

# **Child Care and Development Fund Tribal Annual Report (ACF-700) Manual:**

## **Guide for CCDF Tribal Lead Agencies**

**Revised September 2019**



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## **I. Introduction and Overview of the CCDF Tribal Annual Report (ACF-700)**

On an annual basis, Tribal Lead Agencies for the Child Care and Development Fund (CCDF) are required to submit aggregate information on services provided. The CCDF Tribal Annual Report, also known as the ACF-700, consists of two parts:

**Part 1 – Administrative Data:** Reports data on children and families that received CCDF-funded child care services, and on services that were provided.

**Part 2 – Tribal Narrative:** Describes general child care activities and actions in the Lead Agency’s reservation or Tribal service area.

Both portions of the ACF-700 Report offer the Office of Child Care (OCC) a glimpse into how CCDF program dollars are being spent. Collectively, the submitted report helps to tell the CCDF Tribal child care “story.” The data help to document the work being done and are essential for demonstrating the accomplishments of Tribal child care programs.

The data reported on the ACF-700 form should reflect services provided during the Federal fiscal year (October 1 through September 30), regardless of whether the services were paid for with CCDF funds from that year or a previous year, and regardless of whether the funds used were Tribal Mandatory Funds or Discretionary Funds. In addition, if a program uses other funds to further support direct child care services for the children being reported on the ACF-700, Tribes should indicate the use of those funds and identify the funding source in the "Comments" field of the ACF-700 report.

### **The CCDF Tribal Annual Report is due by DECEMBER 31**

The information submitted on the ACF-700 report provides the United States Congress with information on Tribal programs and serves to inform policy and fiscal decisions. The data gathered for the ACF-700 report are also a rich source of information that can be used for a variety of program needs including informing your Tribal Council about your program, assessing needs, evaluating your program, training staff, resource development, and community education.

This manual provides guidance and instructions for completing and submitting both parts of the CCDF Tribal Annual Report (ACF-700) form.

**NOTE: Grantees with 102-477 status are not required to complete the ACF-700 report.**

## II. Preparing Part 1: Administrative Data of the CCDF Tribal Annual Report (ACF-700)

**NOTE for Small Allocation Tribes:** If you are a small allocation tribal grantee (less than \$250,000) and only conducted quality activities and did not provide direct services during the fiscal year you should **ENTER** zero (0) families and children served in Part 1: Administrative Data, and then **COMPLETE** Part 2: Tribal Narrative.

The administrative data report can be prepared manually with all of the arithmetic calculations performed by hand, or it can be prepared automatically using computer software. Regardless of the method used to calculate the report, you must keep track of certain information on a regular basis (monthly tracking is recommended). Even though the ACF-700 report is due at the end of each Federal fiscal year, **the information required to prepare the report must be gathered on an ongoing basis throughout the year.**

Part 1 – Administrative data should be prepared using information that programs collect during a family’s intake as well as information that is collected on an ongoing basis when services are provided. Generally, during the intake process, a child care program collects demographic information about the families and children they serve. Additionally, as services are provided, programs capture information on the hours of care each child receives, the payment they make on behalf of each child, and each family’s assigned co-pay. All of this information is used to summarize data for the annual ACF-700 report.

You should only include information about children/families whose direct child care services were provided during the Federal fiscal year and who met CCDF eligibility, regardless of which year’s CCDF funds paid for those services. Note that child care services should be reported whether paid for wholly or in part with CCDF funds. Child care services include those services that you offer directly through your own CCDF program, or services that you pay for with your CCDF grant but are offered by other programs and providers. Guidance of what is included in direct services for Tribally Operated Centers (TOC) can be found in *Technical Bulletin #14*. Child care services include slots purchased through contracts/grants, services purchased through certificates/voucher, and services provided in a tribally-operated facility. See *Appendix B* for definitions.

Regardless of whether you are completing the administration data portion of your report manually or using automated software, the following general instructions in *Table 1* apply to all of the data elements in Part 1 of the ACF-700 form and can provide guidance as you perform quality assurance checks on your data to ensure they are accurately reflecting your program.

*Tables 2 and 3* provide additional information regarding the acceptable use of “Not Applicable” (NA) for any of the ACF-700 report fields, and quality assurance data checks to review prior to submitting your report to OCC.

**Table 1: General Instructions for Data Elements in Part 1: Administrative Data**

*NOTE: Upper case letters (A, B...L) represent vertical columns on the report. Lower case letters (a, b...f) represent rows going across the report.*

Subject	Explanation
<i>Report Period – Federal Fiscal Year</i>	The Federal fiscal year (FFY) begins on October 1 and ends on September 30 of each year. The ACF-700 report should only include information about CCDF activities that occurred during this time frame.
<i>Allowable Values</i>	Generally, the fields should only contain numbers or letters. Do not use decimals, dollar signs, dashes, or other characters.
<i>What to Report – Counts or Averages</i>	<p>Some data elements require that you provide counts (for example, counts of families or children) while others require that you provide averages.</p> <p>Counts are required for data elements 1, 2b, 3a-i, 4a-f, 7a-d, and 8a-d.</p> <p>Averages are required for data elements 2a, 5, 6a, and 6b. To calculate averages, refer to the guidance included in this document for each individual data element.</p>
<i>Counting Children not Families</i>	<p>There is only one data element that requires a family count – Element 1, Column A: Total number of families that received child care services this fiscal year.</p> <p>All other data elements requesting counts of who received services are counts of children (2b, 3a-i, 4a-f, 7a-d, and 8a-d). Even if you collect information at the family level (for example Element 4, Reason for care), the data should be reported as a count of children within those families.</p>
<i>Unduplicated Counts (Column A)</i>	In Column A (with the exception of elements 2a, 5, and 6a-6b which ask for averages), you should count each family or child only once regardless of how many times they may have entered and exited service during the Federal fiscal year, or if they received services from more than one provider during the year.
<i>Duplicated Counts (Columns B-L)</i>	A child should be counted in a column if they received services from that type of provider. The numbers of children reported by provider type (Columns B-L) may be more than the total being reported in Column A; however the number may not be <u>less</u> than Column A. Duplicated counts may be used for data elements 2b, 3a-i, and 8a-d (Columns B-L).
<i>Not-Applicable Fields (see following table for additional details)</i>	The use of NA is restricted as illustrated in <i>Table 2</i> . If you do not offer a particular type of child care service (for example, in-home care), you can enter NA in that column for each data

Subject	Explanation
	element. If you do not use a particular type of payment (for example, cash payments), likewise you can enter NA in fields across line 8 c. Use NA only if the service option is not one that you use, or a category of families and children you do not serve. If you <u>do</u> offer a service but no child utilized it, you should enter zero (0) for your count in that field.
<i>Blank Fields</i>	DO NOT LEAVE ANY BLANK FIELDS. Every field should have either a count (a number) or the letters “NA” (Not Applicable).
<i>Rounding</i>	Please round up or down to the nearest whole number. If the number immediately to the right of the decimal point is 4 or less, round the number down. If it is 5 or more, you should round up. For example, 66.3 hours should be rounded down to 66. A dollar amount of \$45.75 should be rounded up to \$46.00. In this case you would enter 46 on the ACF-700 form without a dollar sign and without a decimal point.
<i>Data Accuracy Checks</i>	Please see the guidance included with each data element in <i>Section VI</i> to check the accuracy of the numbers you are reporting. Note that some numbers must add up to and equal numbers reported in other fields. Likewise, some numbers should be less than numbers reported in other fields. If your numbers do not meet the data accuracy check, there may be an error that you need to fix. See <i>Table 3</i> below for a summary of the checks.
<i>Comments Field</i>	<p>Use the comments field to explain any unusual or inconsistent data. For example, if the number of families and children you served changed drastically from your prior year’s report, you may want to indicate the reason for the change.</p> <p>You are not able to attach documents in the comments field of the online submission form. Any documents that you would like to submit to NCDR should be sent via e-mail to: <a href="mailto:NCDR@ecetta.info">NCDR@ecetta.info</a>.</p> <p>You should also use the comments box to provide footnotes explaining when any missing data will be submitted.</p>

**Table 2: Permissible Use of “NA” on Part 1: Administrative Data**

*This table summarizes the appropriate use of “NA” on the Part 1 of the ACF-700 report and the submission site (see Section IV). On the submission site, if you enter “NA” for a data element where “NA” is not permitted, you will get an error message.*

Data Element/Columns Where “NA” is Permitted	Circumstances Where “NA” is Permitted
Element 2b - Total Number of Children That Received Services This Fiscal Year, Columns B-L	When a Tribe does not utilize specific types of care
Element 3, Rows a-h - Age Breakdown of Children Receiving Services, Total by Age Category/Types of Care, Columns B-L	When a Tribe does not utilize specific types of care
Element 3i - Age Breakdown of Children Receiving Services, 13 and older, Columns B-L	When a Tribe does not serve children older than 13 years
Element 5 - Average Number of Hours Child Care Service is Provided Per Child Per Month by Type of Care, Columns B-L.	When a Tribe does not utilize specific types of care
Element 6a - Average Monthly CCDF Subsidy, Total and by Type of Care, Columns B-L	When a Tribe does not utilize specific types of care
Element 6b - Average Monthly Parent Co-payment, Total and by Type of Care, Columns B-L	When a Tribe does not utilize specific types of care
Element 8, Rows a-d – Number of Children Served by Payment Type this fiscal year, Columns B-L	When a Tribe does not utilize certain payment types

**Table 3: Summary of Data Accuracy Checks for Part 1: Administrative Data**

*You can find more detail on the Data Accuracy Checks for each data element in Section IIa. All consistency checks marked with an asterisk (\*) indicate checks that are conducted on the ACF-700 Internet Submission Site. See Section IV for more information).*

Data Element	Consistency Check
Element 1, Column A	Element 1 should be less than or equal to Element 2b.
Element 2a, Column A	Element 2a should be less than or equal to Element 2b.
Element 2b, Column A	Element 2b, Column A, should be greater than or equal to Element 1 and greater than or equal to Element 2a, Column A.
Element 2b, Columns B-L	The total of Element 2b, Columns B-L should be equal to, or greater than Element 2b, Column A.
Element 3a-i, Column A	<p>The total of Element 3a through 3g in Column A should be equal to Element 3h, Column A.*</p> <p>The total of Element 3h, Column A and Element 3i, Column A should equal Element 2b, Column A.*</p>
Element 3a-i, Columns B-L	<p>For each type of care, the total of Elements 3a to 3g in each column should equal the number in Element 3h for that column.*</p> <p>For each care type, the total number of children in Element 3h and Element 3i for that column should equal Element 2b of that column. *</p> <p>The total sum across each row (Columns B-L) must be equal to, or greater than the number reported on the same row in Column A.</p>
Element 4a-f, Column A	The total of Elements 4 a-f, Column A should equal Element 2b, Column A.*
Element 5, Column A	<p>Generally, full-time care is about 160 hours per month. If most of your children are receiving full-time care, your reported average monthly hours of service per child would not likely be substantially higher or substantially lower than 160 in Column A or in any one care type (Columns B-L).</p> <p>If, however, you primarily operate a Before or After School program, your average hours per month may be substantially lower. The average hours should be representative of the program that you operate and the services that you provide.</p>
Element 5, Column B-L	
Element 6a, Column A	In most cases, the subsidy amount (6a) will be larger than the co-payment amount (6b) for both the total column (A) and
Element 6a, Column B-L	



Data Element	Consistency Check
Element 6b, Column A	for each individual care type column (B-L). If your reported co-payment is higher than your reported subsidy, you may have an error in your data.
Element 6b, Columns B-L	
Element 7(a-d), Column A	The sum of 7a, 7b, 7c, and 7d must equal Element 2b, Column A.*
Element 8 a-d, Column A	The sum of 8a, 8b, 8c, and 8d must equal Element 2b, Column A.*
Element 8 a-d, Columns B-L	<p>The sum of 8a, 8b, 8c and 8d must equal Element 2b in the same column. *</p> <p>The total sum across each row (Columns B-L) must be equal to, or greater than the number reported on the same row in Column A.</p>

## **Ila. Manual Preparation of Part 1: Administrative Data**

If you choose to complete your ACF-700 manually, you will have to be prepared to do the required arithmetic calculations yourself. This can be as simple as counting the number of families and children you served, or as complex as the calculation of monthly averages.

