

Calendar No. 309

113TH CONGRESS }
2d Session }

SENATE

{ REPORT
{ 113-138

**CHILD CARE AND DEVELOPMENT BLOCK GRANT ACT
OF 2014**

FEBRUARY 25, 2014.—Ordered to be printed

Mr. HARKIN, from the Committee on Health, Education, Labor, and Pensions, submitted the following

R E P O R T

[To accompany S. 1086]

The Committee on Health, Education, Labor, and Pensions, to which was referred the bill (S. 1086) to amend the Child Care and Development Block Grant Act of 1990 to reauthorize and improve the Child Care and Development Block Grant Act of 1990, and for other purposes, having considered the same, reports favorably thereon with an amendment in the nature of a substitute and recommends that the bill (as amended) do pass.

CONTENTS

I. Purpose and Summary	Page 1
II. Background of Legislation	2
III. Legislative History and Committee Consideration	2
IV. Explanation of Legislation and Committee Views	5
V. Cost Estimate	15
VI. Application of Law to the Legislative Branch	15
VII. Regulatory Impact Statement	15
VIII. Section-by-Section Analysis	15
IX. Changes in Existing Law	25

I. PURPOSE AND SUMMARY

The purpose of S. 1086, the Child Care and Development Block Grant Act of 2014, is to renew, improve, and strengthen the Child Care and Development Block Grant Act of 1990. This Act is designed to maintain State flexibility, promote the healthy development of children, and protect the ability of parents and families to

choose the child care arrangement that best meets their needs and those of their children.

II. BACKGROUND OF LEGISLATION

The current system of child care assistance, which is supported by Federal, State, and local funds, is largely a result of Federal legislative activity over the last 25 years. In 1988, the Family Support Act, legislation reforming the Aid to Families with Dependent Children (AFDC) program, for the first time provided a child care entitlement for families on welfare. Originated by the Senate Committee on Finance, the Family Support Act created a child care entitlement for AFDC parents who were working, enrolled in job training or in an educational program, and for parents needing transitional child care assistance for 12 months after leaving welfare (Transitional Child Care or TCC).

In 1990, two more child care programs were created: the Child Care and Development Block Grant (CCDBG) program under the jurisdiction of the Senate Labor Committee (now renamed the Senate Committee on Health, Education, Labor, and Pensions), and the Title IV-A At Risk Child Care program under the jurisdiction of the Senate Committee on Finance. Both of these programs were designed to help low-income working families and CCDBG was designed to improve the quality of child care as well. Unlike the Family Support Act child care programs, these two new programs were block grants to the States (not individual entitlements) and were not designed to assist welfare families.

In 1996, the four Federal child care programs (the AFDC child care entitlement, the Transitional Child Care entitlement, the IV-A At Risk child care program, and the Child Care and Development Block Grant) were consolidated under the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA). The Act eliminated the entitlement to child care assistance for parents receiving welfare and for those transitioning from welfare to work. The three Finance Committee programs were consolidated into one funding stream, henceforth referred to as mandatory funding. Funding for the Child Care and Development Block Grant (CCDBG) remained under the jurisdiction of the Senate Health, Education, Labor, and Pensions (HELP) Committee and was retained as a discretionary program.

III. LEGISLATIVE HISTORY AND COMMITTEE CONSIDERATION

HEARINGS

During the 112th Congress, the Subcommittee on Children and Families of the HELP Committee held three hearings on issues related to early childhood education or child care. The hearings offered many opportunities for the members of the committee to hear from child care providers, parents, beneficiaries of high-quality early education and care, and other key stakeholders on critical issues related to child care. A brief description of each hearing, including witnesses, follows.

Getting the Most Bang for the Buck: Quality Early Education and Care (06/09/2011)

This hearing highlighted the vast evidence and research indicating that access to high-quality early childhood education programs can have a dramatic, positive impact on the lives of young children. Witnesses included:

Panel I

Joan Lombardi, Ph.D., Deputy Assistant Secretary and Inter-Departmental Liaison for Early Childhood Development, Administration for Children & Families, U.S. Department of Health and Human Services (Washington, DC), who discussed President Obama's proposed initiatives to improve the quality of Federal early childhood programs including the Head Start program and the Child Care and Development Block Grant.

Panel II

Dennis Hillian, family service coordinator, The Charles County Judy Center (Waldorf, MD), who described the Judy Centers that operate in the State of Maryland, which are programs collocated or nearby title I elementary schools to provide high-quality, comprehensive services to preschool-aged children.

Linda K. Smith, executive director, National Association of Child Care Resources & Referral Agencies (Arlington, VA), who advocated for reforms in CCDBG similar to those taken by the military through the Military Child Care Assistance Act passed in 1989.

Arthur J. Rolnick, senior fellow and co-director of the Human Capital Research Collaborative, Humphrey School of Public Affairs, the University of Minnesota, Minneapolis (Minneapolis, MN), who spoke to the strong evidence and research base behind investing in high-quality early learning programs.

Eva Tansky Blum, senior vice president and director of Community Affairs, PNC Bank (Pittsburgh, PA), who highlighted the role that private industry could play in advancing the growth of early childhood education programs.

