead Agency utilized a cost estimation model to determine grant amounts and prioritized small child care providers for awards. Applicants were required to certify that they met certain requirements throughout the period of the grant including (1) the implementation of certain health and safety guidelines; (2) continue to pay full compensation and provide the same level of benefits to employees; and, (3) as possible, provide relief from co-payments and tuition for parents. The Lead Agency engaged in an array of strategies to target providers in low-income communities. Applications were accepted and processed on a rolling basis. The first round of grants was issued in August 2020. The impact and results of these stabilization grants on child care providers and child care staff have been significant. In many instances prevented a provider from permanently going out of business.

☐ ii. Family Child Care Networks. Describe: *Click or tap here to enter text.*

☐ iii. Start-up funding. Describe: *Click or tap here to enter text.*

☐ iv. Technical assistance support. Describe: *Click or tap here to enter text.*

☐ v. Recruitment of providers. Describe: *Click or tap here to enter text.*

☐ vi. Tiered payment rates (as discussed in 4.3.3). Describe:
Click or tap here to enter text.

☐ vii. Support for improving business practices, such as management training, paid sick leave, and shared services. Describe: *Click or tap here to enter text.*

☐ viii. Accreditation supports. Describe: *Click or tap here to enter text.*

☐ ix. Child Care health consultation. Describe: *Click or tap here to enter text.*

☐ x. Mental health consultation. Describe: *Click or tap here to enter text.*

☐ xi. Other. Describe: *Click or tap here to enter text.*

4.1.9   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 (658 E(c)(2)(M); 98.16 (x);98.46(b)).

a. How does the Lead Agency define areas with significant concentrations of poverty and unemployment? In 2010, a taskforce that included representatives from the New Mexico Department of Health, the Public Education Department and the Children, Youth and Families Department utilized epidemiological data to compare levels of risk and resiliency across New Mexico's communities to rank geographical areas by levels of risk. Data was gathered and analyzed from all of New Mexico's counties and school districts. The combined county and school district data allowed an expansive review of indicators associated with health, family environment, poverty, child development, and factors that support literacy and school readiness. This review also included the examination of indicators related to school success, including high-school graduation rates, resource investments at the school district level and support for pregnant and parenting teens. Those with the highest aggregated need were identified, which included frontier to urban population centers encompassing 11 of 33 counties and 35 of 89 school districts. Funding was prioritized for these areas. The Lead Agency also works closely with other state agencies and national research organizations to identify areas of significant concentration of poverty and unemployment.

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 access to high-quality programs.

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 access to high-quality programs. By working closely with partners at the New Mexico Department of Workforce Solutions, Lead Agency is able to review county level data on unemployment. Likewise, our partners at the New Mexico Human Services Department provide data by county level data regarding poverty, specifically poverty among families with children. The Lead Agency then meets with Resource and Referral partners to share this data with them and to develop outreach to specific areas of the state with concentrations of poverty and employment that do not have access to high-quality programs. The Lead Agency and Resource and Referral parents work to increase the number of high-quality programs in these areas by providing targeted supports to existing programs to move along the tiered quality rating improvement system.

4.2   Assess Market Rates and Analyze the Cost of Child Care

Key principles of the CCDF are to: (1) provide equal access to child care for children receiving child care assistance; and (2) ensure parental choice by offering a full range of child care services. Payment rates that are too low to support equal access undermine these principles. To establish subsidy payment rates that ensure equal access, Lead Agencies collect and analyze data through a number of tools. 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 or (2) an ACF pre-approved 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 judge what expected costs would be incurred by child care providers and parents under different 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 (CCDF-ACF-PI-2018-01).

Regardless of whether Lead Agencies conduct a market rate survey or an alternative methodology, they are required to analyze the cost of providing child services, known as the narrow cost analysis, that meet basic health, safety, quality and staffing requirements (base level care) (98.45(b)(3), (f)(1)(ii)(A), and (f)(2)(ii)), and higher-quality care at each level of quality, as defined by the Lead Agency (98.45(b)(4), (f)(1)(ii)(B), and (f)(2)(iii)). The analysis must identify the gaps between the cost of care and subsidy levels adopted by the state and then be considered as part of the rate setting process.

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 what information the Lead Agency will obtain from an alternative methodology that could not be obtained from the required narrow cost analysis.

- Describe how the Lead Agency will consult with the State Early Childhood Advisory Council or similar coordinating body, local child care program administrators, local child care

resource and referral agencies, organizations representing child care caregivers, teachers and directors, and other appropriate entities prior to conducting the identified alternative methodology.

- Describe how the alternative methodology will use methods that are statistically valid and reliable and will yield accurate results. For example, if using a survey, describe how the Lead Agency will ensure a representative sample and promote an adequate response rate. If using a cost estimation model, describe how the Lead Agency will validate the assumptions in the model.
- If the proposed alternative methodology includes an analysis of costs (e.g., cost estimation model or cost study/survey), describe how the alternative methodology will account for key factors that impact the cost of providing care, such as: staff salaries and benefits, training and professional development, curricula and supplies, group size and ratios, enrollment levels, licensing requirements, quality level, facility size, and other factors.
- Describe how the alternative methodology will provide complete information that captures the universe of providers in the child care market.
- Describe how the alternative methodology will reflect variations by provider type, age of children, geographic location, and quality.
- Describe how the alternative methodology will use current data.
- What metrics the Lead Agency will use to set rates based on the alternative methodology.
- Describe the estimated reporting burden and cost to conduct the approach.

A Market Rate Survey (MRS) or an ACF pre-approved alternative methodology must be developed and conducted no earlier than 2 years before the date of submission of the Plan (658E(c)(4)(B)(i) (98.45 (c)). Due to the COVID-19 pandemic, Lead Agencies may request a waiver for up to one additional year (until July 1, 2022) to complete the required MRS or an ACF pre-approved alternative methodology. Lead Agencies may also request the required Narrow Cost Analysis be waived for one year (until July 1, 2022). These waiver requests must include a justification linked to the COVID-19 pandemic.

4.2.1   Completion of the MRS or ACF pre-approved alternative methodology.

Did the state/territory conduct a statistically valid and reliable MRS or ACF pre-approved alternative methodology?

☒   Yes. If yes, please identify the methodology(ies) used below to assess child care prices and/or costs.

　　☐   a.   MRS. When was your data gathered (provide a date range, for instance, September – December, 2019)? *Click or tap here to enter text.*

　　☒   b.   ACF pre-approved alternative methodology. Identify the date of the ACF approval and describe the methodology: The Lead Agency received approval to conduct an alternative methodology on April 15, 2021. The alternative methodology is in process and includes the development of two cost models and a series of interview and surveys of an array of providers in a variety of child care settings in throughout the state.

☐   No, a waiver is being requested in Appendix A.

a. Please identify the Lead Agency's planned methodology(ies) to assess child care prices and/or costs.

☐   i. MRS. If checked, describe the status of the Lead Agency's implementation of the MRS. *Click or tap here to enter text.*

☒   ii. ACF pre-approved alternative methodology. If checked, describe the status of the Lead Agency's implementation of the ACF pre-approved alternative methodology, including if applicable, the date of the ACF approval and a description of the methodology: The Lead Agency received approval on April 15, 2021. The ACF Pre-Approved Alternative Payment Methodology is in process. In this methodology, through an alternative methodology approach, New Mexico is conducting a cost study and building and utilizing a cost estimation model. The ACF pre-approved alternative methodology process will collect and gather data from providers throughout and across New Mexico's diverse geographic and cultural locations. The independent ACF pre-approved alternative methodology process team reviewed financial records, conducted interviews, and collected revenue and expense data (including salary and non- personnel related expenses) from an intentional mix of providers—including multi-site agencies, individual nonprofit providers, for-profit providers, family child care homes, group family child care homes, small and large programs, programs serving school-aged children, in different parts of the states, and programs serving different variations of child age and family income levels. This data (i.e. survey and interviews) will be built in to the cost estimation tools, and revenue and expense models, informing assumptions related to salary and non-personnel expenses. The cost estimation tool will enable ECECD to understand the cost of providing child care and compare this cost with the current rate of subsidy and other forms of available revenue.

b. If a waiver is requested, Lead Agencies will need to respond to questions 4.2.2-4.5.2 based on data collected for the FY 2019-2021 CCDF Plan or any data collected since then. Identify the date of the Lead Agencies' most recent and complete Market Rate Survey or ACF pre-approved alternative methodology that will provide data to inform responses to questions 4.2.2–4.5.2. Click or tap here to enter text.

4.2.2   Prior to developing and conducting the MRS, or conducting the ACF pre-approved alternative methodology, the Lead Agency is required to consult with (1) the State Advisory Council or similar coordinating body, local child care program administrators, local child care resource and referral agencies, and other appropriate entities, and (2) organizations representing caregivers, teachers, and directors (98.45 (e)). Local child care program administrators may also be good informants to Lead Agencies on narrow cost analyses.

Describe how the Lead Agency consulted with the:

a. State Advisory Council or similar coordinating body: On September 17, 2020, ECECD consulted with and received support to submit the request to conduct an alternative methodology from the New Mexico Governor's Early Childhood Advisory Council (ELAC) established by Executive Order 2018-008. The ELAC includes representation from an array of early childhood education and care stakeholders, as outlined in 45 CFR § 98.45 (e)(1)(2). ECECD will continue to consult with ELAC throughout the cost estimation and cost study process. In addition to direct ELAC consultation, the alternative methodology process uses a stakeholder advisory group that includes child care providers, ELAC

members, providers, resource and referral staff, provider association representatives, and representatives from the state Head Start Association and from the New Mexico Association for the Education of Young Children. This stakeholder group was convened a minimum of five times throughout the process to provide content input on the cost survey approach and reach, the cost estimation model; on the quality variables that frame the model; on the model's data-gathering and analysis assumptions; on how to ensure that providers are engaged in both the data gathering process and in the review of model results; and, on any modifications the model may require based on analysis of interim results. This stakeholder advisory body, along with ELAC, and a broad array of provider groups was consulted in March and April of 2021, after data collection and model development generated initial results and analysis. Meetings were held on March 24, March 30, and April 1, 2020 to discuss initial findings of the cost study.

b. Local child care program administrators: This stakeholder group was consulted in March 2021 and on April 25, 2021 to provide content input on the cost survey approach and reach, the cost estimation model; on the quality variables that frame the model; on the model's data-gathering and analysis assumptions; on how to ensure that providers are engaged in both the data gathering process and in the review of model results; and, on any modifications the model may require based on analysis of interim results.

c. Local child care resource and referral agencies: This stakeholder group was consulted in March 2021 and on April 25, 2021 to provide content input on the cost survey approach and reach, the cost estimation model; on the quality variables that frame the model; on the model's data-gathering and analysis assumptions; on how to ensure that providers are engaged in both the data gathering process and in the review of model results; and, on any modifications the model may require based on analysis of interim results.

d. Organizations representing caregivers, teachers, and directors: This stakeholder group was consulted in March 2021 and on April 25, 2021 to provide content input on the cost survey approach and reach, the cost estimation model; on the quality variables that frame the model's data-gathering and analysis assumptions; on how to ensure that providers are engaged in both the data gathering process and in the review of model results; and, on any modifications the model may require based on analysis of interim results.

e. Other. Describe: This stakeholder group was consulted in March 2021 and on April 25, 2021 to provide content input on the cost survey approach and reach, the cost estimation model; on the quality variables that frame the model; on the model's data-gathering and analysis assumptions; on how to ensure that providers are engaged in both the data gathering process and in the review of model results; and, on any modifications the model may require based on analysis of interim results.

4.2.3 ACF has established a set of benchmarks, largely based on research, to identify the components of a valid and reliable market rate survey (81 FR, p. 67509). To be considered valid and reliable a Market Rate Survey or preapproved alternative methodology meets the following:

- o represents the child care market
- o provides complete and current data
- o uses rigorous data collection procedures
- o reflects geographic variations
- o analyzes data in a manner that captures other relevant differences

An MRS can use administrative data, such as child care resource and referral data, if it is representative of the market.

a. Describe how each of the benchmarks are met in either the MRS or ACF pre-approved alternative methodology.

i. Represent the child care market: The survey and the interview process included providers who are eligible to receive subsidy, both centers and family child care homes, serving all ages of children, across all FOCUS quality levels, and in all areas of the state. Between the survey and the interviews, the expert consultant team reached providers that serve over 60 percent of the state's population of children and families eligible for subsidy funded child care. The survey was distributed by the Lead Agency and by public partners. The Lead Agency's distribution includes weekly emails, presentations, and weekly provider video calls that are accessible to all licensed and registered child care providers; and by public partners, including the New Mexico Association for the Education of Young Children (which has an email distribution list that reaches 2,500 providers, and by statewide stakeholders (Statewide advisory group, resource and referral partners, provider associations, local child care collaboratives, etc.), who forwarded emails that inform providers about the alternative methodology process and that included the survey link.

ii. Provide complete and current data: A key component of the alternative methodology process was the collection of complete and current data. The data collection process ran from September 2020 through January 2021 and captured the most up to date information on provider revenues and expenses. To ensure data was not inaccurately impacted by COVID-19, the data collection process included operating revenue and expense data for program operations just prior to the start of COVID-19 closures and regulations; and the survey instructs providers to furnish data for the most recent period before COVID-19 related closures.   Provider interviews provided anecdotal information on COVID-19's impact on expenses and revenue. The cost model may be modified to account for COVID-19's impact on providers, including, for example, mandatory group size restrictions, and increased cleaning costs.   The universe of providers that the cost estimation model reflects are those providers that serve or accept children on the child care assistance program. In September 2020, the ECECD team provided point in time data to the expert consultant team on the following universe of providers in the New Mexico child care market: 549 centers, 74 licensed homes, 129 group homes, 446 registered homes.

iii. Use rigorous data collection procedures: The ACF pre-approved alternative methodology process utilized rigorous data collection procedures. An array of data was collected. The data was analyzed. Field research was conducted via phone interviews and an on-line survey. The study team conducted one-on-one interviews with over 20 providers to gather deeper budgetary information. The survey was available in English and Spanish. 146 providers from across the state responded to the survey between September and November 2020. Initial findings were shared with a key group of stakeholders. Research was influenced by the questions posed by key stakeholders. Additional analysis of additional data sources was conducted. A detailed report was completed.

iv. Reflect geographic variations: Providers who participated in the survey and in the interview process included providers who are eligible to receive subsidy, both centers and family child care homes, serving all ages of children, across all FOCUS quality levels, and in all areas of the state. In New Mexico geographic regions or variations includes metropolitan, rural and frontier regions. If it is determined that there are variations in provider data points by geographic region, this variation were incorporated into the model.

v. Analyze data in a manner that captures other relevant differences: The ACF pre-approved alternative methodology process analyzed data in a manner that captured other relevant differences.

b. Given the impact of COVID-19 on the child care market, do you think that the data you gathered (as indicated in 4.2.1) on the prices or costs of child care adequately reflect the child care market as you submit this plan?

☐No

☒Yes. If yes, why do you think the data represents the child care market? The survey instructed providers to furnish data for the most recent period before there were closures or

increased costs related to COVID-19. Interviews with providers anecdotally covered the impact of COVID-19 on expenses and revenue. The expectation is that COVID-19 related increased expenses will not be a factor at the time that rates based on ACF pre-approved alternative methodology are implemented. However, a key benefit of the alternative methodology approach with the cost estimation model is that the cost model is able to be modified to account for additional costs that may arise due to the ongoing COVID-19 pandemic, such as the cost of substitute time and paid sick leave due to quarantine and testing requirements, personal protective equipment and cleaning costs, or lower group size requirements.

4.2.4   Describe how the market rate survey or ACF pre-approved 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 list of providers for the survey and the interview process included providers who are eligible to receive subsidy, both centers and family child care homes, serving all ages of children, across all FOCUS quality levels, and in all areas of the state. Between the survey and the interviews, the expert consultant team reached out to providers that serve over 60 percent of the state's population of children and families eligible for subsidy funded child care who reside in various communities throughout the state (rural, urban, frontier).

b. Type of provider. Describe: The list of providers for the survey and the interview process included providers who are eligible to receive subsidy, both centers and family child care homes, serving all ages of children, across all FOCUS quality levels, and in all areas of the state. Between the survey and the interviews, the expert consultant team reached out to providers that serve over 60 percent of the state's population of children and families eligible for subsidy funded child care who reside in various communities throughout the state (rural, urban, frontier).

c. Age of child. Describe: The list of providers for the survey and the interview process included providers who are eligible to receive subsidy, both centers and family child care homes, serving all ages of children, across all FOCUS quality levels, and in all areas of the state. Between the survey and the interviews, the expert consultant team reached out to providers that serve over 60 percent of the state's population of children and families eligible for subsidy funded child care who reside in various communities throughout the state (rural, urban, frontier).

d. Describe any other key variations examined by the market rate survey or ACF pre-approved alternative methodology, such as quality level. The list of providers for the survey and the interview process included providers who are eligible to receive subsidy, both centers and family child care homes, serving all ages of children, across all FOCUS quality levels, and in all areas of the state. Between the survey and the interviews, the expert consultant team reached out to providers that serve over 60 percent of the state's population of children and families eligible for subsidy funded child care who reside in various communities throughout the state (rural, urban, frontier).

4.2.5   Has the Narrow Cost Analysis been completed for the FY 2022 – 2024 CCDF Plan?

☐   No, a waiver is being requested in Appendix A. If no, describe the status of the Lead Agency's upcoming narrow cost analysis. *Click or tap here to enter text.*

☒   Yes, the narrow cost analysis information is included in the report as described in 4.2.6. If yes, describe how the State/Territory analyzed the cost of child care through a narrow cost analysis for the FY 2022 – 2024 CCDF Plan, including:

a. The methodology the Lead Agency used to conduct, obtain, and analyze data on the estimated cost of care (narrow cost analysis), including any relevant variation by geographic location, category of provider, or age of child (98.45 (f)(ii)).

The Lead Agency used a rigorous data collection method as well as interviews, an online survey and engagement with key stakeholders as part of the ACF pre-approved alternative methodology. The survey and the interview participants included providers who were eligible to receive subsidies, both centers and family child care homes, serving all ages of children, across all FOCUS quality levels, and in all areas of the state. Between the survey and the interviews, the expert consultant team reached out to providers that serve over 60 percent of the state's population of children and to families eligible for subsidy funded child care who reside in various communities throughout the state (rural, urban, frontier).

b. How the methodology addresses the cost of child care providers' implementation of health, safety, quality and staffing requirements (i.e. applicable licensing and regulatory requirements, health and safety standards, training and professional development standards, and appropriate child to staff ratio, groups size limits, and caregiver qualification requirements (98.45 (f)(ii)(A)). The ACF pre-approved alternative methodology addressed the cost of child care providers' implementation of health, safety, quality and staffing requirements as the alternative methodology included the identification and analysis of each of these costs.

c. How the methodology addresses the cost of 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 (98.45 (f)(ii)(B)).
The ACF pre-approved alternative methodology and narrow cost analysis addressed the cost of higher-quality of care, as defined by the Lead Agency's quality rating and improvement system at each level of quality by identifying and analyzing the cost at each quality level and proposing and recommending rate increases to support the implementation of requirements at each quality level.

d. The gap between costs incurred by child care providers and the Lead Agency's payment rates based on findings from the narrow cost analysis.
The Lead Agency utilized state specific research conducted by the Bipartisan Policy Center as well as the ACF pre-approved alternative methodology to determine the gap between costs incurred by child care providers and the Lead Agency's payment rates. Based on this analysis, the Lead Agency will propose rate changes.

4.2.6   After conducting the market rate survey or ACF pre-approved alternative methodology, the Lead Agency must prepare a detailed report containing the results of the MRS or ACF pre-approved alternative methodology. The detailed report must also include the Narrow Cost Analysis, as described in 4.2.5, which estimates the cost of care (including any relevant variation by geographic location, category of provider, or age of child) necessary to support (1) child care providers' implementation of the health, safety, quality, and staffing requirements, and (2) higher quality care, as defined by the Lead Agency using a quality rating and improvement system or other system of quality indicators, at each level of quality. For states without a QRIS or for a state with a QRIS system that is currently limited to only certain providers, those states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, school-age quality standards, or state defined quality measures.)

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 or stakeholders.

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

a. Date the report containing results was made widely available—no later than 30 days after the completion of the report. The report containing the results was made widely available on August 2, 2021.

b. Describe how the Lead Agency made the detailed report containing results widely available and provide the link where the report is posted. The Lead Agency made the detailed report containing results widely available by sharing it on numerous list serves, sharing it on a number of social media platforms, providing a presentation of the report on a weekly early childhood education and care call, including a description of and a link to the report in the weekly communication e-blast. The report was also shared with an array of stakeholder groups. The report can be found here: https://www.nmececd.org/about-ececd/.

c. Describe how the Lead Agency considered stakeholder views and comments in the detailed report. The Lead Agency considered stakeholder views and comments in the detailed report by establishing a stakeholder group to advise the on the ACF pre-approved alternative methodology process. This group met frequently during this process. This group, which included families, provided input on the development of the detailed report. A draft of the detailed report was shared with the state Advisory Council. This entity provided input on the detailed report.

4.3 Establish Adequate Payment Rates

The Lead Agency must set CCDF subsidy payment rates, in accordance with the results of the current MRS or ACF pre-approved alternative methodology, as identified in 4.2.1, 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 assistance. Lead Agencies must also consider the costs of base and higher quality care at each level as part of its rate setting. 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 as identified in 4.2.1) for the following categories below. Lead Agencies are required to provide a summary of data and facts in their Plan to demonstrate how its payment rates ensure equal access. The preamble to the final rule (81 FR, p. 67512), indicates that a benchmark for adequate payment rates is the 75th percentile of the most recent MRS. The 75th percentile is the number separating the lowest 75 percent of rates from the highest 25 percent. Setting rates at the 75th percentile, while not a requirement, would ensure that eligible children have access to three out of four child care slots.

The 75th percentile benchmark applies to the base rates. Base rates are the lowest, foundational rates before any differentials are added (e.g., for higher quality or other purposes). Further, base rates must be sufficient to ensure that minimum health and safety and staffing requirements are covered.

Percentiles are not required if the Lead Agency conducted an ACF pre-approved alternative methodology, but must be reported if the Lead Agency conducted a MRS. For states that conduct an ACF pre-approved alternative methodology, report the base payment rates based on a full-time weekly rate.

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. If rates are not statewide, please use the most populous geographic region (defined as the area serving highest number of CCDF children) to report base payment rates below.

a. Fill in the table below based on either the statewide rates or the most populous area of the state (area serving highest number of children accessing CCDF). To facilitate compiling state by state payment rates, provide the full-time weekly base payment rates in the table below. If weekly payment rates are not published, then the Lead Agency will need to calculate its equivalent.

Age of child in what type of licensed child care setting. (All rates are full-time)	Base payment rate (including unit)	Full-time weekly base payment rate	If the Lead Agency conducted an MRS, what is the percentile of the base payment rate?	If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?
Infant (6 months) Center care	*$720.64*	*$167.59*		*NM is in the process of developing its ACF pre-approved alternative methodology and cost*

Age of child in what type of licensed child care setting. (All rates are full-time)	Base payment rate (including unit)	Full-time weekly base payment rate	If the Lead Agency conducted an MRS, what is the percentile of the base payment rate?	If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?
				model, to be released on June 30, 2021.
Toddler (18 months) Center care	*$589.55*	*$137.10*		*NM is in the process of developing its ACF pre-approved alternative methodology and cost model, to be released on June 30, 2021.*
Preschooler (4 years) Center care	*$490.61*	*$114.09*		*NM is in the process of developing its ACF pre-approved alternative methodology and cost model, to be released on June 30, 2021.*
School-age child (6 years) Center care (Based on full-day, full-year rates that would be paid during the summer.)	*$436.27*	*$101.45*		*NM is in the process of developing its ACF pre-approved alternative methodology and cost model, to be released on June 30, 2021.*
Infant (6 months) Family Child Care	*$566.98*	*$131.85*		*NM is in the process of developing its ACF pre-approved alternative methodology and cost model, to be released on June 30, 2021.*
Toddler (18 months) Family Child Care	*$463.50*	*$107.79*		*NM is in the process of developing its alternative methodology and cost model, to be released on June 30, 2021.*
Preschooler (4 years) Family Child Care	*$411.62*	*$95.72*		*NM is in the process of developing its ACF pre-approved alternative methodology and cost model, to be released on June 30, 2021.*
School-age child (6 years) Family Child Care	*$406.83*	*$94.61*		*NM is in the process of developing its ACF pre-approved alternative methodology and cost*

Age of child in what type of licensed child care setting. (All rates are full-time)	Base payment rate (including unit)	Full-time weekly base payment rate	If the Lead Agency conducted an MRS, what is the percentile of the base payment rate?	If the Lead Agency used an alternative methodology what percent of the estimated cost of care is the base rate?
(Based on full-day, full-year rates that would be paid during the summer.)				*model, to be released on June 30, 2021.*

b. If the Lead Agency does not publish weekly rates then how were these rates calculated (e.g., were daily rates multiplied by 5 or monthly rates divided by 4.3)? The Lead Agency does not publish weekly rates. The weekly rates above were calculated by dividing the monthly rate by 4.3.

c. Describe how the Lead Agency defines and calculates part-time and full-time care. The Lead Agency defines "full-time care" as 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 8-19 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.

d. Provide the date these current payment rates became effective (i.e., date of last update based on most recent MRS as reported in 4.2.1). September 1, 2016

e. If applicable, identify the most populous area of the state (area serving highest number of children accessing CCDF) used to complete the responses above. Albuquerque, NM

f. Provide the citation, or link, if available, to the payment rates 8.15.2 NMAC (http://164.64.110.134/parts/title08/08.015.002.pdf. The new rates will be

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

☐   a. Geographic area. Describe: *Click or tap here to enter text.*

☐   b. Type of provider. Describe: *Click or tap here to enter text.*

☐   c. Age of child. Describe: *Click or tap here to enter text.*

☒   d. Quality level. Describe: The Lead Agency pays a differential rate to providers achieving higher Star levels by meeting FOCUS essential elements of quality.