The required information includes the number of families and children receiving services, ages of the children, their reason for care, the number of hours of care for each month for each child, the monthly subsidy amount paid on their behalf, the family's monthly co-pay, each family's income, and the type of payment made for each child. For co-payment, subsidy amounts, and hours of service, you also will need to calculate averages for all families and children on a monthly basis for each type of care you provide.

Depending upon the number of clients that a program serves and the number of provider types used, some of the calculations required for the ACF-700 report can be time-consuming and preparing the report can be a tedious process. Again, although this is an annual report, many of the calculations have to be completed for each month of the year for each type of care you offer.

### **Instructions for Manual Calculations**

Following are detailed instructions for manually calculating the ACF-700 report. These instructions include definitions, guidance on manual calculation, and data accuracy checks for each data element. If you are completing the ACF-700 report with the *Tracker* software, you may skip this section of the guide because all of the calculations are automatically completed by the *Tracker* software when you generate your ACF-700 report.

**Table 4: Tribal Lead Agency Contact Information Data Elements**

<b>Tribal Lead Agency Data Elements</b>	<b>Definition</b>	<b>Allowable Values</b>	<b>Guidance</b>
<i>Complete Name of Tribal Lead Agency</i>	Name of the CCDF Tribal Lead Agency	Text	
<i>Address</i>	Mailing address of the CCDF Tribal Lead Agency	Text, Numbers	
<i>Tribal Lead Agency City</i>	City of the mailing address of the CCDF Tribal Lead Agency	Text	
<i>Tribal Lead Agency State</i>	Two-letter postal State abbreviation of the mailing address of the CCDF Tribal Lead Agency	Valid postal State abbreviations	A list of state abbreviations is available at: <a href="https://about.usps.com/who-we-are/postal-history/state-abbreviations.pdf">https://about.usps.com/who-we-are/postal-history/state-abbreviations.pdf</a>
<i>Tribal Lead Agency ZIP Code</i>	Numerical code assigned by the US Postal Service to designate a local area or entity for the delivery of mail	Accepts all valid ZIP codes: 5 digits required. 4 digit extension option (do not include hyphen).	You can search for valid ZIP codes at: <a href="https://tools.usps.com/go/ZipLookupAction!input.action">https://tools.usps.com/go/ZipLookupAction!input.action</a>
<i>Contact Person</i>	Full name of individual whom the Office of Child Care should contact in regard to this report	Text	
<i>Phone</i>	Area code and telephone number for the contact person	Numbers	Include area code
<i>E-mail</i>	Electronic mail address for the contact person	Text, Numbers	Be sure that the entered e-mail address is complete and clearly legible

**DATA ELEMENT 1, Column A: Total number of families that received child care services this fiscal year**

**Definition:** Unduplicated count of **families** who received CCDF subsidized child care services during the Federal fiscal year.

Child care services include those that you offer directly through your own CCDF program, or services that you pay for with your CCDF grant but are offered by other programs and providers, to children whose families meet CCDF eligibility requirements. Child care services include slots purchased through contracts/grants, services purchased through certificates/vouchers, and services provided in a tribally-operated facility. *See Appendix A for definitions.*

**Data Accuracy Check:** Element 1, number of families receiving services should be less than or equal to Element 2b, the total number of children receiving services.

**Guidance:** Each family should be counted once, regardless of the number of days care was provided, and even if the family has exited and re-entered the program.

**Example 1:** A family leaves the program in March but is reinstated in August. The family is counted one time in Element 1.

Report the number of families for whom you provided services during the reporting period October 1 – September 30 regardless of:

- when the payment for the service was made, or
- which fiscal year's funds paid for the service.

**Example 2:** A child received care in August only. The Tribal Lead Agency paid for that care in October. Count the family because the service was received during the report period.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 2a, Column A: Average number of children served each month**

**Definition:** The average number of children served each month. An average is one single number that arithmetically represents a group of numbers. See the *Guidance* section below for one method of calculating this data element.

**Data Accuracy Check:** Element 2a, the average number of children served per month should be less than or equal to Element 2b, the total number of children receiving services all year.

## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

### **Guidance:** How to Calculate a Monthly Average Number of Children Served:

Add the number of children you served each month during the Federal fiscal year and divide by the number of months the Tribal child care program provided services (such as full year, 12 months).

**Note:** This is a **monthly** average, not a yearly average. The following demonstrates how a monthly average can be calculated.

Month	# Children
Oct	15
Nov	12
Dec	13
Jan	13
Feb	12
Mar	14
Apr	11
May	12
Jun	13
Jul	15
Aug	15
Sep	18
<b>Total count for all months</b>	<b>163</b>
<b>Divide by the number of months provided service (12) to get a monthly average.</b>	<b>13.58 (Round to 14)</b>

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

### **DATA ELEMENT 2b, Column A: Total number of children that received services this fiscal year**

**Definition:** An unduplicated count of **children** who received child care services for the Federal fiscal year regardless of the type of care.

#### **Data Accuracy Checks:**

**Check 1:** Element 2b, Column A, should be greater than or equal to Element 1, Column A, the total number of families receiving services.

**Check 2:** Element 2b, Column A, should be greater than or equal to Element 2a, Column A, the average number of children receiving care each month.

**Guidance:** Each child who received services should be counted only once, regardless of the number of days care was provided or if the child exited and re-entered the program.

**Example 1:** A child leaves the program in March, but is reinstated in August. The child is counted one time in Element 2b, Column A.

Count all children who met CCDF eligibility requirements and received direct services paid for fully or partially with CCDF funds during the Federal fiscal year. Child care services are defined as slots purchased through contracts/grants, services purchased through certificates/vouchers, or services provided in a tribally-operated facility funded under CCDF. *See Appendix A for definitions.*

**Example 2:** A Tribal Lead Agency provides child care certificates/vouchers to 100 families to receive child care services at a program of their choice. The total unduplicated number of children should be counted in Element 2b, Column A. Enter the number of children receiving child care through certificates/vouchers regardless of their setting type on line 2b, Column A.

**Example 3:** A Tribal Lead Agency contracts with a center for 50 full-time slots for the Federal fiscal year. The total unduplicated number of children receiving child care through agency contracts with centers should be reported in Element 2b, Column A. If you contracted for 50 slots, the number of children served through these slots will depend on the utilization rate.

Do not count children or families who only generally benefited from services such as when your program:

- Receives a grant or contract to establish, expand, or conduct an early childhood school readiness enrichment program (i.e., not specific slots); or
- You initiate an expansion of quality activities funded under the CCDF. Your use of quality dollars to improve the quality of care should be explained in your Supplemental Narrative.

**Example 4:** A Tribal Lead Agency contracts with a resource and referral agency to provide professional staff development training at a Center serving 78 children. The Tribal Lead Agency does not contract for slots with the center and no children there receive CCDF certificates. Do not count the children because they did not receive direct child care services from the CCDF funds expended.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 2b, Columns B-L: Total number of children that received services this fiscal year by category/type of child care**

**Definition:** An unduplicated count of children who received child care services during the Federal fiscal year for each provider type. See the Guidance section below for detailed definitions of care types.

**Data Accuracy Check:** Add the number of children being served in each care type (Element 2b, Columns B-L). This number should be equal to, or greater than, the total unduplicated

number of children reported in Element 2b, Column A. The sum of the children being served in all care types cannot be less than the total number of children reported in Column A.

**Guidance:** A child may be counted in more than one provider type column (Columns B-L) if the child received care from more than one provider type for different portions of the typical day, week, or month. However, the child should NOT be counted more than once within a single provider type column.

**Example 1:** A child attends a family child care home before school hours and a child care center after school hours. The child would be counted under provider types of both family home and center based child care.

When a child changes the category of provider during the report period, count the child separately in each care type.

**Example 2:** A child receives care in a family child care home from September to March, uses an in-home provider during April and a center from May through October. The child would be counted under each provider type – family home, child’s home, and center care.

Provider types are broken up into two broad categories of no license category available (legally operating in state or locality) and licensed/regulated. Under each of these categories are four types of providers: child’s home, family home, group home, and centers. Additionally, several no-license category provider types are also broken down into relative and non-relative care.

**No License Category Available:** The child care provider is not required to obtain a license (or similar approval) in order to operate legally. A provider in this category is still required to comply with CCDF health and safety requirements (unless the provider is an exempted relative), but is generally not subject to other regulation or licensing. For example, in some jurisdictions, small family home providers may operate legally without having to be licensed. This category also may include providers who have to sign up in order to participate in your CCDF program but do not have to meet any other local licensing requirements.

**Licensed or Regulated Provider:** The provider must apply for, and may only operate after receiving, legally-defined approval to deliver services as a licensed or regulated provider. The licensing agent usually is the Tribe or state. OCC recommends that licensed or regulated providers be subject to third-party monitoring to ensure compliance. For reporting purposes, the terms “licensed/regulated” and “no license category available” are intentionally broad to recognize that grantees operate differently. The term “regulated” is used because not all grantees define “licensed” in the same way, or even use the term consistently. Some grantees have processes that they call “certification” or “registration.” The “licensed/regulated provider” category is intended to encompass any of these regulatory processes. In order to be counted as a “licensed/regulated” provider, the provider must meet state-established health and

safety standards and be subject to monitoring (i.e., self-certification by the provider without documentation or verification is not sufficient).

## **DEFINITIONS**

- **Child's Home:** Care provided by a caregiver in the child's own home.
- **Family Home:** Care provided in the family home of the provider (i.e., care provided by an individual in their own private residence). Generally, family home care is provided only to a limited number of children at any one time (e.g. 3-5).
- **Group Home:** Care provided in the family home of the provider with the assistance of at least one additional hired staff member. Group homes can provide services to a larger number of children at any one time (e.g. 6-10).
- **Center-Based:** Care provided in a center-based setting, including programs in schools or churches.
- **Relative Care:** Care by a provider who is a grandparent, great-grandparent, aunt or uncle, or sibling living outside the child's home.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

### **DATA ELEMENT 3 a-i, Column A: Total number of children receiving services that fall into each age category**

**Definition:** Breakdown by age of children receiving child care services.

#### **Data Accuracy Checks:**

**Check 1:** Add the total number of children in each age bracket for Elements 3a through 3g in Column A. Compare your answer to the number in Element 3h, Column A. If they are not the same, there is an error in the data which should be corrected.

**Check 2:** Add the total number of children in Element 3h, Column A and the number of children in Element 3i, Column A. Your answer should equal the number in Element 2b, Column A. If not, there is an error in the data which should be corrected.

**Guidance:** Each child that received services should be counted only once, regardless of the number of days care was provided and even if the child has exited and re-entered the program.

**Example 1:** A child leaves the program in March, but is reinstated in August. The child is counted one time in Elements 3 a-i, Column A.

The age of the child is reported as of the end of the report period (or the date of exit from the CCDF program).

**Example 2:** A 2-year-old child received services starting in March. On September 15 she turned 3 years old and continued to receive services through the reporting period. The child should be reported as a 3-year-old on line 3d, Column A.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 3 a-i, Columns B-L: Total number of children receiving services that fall into each age category by category/type of child care**

**Definition:** Breakdown by age of children receiving child care services by category/type of care.

**Data Accuracy Checks:**

**Check 1:** For each type of care, add the number of children in each age bracket for Elements 3a to 3g in each column. Your number should match the number in Element 3h for that column. If the numbers do not match there is an error that should be corrected.

**Check 2:** For each type of care, add the number of children in Element 3h and the number of children in Element 3i for that column. Compare your answer to the value entered in Element 2b of that column. If the numbers are not the same, there is an error that should be corrected.