Charlie Mills, III, founder and chief executive officer, Salera Capital Management (Potomac Falls, VA), who described his positive experiences in Head Start and how such experiences contributed significantly to his development throughout childhood and successes later in life.

Examining Quality and Safety in Child Care: Giving Working Families Security, Confidence, and Peace of Mind (09/08/2011)

Eric Karolak, Ph.D., executive director, Early Care and Education Consortium (Washington, DC), who represented the interests of private child care providers to advance recommendations to improve the health and safety conditions in federally subsidized child care.

Donna Bryant, Ph.D., senior scientist, University of North Carolina FPG Child Development Institute (Chapel Hill, NC), who urged members of the committee to make high-quality care a part of the foundation of the child care program, particularly by making a concerted effort to improve the child care workforce by supporting

increased training opportunities, mentorship, professional development, and programs to support educational attainment.

Charlotte Brantley, president & chief executive officer, Clayton Early Learning (Denver, CO), who described the role that community-based providers play in providing access to high-quality care for young children using CCDBG, Head Start, and local preschool funding.

CCDBG Reauthorization: Helping to Meet the Child Care Needs of American Families (07/26/2012)

Panel I

Linda K. Smith, Deputy Assistant Secretary and Inter-Departmental Liaison for Early Childhood Development, Administration for Children & Families, U.S. Department of Health and Human Services (Washington, DC), who described the Obama administration's principles for reauthorization, including: improving quality; supporting increased access; facilitating informed parental and family choice; promoting continuity of care for children and families who benefit from CCDBG; and ensuring program integrity.

Panel II

Janet Singerman, president, Child Care Resources, Inc. (Charlotte, NC), who spoke of the numerous initiatives undertaken in North Carolina to improve the quality of care for children and families including Smart Start—a nationally recognized initiative to improve the school readiness of children by addressing early care and education, family support and child health issues.

Rolf Grafwallner, Ph.D., Asst. State Supt., Early Childhood Development, Maryland State Dept. of Education (Baltimore, MD), who described how States could improve service delivery by focusing on workforce improvements and pursuing other initiatives to better subsidize early care and education through mechanisms such as better integrating CCDBG with existing Federal early learning programs to provide greater access to subsidized care for young children.

Philip Acord, executive director, Children's Home (Chattanooga, TN), who explained how the emergence of the child care subsidy changed the way that child care operators provided services to children in Chattanooga and throughout Tennessee and recommended reforms to CCDBG, including requiring re-determinations for eligibility on an annual basis.

Susana Coro, assistant teacher, Falls Church-McLean Children's Center (Falls Church, VA), who spoke about how the subsidy program had helped her provide care for her child with a developmental disability and how the program could be improved to ensure that families who earn moderate wage increases are not removed from the subsidy system without some form of continuing support.

COMMITTEE CONSIDERATION

On June 4, 2013, Senators Mikulski, Burr, Harkin, and Alexander introduced S.1086, the Child Care and Development Block Grant Act of 2014. On September 18, 2013, the committee met in

executive session to consider the Child Care and Development Block Grant Act of 2014. Senator Harkin offered an amendment as a complete substitute and it was agreed to unanimously by all members present.

IV. EXPLANATION OF LEGISLATION AND COMMITTEE VIEWS

OVERVIEW

The Child Care and Development Block Grant Act of 2014 reauthorizes CCDBG through 2019 at a level of discretionary appropriations of such sums, as may be necessary, to carry out the program. The current 2014 appropriation is approximately \$2.4 billion.

PROGRAM GOALS

The Child Care and Development Block Grant Act of 2014 amends the current goals of the program. The legislation creates six new goals: (1) to assist States in providing high-quality child care services to parents trying to achieve independence from public assistance; (2) to assist States in improving the overall quality of child care services and programs by implementing the health, safety, licensing, training and oversight standards established under the Act and State law; (3) to improve school readiness by having children, families, and caregivers engage in activities in child care settings that are developmentally and age-appropriate and promote children's language, literacy, and mathematics skills, social and emotional development, physical health and development, and approaches to learning; (4) to encourage States to provide consumer education information to assist parents in making informed choices about child care services; (5) to increase the number and percentage of low-income children in high-quality settings; and (6) to improve the coordination and delivery of early childhood education and care, including child care.

These new goals have been added to reinforce parental and family choice in determining the best setting for children while also placing a renewed focus on the quality of care.

LEAD AGENCY & STATE PLAN

The legislation amends the Act to allow Governors to designate a collaborative agency or establish a joint interagency office to serve as the lead agency responsible for administering the program. It also extends the period for which the State plan is designed to be implemented from 2 years to 3 years to provide States more time to carry out the improvements contained in the legislation.