☒   e. Other. Describe: The Lead Agency 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.

4.3.3   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). Lead Agencies may pay providers more than their private pay rates as an incentive or to cover costs for higher quality care (81 FR, p. 67514).

Has the Lead Agency chosen to implement tiered reimbursement or differential rates?
☐   No
☒   Yes, If yes, identify below any tiered or differential rates, and at a minimum, indicate the process and basis used for determining the tiered rates, including if the rates were based on the MRS or an ACF pre-approved alternative methodology. Check and describe all that apply.

☐   a. Tiered or differential rates are not implemented. *Click or tap here to enter text.*

☒   b. Differential rate for non-traditional hours. Describe: The Lead Agency 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.

☐   c. Differential rate for children with special needs, as defined by the state/territory. Describe: *Click or tap here to enter text.*

☐   d. Differential rate for infants and toddlers. Note: Do not check if the Lead Agency has a different base rate for infants/toddlers with no separate bonus or add-on. Describe: *Click or tap here to enter text.*

☐   e. Differential rate for school-age programs. Note: Do not check if the Lead Agency has a different base rate for school-age children with no separate bonus or add-on. Describe: *Click or tap here to enter text.*

☒   f. Differential rate for higher quality, as defined by the state/territory. Describe: The Lead Agency pays a differential rate to providers achieving higher Star levels by meeting FOCUS essential elements of quality.

☐   g. Other differential rates or tiered rates. Describe: *Click or tap here to enter text.*

4.3.4   Establishment of adequate payment rates.

   a. Describe how base payment rates are adequate and enable providers to meet health, safety, quality, and staffing requirements under CCDF, and how they were established <u>based on the most recent MRS or ACF pre-approved alternative methodology</u> and the Narrow Cost Analysis, as reported in 4.2.1 and 4.2.5. In determining compliance with the Act for the equal access provisions in the FY2019-2021 CCDF Plan, the OCC reviewed all the states with payment rates below the 75th percentile benchmark. Of those states, the half with the lowest payment rates were considered non-compliant and placed on a corrective action plan (CAP). These states all had rates below the 25th percentile for either some or all categories of care. The 25th percentile is not to be viewed as a benchmark or a long-term solution to gauge equal access. It is also not to be viewed as sufficient for compliance in future plan cycles. OCC expects to continue to take action against states with the lowest rates in future plan cycles in an effort to keep payment rates moving upward toward ensuring equal access. Note: Per the preamble (81 FR p. 67512), in instances where an MRS or ACF pre-approved alternative methodology indicates that prices or costs have increased, Lead Agencies must raise their rates as a result. <u>The Lead Agency utilized the ACF pre-approved alternative methodology to set adequate base payment rates that enable providers to meet health, safety, quality and staffing requirements under CCDF. The ACF pre-approved alternative methodology included: (1) estimates the cost of providing care at varying levels of quality and the resources needed for a provider to remain financially solvent; (2) an examination of the impact of program size, ages of children served, geographic region, enrollment, bad debt, etc. (3) review of the impact of funding from multiple sources; and (4) identification of the gap between the costs and the revenue sources As part of the ACF pre-approved alternative methodology, the Lead Agency assessed the cost of delivering high-quality services and utilized this assessment to proposed a rate increase.</u>

   b. Describe the process used for setting rates, including how the Lead Agency factors in the cost of care, including any increased costs and provider fees because of COVID-19, and how such costs may be modified after the pandemic subsides.
       Click or tap here to enter text.

4.3.5   Describe how the Lead Agency took the cost of higher quality, as determined in 4.2.5, into account, including how payment rates for higher-quality care, as defined by the Lead Agency using a QRIS or other system of quality indicators, relate to the estimated cost of care at each level of quality. Note: For states without a QRIS, the states may use other quality indicators (e.g. provider status related to accreditation, PreK standards, Head Start performance standards, or state-defined quality measures). The Lead Agency took the higher cost higher quality, as determined in 4.2.5 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 Lead Agency defines quality using a QRIS that includes tiered reimbursement rates. This QRIS includes the following cost drivers: ratios and group sizes; coverage for staff to complete required training; time for child observations, family conferences, lesson planning and continuous quality improvement. The QRIS includes the following quality variables: professional learning and higher education requirements for educators; comprehensive health and development screenings; reflective practice and child assessments. The ACF pre-approved alternative methodology included the utilization of a quality frame that supports program quality improvement at each level of quality and assists families in selecting care and education programs. The ACF pre-approved alternative methodology included the following variances at levels of quality: ratios, staff qualifications, and professional development and planning time. Additional elements of quality included teacher compensation. Proposed payments rates at each quality level were based on the research and analysis conducted as part of the ACF pre-approved alternative methodology.

4.3.6   Identify and describe any additional facts that the Lead Agency considered in determining its payment rates ensure equal access. If applicable, provide a description of how any additional health and safety costs, because of the COVID-19 pandemic are included in rate setting. The Lead Agency considered the additional health and safety costs, because of the COVID-19 pandemic in rate setting. The health and safety costs (including the purchase of personal protective equipment and cleaning and sanitization and the purchase of additional materials to implement social distancing and rearrange child care spaces based on health and safety guidance and the provision of mental health consultation for staff) were included in the cost model that was developed as part of the ACF pre-approved alternative methodology.

4.4   Implement Generally Accepted Payment Practices and Ensure 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)). Responses may also identify any additional health and safety fees providers are charging as a result of COVID-19.

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)).

4.4.1   Certify by identifying and describing the payment practices below that the Lead Agency has implemented for all CCDF child care providers.

a. Ensure the timeliness of payments by either (Lead Agency to implement at least one of the following):

☐ i. Paying prospectively prior to the delivery of services. Describe the policy or procedure. Click or tap here to enter text.

☒ ii. Paying within no more than 21 calendar days of the receipt of a complete invoice for services. Describe the policy or procedure. The Lead Agency 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 the first business day of the following month in which the service was rendered. A signed child care placement agreement must be returned to the Lead Agency for payment to be issued to the provider. The Lead Agency also performs a weekly pay run to capture any payments that were not paid in the monthly.

b. To the extent practicable, support the fixed costs of providing child care services by delinking provider payments from a child's occasional absences by:

Note: The Lead Agency is to choose at least one of the following:

☒ i. Paying based on a child's enrollment rather than attendance. Describe the policy or procedure. The Lead Agency pays child care providers based on the following criteria: payment is based on enrollment rather than attendance; and full payment if child is absent 14 or fewer consecutive days of unexcused absences. 8.15.2.15D NMAC Provider Requirements - Notification of changes: Child care providers must notify the department if a child is disenrolled or child care has not been used for 14 consecutive calendar days without notice from the client. (1) If the above notification was met, the provider will be paid through the 14th calendar day following the first date of nonattendance. (2) If a provider does not notify the department of disenrollment or of non-use for 14 consecutive calendar days, the provider will be paid through the last date of attendance. 8.15.2.17 NMAC - Payment for Services: The department 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.

☐ ii. Providing full payment if a child attends at least 85 percent of the authorized time. Describe the policy or procedure. Click or tap here to enter text.

☒ iii. Providing full payment if a child is absent for five or fewer days in a month. Describe the policy or procedure. The Lead Agency 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. 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. The Lead Agency will not pay the monthly rate if the child is absent for more than 14 days or if the provider fails to notify the department of disenrollment or care not used for 14 consecutive calendar days.

☐ iv. 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. *Click or tap here to enter text.*

c. The Lead Agency's payment practices reflect generally accepted payment practices of child care providers who serve children who do not receive CCDF subsidies. These payment practices must include the following two practices unless the Lead Agency provides evidence that such practices are not generally accepted in its state (658E(c)(2)(S); 98.45(l)(3)).

i. Paying on a part-time or full-time basis (rather than paying for hours of service or smaller increments of time). Describe the policy or procedure and include a definition of the time increments (e.g., part time, full-time). The Lead Agency does not pay on an hour-by-hour care but rather on increments of time based on established need. Pursuant to 8.15.2.17E NMAC, providers are paid according to the units of service needed which are reflected on the child care placement agreement covering the certification period. Full time is paid at 100% of the full time rate when care is provided for an average of 30 or more hours per week per month. Part time 1 is paid at 75% of full time rate when care is provided for an average of 8-29 hours per week per month. Part time 2 is paid (only for split custody or in cases where a child may have two providers) at 50% of the full time rate when care is provide for an average of 6-19 hours per week per month. Part time 3 is paid at 25% of the full time rate when care is provided for an average of seven or less hours per week per month

ii. Paying for reasonable mandatory registration fees that the provider charges to private-paying parents. Describe the policy or procedure. Pursuant to regulation 8.15.2.17C NMAC, ECECD will pay child care providers a five dollar monthly (not to exceed $60 per year), registration/educational fee per child in full time care. The fee is based on units of care.

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, including fees related to COVID 19, and the dispute-resolution process. Describe: As outlined in 8.15.2 NMAC, the Lead Agency 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: Eligibility Interviewers 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. Eligibility Interviewers 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 an administrative appeal hearing must be made in writing within 30 calendar days from the date of the department's adverse action. The hearing is conducted within 60 calendar days of receipt of the appeal request. A hearing officer reviews all relevant information and makes a final decision within 30 calendar days of the hearing

g. Other. Describe: N/A

4.4.2   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: *Click or tap here to enter text.*

4.4.3   Describe how Lead Agencies' payment practices described in subsection 4.4 support equal access to a full range of providers. The Lead Agency 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. Child care providers must notify the Lead Agency if a child is disenrolled or child care has not been used for 14 consecutive calendar days without notice from the client.

4.5   Establish Affordable Co-Payments

Family co-payments are addressed in Section 3 related to minimum 12-month eligibility and the graduated phase-out provision and also in this subsection, because they are an important element for determining equal access. If a Lead Agency allows providers to charge amounts more than the required family co-payments, the Lead Agency must provide a rationale for this practice, including how charging such additional amounts will not negatively impact a family's ability to receive care they might otherwise receive, taking into consideration a family's co-payment and the provider's payment rate.

4.5.1   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 services (98.16 (k))? Check all that apply.

☐   a. Limit the maximum co-payment per family. Describe: *Click or tap here to enter text.*

☐   b. 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.
         Click or tap here to enter text.

☒   c. 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 3.2.5. Describe: The Lead Agency minimizes the abrupt termination of assistance by allowing families who are recertifying to qualify up to 250% of the FPL. The second tier is higher than the initial eligibility allowance of up to 200% of the FPL. This allows a family to increase their household budget, support their child care needs, and still remain eligible while transitioning from the program.

☒   d. Other. Describe: The Lead Agency ensures that the family co-payment is affordable by assessing the base co-payment for each additional child at one half of the co-payment for the previous child.

4.5.2   Does the Lead Agency choose the option to allow providers to charge families additional amounts above the required co-payment in instances where the provider's price exceeds the subsidy payment (98.45(b)(5))?

☒   No

☐   Yes. If yes:

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

ii. Provide data (including data on the size and frequency of such amounts) on the extent to which CCDF providers charge additional amounts to families.
Click or tap here to enter text.

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

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 <u>all child care services</u> in the state/territory, which supports the health and safety of all children in child care. States and territories may allow licensing exemptions. Lead Agencies must describe how such licensing exemptions do not endanger the health, safety, and development of CCDF children in license-exempt care (98.16 (u)).

Lead Agencies also must certify that there are in effect health and safety standards and training requirements applicable to <u>providers serving CCDF children whether they are licensed or license- exempt</u>. These health and safety requirements must be appropriate to the provider setting and age of the children served, must include specific topics and training on those topics, and are subject to monitoring and enforcement procedures.

The organization of this section begins with a description of the licensing system for all child care providers in a state or territory and then moves to focus specifically on CCDF providers who may be licensed, or those exempt from licensing. The next section addresses child-staff ratios, group size limits, and required qualifications for caregivers, teachers, and directors (98.16(m)) serving CCDF children. The section then covers the health and safety requirements; standards, training, and monitoring and enforcement procedures to ensure that CCDF child care providers comply with licensing and health and safety requirements (98.16(n)). Finally, Lead Agencies are asked to describe any exemptions for relative providers (98.16(l)). In some cases, CCDF health and safety requirements may be integrated within the licensing system for licensed providers and may be separate for CCDF providers who are license-exempt. In either case, Lead Agencies are expected to identify and describe health and safety requirements for all providers receiving CCDF.

Note: When responding to questions in this section, the OCC recognizes that each state/territory identifies and defines its own categories of care. The OCC does not expect states/territories to change their definitions to fit the CCDF-defined categories of care. For these questions, provide responses that closely match the CCDF categories of care.

Criminal background check requirements are included in this section (98.16(o)). It is important to note that these requirements apply to all child care staff members who are licensed, regulated, or registered under state/territory law and all other providers eligible to deliver CCDF services.

Note: When asked for citations, responses can include state statute, regulations, administrative rules, policy manuals or policy issuances. See the Introduction on page 4 for more detail.

5.1 Licensing Requirements

Each state/territory must certify it has in effect licensing requirements applicable to all child care services provided within the state/territory (not restricted to providers receiving CCDF funds) and provide a detailed description of these requirements and how the requirements are effectively enforced (658E(c)(2)(F)). If any types of providers are exempt from licensing requirements, the state/territory must describe those exemptions and describe how these exemptions do not endanger the health, safety, or development of children. The descriptions must also include any exemptions based on provider category, type, or setting; length of day; and providers not subject to licensing because the number of children served falls below a Lead Agency-defined threshold and any other exemption to licensing requirements (658E(c)(2)(F); 98.16(u); 98.40(a)(2)(iv)).

5.1.1 To certify, describe the licensing requirements applicable to child care services provided within the state/territory by identifying the providers in your state/territory that are subject to licensing using the CCDF categories listed below. Check, identify, and describe all that apply, and provide a citation to the licensing rule.

☒ a. Center-based child care.

    i. Identify the providers subject to licensing: Child care centers: Defined as a facility that provides care, services and supervision for less than 24 hours a day to children in a non-residential setting and meets the applicable state and local building and safety codes.

    ii. Describe the licensing requirements: The licensing requirements are contained in regulation 8.16.2 NMAC and are designed to establish standards and procedures for the licensing of facilities and educators who provide child care services. These standards and procedures are intended to: (1) establish minimum requirements for licensing facilities providing non-residential care to children in order to protect the health, safety, and development of children; (2) monitor facility compliance with these regulations through surveys to identify any areas that could be dangerous or harmful to children or staff members; (3) monitor and survey out-of-school time programs; and (4) encourage the establishment and maintenance of child care centers, homes and facilities for children that provide a humane, safe, and developmentally appropriate environment. The regulations apply during all hours of operation for child care centers, homes, and out-of-school time programs.

    iii. Provide the citation: 8.16.2.6 NMAC, 8.16.2.7 C(3) NMAC, and 8.16.2.21 through 8.16.2.29 NMAC.

☒ b. Family child care. Describe and provide the citation:

    i. Identify the providers subject to licensing: Family child care home: Defined as a private dwelling required to be licensed under these regulations that provides care, services and supervision for a period of less than 24 hours of any day for no more than six children. The licensee will reside in the home and be the primary educator.

    ii. Describe the licensing requirements: The licensing requirements are contained in regulation 8.16.2 NMAC are designed to establish standards and procedures for the licensing of facilities and educators who provide child care services. These standards and procedures are intended to: establish minimum requirements for licensing facilities providing non-residential care to children in order to protect the health, safety, and development of children; monitor facility compliance with these regulations through surveys to identify any areas that could be dangerous or harmful to children or staff members; monitor and survey out-of-school time programs; and encourage the establishment and maintenance of child care centers, homes and facilities for children that provide a humane, safe, and developmentally appropriate

environment. The regulations apply during all hours of operation for child care centers, homes and out-of-school time programs.

    iii. Provide the citation: 8.16.2.6 NMAC, 8.16.2.7(F)(2) NMAC, and 8.16.2.31 through 8.16.2.38 NMAC.

☐ c. In-home care (care in the child's own) (if applicable):

    i. Identify the providers subject to licensing: *Click or tap here to enter text.*

    ii. Describe the licensing requirements: *Click or tap here to enter text.*

    iii. Provide the citation: *Click or tap here to enter text.*

5.1.2 Identify the CCDF-eligible providers who are exempt from licensing requirements. Describe exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. Describe how such exemptions do not endanger the health, safety, and development of children (658E (c)(2)(F); 98.40(a)(2)). Do not include exempt relative care providers, this information will be collected in Section 5.6.

a. License-exempt center-based child care. Describe and provide the citation by answering the questions below.

    i. Identify the CCDF-eligible center-based child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption: Child care facilities operated by the federal government (military installations) are exempt from licensure by the State of New Mexico and are instead regulated and licensed by the federal Department of Defense.

    ii. Provide the citation to this policy: 8.16.2.9(B) NMAC

    iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. To renew annually to receive CCDF funds, these facilities are required to maintain and submit copies of their Department of Defense certificate, accreditation (if applicable), and a letter or memo identifying the background clearance status of all staff members, educators, volunteers and prospective staff members, or any persons who may have unsupervised physical access to children.

b. License-exempt family child care. Describe and provide the citation by answering the questions below.

    i. Identify the CCDF-eligible family child care providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption: Child care facilities operated by the federal government (military installations) are exempt from licensure by the State of New Mexico and are instead regulated and licensed by the federal Department of Defense.

    ii. Provide the citation to this policy: 8.16.2.9(B) NMAC

    iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. In order to renew annually to receive CCDF funds, these facilities are required to maintain and submit copies of their Department of Defense certificate, accreditation (if applicable), and a letter or memo identifying the

c. In-home care (care in the child's own home by a non-relative):   Describe and provide the citation by answering the questions below.

   i. Identify the CCDF-eligible in-home child care (care in the child's own home by a non-relative) providers who are exempt from licensing requirements. Describe the exemptions based on length of day, threshold on the number of children in care, ages of children in care, or any other factors applicable to the exemption. *Click or tap here to enter text.*

   ii. Provide the citation to this policy: *Click or tap here to enter text.*

   iii. Describe how the exemptions for these CCDF-eligible providers do not endanger the health, safety, and development of children. *Click or tap here to enter text.*

5.2   Standards for Ratios, Group Size and Qualifications for CCDF Providers

Lead Agencies are required to have child care standards for providers receiving CCDF funds, appropriate to the type of child care setting involved, that address appropriate ratios between the number of children and number of providers in terms of the age of the children, group size limits for specific age populations, and the required qualifications for providers (658E(c)(2)(H); 98.41(d); 98.16(m)). For ease of responding, this section is organized by CCDF categories of care, licensing status, and age categories. Respondents should map their Lead Agency categories of care to the CCDF categories. Exemptions for relative providers will be addressed in subsection 5.6.

5.2.1   Describe how the state/territory defines the following age classifications. For instance, Infant: 0-18 months.

   a. Infant. Describe: "Infant" is defined as a child age six weeks to 12 months.
   b. Toddler. Describe: "Toddler" is defined as a child age 12 months to 24 months.
   c. Preschool. Describe: "Preschool" is defined as a child age 3 years to 5 years.
   d. School-Age. Describe: "School-age" is defined as a child age 5 to 18 years.

5.2.2   To demonstrate continued compliance, provide the ratio and group size for settings and age groups below.

   a. Licensed CCDF center-based care:

      i. Infant

         A. Ratio: 1 adult to 6 children (1:6)
         B. Group size: 12 children

      ii. Toddler

         A. Ratio: 1 adult to 6 children (1:6)
         B. Group size: 12 children

      iii. Preschool

         A. Ratio: 1 adult to 12 children (1:12)
         B. Group size: 24 children

iv. School-Age

    A. Ratio: 1 adult to 15 children (1:15)
    B. Group size: 30 children

v. Mixed-Age Groups (if applicable)

    A. Ratio:

6 weeks through 24 months:	1 adult to 6 children (1:6)
18 months through 35 months:	1 adult to 6 children (1:6)
2 years through 4 years:	1 adult to 12 children (1:12)
3 years through 5 years:	1 adult to 14 children (1:14)
6 years and older:	1 adult to 15 children (1:15)

    B. Group size:

6 weeks through 24 months:	12 children
18 months through 35 months:	12 children
2 years through 4 years:	24 children
3 years through 5 years:	28 children
6 years and older:	30 children

vi. If any of the responses above are different for exempt child care centers, describe the ratio and group size requirements for license-exempt providers.
Child care facilities operated by the federal government (military installations) are exempt from licensure and must follow the ratio and group size requirements set by the Department of Defense. 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.

b. Licensed CCDF family child care home providers:

i. Mixed-Age Groups

    A. Ratio: A family child care home licensed to provide care for six or fewer children (not to exceed more than two children under age 2) will have at least one educator in the home at all times (1:6). A home licensed to provide care for more than two children under age 2 will have at least two educators in the home at all times.
    B. Group size: A family child care home licensed to provide care for six or fewer children will maintain a group of six but not exceed more than two children under age 2.

ii. Infant (if applicable)

    A. Ratio: N/A
    B. Group size: N/A

iii. Toddler (if applicable)

    A. Ratio: N/A
    B. Group size: N/A

iv. Preschool (if applicable)

    A. Ratio: N/A
    B. Group size: N/A

v. School-Age (if applicable)

    A. Ratio: N/A
    B. Group size: N/A

vi. If any of the responses above are different for exempt child care homes, describe the ratio and group size requirements for license-exempt family child care home providers. A license-exempt registered provider will provide care for no more than four non-residential children at one time and not to exceed more than two children under age two.

c. Licensed in-home care (care in the child's own home):

i. Mixed-Age Groups (if applicable)

A. Ratio: N/A
B. Group size: N/A

ii. Infant (if applicable)

A. Ratio: N/A
B. Group size: N/A

iii. Toddler (if applicable)

A. Ratio: N/A
B. Group size: N/A

iv. Preschool (if applicable)

A. Ratio: N/A
B. Group size: N/A

v. School-Age (if applicable)

A. Ratio: N/A
B. Group size: N/A

vi. Describe the ratio and group size requirements for license-exempt in-home care. N/A

5.2.3 Provide the teacher/caregiver qualifications for each category of care.

a. Licensed Center-Based Care

i. Describe the teacher qualifications for licensed CCDF center-based care, including any variations based on the ages of children in care: There is no credential required for licensing and the minimum age of 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 Lead Agency (8.16.2.23(B)(2) NMAC). In addition, infant and toddler educators must have at least four hours of training in infant and toddler care annually (8.16.2.23(B)(2)(k) NMAC). For Out-of-School Time programs, teachers must be at least 18 years old. For training requirements, all staff must complete the minimum trainings, within three months of employment (8.16.2.42(C)(1) NMAC).

ii. Describe the director qualification for licensed CCDF center-based care, including any variations based on the ages of children in care or the number of staff employed: A child care center director must be at least 21 years old. At a minimum, a child care center director must complete 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 (8.16.2.23(B)(1)(a) NMAC)

iii. If any of the responses above are different for license-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 by the State of New Mexico and are regulated and licensed by the Department of Defense. 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.

iv. If applicable, provide the website link detailing the center-based teacher and director qualifications. http://164.64.110.134/parts/title08/08.016.0002.pdf

b. Licensed Family Child Care

i. Describe the provider qualifications for licensed family child care homes, including any variations based on the ages of children in care: For a family child care home provider, no credential is required for licensing and the minimum age is 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 ECECD 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 (8.16.2.33(A)(3) and (B) NMAC).

ii. If any of the responses above are different for license-exempt family child care homes, describe which requirements apply to exempt homes: License-exempt registered providers do not require credentials but require a minimum age of 18 years old. The primary caregiver will complete specified training within 3 months of initial registration. Caregivers will obtain a minimum of 6 hours of training annually (8.17.2.10(A) and (G) NMAC).

iii. If applicable, provide the website link detailing the family child care home provider qualifications: http://164.64.110.134/parts/title08/08.016.0002.pdf and http://164.64.110.134/parts/title08/08.017.0002.pdf

c. Regulated or registered In-home Care (care in the child's own home by a non-relative)

i. Describe the qualifications for licensed in-home child care providers (care in the child's own home) including any variations based on the ages of children in care:
N/A

ii. If any of the responses above are different for license-exempt in-home care providers, describe which requirements apply to exempt in-home care providers:
N/A

5.3 Health and Safety Standards and Training for CCDF Providers

The state/territory must describe its requirements for pre-service or orientation training and ongoing training. 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. This training must address the required health and safety topics (658E(c)(2)(I)(i) and the content area of child development. Lead Agencies have flexibility in determining the number of training hours to require, and they may consult with Caring for our Children Basics for best practices and the recommended time needed to address these training requirements.