**Check 3:** The total sum across each row (Columns B-L) must be equal to, or greater than the number reported on the same row in Column A.

**Guidance:** A child may be counted in more than one provider column (Columns B-L) if the child receives care from more than one provider type during the Federal fiscal year. However, the child should not be counted more than once within a single provider type column.

**Example 1:** A child attends a child care center in the morning and a family child care home in the afternoon. The child would be counted under both provider types of center-based and family home.

**Example 2:** If a child only attended a child care center starting in June and switched to a family home starting August 16 and continuing through September 30, count the child once in each category.

**Example 3:** A child attends a Center the first week of the month, but then in the second week, moves to a different Center. Count the child only once in that care-type column.



Provider types are broken up into the two broad categories of no license category available (legally operating in state or locality) and licensed/regulated. Under each of these categories are four types of providers: child's home, family home, group home, and centers. Additionally, several no-license category provider types are also broken down into relative and non-relative care

Refer to definitions provided for Element 2b, Columns B-L.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted*

**DATA ELEMENT 4 a-f, Column A: Number of children who received child care services because of each specified reason**

**Definition:** An unduplicated count of **children** receiving child care services by reason for care.

This element separates reason for care into six categories:

1. Parent working
2. Parent in a training or education program
3. Child receiving or needing Protective Services
4. A Federally declared emergency and parent working<sup>1</sup>
5. A Federally declared emergency and parent in a training or education program<sup>1</sup>
6. A Federally declared emergency and a child receiving or needing Protective Services<sup>1</sup>

**Data Accuracy Check:** Add the number of children recorded for Elements 4 a-f, Column A. This answer and the number in Element 2b, Column A should be the same. If they are not the same, there is an error that should be corrected.

**Guidance:** This is a count of **children**, NOT families. Each child may be counted only once.

When a family receives care for more than one reason (e.g., the parent works and is in a training program), count only the activity in which the parent (or child, in the case of Protective Services) spends the most time and is the primary reason for needing subsidized child care – that is, the reason the family is eligible to receive a subsidy.

Element 4, Column A entries should be unduplicated counts.

When a child's reason for needing care changes during the report period, report the reason as of the end of the report period (or date of exit from the program).

**Example 1:** A child received care in October because of her parents' employment. From November through September child care was provided because the child was in Protective Services. Count the child in line 4c only – Protective Services.

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<sup>1</sup> A Federally declared emergency is an emergency that has resulted in a declaration by the President of the U.S. indicating that Federal assistance is necessary. This generally is a temporary category used only for the duration of the emergency.

**NOTE:** Each Tribal Lead Agency defines the terms "working," "job training and educational program" and "protective services" in Appendix 2 of its Tribal Plan Preprint.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 5. Column A: Average number of hours of child care service provided per child per month**

**Definition:** The average number of hours of child care service provided per child per month.

**Data Accuracy Check:** Generally, full-time care is about 40 hours per week for 4 weeks (160 hours per month). If most of your children are receiving full-time care, your reported average monthly hours of service per child would not likely be substantially higher or substantially lower than 160.

If, however, you primarily operate a Before or After School program, your average hours per month may be substantially lower. The average hours should be representative of the program that you operate and the services that you provide.

**Guidance:** This is a monthly average, NOT a yearly average. One method to calculate the average number of hours of care per child per month is:

1. Begin by counting the total number of hours of care for all children for the first month you provided service during the fiscal year (month X, for example October).
2. Count the total number of children served during month X.
3. Divide the total number of hours from step 1 by the total number of children from step 2 to get the average number of hours of care provided per child for month X.
4. Do steps 1 – 3 for each month services were provided.
5. Add together each of the monthly average hours to get a sum.
6. Divide the sum from step 5 by the total number of months services were provided during the year to get the average number of hours of care provided per child per month.

Some Tribal Lead Agencies do not pay for (or keep records for) the actual number of hours of service per child. Rather, they reimburse by "full" or "part" days of service (or other increments). Such Tribal Lead Agencies still can calculate the average number of hours of child care per child per month based on the program's definitions or estimate of the number of hours that "full" or "part" days represent.

For example, a Tribal Lead Agency may define a "part" day as 4 hours or fewer per day (and estimate a "part" day at 4 hours of care). This same grantee may define a "full" day as more than 5 hours (and estimate a "full" day at 8 hours of care). In step #1 of the above calculations, the Tribal Lead Agency would count 4 hours of care for each "part" day and "8" hours for each "full" day they paid for child care services to get the total number of hours of care for all children for month X.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted. Tribal Lead Agencies should also describe in a footnote how they calculated the average number of hours.*

**DATA ELEMENT 5, Columns B-L: Average number of hours of child care service provided per child per month by category/type of child care**

**Definition:** The average number of hours of child care service provided per child per month – by category/type of child care.

**Data Accuracy Check:** Generally, full-time care is about 40 hours per week for 4 weeks (160 hours per month). If most of your children are receiving full-time care, your reported average monthly hours of service per child would not likely be substantially higher or substantially lower than 160.

If, however, you primarily operate a Before or After School program, your average hours per month may be substantially lower. The average hours should be representative of the program that you operate and the services that you provide.

**Guidance:** This is a monthly average, NOT a yearly average. One method to calculate the average number of hours of care per child per month by category/type of child care is:

1. Work with one care type at a time and begin by counting the total number of hours of care for the first month you provided service during the fiscal year (month X, for example October) for all of the children in that type of child care.
2. For that care type, count the total number of children served during month X.
3. Divide the total number of hours for that type of child care from step 1 by the total number of children from step 2 to get the average number of hours of care provided per child for month X for that type of child care.
4. Do steps 1-3 for each month services were provided in that care type.
5. Add together each of the monthly averages for that type of child care to get a sum.
6. Divide the sum (from step 5) by the total number of months services were provided during the year in that care type to get the average number of hours of care provided per child per month for that category/type of child care.
7. Repeat steps 1-6 for each type of care.

As indicated in guidance for Element 5, Column A, Tribal Lead Agencies that reimburse by "full" or "part" days of service (or other increments) can calculate the average number of hours of child care per child per month by type of care based on the programs definition or estimate of the number of hours that "full" or "part" days represent.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 6a, Column A: Average monthly CCDF program subsidy per child**

**Definition:** The average monthly cost that your CCDF program paid for child care services per child. This does not include the parent's co-payment.

**Data Accuracy Check:** Except in rare circumstances, Element 6a, Column A, the average monthly subsidy paid per child, will be greater than Element 6b, Column A, the average monthly parent co-payment paid per child.

**Guidance:** This is a monthly average, NOT a yearly average. Tribal Lead Agencies should use the same method for calculating the average monthly subsidy amount paid in Element 6a, Column A as used to calculate the average number of hours of care for Element 5, Column A.

One method to calculate the average monthly CCDF subsidy paid for child care services per month per child is:

1. Begin by counting the total amount of CCDF subsidy paid for child care services for all children for the first month you provided service during the fiscal year (month X, for example October).
2. Count the total number of children served during month X.
3. Divide the total amount from step 1 by the total number of children from step 2 to get the average amount of CCDF subsidy paid for child care services for month X.
4. Do steps 1 – 3 for each month services were provided.
5. Add together each of the monthly averages to get a sum of averages.
6. Divide the sum from step 5 by the total number of months services were provided during the year to get the average subsidy amount paid for child care services per child per month.

**Guidance for Tribally-Operated Centers**

Some Tribal Lead Agencies run their own center(s) and do not technically “pay” a provider. Such agencies can still estimate the “average” monthly CCDF subsidy amount paid per child for child care services provided using the record of expenditures that is submitted annually on the required ACF-696T, the Tribal financial report. *Additional information is available in [Technical Bulletin #14](#), updated in March 2018.*

**Calculation to estimate the average monthly subsidy per child for programs with a Tribally Operated Center (TOC) when you only provide services in your TOC:**

1. Add the Tribal Mandatory, Discretionary, and Discretionary Funds Base Amount expenditures (not including expenditures for construction and renovation) that your Tribe reported on Line 4 of the ACF-696T – Expenditures for Child Care Services. During the Federal fiscal year, if you expended funds from more than one grant year, you must add the appropriate expenditures from each of the reports submitted regardless of the year that the grant was awarded.
2. Divide the above total by the number of months that you provided services during the year (ranging from 1 to 12 months) to get an overall monthly subsidy amount.

3. Divide the monthly subsidy amount by the average number of children served per month (data element #2a) to estimate the average monthly subsidy per child in your center.

**Calculation to estimate the average monthly subsidy per child for programs with a TOC when you support both a TOC and other provider types:**

Add the Tribal Mandatory, Discretionary, and Discretionary Funds Base Amount expenditures (not including expenditures for construction and renovation) that your Tribe reported on Line 4 of the ACF-696T – Expenditures for Child Care Services. During the Federal fiscal year, if you expended funds from more than one grant year, you must add the appropriate expenditures from each of the reports submitted regardless of the year that the grant was awarded.

1. Add together all of the CCDF Subsidy payments you have made to all non-TOC providers during the report year.
2. Subtract this total CCDF subsidy payments made to all non-TOC providers from the total you arrived at in step 1 above.
3. Divide the remaining subsidy amount from step 3 by the number of months that you provided services in your TOC during the year (ranging from 1 to 12 months) to get a total monthly TOC subsidy amount.
4. Divide the monthly amount from step 4 by the average number of children served per month in the TOC (data Element 2a, Column H or L) to estimate the average monthly subsidy per child for your TOC. Report this average monthly subsidy per child in Column H or L.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 6a, Columns B-L: Average monthly CCDF program subsidy per child by category/type of child care**

**Definition:** The average monthly cost that your CCDF program paid for child care services per child for each category/type of care.

**Data Accuracy Check:** Except in rare circumstances, Element 6a, Columns B-L, the average monthly subsidy paid per child will be greater than Element 6b, Columns B-L, the average monthly co-pay paid per child.

**Guidance:** This is a monthly average, NOT a yearly average.

Tribal Lead Agencies should use the same method for calculating the **average** monthly CCDF subsidy in Element 6a, Columns B-L as used to calculate the average number of hours of care for Element 5, Columns B-L.

One method to calculate the average monthly CCDF subsidy amount paid for child care services per month for each category/type of child care is:

1. Work with one care type at a time and begin by calculating the total amount of CCDF subsidy paid for child care services for the first month you provided service during the fiscal year (month X, for example October) for all children in that one type of care.
2. For that care type, count the total number of children served during month X.
3. Divide the total amount from step 1 by the total number of children from step 2 to get the average amount of CCDF subsidy paid for child care services for month X for that care type
4. Do steps 1 – 3 for each month services were provided by that care type.
5. Add together each of the monthly subsidy averages for that type of care to get a sum.
6. Divide the sum from step 5 by the total number of months services were provided during the year in that care type to get the average amount paid for child care services per month for that care type.
7. Repeat steps 1-6 for each type of care.

### **Guidance for Tribally-Operated Centers**

Follow the guidance for Element 6a, Column A, regarding calculations for estimating the average monthly subsidy per child for programs with a Tribally Operated Center (TOC) to calculate the estimated average monthly subsidy per child by category/type of child care.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

### **DATA ELEMENT 6b, Column A: Average monthly parent co-payment amount paid per child for child care service.**

**Definition:** The average monthly cost that the family/parent was assessed to pay toward the cost of care per child.

**Data Accuracy Check:** Generally, the parent co-payment is less than the subsidy amount (Element 6a). If your co-payment is larger than the reported subsidy, check to be sure that your numbers are correct.

**Guidance:** This is a monthly average, NOT a yearly average. Tribal Lead Agencies should use the same method for calculating the average monthly parent co-payment on Element 6b, Column A as used to calculate the average number of hours of care for Element 5, Column A.