NUTRITION AND PHYSICAL ACTIVITY

The committee recognizes that over a quarter (27 percent) of children aged 2–5 years are overweight and obese. Children who are overweight between ages 2–5 years are five times more likely to be overweight at age 12 years. Obesity is associated with serious health problems in children, including hypertension, type 2 diabetes, hip and joint problems, as well as serious emotional stress, including low self-esteem, depression and bullying. Nonetheless, the committee is encouraged by recent findings from the Centers for

Disease Control and Prevention (CDC) that after decades of rising rates, obesity among low-income preschoolers declined slightly in 19 States and U.S. territories from 2008 through 2011. The committee is aware that CDC identified helping child care providers use best practices for improving nutrition, increasing physical activity, and decreasing computer and television time as among strategies that the Federal Government is pursuing to prevent obesity. CDC also noted that population-level changes in behavior such as increases in breastfeeding might have contributed to declines in obesity.

Recognizing that a large and growing body of research has found that nutrition and physical activity are important determinants in children's academic success, the committee encourages States to include requirements in their State plans related to nutrition and access to physical activity, which could include best practices for early infant feeding and screen time reduction strategies (time spent viewing non-educational television, smart phones, videos, computers, video games or other screens).

Educating caregivers on appropriate nutrition and physical activity is essential to prevent long-term negative health and developmental implications associated with obesity. Currently, 19 States have pre-service training related to nutrition for child care centers while only 15 States have the same requirement for home-based caregivers. Addressing obesity prevention is of particular concern in child care settings as it is critical for children in their early years to develop healthy behaviors relating to nutrition and physical activity. Furthermore, early obesity can track to adulthood, leading to lifelong consequences. For these reasons, the committee encourages States to target investments toward this type of training so that caregivers are aware of the appropriate nutrition and physical activity needs of the children they serve.

HEALTH AND SAFETY

The committee believes that the law in its current form is inadequate to ensure the basic health and safety of children supported through CCDBG. National polling indicates that the majority of parents who benefit from the CCDBG program believe that the providers who took care of their children have undergone comprehensive criminal history checks, have training in health and safety, and are regularly inspected and monitored. However, the procedures implemented by States to ensure the health and safety of children in CCDBG-supported settings vary and are simply not in line with the common perception of what a family will receive when they send their child to a subsidized child care provider.

For instance, while 30 States report having training requirements specifically for providers serving infants and toddlers, such training has a tendency to be limited in scope and duration. The committee believes that there are certain precautionary measures States and providers should undertake to better protect children. For instance, 20 percent of the deaths related to sudden infant death syndrome (SIDS) occur in child care settings. According to the Centers for Disease Control and the American Academy of Pediatrics, half of the fatalities associated with SIDS would be entirely preventable with effective training and correct sleep practices. The committee hopes to stem the prevalence of these fatali-

ties in child care settings by instituting health and safety requirements that include mandatory pre-service training in safe sleep practices to ensure that providers are aware of the dangers of SIDS and may take proactive steps to avoid it.

In recognition of the growing need to adequately prepare for emergencies and disasters, the legislation also includes a requirement that child care providers receive training and take adequate precautionary measures in preparation for emergencies and disasters. The National Commission on Children and Disasters, established in 2007, provided recommendations to the States including standards essential to disaster preparedness and safety in settings serving children. They include: the development of an evaluation and relocation plan, which includes the designation of a relocation site and evacuation route; the development of a family-child reunification plan, including procedures for notifying parents or other caregivers of the relocation; a plan to address the needs of individual children, including children with special needs; procedures for the reassignment of staff duties, as appropriate; and procedures for communicating with local emergency management officials or other appropriate State or local authorities. As of 2013, a number of States meet these standards for emergency preparedness and response planning. The committee recognizes that the Administration for Children and Families has disseminated helpful resource guides to the States on emergency and disaster preparedness and that the Federal Emergency Management Agency has communicated vital information on the same topic to Governors. The committee encourages the Department of Health and Human Services' and the Federal Emergency Management Agency's continued efforts to provide States with appropriate guidance as they develop these plans for the child care providers in their States.

Another critical component to the legislation is the inclusion of ongoing inspection and monitoring for child care providers in licensed settings. Currently, States vary to a great degree in the frequency of monitoring and inspection of child care facilities. In some States, child care facilities will not receive a pre-licensure inspection until they reach a certain threshold of children. In others, facilities receive pre-licensure inspections as soon as they begin serving a child and can expect an inspection every 4 months. The committee believes that regular and ongoing inspections of child care providers and facilities are necessary to ensure that children remain safe and healthy. The legislation requires that licensed child care providers receive at least one pre-licensure inspection and that they undergo at least one unannounced annual inspection for each fiscal year in which they receive support through CCDBG. While the legislation does not require a similar procedure for unlicensed providers, which serve nearly 1 in every 5 children who receive care through CCDBG, it does require States to describe how exempting certain providers or facilities from licensure will not endanger the health, safety or development of children in such settings. Beyond the expectations set forth in the legislation, the decision of the intensity and frequency of pre-licensure and ongoing inspections should certainly rest with the States, as they are the best suited to understand the needs of the children and families in their jurisdictions and have an acute understanding of State and Federal

resources at hand to carry out meaningful inspection and monitoring activities.