Lead Agencies must also have ongoing training requirements for caregivers, teachers, and directors who are caring for children receiving CCDF funds (658E(c)(2)(I)(i); 98.44(b)(1)(iii)). Lead Agencies are to report the total number of ongoing training hours that are required each year, but they do not have to report these hours out by topic (658E(c)(2)(G)(iii).   Ongoing training requirements will be addressed in 5.3.13.

Both preservice/orientation and ongoing trainings should be a part of a broader systematic approach and progression of professional development (as described in section 6) within a state/territory.

States and territories must have health and safety **standards** for programs (e.g., child care centers, family child care homes, etc.) serving children receiving CCDF assistance relating to the required health and safety topics as appropriate to the provider setting and age of the children served (98.41(a)). This requirement is applicable to all child care programs receiving CCDF funds regardless of licensing status (i.e., licensed or license-exempt). The only exception to this requirement is for relative providers, as defined in 98.2. Lead Agencies have the option of exempting relatives from some or all CCDF health and safety requirements (98.42(c)). Exemptions for relative providers' standards and training requirements will be addressed in question 5.6.3.

To certify, describe the following health and safety requirements for programs serving children receiving CCDF assistance on the following topics (98.16(l)) identified in questions 5.3.1 – 5.3.12. Note: Monitoring and enforcement will be addressed in subsection 5.4.

5.3.1   Prevention and control of infectious diseases (including immunizations) health and safety standards and training requirements.

   a.   Standard(s)

   i.   Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. The Lead Agency requires the following pertinent standards: child care providers must report to the appropriate authorities within a 24-hour period of any incident that has threatened or could threaten the health and safety of children and staff members, including, but not limited to, any of the illnesses on the current list of notifiable diseases and communicable diseases published by the office of epidemiology of the New Mexico Department of Health. Children and child care providers who are sick with any illness on the notifiable diseases and communicable diseases list will be absent until cleared for return by a physician. Any children or child care provider who becomes ill will be separated from others and sent home. All child care providers and children are required to practice proper hand hygiene using soap and warm running water at appropriate intervals and transitions throughout the day. New Mexico requires all children enrolled in child care have on file the child's up-to-date immunization

record or public health division's approved exemption from the requirement. A grace period of a maximum of 30 days will be granted for children in foster care or homeless children and youth.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care. There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.21C NMAC, 8.16.2.26A NMAC, 8.16.2.27A through C NMAC, 8.16.2.31C NMAC, 8.16.2.36A and D NMAC, 8.17.2.15 NMAC, 8.17.2.22Z NMAC, 8.17.2.23G, and 8.17.2.24H. NMAC

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for these training requirements, including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2) NMAC, 8.16.2.33(B) NMAC, and 8.17.2.10(G) through (L) NMAC

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service

☒ Orientation within three (3) months of hire

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

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.2 Prevention of sudden infant death syndrome and the use of safe-sleep practices.

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. The Lead Agency requires a crib for each infant and requires that cribs 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 swing.

    ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care. This standard is not applicable to providers who do not care for infants.

    iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2) NMAC and 8.17.2.10(I) NMAC

  b. Pre-Service and Ongoing Training

    i. Provide the citation(s) for this training requirement(s), including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2) NMAC, 8.16.2.33(B) NMAC, and 8.17.2.10(G) and (I) NMAC

    ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? This requirement is not applicable to providers who do not care for infants.

    iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

       ☐ Pre-Service
       ☒ Orientation within three (3) months of hire

    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

    v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

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

  a. Standard(s)

    i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. The Lead Agency requires child care providers to keep 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 and 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 repellant 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. Providers shall not administer expired medication.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.
No variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is(are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.22(C) NMAC; 8.16.2.26(C) NMAC; 8.16.2.32(C) NMAC; 8.16.2.36(C) NMAC; 8.16.2.41(C) NMAC; 8.16.2.45(C) NMAC; and 8.17.2.24(G) NMAC.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for the training requirement(s), including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2) NMAC; 8.16.2.33(B)(1) NMAC; 8.16.2.42(C)(2) NMAC; and 8.17.2.10(G) NMAC.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii. To demonstrate compliance, certify by checking below how the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service
☒ Orientation within three (3) months of hire

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

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.
Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.4   Prevention of and response to emergencies due to food and allergic reactions.

a. Standard(s)

i.   Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. The Lead Agency requires that child care providers maintain on each child a record containing information on any allergies or medical conditions a child has; the name and telephone number of two people to contact in the local area in case of 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.

ii. Describe any variations in the standards by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care. All requirements apply to license-exempt home providers; but a variation is that the Lead Agency only requires one emergency contact in license-exempt homes.

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.22(E) NMAC, 8.16.2.32(D) NMAC, 8.16.2.41(D) NMAC, and 8.17.2.24 NMAC.

b. Pre-Service and Ongoing Training

i.   Provide the citation(s) for the training requirement(s), including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2) NMAC, 8.16.2.33(B)(1) NMAC, 8.16.2.42(C)(2) NMAC, and 8.17.2.10(G) NMAC

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service
☒ Orientation within three (3) months of hire

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

v.   How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.5   Building and physical premises safety, including the identification of and protection from hazards, bodies of water, and vehicular traffic.

a.   Standard(s)

i.   Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. The Lead Agency requires that providers 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. Regarding electrical cords and outlets, a provider will use only UL approved equipment 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 aboveground 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 an outdoor play area with a fence at least four feet high and with at least one latched gate available for an emergency exit to protect children from vehicular traffic.

ii.   Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care. 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 license-exempt 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. A fence will have one latched gate for emergency exits.

iii.   The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.29 NMAC, 8.16.2.38 NMAC, 8.16.2.47 NMAC, and 8.17.2.22 NMAC

b.   Pre-Service and Ongoing Training

i.   Provide the citation(s) for the training requirement(s), including citations for both licensed and license-exempt providers. 8.16.2.23B(2) NMAC, 8.16.2.33B NMAC, 8.16.2.42C NMAC, and 8.17.2.10G NMAC

ii.   Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii.   To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service

☒ Orientation within three (3) months of hire

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

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.
Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

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

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. Training on Shaken Baby Syndrome prevention and head trauma is required. Providers are also required to engage in practices that support growth and development, noting that practices must be age appropriate and positive. The regulation specifies methods for positive guidance and specifically prohibits abusive practices including, among many others, shaking a child and causing physical or emotional harm. Providers are required to have written policies and procedures clearly outlining guidance practices. This information is provided to all parents and staff who sign a form to acknowledge that they have read and understand the policies and procedures. The Lead Agency is more descriptive in its licensing requirements in how to provide a social-emotional responsive environment. Educators are required to remain calm in stressful situations, be actively engaged with children, talk, actively listen, and respond appropriately to children by acknowledging their questions, comments, concerns, emotions and feeling. Educators help children communicate their feelings by helping them learn skills to express themselves. They are required to model appropriate social behaviors, interactions, empathy, and respond to children that are angry, hurt, or sad in a caring and sensitive manner, and make appropriate physical contact to comfort children who are distressed.

ii. Describe any variations in the standard(s) by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.
There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.22(A)(4) NMAC, 8.16.2.24(A) and (H) NMAC, 8.16.2.32(A)(3) NMAC, 8.16.2.34(A) and (H) NMAC, 8.16.2.41(A) NMAC, 8.16.2.43(A) and (C) NMAC, and 8.17.2.25(C) NMAC

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for the training requirement(s), including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2)(b)(vi) NMAC, 8.16.2.33(B)(1)(f) NMAC, 8.16.2.42(C)(2)(f) NMAC, and 8.17.2.10(G)(6) NMAC

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e.

licensed, license-exempt), or the age of the children in care? Training requirements for prevention of Shaken Baby Syndrome applies to providers caring for infants; however, practicing positive guidance applies to all children.

   iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

   ☐ Pre-Service
   ☒ Orientation within three (3) months of hire

   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

   v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.7   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.

   a. Standard(s)

      i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. The Lead Agency 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 is approved annually by the Lead Agency.

      ii. Describe any variations in the standards by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care. 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 an acknowledgment that they have read and understand the contents of the handbook.

      iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.22(C)(8) NMAC, 8.16.2.29(H)(1) NMAC, 8.16.2.32(A)(5) NMAC, 8.16.2.38(G) NMAC, 8.16.2.41(F)(15) NMAC, 8.16.2.47(G) NMAC, and 8.17.2.22(T) NMAC.

b. Pre-Service and Ongoing Training

    i. Provide the citation(s) for the training requirement(s), including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2)(b)(vii) NMAC, 8.16.2.33(B)(1)(g) NMAC, 8.16.2.42(C)(2)(f) NMAC, and 8.17.2.10(G)(7) NMAC.

    ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

    iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service

☒ Orientation within three (3) months of hire

    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

    v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

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

a. Standard(s)

    i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. Providers are required 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, including bio-contaminants, must be secured in a manner making them inaccessible to children and away from food storage or preparation areas.

    ii. Describe any variations in the standards by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care. There are no variations.

    iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.29 NMAC, 8.16.2.38 NMAC, 8.16.2.47 NMAC, and 8.17.2.22 NMAC

b. Pre-Service and Ongoing Training

    i. Provide the citation(s) for the training requirement(s), including citations for both licensed and license-exempt

providers.
8.16.2.23B(2)(b)(viii) NMAC - Licensed center providers
8.16.2.33B(1)(h) NMAC - Licensed Home providers
8.16.2.42C(2)(g) NMAC - Out of School time providers
8.17.2.10G(8) NMAC - License-exempt providers

ii.   Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service
☒ Orientation within three (3) months of hire

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

v.   How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.
Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com)

5.3.9   Precautions in transporting children (if applicable).

a.   Standard(s)

i.   Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. Providers who transport children are 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 who transports children shall have current certification in cardiopulmonary resuscitation (CPR).

ii. Describe any variations in the standards by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.
In licensed facilities, all vehicles used for transporting 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. Providers 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 airconditioned 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. Licensed center providers are required to have a second adult accompany the driver of the vehicle when transporting five or more children under five years of age.

    iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.28 NMAC, 8.16.2.37 NMAC, 8.16.2.46 NMAC, 8.17.2.22(AA) NMAC, and 8.17.2.24(I) NMAC

  b. Pre-Service and Ongoing Training

    i. Provide the citation(s) for the training requirements, including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2)(b)(ix) NMAC, 8.16.2.33(B)(1)(i) NMAC, 8.16.2.42(C)(2)(h) NMAC, and 8.17.2.10(G)(9) NMAC

    ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? This training requirement is applicable only to those who provide transportation services.

    iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

      ☐ Pre-Service
      ☒ Orientation within three (3) months of hire

    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

    v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above.
Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.10   Pediatric first aid and pediatric cardiopulmonary resuscitation (CPR).

  a. Standard(s)

    i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. All educators are required to be certified in first aid and cardiopulmonary resuscitation (CPR). During emergency declarations, including a public health emergency, online first aid and CPR training may be approved.

    ii. Describe any variations in the standards by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care.
There are no variations.

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers. 8.16.2.22(F)(1)(g) NMAC, 8.16.2.26(B)(1) NMAC, 8.16.2.33(B)(6) NMAC, 8.16.2.41(E)(1)(g) NMAC, 8.16.2.45(B)(1) NMAC, and 8.17.2.10(K) NMAC.

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for this training requirement, including citations for both licensed and license-exempt providers. 8.16.2.23(B)(2)(b)(x) NMAC, 8.16.2.33(B)(1)(j) NMAC, 8.16.2.42(C)(2)(i) NMAC, and 8.17.2.10(G)(10) NMAC.

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service
☒ Orientation within three (3) months of hire

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

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.11 Recognition and reporting of child abuse and neglect. Note: The description must include a certification that child care providers within the state comply with the child abuse reporting requirements of section 106(b)(2)(B)(i) of the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)).

a. Standard(s)

i. Provide a brief description of the standard(s). This description should identify the practices which must be implemented by child care programs. Providers are required to report abuse or neglect of a child immediately to Child 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.

ii. Describe any variations in the standards by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), and the age of the children in care. Additional requirements specific to licensed providers are: (1) Maintain a record of observations of recent bruises, bites or signs of potential abuse or neglect, which must be reported to ECECD; (2)

iii. The Lead Agency must certify that the identified health and safety standard(s) is (are) in effect and enforced through monitoring. Provide the citation(s) for the standard(s), including citations for both licensed and license-exempt providers.
8.16.2.21C (1)(c) and (3) NMAC
8.16.2.22D(2)(l) NMAC
8.16.2.22E(1)(g) NMAC
8.16.2.31C(1)(c) and (3) NMAC
8.16.2.32C(2)(l) NMAC
8.16.2.32D(1)(f) NMAC
8.16.2.40C(1)(c) and (3) NMAC
8.16.2.41C(2)(l) NMAC
8.16.2.41D(1)(e) NMAC
8.17.2.10 F NMAC
8.17.2.15A(3) NMAC
8.17.2.15C NMAC

b. Pre-Service and Ongoing Training

i. Provide the citation(s) for this training requirement(s), including citations for both licensed and license-exempt providers.
8.16.2.23B(2)(a)(i) and (v) NMAC
8.16.2.23B(2)(b)(xi) NMAC
8.16.2.33B(1)(k) NMAC
8.16.2.42C(1)(c) and (g) NMAC
8.16.2.42C(2)(j) NMAC
8.17.2.10G(11) NMAC

ii. Describe any variations in training requirements for the standard(s). Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service

☒ Orientation within three (3) months of hire

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

v. How do providers receive updated information and/or training regarding the standard(s)? This description should include methods to ensure that providers are able to maintain and update the health and safety practices as described in the standards above. Updated information is received from Regulatory Unit personnel, ECECD weekly communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.12   Child Development. Lead Agencies are required to describe in their plan how training addresses child development principles, including the major domains of cognitive, social, emotional, physical development and approaches to learning (98.44(b)(1)(iii)).

a. Pre-Service and Ongoing Training

i. Describe the training content and provide the citation(s) for the training requirement(s). Include citations for both licensed and license-exempt providers. New staff working directly with children, regardless of the number of hours per week, are required to complete a 45-hour entry level course, approved three-credit early care and education course, or an equivalent approved by the Lead Agency prior to or within six months of employment. Substitutes are exempt from this requirement. Each staff person working directly with children and more than 20 hours per week, including the director, is required to obtain at least 24 hours of training per year, commencing with the anniversary date of employment. 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. The 24-hour annual training requirement is waived for educators if employed by a program under FOCUS consultation. Training must be provided by individuals who are registered on the New Mexico Trainer Registry. (8.16.2.23B(2)(d) NMAC, 8.16.2.33B(3) NMAC, 8.16.2.42C(4)(a) NMAC, 18.17.21L NMAC.

ii. Describe any variations in training requirements for this topic. Do training requirements vary by category of care (i.e. Center, FCC, In-home), licensing status (i.e. licensed, license-exempt), or the age of the children in care? There are no variations.

iii. To demonstrate compliance, certify by checking below when the state/territory requires this training topic be completed by providers during either pre-service or during an orientation period within three (3) months of hire.

☐ Pre-Service

☒ Orientation within three (3) months of hire

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

v. How do providers receive updated information and/or training regarding this topic? This description should include methods to ensure that providers are able to maintain and update their understanding of child development principles as described in the topic above. Updated information is received from Regulatory Unit personnel, ECECD weekly

communications, and through free online training and education classes (www.nmels.org or www.quorumlearning.com).

5.3.13   Provide the number of hours of ongoing training required annually for eligible CCDF providers in the following settings (658E(c)(2)(G)(iii):

a.   Licensed child care centers: Part-time staff working less than 20 hours per week must obtain 12 hours of training annually. Full-time staff working more than 20 hours per week must obtain 24 hours of training annually. All staff members in out-of-school time programs are required to obtain 24 hours of training annually.

b.   License-exempt child care centers: N/A

c.   Licensed family child care homes: Part-time staff working less than 20 hours per week must obtain six hours of training annually. Full-time staff working more than 20 hours per week must obtain 12 hours of training annually.

d.   License-exempt family child care homes: Primary and substitute caregivers are required to attend six (6) hours of training annually.

e.   Regulated or registered In-home child care: N/A

f.   Non-regulated or registered in-home child care: N/A

5.3.14   In addition to the required standards, does the Lead Agency require providers to comply with the following optional standards? If checked, describe the standards, how often the training is required and include the citation. (Please check all that apply)

☒ a. Nutrition: This topic is integrated within the required training for competency. Staff who work directly with children are required to take nutrition training every 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. License-exempt providers must also participate in the child and adult care food program (CACFP) to maintain their registration. (8.16.2.23B(2)(d) NMAC, 8.16.2.33B(3) NMAC, 8.16.2.42C(4)(b) NMAC, 8.17.2.3 NMAC, and 8.17.2.10L(2)).

☒ b. Access to physical activity: Full-time children are required to have a minimum of 60 minutes of physical activity daily, preferably outdoors. Part-time children shall have a minimum of 30 minutes of physical activity daily, preferably outside. (8.16.2.24I(11) NMAC, 8.16.2.34(9) NMAC, 8.16.2.43D(1) NMAC, and 8.17.2.25E NMAC)

☒ c. Caring for children with special needs: All Lead Agency health and safety requirements apply to caring for children with special needs. Additional requirements include staff awareness of community resources for children with disabilities. The Family Education Rights and Privacy Act is to be observed at all times. Staff familiarity with the Americans with Disabilities Act as it relates to enrolling and caring for children with special needs is required. (8.16.2.24(E) NMAC, 8.16.2.34(E) NMAC, and 8.16.2.43(E) NMAC.

☐ d. Any other areas determined necessary to promote child development or to protect children's health and safety (98.44(b)(1)(iii)). Describe: *Click or tap here to enter text.*

5.4   Monitoring and Enforcement Policies and Practices for CCDF Providers

5.4.1   Enforcement of licensing and health and safety requirements.

Lead agencies must certify that procedures are in effect to ensure that all 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 5.4.2.

a.   To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety **Standards** as described in Section 5.3. ECECD has in effect a procedures manual to assist regulatory staff in effectively monitoring and enforcing health and safety standards. The procedures involve guidance on the following: (1) conducting complaint/incident investigations, and developing and monitoring administrative actions when necessary; and (2) conducting initial, annual and semi-annual surveys, which include ensuring completion of required health and safety trainings by the CCDF providers. The survey process is intended to identify any areas that could be dangerous or harmful to children or staff members and promotes a humane, safe, and developmentally appropriate environment. The enforcement of these regulations apply during all hours of operation for child care centers, homes and Out-of-School Time programs.

b.   To certify, describe the procedures to ensure that CCDF providers comply with the required Health and Safety **Training** as described in Section 5.3. Pursuant to 8.16.2.17 NMAC, the licensing authority will conduct a survey at least twice a year in each child care facility using these regulations as criteria. The licensing authority will conduct additional surveys or visit the child care facility additional times to provide technical assistance, to check progress on correction of deficiencies found on previous surveys, or to investigate complaints. For licensed-exempt providers, pursuant to 8.17.2.16(B)

NMAC, the caregiver must grant the registered authority the right to enter the premises and survey the caregiver's home and the inspection and copying of records. This includes any investigations which are announced or un-announced.

c. To certify, describe the procedures to ensure that CCDF providers comply with all other applicable state and local health, safety, and fire standards. 8.16.2.8 NMAC outlines that facilities subject to these regulations are also subject to the current versions of all other applicable state and local health, safety, and fire standards.

5.4.2 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 describing, in the questions below, 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

   i. Describe your state/territory's policies and practices for pre-licensure inspections of licensed child care center providers for compliance with health, safety, and fire standards. ECECD licensed providers are provided one (1) pre-licensure inspection for compliance with health, safety, and fire standards.

   ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care center providers. Licensing inspectors perform at least two (2) unannounced inspections per year for compliance with health, safety, and fire standards for licensed facilities.

   iii. Identify the frequency of unannounced inspections:

     ☐ A. Once a year

     ☒ B. 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.

   iv. If applicable, describe the differential monitoring process and how these inspections ensure that child care center providers continue to comply with the applicable licensing standards, including health, safety, and fire standards. N/A

   v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF center providers. 8.16.2.17(A) NMAC and 8.16.2.21(A)(3) and (6) NMAC

b. Licensed CCDF family child care home

   i. Describe your state/territory's policies and practices for pre-licensure inspections of licensed family child care providers for compliance with health, safety, and fire standards. One (1) pre-licensure inspection is required for compliance with health, safety, and fire standards.

ii. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF family child care providers. Licensing inspectors perform at least two (2) unannounced inspections per year for compliance with health, safety, and fire standards for licensed facilities.

iii. Identify the frequency of unannounced inspections:

☐ A. Once a year

☒ B. 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.

iv. If applicable, describe the differential monitoring process and how these inspections ensure that family child care providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.   N/A

v. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF family child care providers. 8.16.2.17(A) NMAC, 8.16.2.31(A)(4) and (6) NMAC

c. Licensed in-home CCDF child care

i. Does your state/territory license in-home child care (care in the child's own home)?

☒ No (Skip to 5.4.3 (a)).

☐ Yes. If yes, answer A – D below:
A. Describe your state/territory's policies and practices for pre-licensure inspections of licensed in-home care (care in the child's own) providers for compliance with health, safety, and fire standards.
Click or tap here to enter text.
B. Describe your state/territory's policies and practices for annual, unannounced inspections of licensed CCDF child care in-home care (care in the child's own home) providers.
Click or tap here to enter text.
C. Identify the frequency of unannounced inspections:
☐ 1. Once a year
☐ 2. More than once a year. Describe: *Click or tap here to enter text.*
D. If applicable, describe the differential monitoring process and how these inspections ensure that in-home care (care in the child's own providers continue to comply with the applicable licensing standards, including health, safety, and fire standards.
E. List the citation(s) for your state/territory's policies regarding inspections for licensed CCDF in-home care (care in the child's own home) providers.
Click or tap here to enter text.

d. List the entity(ies) in your state/territory that is responsible for conducting pre-licensure inspections and unannounced inspections of licensed CCDF providers.
Click or tap here to enter text.

5.4.3   Inspections for license-exempt center-based and family child care providers.

The Lead Agency 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, and fire standards (658E(c)(2)(K)(i)(IV); 98.42(b)(2)(ii)). Inspections for relative providers will be addressed in question 5.6.4. At a minimum, the health and safety requirements to be inspected must address the standards listed in subsection 5.3 (98.41(a)).