One method to calculate the average monthly parent co-payment amount paid for child care services per month per child for each category/type of child care is:

1. Begin by calculating the total amount of CCDF co-payments paid by all families for child care services for the first month you provided service during the fiscal year (month X, for example October).
2. Count the total number of children served during month X.
3. Divide the total amount from step 1 by the total number of children from step 2 to get the average CCDF co-payment paid per child for child care services for month X.
4. Do steps 1 – 3 for each month services were provided.

5. Add together each of the monthly co-payment averages to get a sum.
6. Divide the sum from step 5 by the total number of months services were provided during the year to get the average parent co-payment amount paid for child care services per month per child.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 6b, Column B-L: Average monthly parent co-payment per child by category/type of child care.**

**Definition:** The average monthly cost that the family/parent was assessed to pay toward the cost of care per child for each category/type of care.

**Data Accuracy Check:** Generally, the parent co-payment is less than the subsidy amount. If your co-payment is larger than the reported subsidy, check to be sure that your numbers are correct.

**Guidance:** This is a monthly average, NOT a yearly average. Tribal Lead Agencies should use the same method for calculating the average monthly parent co-payment in Element 6b, Columns B-L as used to calculate the average number of hours of care for Element 5, Columns B-L.

One method to calculate the average monthly parent co-payment amount paid for child care services per month for each category/type of child care is:

1. Work with one care type at a time and begin by calculating the total amount of CCDF co-payment paid for child care services for the first month you provided service during the fiscal year (month X, for example October) for one type of care.
2. Count the total number of children served during month X for that care type.
3. Divide the total amount of co-payments from step 1 by the total number of children from step 2 to get the average parent co-payment paid for child care services for month X for that type of care.
4. Do steps 1 – 3 for each month services were provided for that type of care.
5. Add together each of the monthly averages for that care type to get a sum of the averages.
6. Divide the sum from step 5 by the total number of months that services were provided for that care type during the year to get the average co-payment amount paid for child care services per child per month for that care type.
7. Repeat steps 1-6 for each type of care.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 7 a-d, Column A: Number of children served whose family income was at various levels of poverty**

**Definition:** This is an unduplicated count of **children** receiving child care services whose family's income was at various levels of poverty.

This element separates income into four categories:

1. at or below the poverty threshold for families of the same size
2. above the poverty threshold but at or below 150 percent of the poverty threshold for families of the same size
3. above 150 percent of the poverty threshold but at or below 200 percent of the poverty threshold for families of the same size
4. above 200 percent of the poverty threshold for families of the same size.

**Data Accuracy Check:** Except in rare circumstances, the sum of rows 7a, 7b, 7c and 7d will equal Element 2b, Column A. If the numbers are not the same, there may be an error that should be corrected.

**Guidance:** This is a count of **children**, NOT families. Each child may be counted only once.

If a family's income changed during the reporting period, report the children in the appropriate poverty threshold based on the family's income at the end of the reporting period or when they left the program.

**Example:** If a family's income is below the poverty threshold for families of the same size, and they have 3 children receiving subsidized care, Element 7a would include a count of "3" children for that family. The count would be "3" even if the children were receiving care from more than one provider.

Element 7 asks for the number of children served from families at specific poverty thresholds. The current Health and Human Services (HHS) poverty guidelines, as published in the US Department of Health and Human Services Poverty Guidelines, Research, and Measurement site <https://aspe.hhs.gov/poverty-guidelines> should be used in completing Element 7.

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 8 a-d, Column A: Number of children served by payment type this fiscal year**

**Definition:** This is an unduplicated count of children served by various types of payment.

This element separates payment type into four categories:

1. Grant/Contract with provider
2. Certificate or voucher to parent and/or provider
3. Cash payment to parent
4. Tribally-Operated Center.



## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

*See the Guidance section below for definitions of the various payment types.*

**Data Accuracy Check:** The sum of rows 8a, 8b, 8c and 8-d, Column A must equal Element 2b, Column A. If they are not the same, there is an error that should be corrected.

**Guidance:** This is a count of children, NOT families.

Each child should be counted only once. If payment type for services for a child changes during the reporting period, select the last known payment type.

**Example:** From October through February you paid for a child's services with cash payments to the applicant. Beginning in March and through the remainder of the fiscal year, the child's services were paid through a grant or contract with a provider. This child should be counted in 8a, Column A (grant or contract with provider) only.

**If services for the child were paid for with two types of payment at the same time during the reporting period, select the primary payment type, that is, the type with the most hours.**

**Example:** For the entire Federal fiscal year, a child received services from an in-home provider for 2 hours a day in the early morning, and this provider was paid with cash. At the same time, this child received services for the rest of the day in a center for 8 hours each day, and the center was paid through a contract. You would report this child under 8a, Column A (grant/contract with provider) only.

### Definitions:

- **Grant/Contract with Provider:** A legally binding agreement with a child care provider to deliver services, defining the terms and conditions of those services.
- **Certificate or Voucher to Parent and/or Provider:** A certificate (that may be a check or other form) that is issued by a State, Tribal or local government directly to a parent to verify their eligibility for subsidized services.
- **Cash Payment to Parent:** Money paid to parents in the form of cash or checks to cover the cost of child care services. (This does not include two-party checks to parents and providers, or cash to providers). Note that the term "parent" includes any individual operating *in loco parentis*, as defined in the Tribe's CCDF plan.
- **Tribally-Operated Center:** A child care center operated by the Tribal Lead Agency. The center is usually located on the Tribal reservation or in the Tribal Lead Agency's service area. A Tribally-operated center payment differs from a grant or contract in that a Tribal Lead Agency pays the operational costs of the Center (including teacher salaries).

*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

**DATA ELEMENT 8 a-d, Column B-L: Number of children served by payment type this fiscal year by category/type of child care**

**Definition:** Total number of **children** in each care type whose service was paid for by each payment type.

This element separates payment type into four categories:

1. Grant/Contract with provider
2. Certificate or voucher to parent and/or provider
3. Cash payment to parent
4. Tribally-Operated Center

*See the definitions provided in the Guidance section for Data Element 8 a-d, Column A.*

**Data Accuracy Checks**

**Check 1:** The sum of rows 8a, 8b, 8c and 8d must equal Element 2b in the same column. If the numbers are not the same, there is an error that should be corrected.

**Check 2:** Add the reported numbers across each row (Columns B-L). The total sum must be equal to, or greater than, the number reported on the same row in Column A. If the sum is less than the number reported on the same row in Column A, there is an error that should be corrected.

**Guidance:** This is a count of **children**, NOT families. For each payment type (row) a child can be counted in more than one provider type column (Columns B-L) if the child receives care from more than one provider type for different portions of the typical day, week, or month.

**Example:** If a child being served using certificates (8b) receives before school care with a family home provider, and after school care in a center, that child would be counted on row 8b in two care type columns (family home and center).

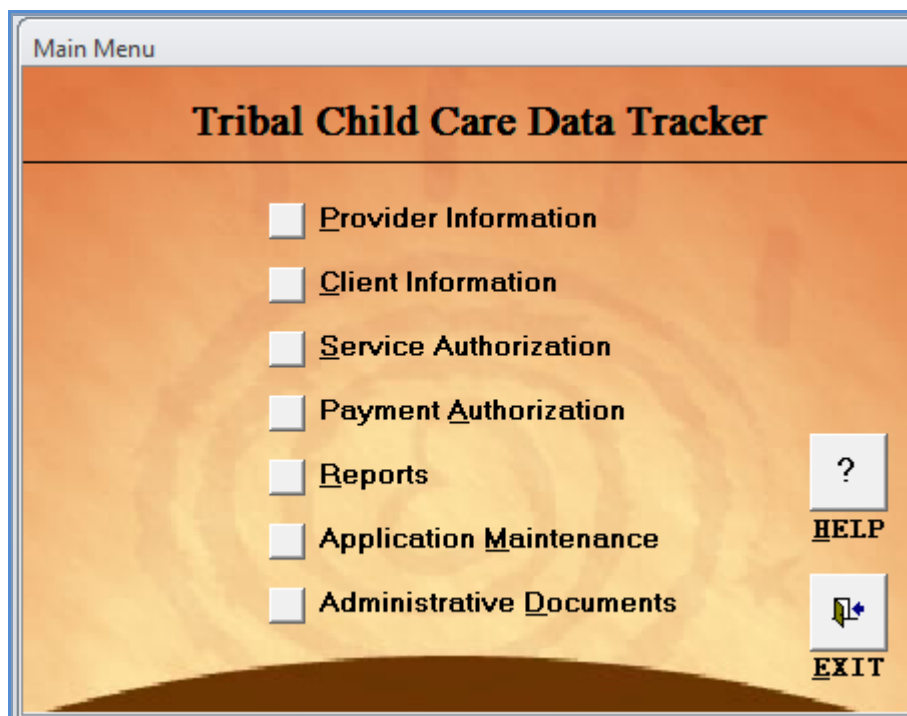
*When data are applicable but not available, provide a footnote in the comment section explaining when the missing data will be submitted.*

## Iib. Computer Preparation of Part 1: Administrative Data

To facilitate the preparation of the ACF-700 report, some Tribal grantees use automated systems to capture and manage the required information. The Office of Child Care (OCC) recognized that many Tribal grantees did not have access to information systems that would allow for the capture and management of information for the required ACF-700 report, and developed the *Child Care Data Tracker (Tracker)* to facilitate the reporting process. The use of this software is optional for the Tribal grantees.

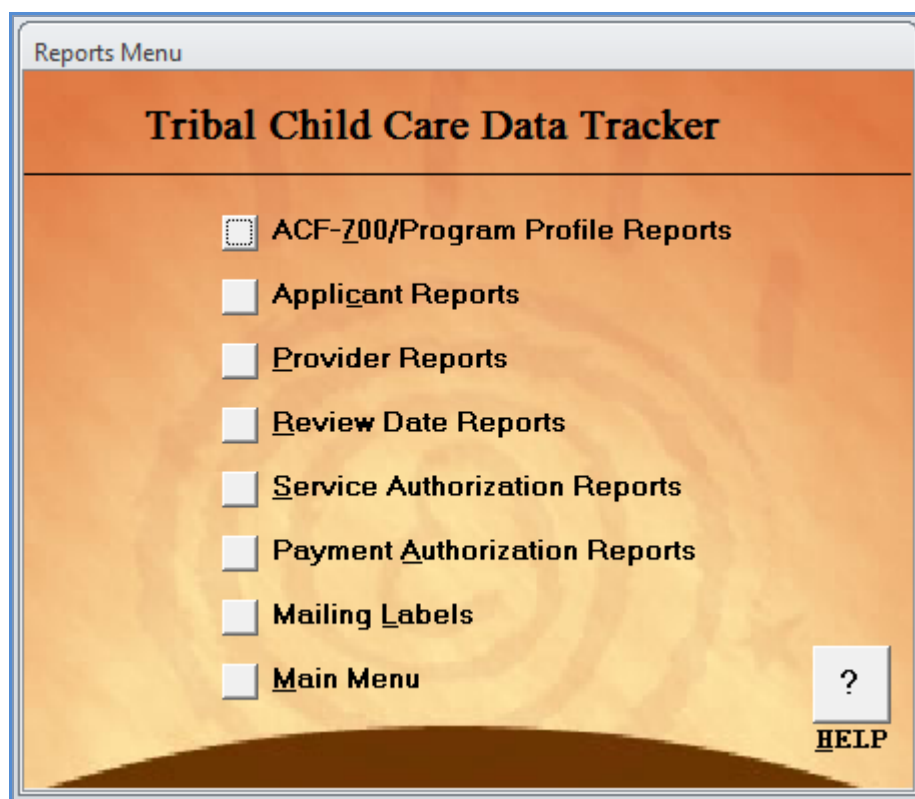
### Tribal Child Care Data Tracker

The *Tracker* is a Microsoft Access-based software tool that is installed and used on any computer that supports Microsoft Access. It is a comprehensive case management tool that can help you to maintain all of your client records and allows you to record a broad range of information about clients including demographics, eligibility reviews, services received, and payments made. The *Tracker* also can automatically generate a variety of reports, including the required ACF-700 report, based on the required data that you enter. The software is available free of charge to CCDF Tribal Grantees. Over time, several versions of the *Tracker* have been developed, each of which has made the software more user-friendly and allowed it to function more efficiently.