CRIMINAL BACKGROUND CHECKS

Another critical safeguard included in the legislation is the requirement of mandatory criminal history checks for prospective and current child care providers who receive support through CCDBG. In 2011, a report from the Government Accountability Office (GAO) stated that child care providers at Federal child care facilities must undergo criminal history checks and that all States currently conduct criminal history checks on licensed child care providers and employees. However, the report also mentioned that some States do not require such checks for providers and employees in unlicensed settings. The GAO also stated that, at the time of the writing of the report, only three States required criminal history checks for all licensed and unlicensed child care providers and that several States exempted certain providers associated with schools or religious organizations from criminal history check requirements. Unfortunately, even in licensed settings, the GAO found that individuals convicted of sex offenses, including those against minors, had been allowed access to child care facilities either as a result of employment by a relative or acquaintance or simply through a failure to perform pre-employment criminal history checks.

The legislation includes a requirement that all child care providers and their employees must undergo comprehensive criminal background checks prior to employment or to maintain current employment. While the committee believes that these checks will go further to ensure the safety of children and promote peace of mind among families, it also believes that these checks must be performed in accordance with existing Federal and State laws. Throughout the course of the long legislative process leading up to the committee passage of this legislation, many expressed concerns about the potential negative consequences that these checks may carry with them. Chief among these concerns was that these checks could have a disproportionately negative impact on certain communities where criminal violations for drug use are more pronounced. It is certainly not the intention of the committee that these checks have a disparate impact on any particular population, or populations. Furthermore, the legislation allows, at the State's election, that individuals who have received a felony criminal conviction for drug-use may receive an individualized review from the State consistent with Title VII of the Civil Rights Act of 1964, which prohibits discrimination on the basis of race, color, religion, sex or national origin.

Another concern of the committee relates to individuals' privacy and ensuring that personal information was not released through the administration of criminal history checks. In response, the committee takes steps to ensure that an individual's privacy is guarded by restricting employers from obtaining information beyond an individual's employment eligibility. Further, the legislation disallows the State from publishing information related to an individual's criminal history check, or any other information that would lead to the identification of an individual who had undergone a criminal history check.

Because this requirement will require some States to make statutory changes, the legislation provides States 2 years from the date of enactment of the legislation to comply with the background checks requirement. Should a State require more time, that State may petition the Secretary of Health and Human Services for a delay of no greater than 1 year. If the State is unable to establish or enhance an infrastructure to allow for these criminal history checks to be carried out according to the legislation, the Secretary must withhold 5 percent of the funds, in the aggregate, that the State would have otherwise received to carry out CCDBG.

CHILDREN WITH SPECIAL NEEDS

The committee believes that all children should have access to high-quality child care services, including those that provide early learning experiences. For this reason, the committee took great care in ensuring that child care programs supported through CCDBG would be well-suited for children with special needs and their families. The Act asks States to explain how they will meet the needs of children with special needs, through means which include, but are not limited to, targeting assistance to families whose children are diagnosed with a disability or delay. Further, the legislation asks States to keep in mind the unique needs of children with disabilities when developing a framework for professional development. These initiatives can be supported through the general or infant and toddler quality expenditures States must reserve. States must also ensure that consumer education information is publicly available so that families can be aware of the services offered through the Individuals with Disabilities Education Act (IDEA) part B program, preschool program, and infant and toddler services under part C.

The committee views these changes, and others incorporated in the legislation, as significant and meaningful improvements to the child care delivery system that will enable low-income parents of young children with disabilities a chance to work while ensuring children with disabilities have access to child care programs that will meet their special needs.

CONTINUITY OF CARE

The primary goal of this legislation is to develop and foster high-quality child care programs that best suit the needs of families as they pursue the dual goals of financial self-sufficiency and promoting the healthy development and school success of their children. With those two goals in mind, the committee believes it is important for States to emphasize continuity of care when developing eligibility policies. Continuity of care supports financial self-sufficiency by offering working families stability to establish a strong financial foundation while also preparing children for school by creating stable conditions necessary for healthy child development and, for young children, early learning.

Many families receive CCDBG assistance for only short periods of time and have frequent periods of cycling on and off the program. For example, a five-State study from 2002 showed that the median length of child care subsidy receipt is often very short, ranging from 3 to 7 months. Short periods of care can be the result of a variety of factors, but developing eligibility policies that pro-

vide increased continuity for families that continue to need child care assistance would offer valuable support and relief to families working toward long-term stability.

Research has shown that children have better educational and developmental outcomes when they have continuity in their child care arrangements. For young children, safe, stable environments provide the opportunity to develop the relationships and trust necessary to comfortably explore and learn from their surroundings. Concurrently, research has shown that frequent changes in care arrangements are associated with higher levels of distress and negative behavior in infants and toddlers.

For these reasons, the legislation establishes a minimum initial eligibility period of 12 months prior to re-determination for families who receive CCDBG benefits through grants, contracts, or certificates, consistent with practices that exist in a majority of States. Children will remain eligible for CCDBG benefits throughout the 12-month period regardless of a temporary change in the ongoing status of the child's parent as working or attending a job training program as long as the parent or family's income does not exceed 85 percent of the State's median income. Furthermore, States must account for irregular fluctuations in income that may occur during initial or re-determination. The committee believes this is particularly important for families who rely on work that is unpredictable or seasonal in nature, such as agriculture work or work associated with tourism industries. However, CCDBG requirements for eligibility are not changed in this legislation.