To certify, 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 Lead Agency recognizes military providers as license-exempt CCDF providers. These providers are not subject to monitoring visits as they are regulated and licensed by the U.S. Department of Defense. Military providers are monitored by the U.S. Department of Defense whose standards are more stringent than the Lead Agency's.

   i.   Provide the citation(s) for this policy or procedure. 8.16.2.9(B) 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. Caregivers in licensed-exempt homes are required to consent to visits, including unannounced visits, by the Lead Agency and the Child and Adult Care Food Program sponsoring agency when child care children are present and during the caregiver's stated normal hours of operation. Licensed-exempt providers are required to have one pre-licensure inspection for compliance with health and safety standards, including fire standards. Inspectors perform one annual inspection for compliance with health and safety standards. Unannounced visits can occur by the sponsoring agency and ECECD at any time during the registration period as a result of an incident or complaint or as part of the monitoring process.

   i.   Provide the citation(s) for this policy or procedure. 8.17.2.13 NMAC

5.4.4   Inspections for license-exempt in-home care (care in the child's own home).

Lead Agencies have the option to develop alternate monitoring requirements for care provided in the child's home that are appropriate to the setting. A child's home may not meet the same standards as other child care facilities and this provision gives Lead Agencies flexibility in conducting more streamlined and targeted on-site inspections. For example, Lead Agencies may choose to monitor in-home providers on basic health and safety requirements such as training and background checks. Lead Agencies could choose to focus on health and safety risks that pose imminent danger to children in care. This flexibility cannot be used to bypass the monitoring requirement altogether. States should develop procedures for notifying parents of monitoring protocols and consider whether it would be appropriate to obtain parental permission prior to entering the home for inspection (98.42(b)(2)(iv)(B)).

a. To certify, describe the policies and practices for the annual monitoring of license-exempt in-home care, including if monitoring is announced or unannounced, occurs more frequently than once per year, and if differential monitoring procedures are used. N/A

b. Provide the citation(s) for this policy or procedure. *Click or tap here to enter text.*

c. List the entity(ies) in your state/territory that are responsible for conducting inspections of license-exempt CCDF providers: *Click or tap here to enter text.*

5.4.5   Licensing Inspectors (or qualified inspectors designated by the Lead Agency).

Lead Agencies will have policies and practices that ensure that individuals who are hired as licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care providers and facilities and have received health and safety training appropriate to the provider setting and age of the children served. Training shall include, but is not limited to, those requirements described in 98.41(a)(1) and all aspects of the state's licensure requirements (658E(c)(2)(K)(i)(I); 98.42(b)(1-2)).

a. To certify, describe how the Lead Agency ensures that licensing inspectors (or qualified monitors designated by the Lead Agency) are qualified to inspect child care facilities and providers The Lead Agency's licensing inspectors are classified by the State of New Mexico as Compliance Officers. These positions are identified by Operational and Advanced levels. The minimum qualifications for the Operational Level are a High School Diploma or Equivalency and two (2) years of experience in investigations, regulation, policy, statutory, and/or contract compliance. The minimum qualifications for the Advanced Level are a Bachelor's degree in Business Administration and three (3) years of experience in the areas of rule, regulation, policy and/or statutory compliance, contract compliance, regulatory administration, insurance, utilities, healthcare and/or government assistance programs.

b. To certify, describe how inspectors and monitors have received training on health and safety requirements that are appropriate to the age of the children in care and the type of provider setting (98.42(b)(1-2)). On-the-job training is provided upon hire in all aspects of the Lead Agency's licensure requirements. All licensing inspectors receive ongoing relevant training.

c. Provide the citation(s) for this policy or procedure. The New Mexico State Personnel Classification Description is defined in the following link: Microsoft Word - G1099 Community and Social Service Specialists All Other (state.nm.us)

5.4.6   The states and territories shall have policies and practices that require the ratio of licensing inspectors to child care providers and facilities in the state/territory to be maintained at a level sufficient to enable the state/territory to conduct effective inspections of child care providers and facilities on a timely basis in accordance with federal, state, and local laws (658E(c)(2)(K)(i)(III); 98.42(b)(3)).

a. To certify, describe the state/territory policies and practices regarding the ratio of licensing inspectors to child care providers (i.e. number of inspectors per number of child care providers) and facilities in the state/territory and include how the ratio is sufficient to conduct effective inspections on a timely basis. ECECD follows the practice of utilizing a ratio of 1:60 licensing inspectors to providers.

b. Provide the policy citation and state/territory ratio of licensing inspectors.
The Lead Agency follows the practice of utilizing a ratio of 60:1 providers to inspectors. In rural areas, this count may be lower to account for extensive drive times. This practice is included in the procedures and training manual for Regulatory Supervisors for managing staff caseload assignments.

5.5   Comprehensive Background Checks

The CCDBG Act requires states and territories to have in effect requirements, policies and procedures to conduct comprehensive background checks for all child care staff members (including prospective staff members) of all child care programs that are 1) licensed, regulated, or registered under state/territory law; or, 2) all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers) (98.43(a)(1)(i)). Background check requirements apply to any staff member who is employed by a child care provider for compensation, including contract employees and self-employed individuals; whose activities involve the care or supervision of children; or who has unsupervised access to children (98.43(2)). For family child care homes, this requirement includes the caregiver and any other adults residing in the family child care home who are age 18 or older (98.43(2)(ii)(C)). This requirement does not apply to individuals who are related to all children for whom child care services are provided (98.43(2)(B)(ii)). Exemptions for relative providers will be addressed in 5.6.5.

A comprehensive background check must include eight (8) separate and specific components (98.43(2)(b)), which encompass three (3) in-state checks, two (2) national checks, and three (3) interstate checks (if the individual resided in another state in the preceding 5 years).

5.5.1   Background Check Requirements. In the table below, certify by checking that the state has policies, and is conducting checks for the required background check components, ensuring that these requirements are in place for all licensed, regulated, or registered child care providers and for all other providers eligible to deliver CCDF services (e.g., license-exempt CCDF eligible providers), in accordance with 98.43(a)(1)(i), 98.43(a)(2) and 98.16(o).

a. Components of In-State Background Checks

Component	Licensed, regulated, or registered child care providers	All other providers eligible to deliver CCDF Services
i. Criminal registry or repository using fingerprints in the current state of residency	☒	☒
	Citation: 8.8.3.10(B)(1) and 8.8.3.11(A)(2) NMAC	Citation: 8.8.3.10(B)(1) and 8.8.3.11(A)(2) NMAC
ii. Sex offender registry or repository check in the current state of residency	☒	☒
	Citation: 8.8.3.13(A)(6) NMAC	Citation: 8.8.3.13(A)(6) NMAC
iii. Child abuse and neglect registry and database check in the current state of residency	☒	☒
	Citation: 8.8.3.6(C) NMAC	Citation: 8.8.3.6(C) NMAC

b. Components of National Background Check

Component	Licensed, regulated, or registered child care providers	All other providers eligible to deliver CCDF Services
i. FBI Fingerprint Check	☒	☒
	Citation: 8.8.3.10(B)(1) and 8.8.3.11(A)(2)	Citation: 8.8.3.10(B)(1) and 8.8.3.11(A)(2)
ii. National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name-based search	☒	☒
	Citation: 8.8.3.10(B)(1), 8.8.3.11(A)(2), and 8.8.3.13(A)(6) NMAC	Citation: 8.8.3.10(B)(1), 8.8.3.11(A)(2), and 8.8.3.13(A)(6) NMAC

c. Components of Interstate Background Checks

Component	Licensed, regulated, or registered child care providers	All other providers eligible to deliver CCDF Services
i. 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. Note: It is optional to use a fingerprint to conduct this check. Searching a general public facing judicial website does not satisfy this requirement. This check must be completed in addition to the national FBI history check to mitigate any gaps that may exist between the two sources (unless the responding state participates in the National Fingerprint File program).	☒	☒
	Citation: 8.8.3.6(C) and 8.8.3.7(I) NMAC	Citation: 8.8.3.6(C) and 8.8.3.7(I) NMAC
ii. Sex offender registry or repository in any other state where the individual has resided in the past 5 years. Note: It is optional to use a fingerprint to conduct this check. This check must be completed in addition to the National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) to mitigate any gaps that may exist between the two sources.	☒	☒
	Citation: 8.8.3.6(C) and 8.8.3.7(I) NMAC	Citation: 8.8.3.6(C) and 8.8.3.7(I) NMAC
	☒	☒

Component	Licensed, regulated, or registered child care providers	All other providers eligible to deliver CCDF Services
iii. Child abuse and neglect registry and database in any other state where the individual has resided in the past 5 years Note: This is a name-based search	Citation: 8.8.3.6(C) and 8.8.3.7(I) NMAC	Citation: 8.8.3.6(C) and 8.8.3.7(I) NMAC

5.5.2   Procedures for a Provider to Request a Background Check.

Child care providers are required to submit requests for background checks for each of their staff members to the appropriate state or territorial agency, which is to be defined clearly on the state or territory Web site. Family child care home providers must also submit background check requests for all household members over the age of 18. The requests must be submitted prior to when the individual becomes a staff member and must be completed at least once every five years per § 98.43(d)(1) and (2). The state or territory must ensure that its policies and procedures under this section, including the process by which a child care provider or other state or territory may submit a background check request, are published on the web site of the state or territory as described in § 98.43(g) and the web site of local lead agencies.

a.   Describe the state/territory procedure(s) for a provider to request the required background checks. If the process is different based on provider type, please include that in this description. If the process is different based on each background check component, please include that in this description. A registration packet can be obtained through www.newmexicokids.org, www.nmececd.org, ECECD Regulatory staff, or by contacting the ECECD Background Check Unit. Every applicant is required to register by phone with the Background Check Unit at (505) 827-7326 or (888) 317-7326. To be fingerprinted, the applicant must log onto the Gemalto Fingerprint Website at www.aps.gemalto.com and click on the Fingerprint Location Map to find a location. Applicants must take the Fingerprint Registration Number provided by the Background Check Unit at the time of registration and be fingerprinted. Once fingerprinted, the applicant must submit the proper background check forms immediately to the Background Check Unit. All direct providers of care, household members over the age of 18 years of age 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 8.8.3.10(B) NMAC) must obtain a background clearance. 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.

b.   The state/territory must ensure 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. What are the fees and how do you ensure that these fees do not exceed the actual cost of processing and administering the background checks? Lead Agencies can report that no fees are charged if applicable (98.43(f)). The BCU does not collect any fees for processing a background check. The provider or the applicant may be required to pay for fingerprinting and all fingerprinting fees are collected by the fingerprinting authority. During the emergency declarations, including a public health emergency, ECECD may assume payment for the fingerprinting fees that are required upon

registration by the fingerprinting authority. If another states charge a fee to process fingerprints and/or an abuse and neglect screen, the provider or the applicant will be required to pay the fee.

c. Describe the state/territory policy(ies) related to prospective staff members working on a provisional basis. Pending completion of all background check components in 98.43(b), the prospective staff member must be supervised at all times by an individual who received a qualifying result on a background check described in 98.43(b) within the past 5 years (98.43(c)(4)) and the prospective staff member must have completed and received satisfactory results on either the FBI fingerprint check or a fingerprint check of the state/territory criminal registry or repository in the state where the prospective staff member resides. Describe and include a citation for the Lead Agency's policy: 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. Pursuant to 8.8.3.7(V) NMAC, notice of provisional employment means a written notice issued to a child care center or home applicant indicating the Background Check Unit (BCU) reviewed the applicant's fingerprint based federal or New Mexico criminal record and made a determination that the applicant may begin employment under direct physical supervision until receiving background eligibility. A notice may also indicate the applicant must receive a complete background eligibility prior to beginning employment. Background checks will be conducted in accordance with the most current regulations related to background checks and employment history verification provisions. All licensed child care facilities and registered homes must adhere to these provisions to maintain their licensing and registration status. A request for a background check must be submitted prior to a staff member's employment. A background check must be conducted in accordance with 8.8.3 NMAC on all required individuals at least once every five years from the original date of eligibility regardless of the date of hire or transfer of eligibility.

d. Describe the procedure for providers to request background checks for staff members that resided in another state within the previous 5 years. Pursuant to regulation 8.8.3.6 NMAC, the BCU will verify whether the applicant resided in another state during the preceding five years. If so, and the state does not participate in the National Fingerprint File (NFF), the licensee/director or provider will receive a notice requiring the applicant to comply with the inter-state criminal repository check. Within the notice, the BCU will provide instructions on the necessary steps the applicant will need to take and the timeframe for completion. Failure to comply will result in the denial of the applicant background check.

e. Describe the procedure to ensure each staff member completes all components of the background check process at least once during each 5-year period. If your state enrolls child care staff members in the FBI Rap Back Program or a state-based rap back program, please include that in this description. Note: An FBI Rap Back program only covers the FBI Fingerprint component of the background check. If child care staff members are enrolled in a state-based rap back, please indicate which background check components are covered by this service. 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. The BCU also receives Rap Back for in-state criminal activity and is fingerprint based.

f. Describe the procedure to ensure providers who are separated from employment for more than 180 consecutive days receive a full background check. Providers who have separated from employment for more than 180 consecutive days are required to submit a new application for a background check.

g. Provide the website link that contains instructions on how child care providers should initiate background check requests for a prospective employee (98.43(g)). https://www.nmececd.org/child-care-licensing-and-registered-homes/

5.5.3   Procedures for a Lead Agency to Respond to and Complete a Background Check.

Once a request has been initiated, the state shall carry out the request of a child care provider for a criminal background check as expeditiously as possible, but not to exceed 45 days after the date on which such request was submitted. The Lead Agency shall make the determination whether the prospective staff member is eligible for employment in a child care program (98.43(e)(1)). Lead Agencies must ensure the privacy of background checks by providing the results of the criminal background check to the requestor or identified recipient in a statement that indicates whether a child care staff member (including a prospective child care staff member or a family child care household member over the age of 18) is eligible or ineligible for employment, without revealing any documentation of criminal history or disqualifying crimes or other related information regarding the individual. In the following questions, describe the Lead Agency's procedures for conducting background checks. These responses should include:

- The name of the agency that conducts the investigation; include multiple names if multiple agencies are involved in different background check components

- How the Lead Agency is informed of the results of each background check component

- Who makes the determinations regarding the staff member's eligibility? Note: Disqualification decisions should align to the response provided in 5.5.7.

- How the Lead Agency ensures that a background check request is carried out as quickly as possible and not more than 45 days after a request is submitted.

a.   Describe the procedures for conducting In-State Background Check requests and making a determination of eligibility. The BCU is solely responsible for conducting In-State Background checks and making determinations of eligibility for all child care applicants in facility and home settings. The applicant begins the background check process by being fingerprinted at a local 3M Cogent location and submitting an application to the BCU. Once the BCU receives the application, the applicant's FBI and State criminal histories are retrieved and reviewed. If there are no disqualifying arrests, a Notice of Provisional Employment is sent to the facility or home. If there is a disqualifying arrest, a Notice of NO Provisional employment is sent to the facility or home. The investigation staff then conducts searches of various criminal history websites including New Mexico Courts, New Mexico Sex Offender Registry and National Sex Offender Registry. The investigation staff also conducts a search of the CYFD Family Automated Case Tracking System (FACTS) which contains New Mexico abuse and neglect histories. Applicants will also undergo a screen of abuse and neglect information, an inter-state criminal history check (non NFF states only), and a sex offender registry check in each state where the applicant resided during the preceding five years. If the applicant does not have any criminal or abuse and neglect histories, the BCU generates and mails an eligibility letter to the child care facility or home. If the applicant has any criminal or abuse and neglect history, the assessment staff will review all of the collected information to determine whether the application can be approved for eligibility or must be denied due to the presence of an automatic disqualifying event. Assessment staff may also request additional information from the applicant to make a determination regarding whether the applicant poses an unreasonable risk to care recipients. If the applicant does not provide a response in the required time frame, the application will be denied, and both the employer and the applicant will be sent letters indicating that the application has been denied. If the applicant provides a response, the information is reviewed to make a final determination regarding whether the applicant is eligible or poses an unreasonable risk and must be denied. If the applicant is denied eligibility due to the presence of an automatic disqualifying event or a determination of unreasonable risk, the employer is sent a letter indicating that the applicant has been denied. The ECECD Background Check Unit (BCU) is solely responsible for conducting in-state background checks and making determinations of eligibility for all child care applicants in facility and home settings. The applicant begins the background check

process by being fingerprinted at a local 3M Cogent location and submitting an application to the BCU. Once the BCU receives the application, the applicant's FBI and state criminal histories are retrieved and reviewed. If there are no disqualifying arrests, a Notice of Provisional Employment is sent to the facility or home. If there is a disqualifying arrest, a Notice of NO Provisional employment is sent to the facility or home. The investigation staff then conducts searches of various criminal history websites including New Mexico Courts, New Mexico Sex Offender Registry and National Sex Offender Registry. The investigation staff also conducts a search of the Children, Youth and Families Department (CYFD) Family Automated Case Tracking System (FACTS) which contains New Mexico abuse and neglect histories. Applicants will also undergo a screen of abuse and neglect information, an inter-state criminal history check (non NFF states only), and a sex offender registry check in each state where the applicant resided during the preceding five years. If the applicant has no criminal or abuse and neglect history, the BCU generates and mails an eligibility letter to the child care facility or home. If the applicant has a criminal or abuse and neglect history, the assessment staff will review all of the collected information to determine whether the application can be approved for eligibility or must be denied due to the presence of an automatic disqualifying event. Assessment staff may also request additional information from the applicant to make a determination regarding whether the applicant poses an unreasonable risk to care recipients. If the applicant does not provide a response in the required time frame, the application will be denied, and both the employer and the applicant will be notified that the application has been denied. If the applicant provides a response, the information is reviewed in order to make a final determination regarding whether the applicant is eligible or poses an unreasonable risk and must be denied. If the applicant is denied eligibility due to the presence of an automatic disqualifying event or a determination of unreasonable risk, the employer is sent a letter indicating that the applicant has been denied eligibility without disclosing the reasons for the denial. The applicant is sent a separate letter outlining the reasons for the denial and advising them of their right to appeal the denial. If the BCU receives an appeal from the applicant, a complete copy of the applicant's file is provided to the ECECD Hearing Officer who conducts a record review and makes a recommendation to the Cabinet Secretary to either affirm or reverse the BCU denial. A final order from the ECECD Cabinet Secretary is provided to the BCU and is sent to the applicant to advise them of the final ECECD decision. If the denial is affirmed, the applicant is advised of their right to seek review of the denial to the New Mexico District Court. If the denial is reversed, the BCU will grant the applicant eligibility and will send an eligibility letter to the employer.

b. If the procedure is different for National Background checks, including the name-based NCIC NSOR check and FBI fingerprint check, please describe here. N/A

c. Describe the procedures for conducting Interstate Background Check requests and making a determination of eligibility. (Note this response should detail how a state conducts an interstate check for a provider who currently lives in their state or territory but has lived in another state(s) within the previous five years). When an applicant discloses residence outside of the state of New Mexico within the past 5 years, additional information is requested from the director for a facility (or the applicant for a registered home) for an interstate criminal history check and abuse and neglect check. If the state where the applicant resided in is a NFF State, the applicant is not required to complete an additional criminal history request as the FBI has direct access to the state's criminal history repository. If the state where the applicant resided is not a NFF state, the director or applicant will receive a request for additional information from the BCU with instructions regarding how to complete and submit the necessary releases to obtain a criminal history check outside of the state of New Mexico to the BCU. Also, a request for additional information to complete an interstate abuse and neglect check will be sent directly from the BCU to the director of a facility or an applicant for a registered home with instructions on how to complete and submit necessary releases to obtain an abuse and neglect check in a state other than New Mexico to the BCU. The request indicates that all information requested must be received by the BCU within fifteen calendar days of the date of the request. If the requested information is not submitted, the BCU will deny the application and send a written notice of the background check denial. If the information is not received within an additional 15 days, a final determination is made and the application is denied for non-response.

d. Describe the procedure the Lead Agency has in place to make an eligibility determination in the event not all the components of the background check are completed within the required 45-day timeframe. When a background check requires additional, such as an interstate criminal history check and/or an abuse and neglect check, a request for additional information is made of the facility director and the applicant. The information must be received by the BCU within 15 calendar days of the date of the request. If the requested information is not submitted, the BCU will deny the application and send a written notice of the background check denial. If the information is not received within an additional 15 days thereafter, a final determination is made and the application is denied for non-response. If an applicant is unable to provide the requested information within 15 days, they may request an extension in writing. If the applicant can show good cause to extend the deadline beyond the original 45-day conditional employment period, the extension will be granted. The BCU will proceed with determining eligibility if an applicant can show documentation of good faith effort to obtain an inter-state background check.

e. Describe procedures for conducting a check when the state of residence is different than the state in which the staff member works. When an applicant discloses residency outside the state of New Mexico, a request for additional information to complete an interstate criminal history check and abuse and neglect check is sent to the director for a facility and to the applicant for a registered home. If the state where the applicant resides is a NFF state, the applicant is not required to complete an additional criminal history request as the FBI has direct access to the state's criminal history repository. If the state where the applicant resides is not a NFF state, the director or applicant will receive a request for additional information from the BCU with and a signed release to obtain a criminal history check. Also, a request for additional information to complete an interstate abuse and neglect check will be sent from the BCU to the director of a facility (or an applicant for a registered home) with the necessary releases to obtain an abuse and neglect check from another state. All information requested must be received by the BCU within 15 calendar days of the date of the request. If the requested information is not submitted, the BCU will deny the application and send written notice of the background check denial. If the information is not received within an additional 15 days thereafter, a final determination is made and the application is denied for non-response.

5.5.4 State designation as a "Compact State" and participation in the National Fingerprint File program.

a. "Compact States" are states that have ratified the National Crime Prevention and Privacy Compact Act of 1998 in order to facilitate electronic information sharing for noncriminal justice purposes (such as employment) among the Federal Government and states. More information can be found here: https://www.fbi.gov/services/cjis/compact-council. The Compact allows signatory states to disseminate its criminal history record information to other states for noncriminal justice purposes in accordance with the laws of the receiving state. For the most up-to-date Compact States and Territories map visit: https://www.fbi.gov/services/cjis/compact-council/maps. Is your state or territory a Compact State?

☒ No
☐ Yes

b. The National Fingerprint File (NFF) is a database of fingerprints, or other unique personal identification information relating to an arrested or charged individual, which is maintained by the FBI to provide positive fingerprint identification of record subjects. Only a state or territory that has ratified the Compact (a Compact State) may join the NFF program. An FBI fingerprint check satisfies the requirement to perform an interstate check of another state's criminal history record repository if the responding state (where the child care staff member

has resided within the past 5 years) participates in the NFF program. It is unnecessary to conduct both the FBI fingerprint check and the search of an NFF state's criminal history record repository (refer to CCDF-ACF-PIQ-2017-01). For the most up-to-date NFF Participation map visit: https://www.fbi.gov/services/cjis/compact-council/maps.   Is your state or territory an NFF State?

☒   No
☐   Yes

5.5.5   Procedures for a Lead Agency to Respond to Interstate Background Checks:

a.   Interstate Criminal History Registry Check Procedures

Provide a description of how the state or territory responds to interstate criminal history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain criminal history information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility). Requests for criminal history checks from other states are referred to the New Mexico Department of Public Safety. To ensure all states have the current contact information for the BCU, the contact information has been provided as requested by Early Childhood National Center on Subsidy Innovation and Accountability. The Department of Public Safety will provide the requested information with a valid, notarized release form and required fee from the applicant.

b.   Interstate Sex Offender Registry Check Procedures

Provide a description of how the state or territory responds to interstate sex offender history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain sex offender information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility).
The New Mexico Department of Public Safety manages the state's Sex Offender Registry website. Any requests not satisfied by searching the website would be directed to the Department of Public Safety. The Sex Offender Registry website is: https://www.icrimewatch.net/index.php?AgencyID=55290. Pursuant to the Sex Offender Registration and Notification Act, the release of sex offender registration information is limited to those individuals convicted of certain sex offenses on or after July 1, 1995, or those individuals convicted of a sex offense prior to that date and were incarcerated or on probation/parole as of that date. There are no laws or policies preventing the state from releasing such information to an out-of-state entity for civil purposes.

c.   Interstate Child Abuse and Neglect Registry Check Procedures

Provide a description of how the state or territory responds to interstate child abuse and neglect history check requests from another state and whether there are any laws or policies that prevent the state from releasing certain child abuse and neglect information to an out-of-state entity for civil purpose (i.e., for purposes of determining employment eligibility). The BCU receives requests for abuse and neglect information by fax or e-mail and provides responses via fax or e-mail as expeditiously as possible and does not exceed the 45-day timeframe from the date the initial request was received. The BCU is only permitted to provide abuse and neglect responses to social services agencies from other states pursuant to New Mexico statute 32A-4-33 NMSA 1978.

5.5.6   Consumer Education Website Links to Interstate Background Check Processes

Lead Agencies must have requirements, policies, and procedures in place to respond as expeditiously as possible to other States', Territories' and Tribes' requests for background checks in order to meet the 45-day timeframe (98.43(a)(1)(iii)). In addition, Lead Agencies are required to include on their consumer education website the process by which another Lead Agency may submit a background check request, along with all of the other background check policies and procedures (98.43 (g)).

State and Territory Lead Agencies are required to designate one page of their existing Consumer Education Website as a landing page for all interstate background check related processes and procedures pertaining to their own state. The purpose of having a dedicated interstate background check web page on the Lead Agency Consumer Education Website is to help state and territories implement the interstate background check requirements of the CCDBG Act (CCDF Consumer Education Website and Reports of Serious Injuries and Death (OMB #0970-0473)).

Check to certify that the required elements are included on the Lead Agency's consumer education website for each interstate background check component, and provide the direct URL/website link.