Child Care Data Tracker Main Menu

The *Tracker* functions generally parallel the activities used by child care program staff with the families they serve. There are several data entry modules in the *Tracker* that allow you to keep track of your children and families, providers, service authorizations and payments. The ACF-700 report is based on the information/data that you enter in these modules. Program information that is required for the ACF-700 report also is required by the software when you use the *Tracker*. This feature of requiring certain data ensures that you will be able to generate an ACF-700 report at the end of the year. In addition to generating the ACF-700 report, the report module in the *Tracker* allows you to generate applicant, provider, service, and payment reports with a variety of sorting options. To learn more about the *Child Care Data Tracker*, see the OCC website at: <https://www.acf.hhs.gov/occ/resource/child-care-data-tracker> for hardware and software requirements and for a downloadable copy of the *User's Guide*.



**Child Care Data Tracker Reports Menu**

### **III. Preparing Part 2: Tribal Narrative of the CCDF Tribal Annual Report (ACF-700)**

The Tribal Narrative (Part 2 of the ACF-700 Form) requests descriptions of the results of specific CCDF-funded activities available on the Tribal Lead Agency's (TLA) reservation or Tribal service area. The Tribal Narrative has been revised to require grantees to respond to specific questions. This new format will allow the Office of Child Care (OCC) the ability to more easily generate aggregate information and therefore better understand Tribal activities as they relate to quality activities, Tribal use of funds, technical assistance needs, and how Tribal grantees are calculating Part 1 of the ACF-700 report.

The questions Tribal grantees are required to answer are detailed on the ACF-700 form in *Appendix A*. The Tribal Narrative can be completed electronically via the ACF-700 Submission site (see additional information in section IV.a). If completing the form manually, you should respond to the questions by putting a check in the box associated with the appropriate response(s). Each of the questions also has a descriptive (or narrative) requirement. You should describe in detail your response to each of the questions. If you need additional space, please provide the details in a separate document.

### **IV. Submitting the Annual Report**

Each Tribal Lead Agency must submit the information requested on the ACF-700 Annual Report by December 31 for the preceding Federal fiscal year (FFY), covering the services provided during the period from October 1 through September 30. ACF Regional Offices are responsible for monitoring compliance with timeliness of submissions. Tribal Lead Agencies anticipating problems in complying with the reporting requirement should contact the ACF Regional Office (*see contact information in Section V*).

The Office of Child Care (OCC) instructs grantees to submit both parts of the Tribal Annual Report using the ACF-700 Internet Submission site on the OCC web site.

Tribal grantees should enter the details of Part 1 (Administrative Data) and Part 2 (Tribal Narrative) into the OCC Internet submission site at <https://extranet.acf.hhs.gov/acf700/login/login700.jsp>. This page contains a password-protected web-based form that checks the administrative data for compliance with data standards at the time of submission. These built-in edit-checking features make it easier for Tribes to identify and correct errors. Use of the paperless Internet data entry site streamlines submission processing and improves data quality. When you submit the ACF-700 report via the web site, you do not have to send additional paper copies via mail or fax. You should, however, notify your Federal Regional Office of Child Care Staff when you have completed your report submission.

## **CCDF Tribal Annual Report (ACF-700):** Guide For CCDF Tribal Lead Agencies

The submission web page requires a login and password. Some Tribes have already designated individuals to access the ACF-700 Internet Submission site. The login and password carry over to each new reporting period, so there is no need to register each year to use the submission site.

To register new staff or otherwise modify registration information, submit the ACF-700 Internet Submission Registration Form in *Appendix C* by email, mail or fax to:

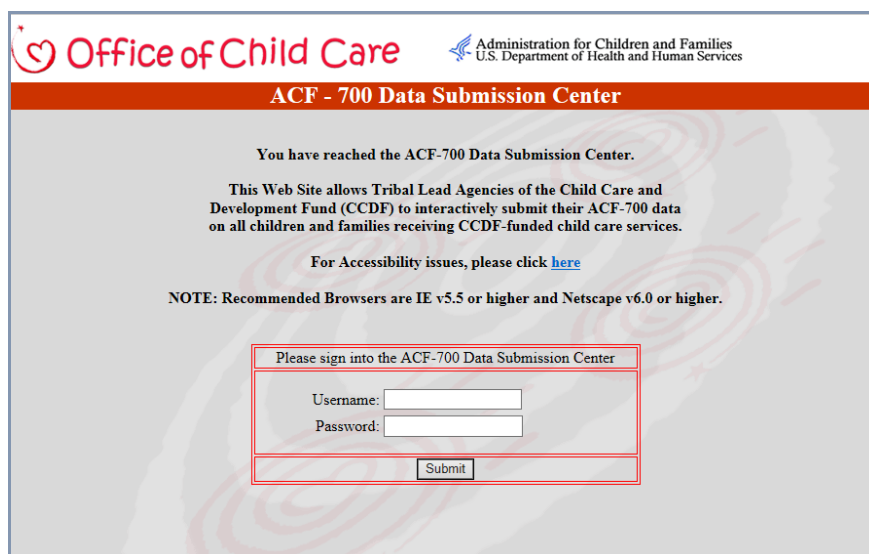
National Center on Child Care Data and Reporting (NCDR)  
6003 Executive Blvd., Suite 400  
Rockville, Maryland 20852  
[NCDR@ecetta.info](mailto:NCDR@ecetta.info)  
Fax: 301-816-8640

NCDR will contact the staff identified on the form to provide further instructions and guidance. The Tribal Lead Agency may contact NCDR at their toll-free number: 877-249-9117, weekdays from 9:00 a.m. to 5:00 p.m. (Eastern Time), or by email at: [NCDR@ecetta.info](mailto:NCDR@ecetta.info).

## **IVa. Logging into and Using the ACF-700 Submission Site**

To submit your ACF-700 report (or to access and/or edit previously submitted data) using the OCC Internet Submission site (<https://extranet.acf.hhs.gov/acf700/login/login700.jsp>), you must first access the web page using the Internet.

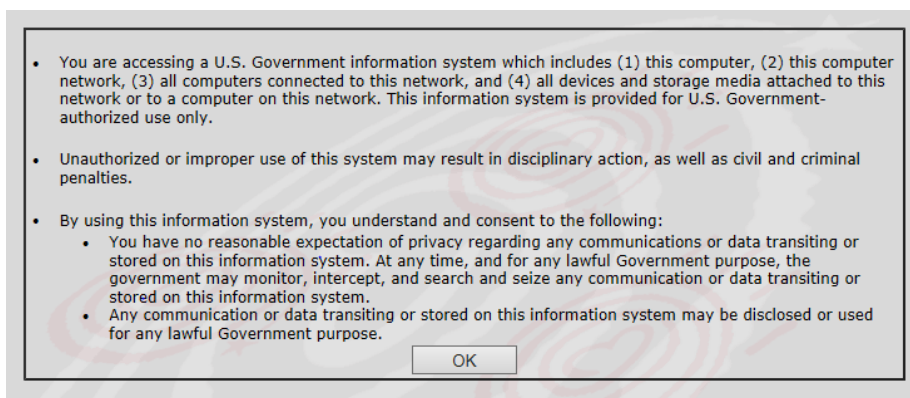
Once there, enter your username and password (assigned by NCDR) in the “Username” and “Password” fields and click the SUBMIT button.



The screenshot shows the login page for the ACF-700 Data Submission Center. At the top, there is a header with the "Office of Child Care" logo on the left and the "Administration for Children and Families U.S. Department of Health and Human Services" logo on the right. Below the header is a red banner with the text "ACF - 700 Data Submission Center". The main content area has a light gray background with a faint circular pattern. It contains the following text: "You have reached the ACF-700 Data Submission Center." followed by "This Web Site allows Tribal Lead Agencies of the Child Care and Development Fund (CCDF) to interactively submit their ACF-700 data on all children and families receiving CCDF-funded child care services." Below this is a link: "For Accessibility issues, please click [here](#)". Then, a note: "NOTE: Recommended Browsers are IE v5.5 or higher and Netscape v6.0 or higher." At the bottom, there is a login form with the title "Please sign into the ACF-700 Data Submission Center". The form has two input fields: "Username:" and "Password:". Below these fields is a "Submit" button.

### **ACF-700 Submission Site Login Page**

The U.S. Government disclaimer will display. Click the “OK” button to accept the conditions for using the site.



The screenshot shows a disclaimer dialog box with a gray background and a black border. It contains the following text: "• You are accessing a U.S. Government information system which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only." followed by "• Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties." and "• By using this information system, you understand and consent to the following:" followed by two bullet points: "• You have no reasonable expectation of privacy regarding any communications or data transiting or stored on this information system. At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this information system." and "• Any communication or data transiting or stored on this information system may be disclosed or used for any lawful Government purpose." At the bottom right of the dialog box is an "OK" button.

The welcome page will open displaying your name – this indicates that you have successfully entered the submission site.

## IVb. Submission of Part 1: Administrative Data on the ACF-700 Submission Site

After accessing the site, select the appropriate fiscal year of the data that you would like to enter from the “Federal Fiscal Year” drop-down list. Next, click on the **Go** button next to “ACF-700 form” to access Part 1 of the report (the Administrative Data portion of the report).

The screenshot shows the 'ACF-700 Data Submission Center' interface. At the top, it says 'Welcome Jane Doe' and 'Congratulations !!!'. Below this, it instructs the user to select a Federal Fiscal Year from a dropdown menu. The dropdown menu is currently set to 'FFY 2016'. To the right of the dropdown menu, there is a 'Go' button. A red arrow points to this 'Go' button. Below the dropdown menu, there are several buttons: 'ACF-700 Form (Data Entry)', 'ACF-700 Form Part 2 Page 1', and 'ACF-700 Form Part 2 Page 2'. A red arrow points to the 'ACF-700 Form (Data Entry)' button.

**NOTE: DO NOT** use the **(Text Version)** buttons. The **Text Version** is designed for use specifically by persons with visual impairments.

Part 1 of the ACF-700 form will open with your existing Tribal Lead Agency name and address noted. Make any needed corrections to this contact information before you begin entering data.

The screenshot shows the 'Child Care and Development Fund Annual Report' form. At the top, there is a legend: a red box for '- Missing Data', a yellow box for '- Inconsistent Data', and a white box for '- Correct Data'. Below this, the form title is 'CHILD CARE AND DEVELOPMENT FUND ANNUAL REPORT'. There is a 'Help' button. The report period is 'ON SERVICES PROVIDED FROM 10/01/2006 THROUGH 09/30/2007'. The form includes fields for 'Name of Tribal Lead Agency', 'Child Care Program', 'Address', 'City', 'State', 'Zip', 'Contact Person', 'Phone', and 'E-mail'. Below these fields, there is a table for 'ON SERVICES PROVIDED FROM 10/01/2006 THROUGH 09/30/2007'. The table has columns for 'TOTAL', 'Relative', 'Non-Relative', 'Relative', and 'No Relative'. The table rows are for '1. Number of families receiving child care services', '2a. Average number of children served per month', '2b. Total number of children receiving child care services', and '3. Age breakdown of children receiving child care services: a. 0 up to 1 year'.



## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

Note that when the form is first opened and before any data is entered, all of the fields are white. When you begin to enter information, all of the cells will change to red or yellow and the colors of the fields may continue to change as you enter information. This color coding helps you to identify and correct any potential data problems.