The legislation also requires States to make meaningful efforts to ensure that re-determination processes will not unduly disrupt the employment, education, or participation in job-training of parents. Many States currently implement re-determination strategies to accomplish this by verifying income and employment by electronic means as opposed to more onerous practices such as asking parents and families to assemble at a certain place at a specific day and time, without which a parent or family cannot benefit from the subsidy.

At the option of a State, it may discontinue assistance for families within the 12-month period if there is demonstrated evidence of prolonged cessation in work, education, or training activities. While the legislation grants States a great degree of flexibility in administering their programs, the committee also strongly discourages States from exercising this option if the intended effect is to abruptly discontinue assistance if there are brief periods when a parent is not engaged in work, education, or training activities during the 12-month period for which parents' children are eligible for assistance. If a State chooses to exercise this option, it must demonstrate that it will continue to provide financial assistance to parents for a period of not less than 3 months to allow such parents to engage in job search, resume work, or to attend an education or training program as soon as possible.

At the end of an eligibility period of not less than 12 months, if a parent's income exceeds the maximum income required for eligibility, a State must allow for the provision of continued assistance to these parents as long as they are still engaged in work, education, or training activities and their income does not exceed 85 percent of the State's median income. The committee does not want

to discourage families engaged in work from pursuing greater opportunities in the form of increased wages or earnings. During the third and final hearing the subcommittee on children and families held on the CCDBG program, a parent described how she became ineligible for assistance due to her increase in income, though she was only in marginally better circumstances and was employed by the same child care provider her young son attended. The committee believes that this type of practice runs counter to the intent of the program and does a great disservice to the adults who rely on child care assistance to seek employment or remain employed, and also to their children who may benefit tremendously from the provision of high-quality care.

The committee strongly believes that if families are truly to achieve self-sufficiency that CCDBG cannot perversely incentivize families to forgo modest raises or bonuses for fear of losing assistance under the CCDBG program. Many States have pursued creative methods to ensure that families who experience increases in earnings are not unduly affected during re-determination. Some States accomplish this by having tiered eligibility systems wherein families may become initially eligible for assistance at a certain percentage of the State's median income but will not become ineligible for assistance if their earnings increase within a certain range over the course of their eligibility period.

The legislation is by no means exhaustive in its description of policies to promote continuity of care for children and the committee encourages States to develop and explore other policies or practices that promote stability for families receiving CCDBG, such as policies that take into account the developmental needs of children, timely eligibility determination and processing of applications, and policies that promote employment and income advancement for parents.

Furthermore, the committee recognizes the unique needs of homeless families and was pleased to make changes to address certain challenges experienced by homeless children. Homeless families often are not able to maintain vital documents. Many families become homeless in circumstances that do not allow them to gather and preserve documents, such as domestic violence, eviction and natural disasters. Mobility and extreme poverty can lead to loss of documents families do maintain. Therefore, it is the intent of the committee that homeless children's access to child care subsidies and child care services not be delayed due to their inability to provide required documentation. Children must be allowed to receive child care services while their families compile documentation. States should develop and adopt policies and procedures to permit immediate enrollment of homeless children, similar to those provided under Subtitle VIIB of the McKinney-Vento Homeless Assistance Act. Once enrolled and receiving child care, families can continue to request and obtain necessary documents from the appropriate authorities.

PARENTAL CHOICE

The legislation reasserts that a primary goal of CCDBG is "to promote parental choice to empower working parents to make their own decisions regarding the child care that best suits their family's needs." This was stated in the original 1990 legislation and its reit-

eration here is meant to emphasize that parental choice remains a guiding principle of the program. Congress clearly intended to meet this objective by maximizing child care options through the introduction of the “child care certificate,” which affords parents the flexibility to choose among the widest range of child care providers and services, including both sectarian and non-sectarian in nature. Grants and contracts will continue to remain an option for States to provide direct services to children. These methods are particularly helpful in meeting the needs of specific populations of children and are well-suited to provide services in specific geographical areas. This, however, in no way detracts from the ability of States to maintain the use of certificates, which offer eligible parents the broadest array of options and afford parents maximum choice. Recent data from the Department of Health and Human Services indicates that approximately 90 percent of children receiving child care assistance were served through certificates.

CHILD CARE QUALITY

When the CCDBG program was initially created in 1990, and then reauthorized in 1996, it was primarily seen as a work support program for low-income working families, particularly mothers. In addition to this critical feature, significant developments in the realm of brain research and child development compel the committee to orient the program as one that is equally, if not more, committed to the healthy physical, cognitive, social, and emotional development of children, especially those in the first several years of life.