Note: The links provided below should be a part of your consumer education website identified in 2.3.11.

a.   Interstate Criminal Background Check:

    ⊠   i.   Agency Name

    ⊠   ii.   Address

    ⊠   iii.   Phone Number

    ⊠   iv.   Email

    ⊠   v.   FAX

    ⊠   vi.   Website

    ⊠   vii.   Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)

    ⊠   viii.   Forms

    ⊠   ix.   Fees

    ⊠   x.   Is the state a National Fingerprint File (NFF) state?

    ⊠   xi.   Is the state a National Crime Prevention and Privacy Compact State?

    ⊠   xii.   Direct URL/website link to where this information is posted. Comprehensive Background Check Process | Early Childhood Education & Care Department (nmececd.org)

b. Interstate Sex Offender Registry (SOR) Check: [New Mexico Department of Public Safety OffenderWatch® sex offender management, mapping and email alert program (sheriffalerts.com)](sheriffalerts.com)

- ☒   i.   Agency Name

- ☒   ii.   Address

- ☒   iii.   Phone Number

- ☒   iv.   Email

- ☒   v.   FAX

- ☒   vi.   Website

- ☒   vii.   Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification are needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)

- ☒   viii.   Forms

- ☒   ix.   Fees

- ☒   x.   Direct URL/website link to where this information is posted. [Comprehensive Background Check Process | Early Childhood Education & Care Department (nmececd.org)](nmececd.org)

c. Interstate Child Abuse and Neglect (CAN) Registry Check:

- ☒   i.   Agency Name

-    ii.   Is the CAN check conducted through a County Administered Registry or Centralized Registry?

- ☒   iii.   Address

- ☒   iv.   Phone Number

- ☒   v.   Email

- ☒   vi.   FAX

- ☒   vii.   Website

- ☒   viii.   Instructions ((e.g. Does a portal/system account need to be created to make a request? What types of identification is needed? What types of payment is accepted? How can a provider appeal the results? How will forms will be accepted and FAQs?)

- ☒   ix.   Forms

- ☒   x.   Fees

- ☒   xi.   Description of information that may be included in a response to a CAN registry check (including substantiated instances of child abuse and neglect accompanied by the State's definition of "substantiated"

instances of child abuse and neglect.

☒   xii.   Direct URL/website link to where this information is posted. [Child Care Licensing and Registered Homes | Early Childhood Education & Care Department (nmececd.org)](https://nmececd.org)

5.5.7   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 (98.43 (c)(1)(i-iii)). 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)(iv-v)).

a.   Does the state/territory disqualify child care staff members based on their conviction for any other crimes not specifically listed in 98.43(c)(i)?

☐   No

☒   Yes. If yes, describe other disqualifying crimes and provide the citation:
The following shall result in a conclusion that the applicant is an unreasonable risk: a conviction, regardless of the degree of the crime or the date of the conviction, of trafficking in controlled substances, criminal sexual penetration or related sexual offenses or child abuse; a substantiated referral, regardless of the date, for sexual abuse or for a substantiation of abuse or neglect relating to a failure to protect against sexual abuse; the applicant's child is in CYFD or another state's custody (NMAC 8.8.3.13 (a) (3-5).

b.   Describe how the Lead Agency notifies the applicant about their eligibility to work in a child care program. This description should detail how the Lead Agency ensures the privacy of background checks. Note: The Lead Agency may not publicly release the results of individual background checks. (98.43(e)(2)(iii)). The privacy of child care applicants is protected pursuant to statute 32A-15-3(C) & (D), NMSA 1978. 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 regulation 8.8.3.17 NMAC (Appeal Rights).

c.   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 BCU has a review process for applicants that are denied based on a felony drug offense(s) pursuant to regulation 8.8.3.15 NMAC (Rehabilitation Petition). This regulation allows a person with such a conviction(s) to submit evidence that they are rehabilitated, do not pose an unreasonable risk, and should therefore be granted eligibility. The BCU also has an appeal process (regulation 8.8.3.17 NMAC) which allows the applicant to challenge a denial of eligibility.

5.5.8   Appeals Processes for Background Checks

States and territories shall provide for a process by which a child care program staff member (including a prospective child care staff member) may appeal the results of a background check to challenge the accuracy or completeness of the information contained in a staff member's background report. The state or territory shall ensure that:

- The child care staff member is provided with information related to each disqualifying crime in a report, along with information/notice on the opportunity to appeal

- A child care staff member will receive clear instructions about how to complete the appeals process for each background check component if the child care staff member wishes to challenge the accuracy or completeness of the information contained in such member's background report

- If the staff member files an appeal, the state or territory will attempt to verify the accuracy of the information challenged by the child care staff member, including making an effort to locate any missing disposition information related to the disqualifying crime

- The appeals process is completed in a timely manner for any appealing child care staff member

- Each child care staff member shall receive written notice of the decision. In the case of a negative determination, the decision should indicate 1) the state's efforts to verify the accuracy of information challenged by the child care staff member, 2) any additional appeals rights available to the child care staff member, and 3) information on how the individual can correct the federal or state records at issue in the case. (98.43(e)(3))

- The Lead Agency must work with other agencies that are in charge of background check information and results (such as the Child Welfare office and the State Identification Bureau), to ensure the appeals process is conducted in accordance with the Act.

a. What is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background check report? If there are different appeal process procedures for each component of the check, please provide that in this description, including information on which state agency is responsible for handling each type of appeal. Note: The FBI Fingerprint Check, State Criminal Fingerprint, and NCIC NSOR checks are usually conducted by a state's Identification Bureau and **may** have different appeal processes than agencies that conduct the state CAN and state SOR checks. ECECD's appeal process (regulation 8.8.3.17 NMAC) allows an applicant to challenge a denial of eligibility. Any applicant who is found ineligible after completion of a background check may request an administrative review. The request for an administrative review shall be in writing and submitted to the BCU within 15 days of the date of the BCU's written notice of a determination of unreasonable risk. The administrative review shall be conducted by a review of the record by a hearing officer designated by the Cabinet Secretary. The hearing officer's review is limited to: (1) whether the BCU's conclusion of unreasonable risk is supported by any section of these regulations; and (2) whether the applicant has been erroneously identified as a person with a relevant conviction or substantiated referral. The review will be completed on the record presented to the hearing officer and includes the applicant's written request for an administrative review and other relevant evidence provided by the applicant. The hearing officer conducts the administrative review and submits a recommendation to the cabinet secretary no later than 60 days after the date the request for administrative review is received unless ECECD and the applicant agree otherwise. A previously cleared applicant whose eligibility has been suspended or revoked may appeal that decision to ECECD and shall be entitled to a

hearing. The request for appeal shall be in writing and submitted to the BCU within 15 days of the date of the BCU's written notice of suspension.

b. If the appeals process is different for interstate checks, what is the procedure for each applicant to appeal or challenge the accuracy or completeness of the information contained in the background report for interstate checks? An applicant is referred to the state providing the record to appeal the information contained in the background report.

c. Interstate Child Abuse and Neglect (CAN) Registry Check: An applicant is referred to the state providing the record to appeal the information contained in the background report.

5.6 Exemptions for Relative Providers

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 certain health and safety requirements. Note: This exception applies if the individual cares only for relative children.

Check and describe where applicable the policies that the Lead Agency has regarding exemptions for eligible relative providers for the following health and safety requirements. The description should include the health and safety requirements relatives are exempt from, if applicable, as well as which of the federally defined relatives the exemption applies to.

5.6.1   Licensing Requirements (as described in Section 5.1)

☐ a. Relative providers are exempt from all licensing requirements.

☐ b. Relative providers are exempt from a portion of licensing requirements. Describe.
Click or tap here to enter text.

☒ c. Relative providers must fully comply with all licensing requirements.

5.6.2   Health and Safety Standards (as described in Section 5.2 and 5.3)

☐ a. Relative providers are exempt from all health and safety standard requirements

☐ b. Relative providers are exempt from a portion of health and safety standard requirements. Describe. *Click or tap here to enter text.*

☒ c. Relative providers must fully comply with all health and safety standard requirements.

5.6.3   Health and Safety Training (as described in Section 5.3)

☐ a. Relative providers are exempt from all health and safety training requirements.

☐ b. Relative providers are exempt from a portion of all health and safety training requirements. Describe. *Click or tap here to enter text.*

☒ c. Relative providers must fully comply with all health and safety training requirements.

5.6.4   Monitoring and Enforcement (as described in Section 5.4)

☐ a. Relative providers are exempt from all monitoring and enforcement requirements.

☐ b. Relative providers are exempt from a portion of monitoring and enforcement requirements. Describe. *Click or tap here to enter text.*

☒ c. Relative providers must fully comply with all monitoring and enforcement requirements.

5.6.5   Background Checks (as described in Section 5.5)

☐ a. Relative providers are exempt from all background check requirements.

☐ b. Relative providers are exempt from a portion of background check requirements. If checked, identify the background check components that relatives must complete:

- ☐   i.   Criminal registry or repository using fingerprints in the current state of residency
- ☐   ii.   Sex offender registry or repository in the current state of residency
- ☐   iii.   Child abuse and neglect registry and database check in the current state of residency
- ☐   iv.   FBI fingerprint check
- ☐   v.   National Crime Information Center (NCIC) National Sex Offender Registry (NSOR) name based search.
- ☐   vi.   Criminal registry or repository in any other state where the individual has resided in the past five years.
- ☐   vii.   Sex offender registry or repository in any other state where the individual has resided in the past five years.
- ☐   viii.   Child abuse and neglect registry or data base in any other state where the individual has resided in the past five years.

☒ c. Relative providers must fully comply with all background check requirements.

6 Recruit and Retain a Qualified and Effective Child Care Workforce

This section covers the state or territory framework for training, professional development, and post-secondary education (98.44(a)); provides a description of strategies used to strengthen the business practices of child care providers (98.16(z)) and addresses early learning and developmental guidelines.

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). This section addresses the quality improvement activities implemented by the Lead Agency related to the support of the child care workforce and the development and implementation of early learning and developmental guidelines. It asks Lead Agencies to describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services. (98.53 (f)) in either of these two areas.

States and territories are required to describe their framework for training, professional development, and post-secondary education for caregivers, teachers, and directors, including those working in school-age care (98.44(a)). This framework is part of a broader systematic approach building on health and safety training (as described in section 5) within a state/territory. States and territories must incorporate their knowledge and application of health and safety standards, early learning guidelines, responses to challenging behavior, and the engagement of families. States and territories are required to establish a progression of professional development opportunities to improve the knowledge and skills of CCDF providers (658E(c)(2)(G)). To the extent practicable, professional development should be appropriate to work with a population of children of different ages, English-language learners, children with disabilities, and Native Americans (98.44(b)(2)(iv)). Training and professional development is one of the options that states and territories have for investing their CCDF quality funds (658G(b)(1)).

6.1 Professional Development Framework

6.1.1 Each state or territory must describe their professional development framework for training, professional development, and post-secondary education for caregivers, teachers and directors in programs that serve children of all ages. This framework should be developed in consultation with the State Advisory Council on Early Childhood Education and Care or similar coordinating body. The framework should include these components:
(1) professional standards and competencies, (2) career pathways, (3) advisory structures, (4) articulation, (5) workforce information, and (6) financing (98.44(a)(3)). Flexibility is provided on the strategies, breadth, and depth with which states and territories will develop and implement their framework.

   a. Describe how the state/territory's framework for training and professional development addresses the following required elements:

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

Professionalism The common core content and competencies for early childhood professionals were developed by the NM 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. 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. 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 New Mexico include the common core content in their coursework.

ii.   Career pathways. Describe: 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. Altogether, this system of professional development is referred to as the New Mexico Early Care, Education and Family Support Career Lattice. 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: 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 Quality Initiatives Bureau within ECECD.   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 requirement for this certificate includes the completion of four specifically identified courses in early childhood education. The certificate of completion is awarded by the Quality Initiatives Bureau within ECECD.   One Year Vocational 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 ECECD Quality Initiatives Bureau awards a state certificate upon completion of this vocational course of study. Associate Degree - a two-year program consists 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. Bachelor's Degree Licensure Option - a four-year program consists 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 Public Education Department. Bachelor's Degree Non-Licensure Option - a four-year program consists of approximately 128 credits, available at some public four-year institutions in the state. The Degree is issued by the institution upon

completion of a Birth through Age 4 (PreK), or Age 3 (PreK) through Grade 3, or Early Childhood Program Administration or Family, Infant and Toddler Studies (FIT) program.   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. Doctorial Degree - consists of 66-72 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. 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 Early Learning Advisory Council, and the Quality Initiatives Bureau, has developed a common catalogue of coursework with common course titles and content for all institutions of higher education in the state.

iii. Advisory structure. Describe: New Mexico has two primary advisory councils that have informed the framework for training and professional development (Early Learning Advisory Council (ELAC) and the ECECD Advisory Council). The ELAC has an established standing committee, the Early Childhood Higher Education Task Force, which advises the Lead Agency and providers on professional development and higher education for early childhood professionals. More recently, the establishment of the ECECD Advisory Council was mandated by the Early Childhood Education and Care Act to: (a) develop outcomes for children and families receiving services through early childhood programs; (b) develop goals and objectives with corresponding indicators that measure whether each of those objectives is reached; and (c) develop a workforce plan to include a career ladder, wage structure, and professional development plan that applies to the full continuum of programs. Of 300 applications received for membership of the ECECD Advisory Council, 41 individuals were selected from across the state. The Advisory Council members are early childhood care providers, health professionals, workforce development professionals, higher education experts, and fully represent New Mexico's ethnic, geographic, and cultural diversity. The Final Report and Recommendations of the New Mexico Early Childhood Education and Care Department Advisory Council can be accessed at https://www.nmececd.org/new-mexico-early-childhood-education-and-care-department-advisory-council/.

iv. 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 Early Learning Advisory Council, has developed a common catalogue of coursework with common course titles and content for all institutions of higher education in the state.

v. 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.

vi. Financing. Describe: ECECD funds the Early Childhood Comprehensive Scholarship program. The scholarship program offers an opportunity to attend college and provides support and financial incentives to make that possible.

b. The following are optional elements, or elements that should be implemented to the extent practicable, in the training and professional development framework.

☒   i.   Continuing education unit trainings and credit-bearing professional development to the extent practicable. Describe: 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.

☒   ii.   Engagement of training and professional development providers, including higher education, in aligning training and educational opportunities with the state/territory's framework. Describe: The Lead Agency coordinates the Higher Education Taskforce. The taskforce consists of one representative from each university and college in New Mexico responsible for providing coursework to early childhood professionals following the Early Childhood Career Path. The taskforce meets monthly to assess the early childhood workforce, needs, sets goals to meet those needs, and serves as a standing committee for the New Mexico Early Learning Advisory Council.

☐   iii.   Other. Describe: *Click or tap here to enter text.*

6.1.2   Describe how the state/territory developed its professional development framework in consultation with the State Advisory Council on Early Childhood Education and Care (if applicable) or similar coordinating body if there is no SAC that addresses the professional development, training, and education of child care providers and staff.
New Mexico's Early Learning Advisory Council has an established standing committee to focus on the professional development framework and educational opportunities for early childhood professionals. In addition, the Early Learning Advisory Council has been involved in strategic planning activities to ensure that the needs of the early childhood community are met. The council's standing committee, known as the Early Childhood Education Higher Education Task Force, has created a mentorship certificate for educators interested in guiding pre-service early childhood students. The certificate coursework encourages educators to become more self-aware, using ongoing reflection to examine their own practice in the classroom and serve as mentors. Members of the Higher Education Task Force and the Early Learning Advisory Council provide input to the department in regard to professional development opportunities, career pathways, established support systems (scholarships and wage supplement), and barriers experienced. Through quarterly meetings and ongoing communication, the Early Learning Advisory Council has helped inform the professional development framework and continues to do so.

6.1.3   Describe how the framework improves the quality, diversity, stability, and retention of caregivers, teachers, and directors (98.44(a)(7)). ECECD funds the Early Childhood Comprehensive Scholarship program. This program collaborates 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 scholarship program provides individuals with the opportunity to attend college which includes scholarship support and financial incentives to make it possible.

6.2   Training and Professional Development Requirements

The Lead Agency must describe how its established health and safety requirements for pre-service or orientation training and ongoing professional development requirements—as described in Section 5 for caregivers, teachers, and directors in CCDF programs—align, to the extent practicable, with the state/territory professional development framework. These requirements must be designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and to improve the knowledge and skills of the

child care workforce. Such requirements shall be applicable to child care providers caring for children receiving CCDF funds across the entire age span, from birth through age 12 (658E(c)(2)(G)). Ongoing training and professional development should be accessible and appropriate to the setting and age of the children served (98.44(b)(2)).

6.2.1   Describe how the state/territory incorporates into training and professional development opportunities:

- 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 mental health intervention models for young children, which can include positive behavior intervention and support models that reduce the likelihood of suspension and expulsion of children (as described in Section 2 of the Pre-Print) (98.44(b)).

  The Lead Agency has developed a comprehensive set of early learning guidelines which serve as a framework to capture the important aspects of early childhood development. These guidelines describe what young children know and can do during the early years of their development. They include reasonable expectations for children at different stages so that educators have criteria to which they can refer 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 New Mexico Early Learning System developed specific trainings targeted to help educators use the Early Learning Guidelines to build partnerships and strengthen their knowledge of the authentic assessment cycle. The process of Authentic Observation Documentation and Curriculum Planning is incorporated into the New Mexico PreK Program Standards. The FOCUS TQRIS includes expectations for building quality practices that support children's growth, development, and learning. The FOCUS TQRIS also includes expectations regarding the full participation of each child with specific focus on promoting social relationships in the classroom. The New Mexico Early Learning System has also developed and implemented several trainings for providing social and emotional support for young children. New Mexico's health and safety standards are a foundational part of multiple training opportunities including the mandatory Health and Safety Orientation, 45-Hour basic training for early childhood workers, and training on the safety and supervision of children. New Mexico has also developed an online training designed to help providers and early childhood professionals adjust their health and safety practices to ensure safety of their children, families, and staff during public health emergencies.

6.2.2   Describe how the state/territory's training and professional development are accessible to providers supported through Indian tribes or tribal organizations receiving CCDF funds (as applicable) (98.44(b)(2)(vi)). New Mexico's Governor has demonstrated a commitment to partner with tribal communities to ensure access to high quality early childhood opportunities. With the creation of the ECECD, these partnership efforts are being led by the Assistant Secretary for Native American Early Childhood Education and Care. Since being appointed, the Assistant Secretary has focused on deepening government-to-government relationships, and leading pandemic-related support efforts for New Mexico's pueblos, tribes, and nations. ECECD looks forward to further strengthening government-to-government relationships via regular (virtual) meetings. Additionally, tribal liaisons have been identified within each of ECECD's divisions to support services and enhance communications. New Mexico's tribal early educators have access to the same training and development opportunities and can access support through any one of the five regional training and development hubs managed by UNM's Early Childhood Service Center. New Mexico is focused on enhancing education, training, and workforce development to support its 23 tribes, pueblos, and nations.

6.2.3   States/territories are required to facilitate participation of child care providers with limited English proficiency and disabilities in the subsidy system (98.16 (dd)). Describe how the state/territory will recruit and facilitate the participation of providers in the subsidy system:

a. with limited English proficiency. The Lead Agency recruits providers whose first language is not English by extending invitations to participate in community dialogue and the utilization of community advocates and local coalitions. Multiple training and development opportunities are available in Spanish. The Lead Agency also ensures dual language translation of written materials and interpretation at meetings. Providers with limited English proficiency participating in the FOCUS TQRIS are also paired with bilingual training and development consultants.

b. who have disabilities. The Lead Agency recruits providers from the community and utilizes community advocates and local coalitions to support the needs of child care providers who may have a disability and promotes compliance with the Americans with Disabilities Act.

6.2.4   Describe how the state/territory's training and professional development requirements are appropriate, to the extent practicable, for child care providers who care for children receiving child care subsidies, including children of different age groups (such as specialized credentials for providers who care for infants and/or school-age children); English-language learners; children with developmental delays and disabilities; and Native Americans, including Indians as defined in Section 4 of the Indian Self-Determination and Education Assistance Act (including Alaska Natives) and Native Hawaiians (98.44(b)(2)(iv)).

The Lead Agency has established seven professional competencies in the areas of: (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. Training in each of the competencies are required within the New Mexico PreK Standards, FOCUS-TIQRIS criteria, state child care licensing regulations, state home visiting standards, and the federal Head Start Performance Standards. The competencies define what trainers, consultants and technical assistance providers should know when identifying the content of the professional development. These include:

- Strategies for collaborating and communicating with adult learners;
- Knowledge of high-quality early childhood practices;
- Strengths-based instructional strategies
- Information on program quality standards and the state's QRIS criteria;
- Information on serving children with disabilities and their families; and
- Knowledge and skills related to measuring and documenting program quality and inclusive practices.

New Mexico's 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.

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

Partnerships with New Mexico's individual tribes, tribal leaders, tribal educators, and state agencies are key to our collective success and to delivering the services that our families and children deserve. ECECD has initiated partnerships with:

- Bureau of Indian Education (BIE) FACE
- Indian Affairs Department
- Indian Child Welfare Act (ICWA) Court
- Indian Education Advisory Council
- Southwestern Indian Polytechnic Institute (SIPI)

Together, New Mexico's tribal communities and ECECD can ensure that our state's young children and families are healthy, supported, and well-prepared for the next stages of their lives.

6.2.5   The Lead Agency must provide training and technical assistance (TA) to providers and appropriate Lead Agency (or designated entity) staff on identifying and serving children and families experiencing homelessness (658E(c)(3)(B)(i)).

a.   Describe the state/territory's training and TA efforts for providers in identifying and serving children and their families experiencing homelessness (relates to question 3.2.2). New Mexico currently does not have specific training focused on identifying and serving children and their families experiencing homelessness. When needs for support are identified, the child care provider may contact ECECD to be connected to a consultant, if not already connected. ECECD staff also coordinate with the McKinney Vento liaisons within the public schools for additional support. ECECD is partnering with the Public Education Department's State Coordinator for the Education for Homeless Children and Youth to develop a training program. The partnership will also include a focus on planning more intentional supports and technical assistance for child care providers who serve children and families experiencing homelessness.

b.   Describe the state/territory's training and TA efforts for Lead Agency (or designated entity) staff in identifying and serving children and their families experiencing homelessness (connects to question 3.3.6). Many families experiencing homelessness qualify for child care assistance through at-risk child care. ECECD partners with the state McKinney-Vento liaisons within the Public Education Department to improve access to child care services for homeless children. These collaborative efforts entail working jointly to improve access to services and addressing the unique needs that arise for homeless children and their families. Referral processes are in place for staff liaisons to coordinate services. ECECD has designated staff to process such referrals and provide outreach as needed. Recently, the McKinney Vento State Liaison Coordinator and the Head Start State Collaboration Director met to develop a plan to support these efforts. In addition, the partnership will focus on identifying training opportunities for staff from ECECD to enhance supports provided to children and families experiencing homelessness.

6.2.6   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 providers' business practices, which can include training and/or TA efforts.

a.   Describe the strategies that the state/territory is developing and implementing for strengthening child care providers' business practices. Work with economic development and CARES Act funding.   The Lead Agency is currently in the process of obtaining licensure for a shared services online platform that would provide access and support to child care providers to strengthen their business practices. Once the shared services platform is accessible to child care providers, resources and tools would be available to support fiscal management, budgeting, recordkeeping, hiring, developing and retaining qualified staff, risk management, community relationships, marketing and public relations, and parent-provider communications.

b. Check the topics addressed in the state/territory's strategies for strengthening child care providers' business practices. Check all that apply.

☒ i. Fiscal management

☒ ii. Budgeting

☒ iii. Recordkeeping

☒ iv. Hiring, developing, and retaining qualified staff

☒ v. Risk management

☒ vi. Community relationships

☒ vii. Marketing and public relations

☒ viii. Parent-provider communications, including who delivers the training, education, and/or technical assistance

☐ ix. Other. Describe: *Click or tap here to enter text.*

6.3 Supporting Training and Professional Development of the Child Care Workforce with CCDF Quality Funds

Lead Agencies can invest CCDF quality funds 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 of the CCDF Rule, and those included in the activities to improve the quality of child care also addressed in Section 7 (98.53(a)(1)).

6.3.1 Training and professional development of the child care workforce.

a. In the table below, describe which content is included in training and professional development activities and how an entity is funded to address this topic. Then identify which types of providers are included in these activities. Check all that apply.