CHILD CARE AND DEVELOPMENT FUND ANNUAL REPORT										OMB Control Number: 0970-0430		
ON SERVICES PROVIDED FROM OCTOBER 1, 2015 THROUGH SEPTEMBER 30, 2016										Expiration Date: 11/30/2019		
Complete Name of Tribal Lead Agency:										Category/Type of child care		
Address:										CARE PROVIDED BY CCDF PROVIDER- NO LICENSE CATEGORY AVAILABLE IN A		
City:										CARE PROVIDED BY CCDF PROVIDER- LICENSED OR REGULATED IN A		
State:												
Zip:												
Contact Person:												
Phone:												
E-mail:												
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	TOTAL	Relative	Non-Relative	Relative	Non-Relative	Relative	Non-Relative	Center	Child's Home	Family Home	Group Home	Center
1. Total number of families that received services this fiscal year												
2a. Average number of children served each month												
2b. Total number of children that received services this fiscal year												
3. Total number of children receiving services that fall into each age category:												
a. 0 up to 1 year												
b. 1 year up to 2 years												
c. 2 years up to 3 years												
d. 3 years up to 4 years												
e. 4 years up to 5 years												
f. 5 years up to 6 years												
g. 6 years up to 13 years												
h. Total number of children 0 up to 13 years (Add Column A, 3a through 3g)												
i. 13 years and older												
4. Number of children who received child care services												
Because:												
a. Their parent(s) worked												
b. Their parent(s) were in training or an education program												
c. Child received or is in need of protective services												
Because there was a Federal Emergency and:												
d. Their parent(s) worked												
e. Their parent(s) were in training or an education program												
f. Child received or is in need of protective services												
5. Average number of hours of child care service provided per child per month												
6. Average monthly amount paid for child care service												
a. Average monthly CCDF program subsidy per child												
b. Average monthly parent copayment per child												
7. Number of children served whose family income was:												
a. at or below the poverty threshold for families of the same size												
b. above the poverty threshold but at or below 150 percent of the poverty threshold for families of the same size												
c. above 150 percent of the poverty threshold but at or below 200 percent of the poverty threshold for families of the same size												
d. above 200 percent of the poverty threshold for families of the same size												
8. Number of children served by payment type this fiscal year:												
a. Grant/contract with provider												
b. Certificate or voucher to parent and/or provider												
c. Cash payment to parent												

## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

The Internet Submission site checks for two types of errors (see *Table 3* for additional details):

- If the field has been left **blank** (red cells), and
- If the data in specific fields are **inconsistent** (yellow cells) with information in related fields.

Meeting the system quality checks does not guarantee that the information is correct. You still must review your own report carefully to ensure that the data you submit to the OCC accurately reflects the families and children you serve, and the services you provide.

If the system notes a potential error, a red arrow button will be shown by the data element in question. You can click the red arrow to display an explanation of the possible error and use the guidance to make corrections to your report.

2b. Total number of children receiving child care service	16	0	0	0	0	0	0	0	0	0
3. Age breakdown of children receiving child care services:										
a. 0 up to 1 year	5	0	0	0	0	0	0	0	0	0
b. 1 year up to 2 years	4	0	0	0	0	0	0	0	0	0
c. 2 years up to 3 years	5	0	0	0	0	0	0	0	0	0
d. 3 years up to 4 years	0	0	0	0	0	0	0	0	0	0
e. 4 years up to 5 years	2	0	0	0	0	0	0	0	0	0
f. 5 years up to 6 years	0	0	0	0	0	0	0	0	0	0
g. 6 years up to 13 years	0	0	0	0	0	0	0	0	0	0
h. 0 up to 13 years (sum of rows 3a through 3g)	16	0	0	0	0	0	0	0	0	0
i. 13 years and older	0	0	0	0	0	0	0	0	0	0
4. Number of children receiving child care services because:										
a. Parent is (or parents are) working	12									
b. Parent is (or parents are) in training or education program	1									
c. Child is receiving or in need of protective services	1									
5. Average number of hours of child care service provided per child per month	7	0	0	0	0	0	0	0	0	0
6. Average monthly amount paid for child care service per child										
a. Average monthly CCDF subsidy	250	0	0	0	0	0	0	0	0	0
b. Average monthly parent copayment	75	0	0	0	0	0	0	0	0	0
7. Number of children receiving child care services from families with incomes:										
a. at or below the poverty threshold for families of the same size	3									

## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

Consistency check between the "Total Number of Children Receiving Child Care Services" row and the sum of four "Poverty Threshold" rows. Do this check for Column A only.

Number of Children Receiving Child Care Services from Families with Income ...

Element 2b, Total Number of Children Receiving Child Care Services = { Element 7a, At or Below Poverty Threshold + Element 7b, Above Threshold But at or Below 150% + Element 7c, Between 150% and 200% of Threshold + Element 7d, Above 200% of Poverty Threshold }

Close Window

2a. Average number of children served															
2b. Total number of children receiving services:															
a. 0 up to 1 year															
b. 1 year up to 2 years															
c. 2 years up to 3 years															
d. 3 years up to 4 years															
e. 4 years up to 5 years															
f. 5 years up to 6 years															
g. 6 years up to 13 years															
h. 0 up to 13 years (sum of rows 3a through 3g)	16	0	0	0	0	0	0	0	0	0	0	0	0	0	17
i. 13 years and older	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Number of children receiving child care services because:															
a. Parent is (or parents are) working	12														
b. Parent is (or parents are) in training or education program	1														
c. Child is receiving or in need of protective services	1														
5. Average number of hours of child care service provided per child per month	7	0	0	0	0	0	0	0	0	0	0	0	0	8	8
6. Average monthly amount paid for child care service per child															

Be sure to **first save your data** and then check your entered data for errors. To check for errors, click the **Error Check Results** button located at the bottom of the page. A page will open that lists the errors for your submitted data or indicates that no errors were found.

Administration for Children and Families  
U.S. Department of Health and Human Services

**ACF - 700 Data Submission Center**

Field (Phone:) - Missing data.

Field (E-mail:) - Missing data.

[Back to ACF-700 form](#) [Back to Welcome page](#) [Back to Login Page](#)

### Things to Remember:

You must enter information in each of the cells on Part 1 of the ACF-700 form on the submission site. Do not leave any cells blank. Each cell should have either a number or NA (See *Table 2* for the appropriate use of NA - not applicable).

You should use the "Comments" field to enter information that would help clarify any special reporting circumstances or to explain any peculiarities in your data (See *Table 1* for further information). If your program uses funds other than CCDF grant dollars to further support direct child care services for the children being reported on the ACF-700, you should

## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

indicate the use of those funds and identify the funding source in the "Comments" field on Part 1 of the ACF-700 report.

When you have completed entering and checking information, click the **Save/Submit Form** button at the bottom of the screen to save your information and submit it to OCC. **If you exit the form without saving it, all of the information you entered will be lost.**

If you need to stop data entry and finish entering information at another time, you still should click the **Save/Submit Form** button. Everything that you have entered to that point will be saved and available when you return later to complete the form. It is acceptable to submit a partially completed form as long as you remember to return and complete it in a timely manner. Upon saving your data, the next screen will indicate that you have successfully uploaded the data. **After 15 minutes of inactivity, the site will close and any unsaved data entry will be lost.**

Administration for Children and Families  
U.S. Department of Health and Human Services

**ACF - 700 Data Submission Center**

You have successfully uploaded the ACF-700 data for **FFY 2013**

Back to Welcome Page

Upon returning to the ACF-700 form (after saving the data), a print button will display on the bottom right hand corner of the screen. To print your report, click the **Print this Form** button. We recommend that you always keep a hard copy of each year's report for future reference.

c. Child is receiving or in need of protective services	0										
5. Average number of hours of child care service provided per child per month	145	0	0	150	140	0	0	150	0	140	0
6. Average monthly amount paid for child care service per child											
a. Average monthly CCDF subsidy	169	0	0	173	158	0	0	191	0	74	0
b. Average monthly parent copayment	10	0	0	15	10	0	0	1	0	54	0
7. Number of children receiving child care services from families with income:											
a. at or below the poverty threshold for families of the same size	9										
b. above the poverty threshold but at or below 150 percent of the poverty threshold for families of the same size	3										
c. above 150 percent of the poverty threshold but at or below 200 percent of the poverty threshold for families of the same size	0										
d. above 200 percent of the poverty threshold for families of the same size	0										
Comments:											
<div><input type="button" value="Print this form"/> <input type="button" value="Save/Submit Form"/> <input type="button" value="Error Check Results"/></div>											

## IVc. Submission of Part 2: Tribal Narrative on the ACF-700 Submission Site

The Supplemental Narrative is separated into two pages on the submission site; either page can be accessed from the Welcome Page of the site. To access and respond to question #1, click on the **Go** button associated with Part 2, *Page 1*. To respond to questions #2 - #6, click on the **Go** button associated with Part 2, *Page 2*.

Welcome First Name SecTribeUser

Congratulations !!!

You have successfully entered the ACF-700 Data Submission Center.  
Please follow the instructions below to access your ACF-700 data  
and/or to generate a Tribal Story Page based on your ACF-700 data

1) Please select the desired Federal Fiscal Year:

Federal Fiscal Year:

2) Please select:

- the ACF-700 Form (Data Entry) Button to enter, edit, view ACF-700 data
- Or
- the Tribal Story Page Button to generate ACF-700 Tribal Story Page  
(NOTE: ACF-700 data must be entered to generate Tribal Story Page)

ACF-700 Form (Data Entry) Tribal Story Page

(Text Version) (Text Version)

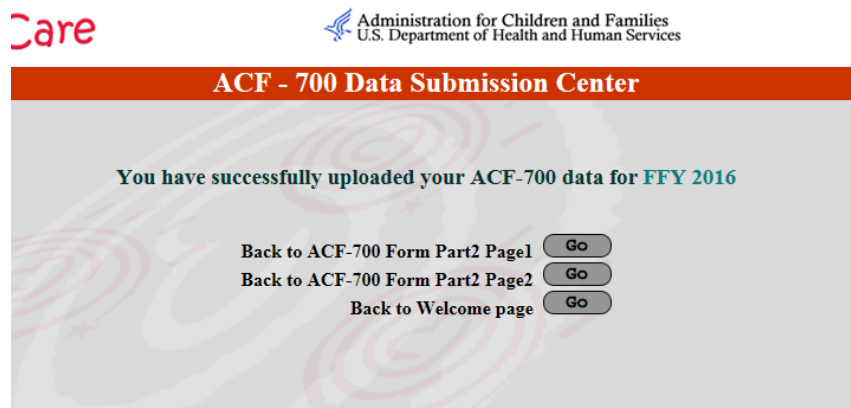
ACF-700 Form Part 2 Page 1

ACF-700 Form Part 2 Page 2

Indicate Tribal program details and activities by checking the appropriate boxes to respond to the questions and provide further details in the “Describe” boxes. **The “Describe” boxes have a 4,000 character limit (including spaces).** Answer all of the questions on both Pages to complete your Narrative portion of the report. Do not leave any questions blank.