In 2000, the National Research Council (“the council”) released its groundbreaking report *From Neurons to Neighborhoods*, which detailed the nature of early development and the role of early experiences on a child’s life. The council stated that,

“[f]rom the time of conception to the first day of kindergarten, development proceeds at a pace exceeding that of any subsequent stage of life . . . [w]hat happens during the first months and years of life matters a lot, not because this period of development provides an indelible blueprint for adult well-being, but because it sets either a sturdy or fragile stage for what follows.”

The council went on to describe that young children rapidly develop foundational capabilities on which subsequent development builds. Further, the council stated that disparities in what children know and can do present themselves well before kindergarten entry. These disparities are highly predictive of future academic performance and are strongly associated with social and economic circumstances.

Subsequent research has borne out and reinforced much of what the council distilled in its report which is why the committee views the reauthorization of CCDBG as a critical opportunity to place a greater emphasis on improving the level of quality in subsidized child care settings. According to data from 2011, well over half of the children who benefit from CCDBG subsidies are infants, toddlers, and preschool-aged children. However, the States operating and administering CCDBG vary to a great degree in the emphasis they place on providing children access to environments that nur-

ture their healthy development. This reauthorization attempts to set a base level of quality expectations and guidelines that are currently implemented by a growing number of States.

For the foregoing reasons, the legislation increases the percentage of the total block grant (including mandatory funding) a State must spend on activities to improve the quality of child care provided to eligible families in the State and also provides a list of 11 allowable activities for these funds, from which the State must choose no fewer than two. The allowable activities enumerated in the legislation are in-line with current efforts in the States and should serve to either complement the work currently done by States or to enhance their ability to perform additional activities that will benefit the children and families they serve.

Improvements in the workforce are embedded throughout the legislation, but are prominently highlighted as an activity where States may direct their quality reservation funding. As stated by the chair of the Institute of Medicine’s Committee on Early Childhood Education and Care Workforce,

“[t]he research picture is clear—quality of care and education matters to the lives of young children, and teachers and caregivers are central to providing that quality.”

And as the National Academy of Sciences noted in a 2012 report, the “interactions, behaviors, and teaching practices” of adults are influenced by such factors as the attitudes, education, training or professional development, compensation of teachers and caregivers.

The committee recognizes that the varying levels of quality in child care can be directly linked to the quality of the workforce delivering that care. For that reason, the committee placed a particular emphasis on States providing caregivers and teachers the necessary support to increase their knowledge and skills through training, which may include the acquisition of a credential. Research highlights the benefits a skilled workforce can have on education attainment in child care settings. Furthermore, the committee applauds the efforts of certain States that have linked the attainment of a degree or credential relevant to child care work to higher wages for those workers. One promising program utilized in many States—called the Teacher Education and Compensation Helps Grants—provides scholarships to child care workers to complete course work in early childhood education and to increase their compensation. However, the committee does not intend, nor does it imply, that this legislation requires the attainment of a credential to receive support through CCDBG.

The committee acknowledges these changes can have a positive impact on children served but also on building the professional child care workforce. To that end, the committee encourages States, particularly in section 6, to further their efforts in this regard.

The legislation also makes a number of additions to the law to focus on the provision of high-quality care to infants and toddlers. Data from the Department of Health and Human Services show that nearly a third of the children who benefit from CCDBG are infants and toddlers. In some States, such as Louisiana, nearly half of the children benefiting from CCDBG are below the age of 3. As stated previously, the most remarkable period of growth for children occurs in their first few years of life and it is therefore critical that our youngest children are in settings that encourage their

positive cognitive, physical, social and emotional development. For this reason, it has been the longstanding practice of the Committee on Appropriations to reserve approximately \$100 million in each year's funding bills strictly for the purposes of improving the quality of care provided to infants and toddlers.

Through the legislation, the committee augments and makes permanent the reservation for infant and toddler quality activities in recognition of the great importance of directing investments to this particular age population. The legislation requires a reservation of no less than 3 percent of the funding that State receives, in the aggregate (including mandatory funds), specifically for quality improvement activities for infants and toddlers. This is in addition to the reservation for quality activities referred to above. Using funding provided for CCDBG for fiscal year 2013, this reservation would amount to approximately \$150 million.

The committee provides a list of allowable activities for States to pursue that are reflective of the current practices of many States that have devoted significant attention and resources to improving care for infants and toddlers. For example, the legislation allows States to support a network of infant and toddler child care specialists who can help child care providers increase their knowledge and skills related to the provision of care for very young children. This is a practice supported in a majority of States and one that could serve as an invaluable resource to child care providers serving infants and toddlers. The legislation also allows States to use funds to target professional development and improve training for providers who serve infants and toddlers. To accomplish this, a State could choose to provide financial supports to providers to help cover the high costs of training or education. This is a practice currently undertaken in 39 States.

The legislation also requests that States describe in their State plans how they will prioritize providing care for infants and toddlers, which can be demonstrated by prioritizing infants and toddlers through their certificate programs or through establishment or expansion of direct contracts and grants to providers that provide high-quality care to infants and toddlers.