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	*License exempt center-based*	*Licensed family child care home*	*License-exempt family child care home*	*In-home care (care in the child's own home)*
i. 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 (98.53 (a)(1)(i)(A)).	☒	☐	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	*License exempt center-based*	*Licensed family child care home*	*License-exempt family child care home*	*In-home care (care in the child's own home)*
Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training. Its content includes best practices and research-based information with strategies to improve care. Training opportunities are available for early childhood professionals on the Pyramid Framework for social emotional support. Training and practice in the Pyramid Framework help early educators build skills for supporting nurturing and responsive caregiving, create learning environments, provide targeted social-emotional skills, and support children with challenging behaviors. Training opportunities on social emotional, cognitive, and physical development of young children include topics such as how children learn through play, powerful interactions, safety and supervision, quality in early childhood programs, health/nutrition, and introduction to the Classroom Assessment Scoring System (CLASS) to support teacher-child interactions. Trainings from the Brazelton Touchpoints Center have also been provided, and are available to providers. New Mexico has also provided early child professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to both NMELS and Quorum are free for child care providers.					
ii. Implementing behavior management strategies, including positive behavior interventions and support models that	☒	☒	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
promote positive social-emotional development and the mental health of young children and that reduce challenging behaviors, including a reduction in expulsions of preschool-age children from birth to age five for such behaviors. (See also section 2.4.5.) (98.53(a)(1)(iii)). Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve care. Trainings offered for early childhood professionals focus specifically on positive behavior interventions and support models that promote positive social-emotional development, such as trauma informed practices, powerful interactions, and CLASS. The Pyramid Framework ad Brazelton Touchpoints trainings are also infused in professional development opportunities to support social-emotional development and the mental health of young children to reduce challenging behaviors. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. All trainings are funded through a combination of state, CCDF, and					

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
Preschool Development Grant resources.					
iii. 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. (98.53(a)(1)(iv)). Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training offerings. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve care. Training opportunities for early childhood professionals on culturally and linguistically appropriate ways to support their children's development are available and include strengths-based family engagement, Native language learning, family engagement, and Brazelton Touchpoints. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to both NMELS and Quorum are free for child care providers. All trainings are funded through a combination of state, CCDF, and Preschool Development Grant resources.	☒	☒	☒	☒	☒
iv. Implementing developmentally appropriate, culturally and	☒	☒	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
linguistically responsive instruction, and evidence-based curricula, and designing learning environments that are aligned with state/territory early learning and developmental standards (98.15 (a)(9)). Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training offerings. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve care. Training opportunities include culturally and linguistically appropriate ways to support child development as well as culturally appropriate curriculum and assessment. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to NMELS and Quorum are free for child care providers. All trainings are funded through a combination of state, CCDF, and Preschool Development Grant resources.					
v. 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.	☒	☒	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	*License exempt center-based*	*Licensed family child care home*	*License-exempt family child care home*	*In-home care (care in the child's own home)*
Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training offerings. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve care. Trainings focus on community partnerships and include topics such as continuous program improvement, strategies to build effective community partnerships, quality early childhood programs, along with speakers and webinars. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to both NMELS and Quorum are free for child care providers. All trainings are funded through a combination of state, CCDF, and Preschool Development Grant resources.					
vi. Using data to guide program evaluation to ensure continuous improvement 98.53(a)(1)(ii). **Describe the content and funding:** The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training offerings. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve	☒	☒	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
care. Training opportunities available on continuous program improvement include data analysis, speakers, and webinars focused on the use of data for ongoing program improvement. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to both NMELS and Quorum are free for child care providers. All trainings are funded through a combination of state, CCDF, and Preschool Development Grant resources.					
vii. Caring for children of families in geographic areas with significant concentrations of poverty and unemployment. Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training offerings. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve care. Training opportunities are available that focus on areas with children and families living in poverty or parents experiencing unemployment. Trainings focused on trauma informed practice, family engagement, and powerful interactions support early childhood professionals in their work. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online	☒	☒	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to both NMELS and Quorum are free for child care providers. All trainings are funded through a combination of state, CCDF, and Preschool Development Grant resources.					
viii. Caring for and supporting the development of children with disabilities and developmental delays 98.53 (a)(1)(i)(B). Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training offerings. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve care. Trainings available specific to supporting children with disabilities and developmental delays include full participation for all children, powerful interactions, and how children learn through play. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning;	☒	☒	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to both NMELS and Quorum are free for child care providers. All trainings are funded through a combination of state, CCDF, and Preschool Development Grant resources.					
ix. Supporting the positive development of school-age children (98.53(a)(1)(iii). Describe the content and funding: The New Mexico Early Learning System (https://www.nmels.org/ets/store/) is the primary platform used for training offerings. Trainings are developed to address key topics. Content includes best practices and research-based information with strategies to improve care. Many training topics apply to supporting the positive development of school-age children for early childhood and school age settings and include topics on powerful interactions, developmentally appropriate curriculum an assessment and environmental rating scales. New Mexico has also provided early childhood professionals with access to Quorum eLearning, an online platform that offers courses in an array of areas with a focus on improving the quality of early childhood services by addressing critical content areas (https://qassist-s.mlearning.com/). New Mexico ensures that trainings offered connect back to the seven core competency areas, which include: Child Growth, Development and Learning; Developmentally Appropriate Content; Health, Safety and Nutrition; Learning Environment and Curriculum Implementation; Family and Community Collaboration; Assessment of Children and Evaluation of Programs; and Professionalism. Access to both NMELS and Quorum are free for child care providers. All trainings are funded through a combination of state, CCDF, and Preschool Development Grant resources.	☐	☒	☒	☒	☒

What content is included under each of these training topics and what type of funds are used for this activity?	Which type of providers are included in these training and professional development activities?				
	Licensed center-based	*License exempt center-based*	*Licensed family child care home*	*License-exempt family child care home*	*In-home care (care in the child's own home)*
x. Other. Describe: *Click or tap here to enter text.*	☐	☐	☐	☐	☐

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 and then identify which providers are eligible for this activity. Check all that apply.

		Licensed center-based	License-exempt center-based	Licensed family child care home	License exempt family child care home	In-home care (care in the child's own home)
☒	i. Coaches, mentors, consultants, or other specialists available to support access to post-secondary training, including financial aid and academic counseling.	☒	☒	☒	☒	☒
☒	ii. Statewide or territory-wide, coordinated, and easily accessible clearinghouse (i.e., an online calendar, a listing of opportunities) of relevant post-secondary education opportunities.	☒	☒	☒	☒	☒
☒	iii. Financial awards such as scholarships, grants, loans, or reimbursement for expenses and/or training, from the state/territory to complete post-secondary education.	☒	☒	☒	☒	☒
☐	iv. Other. Describe: *Click or tap here to enter text.*	☐	☐	☐	☐	☐

6.3.2 Describe the measurable indicators of progress relevant to subsection 6.3 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. One of five strategic priorities identified by ECECD is to advance a diverse, well-compensated, and credentialed workforce. Through the implementation of training, coaching, and consultation for child care providers, as well as scholarship opportunities and wage supplement programs, ECECD is focused on improving supports for early childhood professionals. Training and consultation efforts tie directly to the quality of services. Progress is measured through the number of programs designated as high-quality through New Mexico's Tiered Quality Rating and Improvement System (FOCUS). Progress related to the scholarship program will be measured by the number of active scholars and the number of participants that successfully achieve the certificate or degree they are working toward. Similarly, the wage supplement program will include measures specific to the number of participants at each level and the number that advance levels within identified periods.

6.4 Early Learning and Developmental Guidelines

6.4.1 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 address the following requirements:

  i. Are research-based. The New Mexico Early Learning Guidelines 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. The Early Learning Guidelines have been correlated with New Mexico's K-12 Content Standards, thus demonstrating that learning in the early years builds toward success throughout a child's educational experience. They have been cross-walked and aligned with the following documents, assessment tools, and curricula: Head Start Child Development/Early Learning Framework; Mind in the Making — Seven Essential Life Skills; Creative Curriculum; New Mexico Content Standards for Kindergarten; and Common Core State Standards for Kindergarten.

  ii. Developmentally appropriate. The New Mexico Early Learning Guidelines can be used in a criterion-referenced assessment process. Educators determine children's performance related to the indicators through observation that is supported through anecdotal documentation as well as work sampling. They use this information to formulate goals and objectives that are meaningful for the child and family. When considering referral for special services, the Guidelines can be used to raise red flags and identify the need for further assessment with norm-referenced screening tools or other assessment instruments. The Guidelines have been aligned to outcomes from multiple systems so that they can be used in any early childhood program. Through observation and documentation, educators build a case about each child's progress, strengths, and areas of need.

  iii. Culturally and linguistically appropriate. The New Mexico Early Learning Guidelines 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.

  iv. Aligned with kindergarten entry. Keeping in mind that learning is integrated across domains, a child's development in one domain influences development in other domains and performance may be stronger in one area than in another. Therefore, environments and experiences should be organized to build upon developmental strengths and maximize connections across domains. The domains of the Early Learning Guidelines have been correlated with New Mexico's K-12 Content Standards, thus demonstrating that learning in the early years builds toward success throughout a child's educational experience and ensures developmentally appropriate entry into kindergarten.

v. Appropriate for all children from birth to kindergarten entry. New Mexico's Early Learning Guidelines: Birth through Kindergarten paired with the Authentic Observation Documentation and Curriculum Planning process, provide a cross-systems approach to building upon the strengths of each child to facilitate growth, development, and learning within the context of the family. The 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. While the domain titles differ to reflect the learning and development of children at various ages, the domains for the age groups can be correlated. The domains of the Early Learning Guidelines have been correlated with New Mexico's K-12 Content Standards, thus demonstrating that learning in the early years builds toward success throughout a child's educational experience.

vi. Implemented in consultation with the educational agency and the State Advisory Council or similar coordinating body. The domains of the Early Learning Guidelines have been correlated with New Mexico's K-12 Content Standards, thus demonstrating that learning in the early years builds toward success throughout a child's educational experience.

b. Describe how the required domains are included in the state/territory's early learning and developmental guidelines. Responses for "other" are optional.

i. Cognition, including language arts and mathematics. Cognition: Educators observe children all the time -- when they are interacting with other children, helping them find materials, spell words, or complete a task, educators are taking in information about what each child is doing. To be an effective observer and to remember what each child did and/or said, educators need to write down their observations. Language Arts: the more exposure to reading experiences such as listening to stories and enjoying rich children's literature, the more their love of reading and comprehension skills will develop. Imitating adult writing through scribbling, forming written marks and shapes, and eventually letters and words, leads to asking how words are spelled and attempting to use writing processes to represent their thoughts and ideas and to communicate with others. It is also understood that the home language may be the first and most developed with regard to reading and writing. New Mexico educators using the Early Learning Guidelines are asked to provide as many resources as possible in children's home languages. Mathematics: numeracy encompasses mathematical thinking as it is applied in meaningful and purposeful experiences in everyday life. New Mexico's educators are trained to approach the Early Learning Guidelines, with the understanding that number and quantity is essential and goes beyond counting. Numeracy can be embedded in many playful activities and is best addressed through hands-on exploration with actual materials.

ii. Social development. The New Mexico Early learning Guidelines support the consideration of each child's unique circumstances, respect for each family, and cooperative engagement between families and educators. These things are critical to children's academic success and later school achievement. Creating partnerships with families is a way to ensure that children are provided with the best learning experiences at home and at school This competence is nurtured in an environment that affirms children as individuals and as participants in their community, helping them to learn to get along with others and demonstrate personal responsibilities.

iii. Emotional development. Within the New Mexico Early Learning Guidelines, both the social and emotional development of children is included in the Self, Family, and Community Domain. With that said, in addition to the information above, the New Mexico Early Learning Guidelines support that culture, heritage, home language, values, and traditions all play very important roles in the child's growing sense of self. As they move on in the preschool and kindergarten years, their understanding moves beyond just self and family and gradually expands to include the people they meet in their school, neighborhood, community, and in the larger world.

iv. Physical development. Young children's future health and well-being are directly related to the development and strengthening of both their large and small muscles. Motor control refers to such characteristics as balance, coordination, purposeful control, and stability of body movements

and functions. Good physical health and motor development allow for full participation in learning experiences. Children with disabilities receive special accommodations that permit them to participate fully at their level. In order to observe and document the indicators in the New Mexico Early Learning Guidelines, it is understood that teachers may need to set up opportunities for children to demonstrate them. Rather than doing so only through on-demand tasks, teachers can provide opportunities that encourage children to use specific skills and capabilities.

v. Approaches toward learning. Approaches to learning include the ways in which a child acquires and understands knowledge and applies that knowledge in meaningful ways. The child's disposition to try new things, to take initiative, and to stay with a task even in the face of challenges are all essential elements of success for students in academic endeavors. In New Mexico, we believe that preschool and kindergarten children are beginning to develop these dispositions as they enter school experiences and learn more about themselves as learners. Each young child's approach to learning is unique. A well-planned learning environment, carefully designed activities, and positive educator/child interactions support children's willingness to explore their environment, try new experiences, and gain persistence in completing projects. Adults must ensure that every child has the opportunity to develop knowledge and skills to a new level of mastery. Some of the indicators in the Early Learning Guidelines can be observed quickly by educators and the child's performance can be documented with a checkmark or a "Yes" or "No" response. Other indicators must be observed multiple times so that an educator can build a case about how the child goes about showing that set of skills or capabilities. The documentation for these indicators will include written descriptions of what the child did and/or said and may be accompanied by a photograph or work sample. The Lead Agency trains educators to think about which indicators are best documented in these different ways.

vi. Describe how other optional domains are included, if any:
   Click or tap here to enter text.

c. 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 most current posted version of the Early Learning Guidelines is dated July 2014. An update and revision of the preschool rubrics and sections have been developed and implemented among New Mexico PreK programs. Additionally, a work group has been designated to continue the work that began in 2017 to review and revise the Infant/Toddler section of the Early Learning Guidelines.

d. If applicable, discuss the state process for the adoption, implementation, and continued improvement of state out-of-school time standards. N/A

e. Provide the Web link to the state/territory's early learning and developmental guidelines and if available, the school-age guidelines. https://www.newmexicokids.org/wp-content/uploads/2015/05/Early_Learning_Guidelines_Birth_thru_Kindergarten_July_2014.pdf

6.4.2 CCDF funds cannot be used to develop or implement an assessment for children that:

- Will be the primary or sole basis to determine a child care provider ineligible to participate in the CCDF

- Will be used as the primary or sole basis to provide a reward or sanction for an individual provider

- Will be used as the primary or sole method for assessing program effectiveness

- Will be used to deny children eligibility to participate in the CCDF (658E(c)(2)(T)(ii)(I); 98.15(a)(2))

Describe how the state/territory's early learning and developmental guidelines are used.

The New Mexico Early Learning Guidelines include a full set of outcomes and indicators that cover all aspects of development and provide reasonable expectations for young children from birth through kindergarten. The New Mexico Essential Indicators are identified in the developmental assessment of children, including portfolio observations as required by New Mexico TQRIS and PreK program. The Early Learning Guidelines also inform New Mexico's Authentic Observation, Documentation & Curriculum Planning Process (NM AODCP). NM AODCP is the careful observation and assessing of children within the context of their daily activities and then using those observations for curriculum planning.

6.4.3 If quality funds are used to develop, maintain, or implement early learning and development guidelines, describe the measurable 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)). Quality funds will not be used to develop, maintain, or implement early learning and development guidelines.

7   Support Continuous Quality Improvement

Lead Agencies are required to 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 CCDF Plan, the ACF 118, states and territories will describe the types of activities supported by quality investments over the 3-year period (658G(b); 98.16(j)).

2. In the annual expenditure report, the ACF-696, ACF will collect data on how much CCDF funding is spent on quality activities. 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 Quality Progress Report, the ACF 218, that will include a description of activities 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 (Addressed in Section 6)

- Improving on the development or implementation of early learning and developmental

guidelines (Addressed in Section 6)

- Developing, implementing, or enhancing a tiered quality rating and improvement system or other systems of quality improvement for child care providers and services

- Improving the supply and quality of child care programs and services for infants and toddlers

- Establishing or expanding a statewide system of child care resource and referral services

- Supporting compliance with state/territory requirements for licensing, inspection, monitoring, training, and health and safety (as described in section 5)

- Evaluating the quality of child care programs in the state/territory, including evaluating how programs positively impact children

- Supporting providers in the voluntary pursuit of accreditation

- Supporting the development or adoption of high-quality program standards related to health, mental health, nutrition, physical activity, and physical development

- Performing other activities to improve the quality of child care services, as long as outcome measures relating to improved provider preparedness, child safety, child well-being, or kindergarten entry are possible

Throughout this Plan, states and territories will describe the types of quality improvement activities where CCDF investments are being made, including but not limited to, quality set-aside funds, and will describe the measurable indicators of progress used to evaluate state/territory progress in improving the quality of child care services for each expenditure (98.53(f)). These activities can benefit infants and toddlers through school-age populations, and all categories of care. It is important that while Lead Agencies have the flexibility to define "high quality" and develop strategies and standards to support their definition, Lead Agencies should consider how that definition and those strategies for different provider types reflect and acknowledge their unique differences and how quality varies in different settings, including family child care and small care settings as well as child care centers.

This section covers the quality activities needs assessment, quality improvement activities, and indicators of progress for each of the activities undertaken in the state or territory.

7.1 Quality Activities Needs Assessment for Child Care Services

7.1.1 Lead Agencies must invest in quality activities based on an assessment of the state/territory's needs to carry out those activities. Lead Agencies have the flexibility to design an assessment of their quality activities that best meet their needs, including how often they do the assessment. Describe your state/territory assessment process, including the frequency of assessment (658G(a)(1); 98.53(a)). The Lead Agency is in the process of reviewing the FOCUS (New Mexico's Tiered Quality Rating and Improvement System) criteria to identify any needed updates and revisions. The review process will include key representation from internal ECECD staff and external stakeholders to develop recommendations for updates. Following the development of recommendations, ECECD will hold a series of community meetings to share the recommendations with child care providers and receive input for consideration and further revisions as needed. As a new agency, ECECD will also develop a formal process for the routine assessment of FOCUS. The current review and revisions are expected to be completed by early spring 2022. Following the updates, trainings will occur to support a statewide rollout.

7.1.2 Describe the findings of the assessment and if any overarching goals for quality improvement were identified. If applicable, include a direct URL/website link for any available evaluation or research related to the findings. The planned review process for FOCUS will begin in May 2021.

7.2 Use of Quality Funds

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

Quality Improvement Activity	Type of funds used for this activity. Check all that apply.	Other funds: describe	Related Section
a. Supporting the training and professional development of the child care workforce as discussed in 6.2.	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	6.3
b. Developing, maintaining, or implementing early learning and developmental guidelines.	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	6.4
c. Developing, implementing, or enhancing a tiered quality rating and improvement system.	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	7.3
d. Improving the supply and quality of child care	☒ i. CCDF funds	*Click or tap here to enter text.*	7.4

Quality Improvement Activity	Type of funds used for this activity. Check all that apply.	Other funds: describe	Related Section
services for infants and toddlers.	☒ ii. State general funds		
e. Establishing or expanding a statewide system of CCR&R services, as discussed in 1.7.	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	7.5
f. Facilitating Compliance with State Standards	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	7.6
g. Evaluating and assessing the quality and effectiveness of child care services within the state/territory.	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	7.7
h. Accreditation Support	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	7.8
i. Supporting state/territory or local efforts to develop high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development.	☒ i. CCDF funds ☒ ii. State general funds	*Click or tap here to enter text.*	7.9
j. Other activities determined by the	☐ i. CCDF funds	*Click or tap here to enter text.*	7.10

Quality Improvement Activity	Type of funds used for this activity. Check all that apply.	Other funds: describe	Related Section
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.	☐ ii. State general funds		

7.3 Quality Rating and Improvement System (QRIS) or Another System of Quality Improvement

Lead Agencies may respond in this section based on other systems of quality improvement, even if not called a QRIS, as long as the other quality improvement system contains the elements of a QRIS. QRIS refers to a systematic framework for evaluating, improving, and communicating the level of quality in early childhood programs and contains five key elements:

1. Program standards

2. Supports to programs to improve quality

3. Financial incentives and supports

4. Quality assurance and monitoring

5. Outreach and consumer education

7.3.1 Does your state/territory have a quality rating and improvement system or another system of quality improvement?

☐ a. No, the state/territory has no plans for QRIS development. If no, skip to 7.4.1.

☐ b. No, but the state/territory is in the QRIS development phase. If no, skip to 7.4.1.

☒ c. Yes, the state/territory has a QRIS operating statewide or territory-wide. Describe how the QRIS is administered (e.g., statewide or locally or through CCR&R entities) and any partners, and provide a link, if available. FOCUS On Young Children's Learning is New Mexico's third generation TQRIS. The FOCUS program promotes intentional use of experiences, interactions, and curriculum to support child development and learning using the New Mexico Early Learning Guidelines. The FOCUS program is administered and managed by the Lead Agency's Division of Policy, Research, and Quality Initiatives. Training and Consultation services are provided for programs participating in FOCUS and are contracted with UNM Early Childhood Services Centers. These centers are stationed throughout New Mexico in 5 regional hubs. Verifications of the Tiered Quality Rating and Improvement Criteria are managed by UNM Early Childhood Service Center Staff. Fidelity and accountability is ensured by joint communication with the Verification Team and review of the process by both

> UNM and ECECD leadership. Since August of 2019 they have conducted 161 Verifications. The required criteria is documented in The New Mexico FOCUS: Essential Elements of Quality and is used to determine a program's STAR Level (the level of quality that is indicated on the child care license). Successfully completing the criteria at FOCUS Levels 3, 4, and 5 correspond to the 3, 4, or 5 Stars on a program's license. Together, the New Mexico Early Learning Guidelines: Birth through Kindergarten and the FOCUS: Essential Elements of Quality provide Common Early Learning Standards, standardized criteria for a common Authentic Observation Documentation Curriculum Planning Process, Common Early Learning Program Standards, and a standardized process for Continuous Quality Improvement. Using a program improvement and quality rating system, early learning programs will increase their ability to focus on children's learning, improve their practice, and as a result of that improvement in practice, improve each child's kindergarten readiness. The criteria for establishing the STAR level is based on FOCUS: New Mexico's Essential Elements of Quality for Early Learning programs as follows: Family Practices & Engagement; Inclusive Practices; Culture & Language; Promoting Positive Social Relationships; Professional Qualifications; Intentional Teaching & Early Intervention Practices; and Intentional Leadership: Continuous Quality Improvement (CQI) https://www.newmexicokids.org/parents-and-families-3/what-is-quality/

☐ d. 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. *Click or tap here to enter text.*

☐ e. Yes, the state/territory has another system of quality improvement. Describe the other system of quality improvement and provide a link, if available. *Click or tap here to enter text.*

7.3.2 Indicate how providers participate in the state or territory's QRIS or another system of quality improvement.

a. Are providers required to participate in the QRIS or another system of quality improvement? Check all that apply if response differs for different categories of care.

☒ i. Participation is voluntary.

☐ ii. Participation is partially mandatory. For example, participation is mandatory for providers serving children receiving a subsidy, participation is mandatory for all licensed providers or participation is mandatory for programs serving children birth to age 5 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). *Click or tap here to enter text.*

☐ iii. 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 or another system of quality improvement? Check all that apply.

☒ i. Licensed child care centers

☒ ii. Licensed family child care homes

☐ iii. License-exempt providers

☒ iv. Early Head Start programs

☒ v. Head Start programs

☒   vi.   State Prekindergarten or preschool programs

☒   vii.   Local district-supported Prekindergarten programs

☒   viii. Programs serving infants and toddlers

☒   ix.   Programs serving school-age children

☒   x.   Faith-based settings

☒   xi.   Tribally operated programs

☐   xiv. Other. Describe: Click or tap here to enter text.

c.   Describe how the Lead Agency's QRIS, or other system for improving quality, considers how quality may look different in the different types of provider settings which participate in the QRIS or other system of quality improvement. For instance, does the system of quality improvement consider what quality looks like in a family child care home with mixed-age groups vs. child care centers with separate age groups?   Or are standards related to quality environments flexible enough to define quality in home-based environments, as well as child care center environments? The Lead Agency utilizes the same framework for FOCUS Tiered Quality Rating and Improvement but has modified the requirements for homes and out-of-school time providers regarding ratios and some expectations for lesson planning and the collection of observations and documentation. The requirement for the creation of a Continuous Quality Improvement Plan is also autonomous to providers' individual culture and needs.

7.3.3   Identify how the state or territory supports and assesses 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 or another system of quality improvement. 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).

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

☐ No

☒ Yes. If yes, check the type of alignment, if any, between the state/territory's quality standards and other standards. Check all that apply.

☒ a. 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).

☐ b. 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).

☒ c. 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).

☐ d. Programs that meet all or part of state/territory school-age quality standards.

☐ e. Other. Describe: Click or tap here to enter text.

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

☐ No

☒ Yes. If yes, check any links between the state/territory's quality standards and licensing requirements.

☒   a.   Requires that a provider meet basic licensing requirements to qualify for the base level of the QRIS.