1. Provide a brief description of the Tribe's quality improvement activities during the last fiscal year by answering the questions below. Please check all boxes that apply. field, identify the Tribal Lead Agency's accomplishments and best practices.	
1a. What trainings did the Tribal Lead Agency provide for child care providers? Check all that apply.	<input type="checkbox"/> Prevention and control of infectious diseases (including immunizations)
	<input type="checkbox"/> Prevention of sudden infant death syndrome (SIDS) and use of safe sleeping practices
	<input type="checkbox"/> Administration of medication, consistent with standards for parental consent
	<input type="checkbox"/> Prevention of and response to emergencies due to food and allergic reactions
	<input type="checkbox"/> Prevention of shaken baby syndrome and abusive head trauma
	<input type="checkbox"/> Emergency preparedness and response planning for emergencies resulting from natural disaster or a human-caused event (such as violence at a child care facility)
	<input type="checkbox"/> Handling and storage of hazardous materials and the appropriate disposal of bio contaminants
	<input type="checkbox"/> Building and physical premises safety, including identification of and protection from hazard that can cause bodily injury such as electrical hazards, bodies of water
	<input type="checkbox"/> Precautions in transporting children (if applicable)
	<input type="checkbox"/> Family engagement
<input type="checkbox"/> Nutrition	
<input type="checkbox"/> Promotion of child development	
<input type="checkbox"/> Fiscal management	
<input type="checkbox"/> Curriculum development and instruction	
<input type="checkbox"/> Other topic(s) (List):	
<input checked="" type="checkbox"/> First aid and cardiopulmonary resuscitation (CPR) certification	
<input type="checkbox"/> Access to physical activity	
<input type="checkbox"/> Language and literacy	
<input type="checkbox"/> Caring for children with special needs	
<input type="checkbox"/> Administration and Program management	
<input type="checkbox"/> Child care as a business	
<input type="checkbox"/> None	
Describe the trainings the Tribal Lead Agency provided during the fiscal year. In your narrative, please also include the number of providers trained during	
<input type="text"/>	

Click the **Save/Submit Form** button at the bottom of the form to save all entered information before navigating to the next page. A message will display indicating that your information has been uploaded. At any time, you can return to the site to make edits or to complete the form if you left it unfinished. If you exit the form without saving, your information will be lost.



From the successful upload page, you can go to either page of the Supplemental Narrative or return to the Welcome Page, where you can access Part 1 of the ACF-700 report.

**NOTE: Both pages of Part 2, the Supplemental Narrative, must be completed.**

## **V. Resources**

### **National Center on Data and Reporting**

If you have questions or need additional assistance completing the ACF-700 or using the *Child Care Data Tracker software*, contact the National Center on Data and Reporting (NCDR). The NCDR was established by the Office of Child Care to provide technical assistance related to the grantee reporting requirements. You may contact NCDR by e-mail, phone, fax, or mail. The NCDR staff is available Monday-Friday, 9:00 am to 5:00 pm, prevailing Eastern Time. All voice-mail messages left during or outside of those hours are returned promptly.

National Center on Data and Reporting (NCDR)  
6003 Executive Blvd., Suite 400  
Rockville, MD 20852  
Phone: 877-249-9117 (toll-free)  
Fax: 301-816-8640  
E-mail: [NCDR@ecetta.info](mailto:NCDR@ecetta.info)

### **Regional Office Contact information**

If you have questions regarding policy issues, contact your Regional Office.

#### **List of Regional Office addresses and phone numbers**

<https://www.acf.hhs.gov/occ/resource/regional-child-care-program-managers>

# CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

## Appendix A – ACF-700 Form

CHILD CARE AND DEVELOPMENT FUND ANNUAL REPORT ON SERVICES PROVIDED FROM OCTOBER 1, 20__ THROUGH SEPTEMBER 30, 20__										OMB Control Number: 0970-0430 Expiration Date: 11/30/2019			
COMPLETE NAME OF TRIBAL LEAD AGENCY:		CATEGORY/TYPE OF CHILD CARE											
ADDRESS:		CARE PROVIDED BY A CCDF PROVIDER – NO LICENSE CATEGORY AVAILABLE IN A						CARE PROVIDED BY CCDF PROVIDER – LICENSED OR REGULATED IN A					
CONTACT PERSON:		CHILD'S HOME BY A		FAMILY HOME BY A		GROUP HOME BY A		(H) Center	(I) Child's Home	(J) Family Home	(K) Group Home	(L) Center	
Phone:		(B) Relative	(C) Non- Relative	(D) Relative	(E) Non- Relative	(F) Relative	(G) Non- Relative						
E-Mail:		TOTAL											
<b>PART 1</b>													
1. Total number of families that received child care services this fiscal year													
2 a. Average number of children served each month													
2 b. Total number of children that received services this fiscal year													
3. Total number of children receiving services that fall into each age category:													
a. 0 up to 1 year		a.	a.	a.	a.	a.	a.	a.	a.	a.	a.	a.	a.
b. 1 year up to 2 years		b.	b.	b.	b.	b.	b.	b.	b.	b.	b.	b.	b.
c. 2 years up to 3 years		c.	c.	c.	c.	c.	c.	c.	c.	c.	c.	c.	c.
d. 3 years up to 4 years		d.	d.	d.	d.	d.	d.	d.	d.	d.	d.	d.	d.
e. 4 years up to 5 years		e.	e.	e.	e.	e.	e.	e.	e.	e.	e.	e.	e.
f. 5 years up to 6 years		f.	f.	f.	f.	f.	f.	f.	f.	f.	f.	f.	f.
g. 6 years up to 13 years		g.	g.	g.	g.	g.	g.	g.	g.	g.	g.	g.	g.
h. Total number of children 0 to 13 years (add Column A, 3a thru 3g)		h.	h.	h.	h.	h.	h.	h.	h.	h.	h.	h.	h.
i. 13 years and older		i.	i.	i.	i.	i.	i.	i.	i.	i.	i.	i.	i.
4. Number of children who received child care services													
Because:													
a. Their parent(s) worked		a.											
b. Their parent(s) were in training or an education program		b.											
c. Child received or needed protective services		c.											
Because there was a Federal Emergency and:													
d. Their parent(s) worked		d.											
e. Their parent(s) were in training or an education program		e.											
f. Child received or needed protective services		f.											
5. Average number of hours of child care service provided per child per month													
6. Average monthly amount paid for child care service													
a. Average monthly CCDF program subsidy per child		a.	a.	a.	a.	a.	a.	a.	a.	a.	a.	a.	a.
b. Average monthly parent copayment per child		b.	b.	b.	b.	b.	b.	b.	b.	b.	b.	b.	b.
7. Number of children served whose family income was:													
a. at or below the poverty threshold for families of the same size		a.											
b. above the poverty threshold but at or below 150 percent of the poverty threshold for families of the same size		b.											
c. above 150 percent of the poverty threshold but at or below 200 percent of the poverty threshold for families of the same size		c.											
d. above 200 percent of the poverty threshold for families of the same size		d.											
8. Number of children served by payment type this fiscal year:													
a. Grant/contract with provider		a.	a.	a.	a.	a.	a.	a.	a.	a.	a.	a.	a.
b. Certificate or voucher to parent and/or provider		b.	b.	b.	b.	b.	b.	b.	b.	b.	b.	b.	b.
c. Cash payment to parent		c.	c.	c.	c.	c.	c.	c.	c.	c.	c.	c.	c.
d. Tribally-operated center		d.	d.	d.	d.	d.	d.	d.	d.	d.	d.	d.	d.
Comments: (Please use the back of this sheet if necessary)													
Public reporting burden for this collection of information is estimated to average 35 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.													

CCDF grantees with 102-477 status are not required to complete the ACF-700 report.



## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

PART 2	
TRIBAL NARRATIVE QUESTIONS	
1. Provide a brief description of the Tribe's quality improvement activities during the last fiscal year by answering the questions below. Please check all the boxes that apply. Under the "Describe" field, identify the Tribal Lead Agency's accomplishments and best practices.	
1a. What trainings did the Tribal Lead Agency provide for child care providers? Check all that apply.	<div> <input type="checkbox"/> Prevention and control of infectious diseases (including immunizations)  <input type="checkbox"/> Prevention of sudden infant death syndrome (SIDS) and use of safe sleeping practices  <input type="checkbox"/> Administration of medication, consistent with standards for parental consent  <input type="checkbox"/> Prevention of and response to emergencies due to food and allergic reactions  <input type="checkbox"/> Prevention of shaken baby syndrome and abusive head trauma  <input type="checkbox"/> Emergency preparedness and response planning for emergencies resulting from a natural disaster or a human-caused event (such as violence at a child care facility)  <input type="checkbox"/> Handling and storage of hazardous materials and the appropriate disposal of bio contaminants  <input type="checkbox"/> Building and physical premises safety, including identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic  <input type="checkbox"/> Precautions in transporting children (if applicable)  <input type="checkbox"/> Family engagement  <input type="checkbox"/> Nutrition  <input type="checkbox"/> Language and literacy  <input type="checkbox"/> Fiscal management  <input type="checkbox"/> Curriculum development and instruction  <input type="checkbox"/> Other topic(s) (List): </div> <div> <input type="checkbox"/> First aid and cardiopulmonary resuscitation (CPR) certification  <input type="checkbox"/> Access to physical activity  <input type="checkbox"/> Promotion of child development  <input type="checkbox"/> Caring for children with special needs  <input type="checkbox"/> Administration and program management  <input type="checkbox"/> Child care as a business  <input type="checkbox"/> None </div> <p>Describe the trainings the Tribal Lead Agency provided during the fiscal year. In your narrative, please also include the number of providers trained during the fiscal year:</p>
1b. Did the Tribal Lead Agency support child care providers in achieving any of the following along a career pathway? Check all that apply.	<div> <input type="checkbox"/> Credit towards required training hours  <input type="checkbox"/> Credential  <input type="checkbox"/> Other (List): </div> <div> <input type="checkbox"/> Certificate  <input type="checkbox"/> Degree  <input type="checkbox"/> None </div> <p>Describe the support given to providers in achieving credits, credentials, or degrees. In your narrative, please also include the number of providers who received support from the Tribal Lead Agency to obtain credits, credentials, or degrees. (For example, providing educational opportunities to support a pathway to professional development in early childhood development that enables providers to earn a Child Development Associate (CDA) credential, an AA or BA degree, etc.; offering a Native language credential; or providing coaching to providers on dealing with children's challenging behaviors.):</p>
1c. How did the Tribal Lead Agency assist providers in meeting health and safety standards? Check all that apply.	<div> <input type="checkbox"/> Provide health and safety equipment/materials  <input type="checkbox"/> Classroom materials and resources  <input type="checkbox"/> Other (List): </div> <div> <input type="checkbox"/> Grants/mini-grants for health and safety equipment/materials  <input type="checkbox"/> Financial assistance in meeting licensing requirements  <input type="checkbox"/> None </div> <p>Describe how the Tribal Lead Agency assisted providers in meeting health and safety standards:</p>
1d. How did the Tribal Lead Agency support and provide culturally appropriate activities to children, parents, and providers? Check all that apply.	<div> <input type="checkbox"/> Incorporation of Tribal language into child care settings  <input type="checkbox"/> Served traditional Tribal foods in facilities  <input type="checkbox"/> Culturally-based training to non-Tribal providers  <input type="checkbox"/> None </div> <div> <input type="checkbox"/> Modified curriculum to reflect Tribal culture  <input type="checkbox"/> Culturally-based training opportunities for parents and providers  <input type="checkbox"/> Other (List): </div> <p>Describe the Tribal Lead Agency's support and provision of culturally appropriate activities:</p>