REGULATORY FLEXIBILITY

CCDBG, by virtue of being a block grant program, has traditionally promoted flexibility at the State and local level to approach the issue of affordable, safe child care. Because several other Federal programs and their attendant requirements are oftentimes applied in the same settings where CCDBG funds are used, practitioners in the field urged the committee to address sometimes contradictory Federal requirements. The committee included language providing for a waiver process by which States may seek relief from certain Federal laws that might prove unworkable on the local level. In return, the legislation instructs the Secretary of Health and Human Services to work within HHS, but also other agencies, to provide relief from those State-identified provisions only to the extent relief from those laws would not endanger the well-being of children. The committee believes this provision will provide clarity as well as provide States the freedom from conflicting requirements in the delivery of services to children served under the CCDBG program.

It is the intention of the committee that States exercise this provision in an attempt to maximize the effective administration and delivery of federally subsidized child care, and not for purposes that have a minor effect on child care. This provision was not intended, nor should it be interpreted, as one that can be used to undermine the goals and purposes of other laws. It is the expectation of the committee that if a State should ever request relief under this provision that it would only be done in cases where the relief sought was necessary to improve the delivery of services to children and families and that, in the absence of relief, the State's ability to effectively administer the program would suffer. Should a State present a request wherein certain actions could be taken at the State or municipal level to reach the same ameliorative or salutary effect, it would not fall within the type of circumstance envisioned by the committee.

V. COST ESTIMATE

Pending response from the Congressional Budget Office.

VI. APPLICATION OF LAW TO THE LEGISLATIVE BRANCH

Section 102(b)(3) of Public Law 104–1, the Congressional Accountability Act, requires a description of the application of this bill to the legislative branch. S. 1086 reauthorizes the child care and development block grant to the States and does not amend any act that applies to the legislative branch.

VII. REGULATORY IMPACT STATEMENT

Pursuant to the requirements of paragraph 11(b) of rule XXVI of the Standing Rules of the Senate, the committee has determined that the bill will not have a significant regulatory impact.

VIII. SECTION-BY-SECTION ANALYSIS

Section 1. Short title

This section designates the bill as the “Child Care and Development Block Grant Act of 2014.”

Section 2. Short title and purposes

This section lays out the purposes of the CCDBG program.

Section 3. Authorization of appropriations

This section authorizes such sums as may be necessary for each of the fiscal years 2014 through 2019.

Section 4. Lead agency

This section requires the Governor of a State interested in receiving CCDBG funding to designate an agency, or establish a joint interagency office, to serve as the lead agency for the State with respect to CCDBG. Also provides Indian tribes or organizations an option to work with the State in development of State plan.

Section 5. Application & plan

Period covered by a plan

This section requires that State plans be implemented in a 3-year period.

Monitoring & inspection reports

This section requires States, not later than 1 year after coming into compliance with the licensing and regulatory requirements required under this law (could not exceed 3 years after enactment of law), to make public by electronic means the results of monitoring and inspection reports, including those due to major, substantiated complaints, about failure to comply with this Act and State child care policies. Further, States must publish the number of deaths, serious injuries, and instances of substantiated child abuse that occurred in child care settings each year. Finally, States must make public information on the date inspections occurred and, where applicable, information on the corrective action taken.

Consumer education information

This section requires States to collect and disseminate information to help promote informed child care choices, including information regarding: (1) the quality and availability of child care services provided through CCDBG; (2) quality of providers (if available); (3) the State processes for licensing child care providers, conducting background checks, and monitoring of providers; (4) the availability of assistance to obtain child care services both at Federal and State level; (5) other financial assistance programs that families may be eligible for; and (6) research and best practices concerning children's development. This section further requires States to collect and disseminate information on developmental screenings and how families can utilize State and local resources to access such screenings.

Compliance with State licensing requirements

This section requires States to certify that they have in effect licensing requirements applicable to child care services provided within the State. It also requires States to provide a detailed description of such requirements and how they are effectively enforced. Further, States that use CCDBG funding to support license-exempt care must describe, in their State plan, why such license-exempt care does not endanger the health, safety, or development of children. A State may request relief from a provision of Federal law if it conflicts with these requirements.

Training requirements

This section requires States to describe their workforce training requirements that are designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children. States must provide an assurance that their workforce training requirements (1) include a set of workforce and competency standards for child care providers; (2) are developed in consultation with the State Advisory Council on Early Childhood Education and Care; (3) include an evidence-based training framework designed to promote children's learning, development, and school-

readiness; (4) incorporate knowledge and application of the State's early learning and developmental guidelines and, where applicable, the State's child development and health standards; and (5) to the extent practicable, are appropriate for a population of children that includes different age groups (infants, toddlers, preschoolers), English learners, children with disabilities, and Indians.

Progression of professional development

In developing their workforce training requirements, this section requires States to develop a statewide progression of professional development designed to improve the skills and knowledge of the workforce, which may include the acquisition of course credit in postsecondary education or of a credential aligned with the framework, and shall be accessible to providers supported through Indian tribes or tribal organizations that receive CCDBG funding. The State shall engage the State Advisory Council on Early Childhood Education and Care—and may engage institutions of higher education and other training providers—in aligning training opportunities with the State's framework. This section prohibits the Secretary of Health and Human Services from requiring individuals who provide child care services through CCDBG to acquire credentials. It further clarifies that nothing in this section shall be construed to prohibit a State from requiring a credential.