☐   b.   Embeds licensing into the QRIS.

☒   c.   State/territory license is a "rated" license.

☐   d.   Other. Describe: *Click or tap here to enter text.*

7.3.5   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 or another system of quality improvement.

☐ No

☒ Yes. If yes, check all that apply.

a.   If yes, indicate in the table below which categories of care receive this support.

Financial incentive or other supports	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home (care in the child's own home)
i. One-time grants, awards, or bonuses	☐	☐	☐	☐	☐
ii. Ongoing or periodic quality stipends	☐	☐	☐	☐	☐
iii. Higher subsidy payments	☒	☐	☒	☐	☐
iv. Training or technical assistance related to QRIS	☒	☐	☒	☐	☐
v. Coaching/mentoring	☒	☐	☒	☐	☐
vi. Scholarships, bonuses, or increased compensation for degrees/certificates	☒	☐	☒	☐	☐
vii. Materials and supplies	☐	☐	☐	☐	☐
viii. Priority access for other grants or programs	☐	☐	☐	☐	☐
ix. Tax credits for providers	☐	☐	☐	☐	☐

x.	Tax credits for parents	☐	☐	☐	☐	☐
xi.	Payment of fees (e.g. licensing, accreditation)	☐	☐	☐	☐	☐

b. Other: Participation in New Mexico FOCUS Quality Planning Time Grants

7.3.6 Describe the measurable indicators of progress relevant to subsection 7.3 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 collaboration with the University of New Mexico (UNM) Early Childhood Services Center, the Lead Agency uses the verification process to ensure programs are functioning at a specific STAR Level according to the Established FOCUS Criteria. Currently, the verification process is conducted by UNM ECSC personnel and is based on observations, interviews and review of documentation and practices as they relate to the criteria. ECECD is accountable for providing an outcomes report with measurable progress related to the quality of programs participating in child care assistance. The outcomes measures are established by ECECD in collaboration with the New Mexico Legislative Finance Committee and the New Mexico Department of Finance and Administration. Each year, the Legislative Finance Committee provides a report card indicating how the agency as a whole is performing. The following areas were measured: Children receiving subsidy in high quality programs: SFY19 Target 53%, Actual 72.5%; Licensed child care providers participating in high quality programs: SFY19 Target 35%, Actual 43.3%; Children receiving state childcare subsidy, excluding child protective services childcare, that have one or more Protective Services substantiated abuse or neglect referrals: SFY19 Target 1.3% or lower, Actual 1.3% (FY19 Legislative Performance Report Card).

7.4 Improving the Supply and Quality of Child Care Programs and Services for Infants and Toddlers

Lead Agencies are required to spend 3 percent of their total CCDF expenditures on activities to improve the supply and quality of their infant and toddler care. This is in addition to the general quality set-aside requirement.

Lead Agencies are encouraged to use the required needs assessment to systematically review and improve the overall quality of care that infants and toddlers receive, the systems in place or needed to support and enhance the quality of infant and toddler providers, the capacity of the infant and toddler workforce to meet the unique needs of very young children, and the methods in place to increase the proportion of infants and toddlers in higher quality care, including any partnerships or coordination with Early Head Start and IDEA Part C programs.

7.4.1 Identify and describe the activities that 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 and check which of the activities are available to each provider type.

	Activities available to improve the supply and quality of infant and toddler care.	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
☒	a. 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: ECECD contracts with the University of New Mexico Early Childhood Services Center for the provision of training, consultation, and supports to child care providers throughout the state. This includes five regional training hubs which offer training opportunities, outreach, and networking based on the needs of the local region. Toy Lending Libraries are also established in each region to offer child care providers learning materials to support services to children. Resources are also tailored to provider needs. Consultants located in each region provide feedback to ECECD to inform strategies to address gaps in services to improve access and quality among all providers, including those serving infants and toddlers.	☒	☒	☒	☒	☐
☒	b. Establishing or expanding the operation of community-based, neighborhood-based, or provider networks comprised of home-based providers, or small centers focused on expanding the supply of infant and toddler care. Describe: Community-based and provider networks have formed organically in New Mexico. While ECECD encourages the establishment of provider networks, the Department does not formally oversee these efforts. Consultants assigned to programs will often facilitate networking opportunities for providers who are requesting collaboration opportunities in their region.	☐	☐	☐	☐	☐
☒	c. Providing training and professional development to enhance child care providers' ability to provide developmentally appropriate services for infants and toddlers. Describe: ECECD contracts with the University of New Mexico Early Childhood Services Center for the provision of training, consultation, and supports to child care providers throughout	☒	☒	☒	☒	☒

	Activities available to improve the supply and quality of infant and toddler care.	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
	the state. This includes five regional training hubs which offer training opportunities, outreach, and networking based on the needs of the local region. Available trainings cover a range of early childhood topics, including developmentally appropriate practice and considerations for infant and toddler care. Consultation services are driven by the unique needs of providers as well. In addition, ECECD has offered free Quorum eLearning licenses to early childhood professionals. Quorum courses are focused on early childhood services and do have some focus on infant/toddler care. Most trainings offered in the state are cross-walked with the competencies for Infant Mental Health Endorsement.					
☒	d. 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: ECECD contracts with the University of New Mexico Early Childhood Services Center for the provision of training, consultation, and supports to child care providers throughout the state. This includes five regional training hubs which offer training opportunities, outreach, and networking based on the needs of the local region. Consultants have a range of expertise, including working with infants/toddlers and supporting classrooms with specific needs. In addition to consultation, available trainings focus on a variety of early childhood topics, including developmentally appropriate practice and considerations for infant and toddler care. In addition, ECECD has offered free Quorum eLearning licenses to early childhood professionals. Quorum courses are focused on early childhood services and do have some focus on infant/toddler care. Most trainings offered in the state are cross-walked with the competencies for Infant Mental Health Endorsement.	☒	☒	☒	☒	☒
☒	e. 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: Consultants with UNM ECSC serve as the liaison between Child Care Programs and IDEA Part C Early Intervention, IDEA 619 Preschool Program, Head Start, Early Head Start and Home Visiting Programs. Consultants support child care providers, as needed, to connect with local Part C/619 programs and other providers of infant/toddler services. Child care providers are encouraged to collaborate with early intervention providers to coordinate services to further support families and the children	☒	☒	☒	☐	☒

	Activities available to improve the supply and quality of infant and toddler care.	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
	in their care. The ECECD oversees child care licensing, IDEA Part C Early Intervention, Home Visiting, Head Start Collaboration Office, NM PreK, and other services that support families, children, and the early childhood workforce. This consolidation of services into one department will enhance opportunities for further alignment, collaboration, and quality of services.					
☒	f. Developing infant and toddler components within the state/territory's QRIS, including classroom inventories and assessments. Describe: The FOCUS criteria and all stated components cover ages from 6 weeks to 5 years for the Center Based and Family Child Care Based programs and are integrated in a continuum process.	☒	☒	☒	☐	☐
☒	g. Developing infant and toddler components within the state/territory's child care licensing regulations. Describe: Licensing components specific to the care of infants and toddlers are included in 8.16.2.24C and D NMAC; 8.16.2.34C and D NMAC; and 8.17.2.25F NMAC.	☒	☐	☒	☒	☐
☒	h. Developing infant and toddler components within the early learning and developmental guidelines. Describe: The New Mexico Early Learning Guidelines Birth to Kindergarten were developed by professionals from a variety of programs and settings. The Early Learning Guidelines 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 develop at the same rate or pace; rather, each child develops in their own unique way. Some children have strengths in areas that go beyond their chronological age. Most develop appropriately for their ages. There are also children who may not reach age-appropriate milestones in some areas and need special interventions. Formatting the New Mexico Early Learning Guidelines in a continuum helps educators - and families - see an individualized picture of each child's capabilities. The Guidelines 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. New Mexico is currently in the process of reviewing the current Early Learning Guidelines and completing an analysis and recommendations for updates specific to the infant and toddler components.	☒	☒	☒	☒	☒

	Activities available to improve the supply and quality of infant and toddler care.	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
☒	i. 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: A Guide for choosing child care has been developed for families to assist in the search for quality programs that may meet their needs. https://cyfd.org/docs/parentsguide_childcare_0213lr.pdf	☐	☐	☐	☐	☐
☐	j. 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. *Click or tap here to enter text.*	☐	☐	☐	☐	☐
☐	k. Coordinating with child care health consultants. Describe: *Click or tap here to enter text.*	☐	☐	☐	☐	☐
☒	l. Coordinating with mental health consultants. Describe: ECECD collaborates with the New Mexico Association for Infant Mental Health to ensure child care providers have access to information, training, and consultation. Training development for early childhood providers includes consideration of infant mental health competencies. When child care providers would benefit from support from a mental health consultant or an individual who specializes in infant and toddler care, they can reach out to ECECD to be connected to a qualified consultant. New Mexico recently completed the development of a Statewide Infant Early Childhood Mental Health Consultation Report and Three-Year Plan, officially launched in May 2021.	☐	☐	☐	☐	☐
☒	m. Establishing systems to collect real time data on available (vacant) slots in ECE settings, by age of child, quality level, and location of program. Describe: ECECD has no system in place to collect real time data on available slots in ECE settings, by age of child, quality level, and location of program.	☐	☐	☐	☐	☐
☐	n. Other. Describe:	☐	☐	☐	☐	☐

Activities available to improve the supply and quality of infant and toddler care.	Licensed center-based	License exempt center-based	Licensed family child care home	License-exempt family child care home	In-home care (care in the child's own home)
Click or tap here to enter text.					

7.4.2   Describe the measurable indicators of progress relevant to subsection 7.4 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. New Mexico's Tiered Quality Rating and Improvement System (FOCUS) entails specific quality criteria. A crosswalk was conducted between the FOCUS criteria and the standards of various accrediting entities recognized by the state. Improving outcomes for children and families remains a priority for the state, as evidenced by the creation of the Early Childhood Education and Care Department (July 1, 2020). Early childhood investments continue to be a key legislative strategy to improving long-term outcomes for the state; research from the Legislative Finance Committee continues to measure these efforts to demonstrate improvement of outcomes for children and efficacy of services provided. The New Mexico Legislative Finance Committee Performance Report Card (First Quarter, Fiscal Year 2021) measured the following: Percent of licensed child care providers participating in high-quality programs (FY21 Target: 43%); Percent of children receiving subsidy in high quality programs (FY21 Target: 70%); Percent of children receiving child care assistance with substantiated abuse or neglect referrals during the child care assistance participating period (0.7%, Target: 1.3%); Percent of children in NM child care assistance who have attended 4- or 5-Star programs for eight months or longer showing measurable progress on the school readiness fall preschool assessment tool (FY21 Target: 85%). The Lead Agency is a leading participant in the New Mexico Pritzker Children's Initiative. The long-term vision of this effort is to ensure that each and every child, prenatal to age 3, and their families in New Mexico have equitable access to quality early learning opportunities to support their development, health, and well-being, helping support success in kindergarten and beyond. This vision considers the broad needs of the prenatal to three population, including health and education as well as auxiliary efforts such as paid family leave and census counting. Six strategic goals have been developed. The Lead Agency has incorporated these goals in its strategic plan. The goals and numeric targets are as follows: Goal One: increase the impact of an aligned system approach to prenatal to three services;   Goal Two: build and maintain a system that remediates racial, economic, linguistic and other inequities;   Goal Three: increase access by women and families to programs that support safe and healthy births and ongoing healthy maternal and child development;   Goal Three, Target 1 - 100% of Medicaid births will have access to continuous Medicaid coverage to 12 months postpartum (population impacted 9,603); Goal Three, Target 2 - Women will have access to prenatal and postpartum care navigation and service coordination (population impacted 4,129);   Goal Three, Target 3 - Women will have increased maternal depression screening interventions and referrals to services (population impacted 1,950) Goal Four: increase number of children and families served in home visiting programs; Goal Four, Target 1 - Additional babies and toddlers participate in home visiting through evidence- and research-based programs (population impacted 7,870); Goal Four, Target 2 - Additional babies participate in initial three post-partum home visits (population impacted 15,400); Goal Five: increase access to high-quality, affordable infant and toddler care for low-income families; Goal Five, Target 1, Additional infants and toddlers will be served in high quality child care (population impacted 3,707); Goal Five, Target 2, Additional infants and toddlers will be served by child care that has increased their quality by one star level (population impacted 3,734); Goal Six: increase the qualifications and capacity of the early childhood workforce serving infants and toddlers;   Goal Six, Target 1, An additional 834 home visitors will be qualified to serve children by 2025; Goal Six, Target 2, An additional 2,667 early childhood educators will go up a degree level and then will be able to serve more children ages 0 - 3 years old in higher quality care (population impacted 13,400);   Goal Six, Target 3, An additional 425 early childhood providers will be endorsed in infant mental health and will be able to impact additional children ages 0-3 years old (population impacted 6,994).

7.5   Child Care Resource and Referral

A Lead Agency may expend funds to establish, expand, or maintain a statewide system of child care resource and referral services (98.53(a)(5)). It can be coordinated, to the extent determined appropriate by the Lead Agency, by a statewide public or private non-profit, community-based,

or regionally based lead child care resource and referral organization (658E(c)(3)(B)(iii)). This effort may include activities done by local or regional child care and resource referral agencies, as discussed in section 1.7.

7.5.1   What are the services provided by the local or regional child care and resource and referral agencies? The Lead Agency oversees the Child Care Resource and Referral (CCRR) for New Mexico. The CCRR maintains a statewide database of childcare providers that are licensed or registered by ECECD and provides updates on providers who continue to maintain their licensure and Star Level as they progress through the state's TQRIS, known as FOCUS. This database is used to provide referrals to families inquiring about childcare and referrals are provided at no cost to either childcare providers or referral clients. Childcare providers share the information that is included in the database which is in turn used to help connect families to providers who will meet the individual needs of their children. Childcare providers information appears in the database on a voluntary basis.

7.5.2   Describe the measurable indicators of progress relevant to subsection 7.5 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. Early childhood investments continue to be a key legislative strategy to improve long-term outcomes for New Mexico's children. Data from the New Mexico Legislative Finance Committee shows some of those investments are paying off with improved educational outcomes. The SFY19 Early Childhood Accountability Report noted measurable improvement in the majority of the following areas: (1) Children attending a 4- or 5-Star Center: SFY19 48%, SFY18 43%; 4-Year Olds Attending Child Care: SFY19 2,694, SFY18 2,371; (3) Average Monthly Co-Pay as Part of Monthly Income: SFY19 5%, SFY18 5%; and Low Income Child Care Participants Proficient in Reading by Third Grade: SFY19 19%, SFY18 18%.

7.6   Facilitating Compliance with State Standards

7.6.1   What activities does your state/territory fund with CCDF quality funds to facilitate child care providers' compliance with state/territory health and safety requirements? These requirements may be related to inspections, monitoring, training, compliance with health and safety standards, and with state/territory licensing standards as outlined in Section 5. Describe: The Lead Agency collaborates with the University of New Mexico Early Childhood Services Center (UNM ECSC) to offer a health and safety training to meet the state and federal requirement. The training is housed online in the New Mexico Early Learning System. Training and development consultation provided by the UNM ECSC helps early care and education programs continuously improve their quality and meet the New Mexico Child Care Licensing, PreK and FOCUS-TQRIS standards. UNM ECSC is 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 of New Mexico's children and their families.

7.6.2   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?

☒ a. Licensed CCDF providers
☒ b. Licensed non-CCDF providers
☒ c. License-exempt CCDF providers

☐ d. Other. Describe: *Click or tap here to enter text.*

7.6.3   Describe the measurable indicators of progress relevant to subsection 7.6 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. New Mexico's TQRIS (FOCUS on Young Children's Learning) prioritizes Continuous Quality Improvement. The criteria encourages discussions about the approach and process for implementation – from Self-Assessment to developing a Continuous Quality Improvement Plan – that identifies common elements across the New Mexico Early Childhood System. Data from the New Mexico Legislative Finance Committee shows some of those investments are paying off with improved educational outcomes. The SFY19 Early Childhood Accountability Report noted measurable improvement in the following areas: (1) Children attending a 4- or 5-Star Center: SFY19 48%, SFY18 43%; (2) 4-Year Olds Attending Child Care: SFY19 2,694, SFY18 2,371; (3) Average Monthly Co-Pay as Part of Monthly Income: SFY19 5%, SFY18 5%; and (4) Low Income Child Care Participants Proficient in Reading by Third Grade: SFY19 19%, SFY18 18%.

7.7   Evaluating and Assessing the Quality and Effectiveness of Child Care Programs and Services

7.7.1   Does the state/territory measure the quality and effectiveness of child care programs and services in both child care centers and family child care homes?

☐   No

☒   Yes. If yes, describe any tools used to measure child, family, teacher, classroom, or provider improvements, and how the state/territory evaluates how those tools positively impact children. One tool is used to verify the quality of programs and classrooms participating in FOCUS. The state reviews the results of a verification and submits notification to Child Care Licensing when a program has met the quality criteria for Star Levels 3, 4, and 5. After a provider progresses from 2-Star to 3-Star, an annual verification is required to ensure providers continue to meet the criteria for the Star Level for which they are reimbursed.

7.7.2   Describe the measurable indicators of progress relevant to subsection 7.7 that the state/territory will use to evaluate its progress in improving the quality of child care programs and services in child care centers and family child care homes within the state/territory and the data on the extent to which the state or territory has met these measures.
The Lead Agency prepares an outcomes report with measurable progress related to the quality of programs participating in Child Care Assistance. The outcomes measures are established by the Lead Agency in collaboration with the New Mexico Legislative Finance Committee and the New Mexico Department of Finance and Administration. Each year, the Legislative Finance Committee provides a report card indicating how the agency as a whole is performing. The following areas were measured: (1) Children receiving subsidy in high quality programs: FY 19 Target 53%, Actual 72.5%; (2) Licensed child care providers participating in high quality programs. FY19 Target 35%, Actual 43.3%; and (3) Children receiving state childcare subsidy, excluding child protective services childcare, that have one or more Protective Services-substantiated abuse or neglect referrals: FY19 Target 1.3% or lower, Actual 1.3%. (FY19 Legislative Performance Report Card)

7.8   Accreditation Support

7.8.1   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?

☒ a. Yes, the state/territory has supports operating statewide or territory-wide for both child care centers and family child care homes. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers and family child care homes to achieve accreditation. Is accreditation available for programs serving infants, toddlers, preschoolers and school-age children? The Lead Agency has a process in place for child care providers to be recognized with a 5-star licensing status if they have achieved accreditation through an approved national early childhood accreditation entity. ECECD also supports programs toward accreditation through ongoing training, consultation, and coaching services offered. Accreditation is available for programs serving infants, toddlers, preschoolers, and school-aged children.

☐ b. Yes, the state/territory has supports operating statewide or territory-wide for child care centers only. Describe the support efforts for all types of accreditation that the state/territory provides to child care centers. Describe:
Click or tap here to enter text.

☐ c. Yes, the state/territory has supports operating statewide or territory-wide for family child care homes only. Describe the support efforts for all types of accreditation that the state/territory provides to family child care. Describe:
Click or tap here to enter text.

☐ d. Yes, the state/territory has supports operating as a pilot-test or in a few localities but not statewide or territory-wide.

　　☐ i. Focused on child care centers. Describe: *Click or tap here to enter text.*

　　☐ ii. Focused on family child care homes. Describe: *Click or tap here to enter text.*

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

　　☐ i. Focused on child care centers. Describe: *Click or tap here to enter text.*

　　☐ ii. Focused on family child care homes. Describe: *Click or tap here to enter text.*

☐ f. No, the state/territory has no plans for supporting accreditation.

7.8.2   Describe the measurable indicators of progress relevant to subsection 7.8 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. New Mexico's Tiered, Quality Rating and Improvement System (FOCUS) entails specific quality criteria. A crosswalk was conducted between the FOCUS criteria and the standards of various accrediting entities recognized by the state. Improving outcomes for children and families remains a priority for the state, as evidenced by the creation of the new cabinet level Early Childhood Education and Care Department (July 1, 2020). Early childhood investments continue to be a key legislative strategy to improving long-term outcomes for the state and research from the Legislative Finance Committee continues to measure these efforts to demonstrate improvement of outcomes for children and efficacy of services provided. The Legislative Finance Committee Performance Report Card (First Quarter, Fiscal Year 2021) measured the following: (1) Percent of licensed child care providers participating in high-quality programs (FY21 target: 43%); (2) Percent of children receiving subsidy in high quality programs (FY21 target: 70%); (3) Percent of children receiving child care assistance with substantiated abuse or neglect referrals during the child care assistance participating period (0.7%, target: 1.3%); and (4) Percent of children in NM child care assistance who have attended 4- or 5-Star programs for eight months or longer showing measurable progress on the school readiness fall preschool assessment tool (FY21 target: 85%).

7.9   Program Standards

7.9.1   Describe how the state/territory supports state/territory or local efforts to develop or adopt high-quality program standards, including standards for:

a.   Infants and toddlers The goal of New Mexico's early learning system is to provide all children with access to high-quality early learning programs and is guided by the FOCUS criteria which supports quality standards for infants, toddlers, and preschoolers. The shared framework articulates expectations for early childhood programs and professionals working across sectors to promote: 1) full participation of each child (i.e., family engagement, inclusive practices, culture and language, social relationships); 2) practices that promote children's growth, development, and learning; and 3) leadership practices. Early childhood programs and professionals will be supported in a variety of ways (knowledge through development, coaching, training, higher education) to implement research-based practices that reflect these expectations and will enhance their skills and knowledge through a continuous quality improvement (CQI) process. Changes in practice among early childhood programs and professionals will promote children's development and enable each child, with the support of their family, to have an equal opportunity for success in school.

b.   Preschoolers The goal of New Mexico's early learning system is to provide all children with access to high-quality early learning programs and is guided by the FOCUS criteria which supports quality standards for infants, toddlers, and preschoolers. The shared framework articulates expectations for early childhood programs and professionals working across sectors to promote: 1) full participation of each child (i.e., family engagement, inclusive practices, culture and language, social relationships); 2) practices that promote children's growth, development, and learning; and 3) leadership practices. Early childhood programs and professionals will be supported in a variety of ways (knowledge through development, coaching, training, higher education) to implement research-based practices that reflect these expectations and will enhance their skills and knowledge through a continuous quality improvement (CQI) process. Changes in practice among early childhood programs and professionals will promote children's development and enable each child, with the support of their family, to have an equal opportunity for success in school.

c.   and/or School-age children. The quality criteria for school age programs is currently in draft form. However, many Out-of-School Time programs have moved through the quality continuum to achieve 3-, 4-, and 5-Star quality ratings. Much of the framework for school age programs is shared with the infant/toddler, and preschool frameworks including: (1) promoting the full participation of each child

(i.e., family engagement, inclusive practices, culture and language, social relationships); (2) practices that promote children's growth, development, and learning; and (3) leadership practices. Out-of-School Time professionals are still supported in the system through development, coaching, training, higher education to implement research-based practices that reflect these expectations and will enhance their skills and knowledge through a continuous quality improvement (CQI) process.

7.9.2   Describe the measurable indicators of progress relevant to subsection 7.9 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 verification process determines the STAR level for each program based on the FOCUS criteria. This process uses an observation and interview approach in conjunction with document review as they align with the FOCUS criteria, and the Verification Tools. Verifications are managed by UNM Early Childhood Services Center staff and are typically completed within 45 business days of program application.

7.10   Other Quality Improvement Activities

7.10.1   List and describe any other activities that the state/territory provides to improve the quality of child care services for infants and toddlers, preschool-aged, and school-aged children, which may include consumer and provider education activities; and also describe the measurable indicators of progress for each activity relevant to this use of funds that the state/territory will use to evaluate its progress in improving provider preparedness, child safety, child well-being, or kindergarten entry, and the data on the extent to which the state or territory has met these measures. Describe: *Click or tap here to enter text.*

8   Ensure Grantee Program Integrity and Accountability

Program integrity and accountability activities are integral to the effective administration of the CCDF program. Lead Agencies are required to describe in their Plan effective internal controls that ensure integrity and accountability while maintaining the continuity of services (98.16(cc)). These accountability measures should address reducing fraud, waste, and abuse, including program violations and administrative errors.