## CCDF Tribal Annual Report (ACF-700): Guide For CCDF Tribal Lead Agencies

<p>1e. How did the Tribal Lead Agency provide consumer education to parents and providers? Check all that apply.</p>	<p> <input type="checkbox"/> Written materials, including newsletters, brochures, booklets, checklists, or handbooks about child care topics.  <input type="checkbox"/> Local/Tribal media  <input type="checkbox"/> Social media such as Facebook, Twitter, Instagram  <input type="checkbox"/> Guidance and Education from Child Care Resource and Referral Agencies  <input type="checkbox"/> Internet, including electronic media, publications, and webcasts about child care topics  <input type="checkbox"/> Postings on community bulletin boards  <input type="checkbox"/> Other (List):  <input type="checkbox"/> None         </p> <p><b>Describe the consumer education the Tribal Lead Agency provided to parents and child care providers:</b></p>
<p>1f. Did any CCDF child care providers participate in the following? Check all that apply.</p>	<p> <input type="checkbox"/> State system of assessing and improving quality such as Quality Rating Improvement System (QRIS)  <input type="checkbox"/> Tribal system of assessing and improving quality, such as QRIS  <input type="checkbox"/> Nationally-recognized accreditation  <input type="checkbox"/> Other (List):  <input type="checkbox"/> None         </p> <p><b>Describe the quality rating improvement system used. If none was selected, please explain why no quality rating improvement system is being used:</b></p>
<p>1g. Describe any other significant quality activities that occurred during the last fiscal year:</p>	
<p><b>2. Did the Tribal Lead Agency coordinate activities with child care and early childhood development programs during the last fiscal year?</b></p>	
<p>Check all that apply.</p>	<p> <input type="checkbox"/> Head Start  <input type="checkbox"/> Home visiting  <input type="checkbox"/> Child and Adult Care Food Program (CACFP)  <input type="checkbox"/> Public health entities (including agencies responsible for immunizations and dental care)  <input type="checkbox"/> Temporary Assistance for Needy Families (TANF)  <input type="checkbox"/> Public-private partnerships  <input type="checkbox"/> Social services  <input type="checkbox"/> Employment services/Workforce development  <input type="checkbox"/> Other (List):  <input type="checkbox"/> None         </p> <p> <input type="checkbox"/> Early Head Start  <input type="checkbox"/> State Child Care Development Fund (CCDF)  <input type="checkbox"/> Summer Food Service Program  <input type="checkbox"/> Early Head Start - Child Care Partnerships  <input type="checkbox"/> Pre-Kindergarten  <input type="checkbox"/> Public Education         </p> <p><b>Describe the coordinated activities during the fiscal year:</b></p>
<p><b>3. Did the Tribal Lead Agency supplement the CCDF grant with dollars from other sources to help run the child care program during the last fiscal year? Check one.</b></p> <p> <input type="checkbox"/> Yes      <input type="checkbox"/> No         </p>	
<p>a. If yes, what other sources of funding were used? Check all that apply.</p>	<p> <input type="checkbox"/> Tribal funds    <input type="checkbox"/> Grant/Foundation funds    <input type="checkbox"/> Private donations    <input type="checkbox"/> State funds    <input type="checkbox"/> Other Federal funds    <input type="checkbox"/> Other (List):         </p> <p><b>Describe the additional sources of funding and how they were used:</b></p>

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<b>4. Does the Tribal Lead Agency have any unmet technical assistance needs? Check one.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Describe the Tribal Lead Agency's unmet technical assistance needs (up to five areas):	
<b>5. Did the Tribal Lead Agency use the Child Care Data Tracker to collect data during the last fiscal year? Check one.</b> <input type="checkbox"/> Yes (proceed to 5a) <input type="checkbox"/> No (proceed to 5b)	
a. If yes, please include a description of how the Tribal Lead Agency is using the Child Care Data Tracker for the ACF-700 report or other data reporting and administrative efforts.	Describe:
b. If no, please describe why the Tribal Lead Agency is not using the Child Care Data Tracker.	Describe:
<b>6. In Section 5.1.1 of the Tribal Plan, Tribal Lead Agencies were asked to identify goals. The following questions will be related to the goals identified by the Tribal Lead Agency in the State Plan.</b>	
a. Please report on progress made towards those identified goals. Include a description of how the Tribal Lead Agency is tracking and measuring this progress.	Describe the Tribal Lead Agency's activities as they relate to progress towards your goals:
b. As a result of progress made towards the identified goals, did the Tribal Lead Agency do any of the following? Check all that apply.	<input type="checkbox"/> Changes in current policies/procedures <input type="checkbox"/> Provided technical assistance and/or training <input type="checkbox"/> Enforced compliance <input type="checkbox"/> Increased number of monitoring visits <input type="checkbox"/> Identified challenges <input type="checkbox"/> Set new goals <input type="checkbox"/> Other (List): <input type="checkbox"/> None
	Describe the changes made as a result of progress made towards the identified goals:
<b>7. Additional Comments (Optional).</b> Please feel free to provide any additional information about the program that you would like to include with this report. (For example, initiatives, cultural activities, testimonials, good news, and/or stories.)	Describe:

## Appendix B – Glossary of Commonly Used Child Care Terms

Term	Definition
<i>ACF</i>	The Administration for Children and Families, an agency of the Department of Health and Human Services (HHS). ACF is responsible for Federal programs that promote the economic and social wellbeing of families, children, individuals, and communities.
<i>ACF-696T</i>	The financial report required to be submitted by Tribes receiving Child Care and Development Fund (CCDF) grants.
<i>ACF-700</i>	An annual report required to be submitted by Tribal grantees, which contains two parts: Part 1 - Administrative Data and Part 2 - Tribal Narrative. The report contains data related to families and children receiving assistance through the CCDF and information related to the administration of the CCDF program.
<i>Applicant</i>	A family or individual who is applying to receive a child care subsidy and who must meet defined eligibility requirements. An applicant may be a member of a family group (usually a parent) or a single child in protective custody.
<i>Average</i>	One single number that arithmetically represents a group of numbers.
<i>CCDF</i>	Child Care and Development Fund. CCDF provides funding for low-income families, families receiving temporary public assistance, and those transitioning from public assistance, to obtain child care so they can work or attend training and/or education activities.
<i>Cash Payment</i>	Money paid to providers or parents in the form of cash or checks to cover the cost of child care services. (This does not include two-party checks to parents and providers, or cash to providers).
<i>Center Care</i>	Service that is provided in a facility other than a private home. Center-based care also would include such providers as churches and schools.
<i>Certificate/Voucher</i>	A certificate (that may be a check or other form) that is issued by a State or local government directly to a parent to verify their eligibility for subsidized services.
<i>Child/Children</i>	Those persons who are receiving subsidized child care services.
<i>Child's Home Care</i>	Services that are provided in the home of the child receiving services.
<i>Contact Person</i>	The grantee staff person who is familiar with the ACF-700 information and will be able to answer questions and provide clarifications. This may or may not be the Program Director.
<i>Contract/Grant</i>	A legally binding agreement with a child care provider to deliver services, defining the terms and conditions of those services.

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Term	Definition
<i>Co-payment</i>	The dollar amount the lead agency determines the family should pay. Lead agencies are required to calculate the assessed co-payment amount based, at a minimum, on the family's income and size.
<i>Education</i>	School or work-related information and training activities intended to prepare individuals to obtain and keep a paying job that will allow them to achieve financial independence.
<i>Eligibility Income</i>	The total amount of money a family/applicant receives (earned or unearned) that is included when eligibility for the CCDF program is being determined.
<i>Family</i>	The applicants who apply for, and must qualify for CCDF subsidy assistance. A family may be represented by birth, adopted, or foster parents, and children in need of child care. The ACF-700 requires an annual <u>unduplicated family count</u> .
<i>Family Home Care</i>	Service that is provided by one person in a residence of someone other than the child(ren) receiving care. Usually a family home is the residence of the child care provider.
<i>Grant</i>	See: Contract/Grant
<i>Group Home Care</i>	Service that is provided by more than one person in a residence of someone other than the child(ren) receiving care. A group home typically is able to care for more children at one time than a family home because additional staff are employed to help with child care. Usually a group home is the residence of the primary child care provider.
<i>Hours of Care</i>	The number of hours each day that a child actually attends and participates in child care services.
<i>Licensed/Regulated</i>	The provider must apply for, and may only operate after receiving, legally defined approval to deliver services as a licensed or regulated provider. The licensing agent usually is the Tribe or state. OCC recommends that licensed or regulated providers be subject to third-party monitoring to ensure compliance. For reporting purposes, the terms "licensed/regulated" and "no license category available" are intentionally broad to recognize that grantees operate differently. The term "regulated" is used because not all grantees define "licensed" in the same way, or even use the term consistently. Some grantees have processes that they call "certification" or "registration." The "licensed/regulated provider" category is intended to encompass any of these regulatory processes.
<i>NCDR</i>	National Center on Data and Reporting (formerly the National Center on Data and Technology). A team of technical assistance specialists who help grantees to meet grant reporting requirements. NCDR's toll free number is 877-249-9117 and the e-mail address is <a href="mailto:NCDR@ecetta.info">NCDR@ecetta.info</a> .

Term	Definition
<i>No License</i>	The provider is not required to obtain a license but still must meet all state or Tribal health, safety, and other child care program regulations to be operating legally. For example, in some jurisdictions, small family home providers may operate legally without having to be licensed. This category also may include providers who have to sign up in order to participate in your CCDF program but do not have to meet any other local licensing requirements.
<i>Non-Relative Provider</i>	A provider who does <u>not</u> meet the description of a relative (see below).
<i>OCC</i>	Office of Child Care in ACF. The OCC is dedicated to enhancing the quality, affordability, and availability of child care for all families. The Office administers Federal funds to States, Territories, and Tribes to assist low-income families in accessing quality child care for children when the parents work or participate in education or training. The OCC web site is <a href="https://www.acf.hhs.gov/occ">https://www.acf.hhs.gov/occ</a> .
<i>Protective Services</i>	Public program designed to provide safe care for children who are victims of abuse or neglect, or whose parents are otherwise unable to adequately care for them (temporarily or permanently).
<i>Poverty Guideline</i>	A guideline provided by HHS that indicates the minimum income a family with different numbers of family members needs to be able to survive at a most basic level. Families with income at or below this threshold are considered to be living in poverty. Annual poverty guidelines are available on-line at <a href="https://aspe.hhs.gov/poverty-guidelines">https://aspe.hhs.gov/poverty-guidelines</a> .
<i>Regulated</i>	See: Licensed.
<i>Relative Provider</i>	An “adult” who is by marriage, blood relationships, or court decree, a grandparent, great-grandparent, aunt or uncle, or sibling living outside the child’s home.
<i>Subsidy</i>	The amount of money that is paid by the CCDF lead agency on the family’s behalf to allow them to receive child care services they might not otherwise be able to afford. In this case, the CCDF subsidy is the dollar amount used to support the child care costs for an eligible family’s children.
<i>TA</i>	Technical assistance. Help that is provided to grantees, Central and Regional ACF staff, and other stakeholders to support program operations and the collection, management, and reporting of high quality CCDF data. TA related to reporting requirements is provided by the NCDR.
<i>Technical Bulletins</i>	Publications, available on the OCC web site at <a href="https://www.acf.hhs.gov/occ/resource/current-technical-bulletins">https://www.acf.hhs.gov/occ/resource/current-technical-bulletins</a> that provide technical guidance to grantees receiving CCDF funds.
<i>Training</i>	Activities designed to prepare individuals to obtain and keep a paying job that will allow them to achieve financial independence.

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Term	Definition
<i>Tribal Lead Agency</i>	The organization that applied for, received, and is responsible for administering the Tribal CCDF grant. The lead agency may be different from the organization that directly provides the child care services.
<i>Tribally-Operated Center</i>	Tribal grantees who use CCDF funds to operate a center-based child care business are said to have a Tribally Operated Center (TOC). The Tribe oversees all operations of the program: paying facility costs (e.g. rent and utilities), hiring and managing staff, purchasing equipment and supplies, and screening families for eligibility.
<i>Un-licensed</i>	See: No License.
<i>Voucher</i>	See: Certificate/Voucher
<i>Work</i>	Paid employment. This employment may include full- time or part-time work. It also may include sporadic, seasonal work.

## Appendix C – Internet Submission Registration Form



### CHILD CARE AND DEVELOPMENT FUND Tribal Annual Report (ACF-700) Internet Submission

To ensure appropriate authorization for submitting information via the Internet, please provide the following information

**Name:**

**Title:**

**Agency:**

**Mailing address:**

**Phone:**

**Fax:**

**E-mail:**

Please complete this form for each authorized individual.

Then email your completed form to [NCDR@ecetta.info](mailto:NCDR@ecetta.info). You can also fax or mail to:  
National Center on Data and Reporting (NCDR)  
6003 Executive Blvd., Suite 400  
Rockville, MD 20852  
Fax: 240-514-2601

A National Center on Data and Reporting Technical Assistance Specialist will contact you to provide additional information and instructions about submitting the ACF-700. They can be reached at 877-249-9117 or via email at [NCDR@ecetta.info](mailto:NCDR@ecetta.info).