This section includes topics on internal controls to ensure integrity and accountability and processes in place to investigate and recover fraudulent payments and to impose sanctions on clients or providers in response to fraud. Respondents should consider how fiscal controls, program integrity, and accountability apply to:

• Memorandums of understanding (MOUs) within the Lead Agency's various divisions that administer or carry out the various aspects of CCDF

• MOUs, grants, or contracts to other state agencies that administer or carry out various aspects of CCDF

• Grants or contracts to other organizations that administer or carry out various aspects of CCDF, such as professional development and family engagement activities

• Internal processes for conducting child care provider subsidy

8.1 Internal Controls and Accountability Measures to Help Ensure Program Integrity

8.1.1 Lead Agencies must ensure the integrity of the use of funds through sound fiscal management and must ensure that financial practices are in place (98.68 (a)(1)). Describe the processes in place for the Lead Agency to ensure sound fiscal management practices for all expenditures of CCDF funds. Check all that apply:

☒ a. Verifying and processing billing records to ensure timely payments to providers. Describe: Program managers within the Lead Agency receive invoices from providers and vendors. After reviewing the invoice, the program manager will approve the invoice and certify that the services have been performed. Invoices are processed within 30 business days to ensure timely payment to providers.

☒ b. Fiscal oversight of grants and contracts. Describe: Program managers review and approve expenditures associated with grants and contracts. The Lead Agency's Administrative Services Division processes payments after certification of expenditures has been received from program. Monthly reconciliations of each federal award is prepared and provided to program for their review. Budget status reports are also provided to program managers for review. At least weekly, draws are submitted for reimbursement from the grantors through the federal draw systems in place. Federal reports are submitted within 30 days after the quarter end. Additionally, ECECD follows the State of New Mexico's Model Accounting Practices Manual (MAPs). MAPs is updated annually by the State of New Mexico Department of Finance and Administration. Embedded in MAPs are requirements for state agencies to design and implement an effective internal control framework through the State's established statutes and rules. ECECD has implemented requirements of 2.20.5 NMAC -Accounting by Governmental Entities-Responsibility for Accounting Function. ECECD has established a leadership team and hired the CFO to ensure the internal controls exist and functioning properly. Additionally, policies and procedures have been implemented and distributed to all employees of ECECD. ECECD administrative staff, as well as the programmatic staff, have an understanding of the requirements of Uniform Guidance: PART 200—UNIFORM ADMINISTRATIVE REQUIREMENTS, COST PRINCIPLES, AND AUDIT REQUIREMENTS FOR FEDERAL AWARDS. Internal controls have been established to ensure compliance with the requirements of CFR 2 pt. 200 especially: Allowability (allowable costs and activities), Cash Management, Procurement Standards, Subrecipient Monitoring, and Reporting. The New Mexico State Treasurer's Office has an established Treasury-State CMIA agreement which defines the prescribed procedures over disbursing funds to subrecipients. The agreement is applicable to all state agencies within New Mexico. In addition to the State's statutes and rules, the ECECD Administrative Services Division staff have an understanding of Generally Accepted Accounting Principles (GAAP), Government Accounting Standards Board (GASB).

☒ c. Tracking systems to ensure reasonable and allowable costs. Describe: The Lead Agency conducts audits on 100% of child care assistance payments prior to releasing payments. Any payments that should not be paid are pulled and will not be sent to the financial system for payment. The ECECD also receives an annual audit conducted by an Independent Public Accountant. The audit is conducted in accordance with Generally Accepted Accounting Principles and Government Accounting Standards Board. The audit will include a compliance audit of all major federal programs and the auditors will issue a report on internal control compliance required by the Uniform Guidance.

☐ d. Other. Describe: *Click or tap here to enter text.*

8.1.2 Check and describe the processes that the Lead Agency will use to identify risk in their CCDF program (98.68(a)(2)). Check all that apply:

☒ a. Conduct a risk assessment of policies and procedures. Describe:
On an annual basis and as necessary, all policies and procedures are reviewed to identify possible risk in the CCDF program. The Lead Agency has issued an RFP for internal audit services, which will include an audit of the Lead Agency's areas of risk.

☒ b. Establish checks and balances to ensure program integrity. Describe:
The Lead Agency runs system reports that flag errors to identify unintentional or intentional program violations with the following process: Generation of 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. The Lead Agency generates a number of other monthly and weekly reports from which major fluctuations in trends and individual administrative errors can be identified.

☒ c. Use supervisory reviews to ensure accuracy in eligibility determination. Describe:
The Lead Agency Child Care Assistance team conducts regular staff meetings to ensure consistency with current policy regarding eligibility determinations. In addition, the Improper Payment Unit conducts 276 case file reviews for the federal year and off year and performs 12-15 file reviews based on a worker's six- and 12-month employee evaluation to provide child care management valuable data for program integrity, training and consistency throughout the state.

☐ d. Other. Describe: *Click or tap here to enter text.*

8.1.3 States and territories are required to describe effective internal controls that are in place to ensure program integrity and accountability (98.68(a)), including processes to train child care providers and staff of the Lead Agency and other agencies engaged in the administration of CCDF about program requirements and integrity.

a. Check and 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.

☒ i. Issue policy change notices. Describe: The Lead agency informs and trains providers regarding policy changes through list serves, social media platforms, weekly provider calls, stakeholders' meetings, meetings with CCDF staff and Lead Agency weekly communication e-blasts.

☐ ii. Issue policy manual. Describe: *Click or tap here to enter text.*

☒ iii. Provide orientations. The ECECD Child Care Assistance team conducts trainings and orientations to child care providers about program requirements and program integrity as needed.

☒ iv. Provide training. Describe: The ECECD Child Care Assistance team conducts trainings and orientations to child care providers about program requirements and program integrity as needed.

☒ v. Monitor and assess policy implementation on an ongoing basis. Describe:
The Lead Agency Child Care Assistance team conducts 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; 12-15 file reviews are conducted based on a worker's six- and 12-month employee evaluation to provide child care management valuable data for program integrity, training

and consistency throughout the state.

☒   vi.   Meet regularly regarding the implementation of policies. Describe: The ECECD Child Care Assistance team meets with providers to ensure consistency with current policy and training on any new policy changes.

☐   vii.   Other. Describe: *Click or tap here to enter text.*

b.   Check and describe how the Lead Agency ensures that all its staff members and any staff members in other agencies who administer the CCDF program through MOUs, grants and contracts are informed and trained regarding program requirements and integrity (98.68 (a)(3)). Check all that apply:

☒   i.   Issue policy change notices. Describe: The ECECD Policy Research and Quality Initiatives team conducted several regional and statewide sessions on the state's Child Care and Development Fund (CCDF) Plan for 2022-2024. These sessions were both in English and Spanish. During these sessions, ECECD staff answered the questions that the providers and their staff presented.

☒   ii.   Train on policy change notices. Describe: The ECECD Child Care Assistance team conducts trainings to staff members to ensure they are informed and trained regarding any policy changes, program requirements, and program integrity.

☒   iii.   Issue policy manuals. Describe: After implementation of policy changes, the policy manual is issued to the Child Care Assistance team. The policy manual is revised as needed to reflect any updates. The ECECD Child Care Assistance team conducts orientations, onsite training, and online training to staff members to ensure they are informed and trained regarding program requirements and program integrity.

☒   iv.   Train on policy manual. Describe: ECECD Child Care Assistance team conducts trainings to staff members to ensure they are informed and trained regarding the policy manual, program requirements, and program integrity.

☒   v.   Monitor and assess policy implementation on an ongoing basis. Describe: The ECECD Child Care Assistance team conducts 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 performs 12-15 file reviews based on a worker's six- and 12-month employee evaluation to provide child care management valuable data for program integrity, training, and consistency throughout the state.

☒   vi.   Meet regularly regarding the implementation of policies. Describe: The ECECD Child Care Assistance team conducts regular staff meetings to ensure consistency with current policy and training on any new policy changes.

☐   vii.   Other. Describe: *Click or tap here to enter text.*

8.1.4   Describe the processes in place to regularly evaluate Lead Agency internal control activities (98.68 (a)(4)). Describe: The Lead Agency is audited annually by an Independent Public Accountant. The audit is conducted in accordance with Generally Accepted Accounting Principles and Government Accounting Standards Board. The audit will include a compliance audit of all major federal programs and the auditors will issue a report on internal control compliance required by the Uniform Guidance.

8.1.5   Lead Agencies conduct a wide variety of activities to fight fraud and ensure program integrity. Lead Agencies are required to have processes in place to identify fraud and other program violations to ensure program integrity. Program violations can include both intentional and unintentional client and/or provider violations, as defined by the Lead Agency. These violations and errors, identified through the error-rate review process, may result in payment or nonpayment (administrative) errors and may or may not be the result of fraud, based on the Lead Agency definition. Check and describe any activities that the Lead Agency conducts to ensure program integrity.

a.   Check and describe all activities that the Lead Agency conducts, including the results of these activities, to **identify and prevent fraud or intentional program violations**. Include in the description how each activity assists in the identification and prevention of fraud and intentional program violations.

☒	i.	Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)). Describe the activities and the results of these activities: A cross-check between TANF data and the Lead Agency's EPICS data system is performed to identify matching records.
☒	ii.	Run system reports that flag errors (include types). Describe the activities and the results of these activities: ECECD runs system reports that identify unintentional or intentional program violations by audits on 100% of the child care assistance payments prior to releasing any payments. The following are methods used in conducting the payment audits: (1) The generation of exception reports which identify all duplicate payments and all payments over a set dollar amount. The exception report identifies any duplicate payments for the same child, same provider and same service month. The report compares any payments paid out in the past with the current payment requests based on service data and child. (2) EPICS only allows for one payment per service month per provider and child. This ensures that a particular payment can not exceed the highest differential payment. (3) Any payments that are questionable through the audit process using the exception report are reviewed with the child care program supervisors, and if verified, supervisor approval is granted. If a payment is not approved the payment will be pulled for non-payment. (4) Excel tools are also used to cross check and validate that the calculated payments are correct and accurate. (5) A number of other monthly and weekly reports are generated from which major fluctuations in trends and individual administrative errors can be identified.
☒	iii.	Review enrollment documents and attendance or billing records. Describe the activities and the results of these activities: The ECECD audit team compares data reports to identify trends through the audit process when any errors are flagged through system reports and further investigation is required. Payments that the audit process cannot verify or flags for errors are pulled for non-payment. The Lead Agency's EPICS system has incorporated numerous updates within the system that

		prevent eligibility workers from making administrative errors.
☒	iv.	Conduct supervisory staff reviews or quality assurance reviews.
		Describe the activities and the results of these activities: The Lead Agency's EPICS system has incorporated numerous edits within the system that prohibit eligibility workers from making administrative errors. The EPICS system determines eligibility based on the data that the eligibility worker enters, which information the EPICS system uses to determine the applicant's eligibility. Various systems checks have been incorporated into EPICS to ensure accurate eligibility determination.
☒	v.	Audit provider records.
		Describe the activities and the results of these activities: ECECD has implemented several measures to ensure program integrity. The Lead Agency's EPICS system has incorporated numerous updates within the system that prevent eligibility workers from making administrative errors. The EPICS system will determine eligibility based on the data is entered by the worker. ECECD has invested substantial resources into making "front end" system 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.
☒	vi.	Train staff on policy and/or audits.
		Describe the activities and the results of these activities: The ECECD Child Care Assistance team conducts trainings to staff members to ensure they are informed and trained regarding any policy changes, program requirements and integrity. The Quality Assurance teams conducts biweekly trainings to staff members to ensure they are informed and trained regarding any policy changes, program and integrity requirements, and procedure and database changes. In addition, representatives from both the Quality Assurance team and Child Care Assistance team attend other agency trainings to ensure collaboration and communication.
☐	vii.	Other.
		Describe the activities and the results of these activities: *Click or tap here to enter text.*

b. Check and describe all activities the Lead Agency conducts, including the results of these activities, to **identify unintentional program violations**. Include in the description how each activity assists in the identification and prevention of unintentional program violations.

☒	i.	Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)).
		Describe the activities and the results of these activities: A cross-check between TANF data and the Lead Agency's EPICS data system is performed to identify matching records.
☐	ii.	Run system reports that flag errors (include types).
		Describe the activities and the results of these activities: ECECD runs system reports that identify unintentional or intentional program violations by audits on 100% of the child care assistance payments prior to releasing any payments. The following are methods used in conducting the payment audits: (1) The generation of exception reports which identify all duplicate payments and all payments over a set dollar amount. The exception report identifies any duplicate payments for the same child, same provider, and same

	service month. The report compares any payments paid in the past with the current payment requests based on service data and child. (2) EPICS only allows for one payment per service month per provider and child. This ensures that a particular payment cannot exceed the highest differential payment. (3) Any payments that are questionable through the audit process using the exception report are reviewed with the child care program supervisors, and if verified, supervisor approval is granted. If a payment is not approved the payment will be pulled for non-payment. (4) Excel tools are also used to cross check and validate that the calculated payments are correct and accurate. (5) ECECD generates a number of other monthly and weekly reports from which major fluctuations in trends and individual administrative errors can be identified.
☒	iii. Review enrollment documents and attendance or billing records. Describe the activities and the results of these activities: The ECECD audit team compares data reports to identify trends through the audit process when any errors are flagged through system reports and further investigation is required. Payments that the audit process cannot verify or flags with errors are pulled for non-payment. The Lead Agency's EPICS system has incorporated numerous edits within the system that prohibit eligibility workers from making administrative errors.
☒	iv. Conduct supervisory staff reviews or quality assurance reviews. Describe the activities and the results of these activities: The Lead Agency's EPICS system has incorporated numerous edits within the system that prohibit eligibility workers from making administrative errors. The EPICS system determines eligibility based on the data that the eligibility worker enters, which information the EPICS system uses to determine the applicant's eligibility. Various systems checks have been incorporated into EPICS so that eligibility is accurately determined.
☒	v. Audit provider records. Describe the activities and the results of these activities: The Lead Agency's EPICS system has incorporated numerous edits within the system that prohibit eligibility workers from making administrative errors. The EPICS system determines eligibility based on the data that the eligibility worker enters, which information the EPICS system uses to determine the applicant's eligibility. Various systems checks have been incorporated into EPICS so that eligibility is accurately determined. ECECD has invested substantial resources into making "front end" system improvements toward the prevention of fraud and administrative errors. Some of the investments are through Improper Payment Unit and Child Care Supervisors conducting additional staff reviews on case files.
☒	vi. Train staff on policy and/or audits. Describe the activities and the results of these activities: The ECECD Child Care Assistance Team conducts trainings to staff members to ensure they are informed and trained regarding any policy changes, program requirements and program integrity. The Quality Assurance Team conducts biweekly trainings to staff members to ensure they are informed and trained regarding any policy changes, program and program integrity requirements, procedures, and database changes. In addition, representatives from both the Quality Assurance and Child Care Assistance Teams attend other agency trainings to ensure collaboration and communication.
☐	vii. Other. Describe the activities and the results of these activities: *Click or tap here to enter text.*

c. Check and describe all activities that the Lead Agency conducts, including the results of these activities, to **identify and prevent agency errors**. Include in the description how each activity assists in the identification and prevention of agency errors.

☒	i. Share/match data from other programs (e.g., TANF program, Child and Adult Care Food Program, Food and Nutrition Service (FNS), Medicaid) or other databases (e.g., State Directory of New Hires, Social Security Administration, Public Assistance Reporting Information System (PARIS)). Describe the activities and the results of these activities: A cross-check of TANF data utilizing interfaced systems is conducted to identify matching records.
☒	ii. Run system reports that flag errors (include types). Describe the activities and the results of these activities: ECECD runs system reports that identify unintentional or intentional program violations by audits on 100 % of the child care assistance payments prior to releasing any payments. The following are methods used in conducting the payment audits: (1) The generation of exception reports which identify all duplicate payments and all payments over a set dollar amount. The exception report identifies any duplicate payments for the same child, same provider, and same service month. The report compares any payments paid in the past with the current payment requests based on service data and child. (2) EPICS only allows for one payment per service month per provider and child. This ensures that a particular payment cannot exceed the highest differential payment. (3) Any payments that are questionable through the audit process using the exception report are reviewed with the child care program supervisors, and if verified, supervisor approval is granted. If a payment is not approved the payment will be pulled for non-payment. (4) Excel tools are also used to cross check and validate that the calculated payments are correct and accurate. (5) ECECD generates a number of other monthly and weekly reports from which major fluctuations in trends can be identified in addition to individual administrative errors.
☒	iii. Review enrollment documents and attendance or billing records. Describe the activities and the results of these activities: The Lead Agency audit team reviews enrollment documents and attendance or billing records and compares data reports to identify trends as part of the ongoing audit process. Any payments that are not verified through the audit process and the flagging of errors are pulled for non-payment. The Lead Agency's EPICS system has incorporated numerous edits within the system that prohibit eligibility workers from making administrative errors.
☒	iv. Conduct supervisory staff reviews or quality assurance reviews. Describe the activities and the results of these activities: The Lead Agency Child Care Assistance team conducts regular supervisory staff reviews or quality assurance reviews. In addition, the Improper Payment Unit conducts 276 case file reviews for the federal year and off year and performs 12-15 file reviews based on a worker's six- and 12-month employee evaluation to provide child care management valuable data for program integrity, training and consistency throughout the state.
☒	v. Audit provider records. Describe the activities and the results of these activities: The Lead Agency audit team reviews provider records and compares data reports to identify trends as part of the on-going audit process.
☒	vi. Train staff on policy and/or audits. Describe the activities and the results of these activities: The Lead Agency Child Care Assistance Team conducts trainings to staff members to ensure they are informed and trained regarding any policy changes, program requirements and program integrity. The Quality Assurance Team conducts biweekly trainings to staff members to ensure they are informed and trained regarding any policy changes, program and program integrity requirements, procedures, and database changes. In addition, representatives from both

	the Quality Assurance and Child Care Assistance Teams attend other agency trainings to ensure collaboration and communication.
☐	vii. Other. Describe the activities and the results of these activities: *Click or tap here to enter text.*

8.1.6   The Lead Agency is required to identify and recover misspent funds as a result of fraud, and it has the option to recover any misspent funds as a result of errors.

   a.   Identify what agency is responsible for pursuing fraud and overpayments (e.g. State Office of the Inspector General, State Attorney). The Lead Agency is responsible for identifying suspected fraud and seeking collection of overpayments. The Lead Agency must report to the Office of the State Auditor all instances of suspected fraud.

   b.   Check and describe all activities, including the results of such activity, that the Lead Agency uses to investigate and recover improper payments due to fraud. Include in the description how each activity assists in the investigation and recovery of improper payment due to fraud or intentional program violations. Activities can include, but are not limited to, the following:

      ⊠   i.   Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount.

         Describe the activities and the results of these activities: The Lead Agency seeks to recoup the full amount identified.

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

         Describe the activities and the results of these activities: The Lead Agency coordinates and refers to other state agencies, including the Office of the State Auditor and the State Attorney General.

      ☐   iii.   Recover through repayment plans.

         Describe the activities and the results of these activities: A repayment plan is developed and contained in a formal agreement between the payee and the Lead Agency.

      ☐   iv.   Reduce payments in subsequent months.

         Describe the activities and the results of these activities: *Click or tap here to enter text.*

      ☐   v.   Recover through state/territory tax intercepts.

         Describe the activities and the results of these activities: *Click or tap here to enter text.*

      ☐   vi.   Recover through other means.

         Describe the activities and the results of these activities: *Click or tap here to enter text.*

      ☐   vii.   Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

         Describe the activities and the results of these activities: *Click or tap here to enter text.*

      ☐   viii.   Other. Describe the activities and the results of these activities: *Click or tap here to enter text.*

c. Check and describe any activities that the Lead Agency will use to investigate and recover improper payments due to unintentional program violations. Include in the description how each activity assists in the investigation and recovery of improper payments due to unintentional program violations. Include a description of the results of such activity. Activities can include, but are not limited to, the following:

☐ i. N/A. the Lead Agency does not recover misspent funds due to unintentional program violations.

☒ ii. Require recovery after a minimum dollar amount of an improper payment and identify the minimum dollar amount.

Describe the activities and the results of these activities: The Lead Agency seeks to recoup the full amount identified.

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

Describe the activities and the results of these activities: When an overpayment is discovered, an overpayment request is created in the EPICS system. Upon verification, the transaction is processed through the NM State financial reporting system, Statewide Human Resources, Accounting, and Reporting Enterprise (SHARE). The SHARE system generates statements that are issued to the provider.

☒ iv. Recover through repayment plans.

Describe the activities and the results of these activities: A repayment plan is developed and contained in a formal agreement between the payee and the Lead Agency.

☐ v. Reduce payments in subsequent months.

Describe the activities and the results of these activities: *Click or tap here to enter text.*

☐ vi. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities: *Click or tap here to enter text.*

☐ vii. Recover through other means.

Describe the activities and the results of these activities: *Click or tap here to enter text.*

☐ viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit below.

Describe the activities and the results of these activities: *Click or tap here to enter text.*

☐ ix. Other. Describe the activities and the results of these activities:
Click or tap here to enter text.

d. Check and describe all activities that the Lead Agency will use to investigate and recover improper payments due to agency errors. Include in the description how each activity assists in the investigation and recovery of improper payments due to administrative errors. Include a description of the results of such activity.

☐ i. N/A. the Lead Agency does not recover misspent funds due to agency errors.

☒ ii. Require recovery after a minimum dollar amount of an improper payment and

identify the minimum dollar amount.

Describe the activities and the results of these activities: The Lead Agency seeks to recoup the full amount identified.

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

Describe the activities and the results of these activities: When an overpayment is discovered, an overpayment request is created in the EPICS system. Upon verification, the transaction is processed through the NM State financial reporting system, Statewide Human Resources, Accounting, and Reporting Enterprise (SHARE). The SHARE system generates statements that are issued to the provider.

☒ iv. Recover through repayment plans.

Describe the activities and the results of these activities: A repayment plan is developed and contained in a formal agreement between the payee and the Lead Agency.

☐ v. Reduce payments in subsequent months.

Describe the activities and the results of these activities: *Click or tap here to enter text.*

☐ vi. Recover through state/territory tax intercepts.

Describe the activities and the results of these activities: *Click or tap here to enter text.*

☐ vii. Recover through other means.

Describe the activities and the results of these activities: *Click or tap here to enter text.*

☒ viii. Establish a unit to investigate and collect improper payments and describe the composition of the unit.

Describe the activities and the results of these activities: The Lead Agency improper payment audit team compares data reports to identify trends through the audit process when any errors are flagged through system reports and further investigation is required. Any payments not verified thru the audit process and the flagging of errors are pulled for non-payment.

☐ ix. Other. Describe the activities and the results of these activities: *Click or tap here to enter text.*

8.1.7 What type of sanction will the Lead Agency place on clients and providers to help reduce improper payments due to program violations? Check and describe all that apply:

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

Describe the activities and the results of these activities: In cases where substantiated fraud has been determined, the Lead Agency may disqualify a client or provider until their debt has been paid in full (8.15.2.20 NMAC).

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

Describe the activities and the results of these activities: In cases where substantiated fraud has been determined, the Lead Agency may disqualify a client or provider until their debt has been paid in full (8.15.2.20 NMAC)..

☐   c. Prosecute criminally.

Describe the activities and the results of these activities:
Click or tap here to enter text.

☒   d. Other. Describe the activities and the results of these activities:
The Lead Agency coordinates and refers to other state agencies including the Office of the State Auditor and the State Attorney General.

Appendix A: MRS, Alternative Methodology and Narrow Cost Analysis Waiver Request Form

Lead Agencies may apply for a temporary waiver for the Market Rate Survey or ACF pre-approved alternative methodology and/or the narrow cost analysis. These waivers will be considered "extraordinary circumstance waivers" to provide relief from the timeline for completing the MRS or ACF pre-approved alternative methodology and the narrow cost analysis during the COVID-19 pandemic. These waivers are limited to a one-year period.

Approval of these waiver requests is subject to and contingent on OCC review and approval of responses in Section 4, questions 4.2.1 and 4.2.5.

To submit a Market Rate Survey (MRS) or ACF pre-approved alternative methodology or a Narrow Cost Analysis waiver, complete the form below.

Check and describe each provision for which the Lead Agency is requesting a time-limited waiver extension.

☐ Appendix A.1: The Market Rate Survey (MRS) or ACF pre-approved alternative methodology (See related question 4.2.1.)

1. Describe the provision (MRS or ACF pre-approved alternative methodology) from which the state/territory seeks relief. Include the reason why the Lead Agency is seeking relief from this provision due to this extraordinary circumstance. *Click or tap here to enter text.*

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. *Click or tap here to enter text.*

3. Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. *Click or tap here to enter text.*

☒ Appendix A.2: The Narrow Cost Analysis (See related question 4.2.5.)

1. Describe the provision (Narrow Cost Analysis) from which the state/territory seeks relief. Include the reason why in these extraordinary circumstances, the Lead Agency is seeking relief from this provision.
Click or tap here to enter text.

2. Describe how a waiver of the provision will, by itself, improve the delivery of child care services for children. *Click or tap here to enter text.*

3. Certify and describe how the health, safety, and well-being of children served through assistance received through CCDF will not be compromised as a result of the waiver. *Click or tap here to enter text.*