Child-to-provider ratio standards

This section requires States to describe their child care standards regarding group size limits for specific age populations, the appropriate ratio between the number of children and the number of providers, and required qualifications for providers. This section allows the Secretary of Health and Human Services to offer guidance to States on child-to-provider ratios, but does not require States to maintain or establish specific child-to-provider ratios for CCDBG.

Health & safety requirements

This section requires States to certify that they have in effect requirements designed to protect the health and safety of children in the CCDBG program. These requirements shall include health and safety topics consisting of (1) the prevention and control of infectious diseases and the establishment of a grace period that allows homeless children to receive services under this Act while their families are taking any necessary action to comply with immunization and other health and safety requirements; (2) hand-washing and universal health precautions; (3) the administration of medication, consistent with standards for parental consent; (4) the prevention of and response to emergencies due to food and other allergic reactions; (5) prevention of sudden infant death syndrome and uses of safe sleeping practices; (6) sanitary methods of food handling; (7) building and physical premises safety; (8) emergency preparedness and response planning for emergencies resulting from a natural disaster or a man-caused event (such as violence at a child care facility); (9) the handling and storage of hazardous materials and the appropriate disposal of bio-contaminants; (10) identification of and protection from hazards that can cause bodily injury (electrical hazards, bodies of water, vehicular traffic); (11) precautions for transporting children, if applicable; (12) first aid and cardiopulmonary

resuscitation; and (13) minimum health and safety training appropriate to the provider setting involved that addresses each of the matters described above. States may also establish requirements related to physical activity and nutrition. Nothing in this section is intended to require a State to repeal or amend laws or regulations that allow children who have not been immunized to be enrolled in child care.

Compliance with State & local health & safety requirements

This section requires States to certify that procedures are in place to ensure that CCDBG providers within their State comply with all applicable State or local health and safety requirements.

Enforcement of licensing & other regulatory requirements

This section requires States, within 2 years of enactment of this Act, to certify that they have in effect policies and practices to ensure that individuals who are hired as licensing inspectors in the State are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, child abuse prevention and detection, program management, child development, and relevant law enforcement. In addition, States must ensure that licensing inspectors (or a qualified inspector designated by the lead agency) perform (1) not less than one pre-licensure health, safety, and fire inspection of each child care provider and facility in the State; and (2) not less than annually, a health, safety, and fire inspection (which shall be unannounced) of each child care provider and facility (inspections can occur all at once or at multiple times). Further, the ratio of licensing staff to such child care providers and facilities in the State must be maintained at a level sufficient to enable the State to conduct inspections of providers and facilities in a timely manner and must be consistent with research findings and best practices.

Compliance with child abuse reporting requirements

This section requires States to certify that child care providers within the State will comply with the child abuse reporting requirements of the Child Abuse Prevention and Treatment Act (CAPTA).

Meeting the needs of certain populations

This section requires States to describe how they will develop and implement strategies (which may include the provision of compensation at higher payment rates and bonuses to child care providers) to increase the supply and improve the quality of child care for: (1) children in underserved areas, including rural areas; (2) infants and toddlers; (3) children with disabilities as defined by the State; and (4) children who receive care during non-traditional hours.

Protection for working parents

This section requires States to describe the procedures and policies in place to ensure that working parents are not required to unduly disrupt their employment in order to comply with the State's requirements for redetermination of eligibility for assistance through CCDBG. States shall ensure that each child that receives

assistance through CCDBG will receive assistance for not less than 12 months (regardless of changes in family income so long as family income does not exceed 85 percent of the State median income for a family of the same size) before the State re-determines the eligibility of the child. States will be required to demonstrate how their initial determination and redetermination processes take into account irregular fluctuations in earnings. States will also be required to describe the policies and procedures in place to allow for provision of continued assistance (for a period not to exceed 12 months) to children of working parents who become ineligible for assistance during the redetermination process due to a modest increase in the parents' income.

Coordination with other programs

In order to expand accessibility and continuity of quality childhood education and care, and assist children enrolled in kindergarten, Early Head Start, or Head Start programs to receive full-day services, this section requires States to coordinate with Head Start; Early Head Start; ESEA; the Individuals with Disabilities Act; Maternal, Infant, and Early Childhood Home Visiting programs; State, tribal, and locally funded early childhood education and care programs; programs serving homeless children; and other Federal programs supporting early childhood education and care activities including child care programs funded through State veterans affairs offices (where applicable).

Public-private partnerships

This section requires States to demonstrate how they are encouraging partnerships among State agencies, other public agencies, Indian tribes and tribal organizations, and private entities, to leverage existing service delivery systems and to increase the supply and quality of child care services for children who are less than 13 years of age.

Priority for low-income populations

This section requires States to describe the process by which they propose to give priority to children of families in areas that have significant concentrations of poverty and unemployment.

Consultation

This section requires certification that State plans have been developed in consultation with the State Advisory Council on Early Childhood Education and Care (established pursuant to the Head Start Act).

Payment practices

So as to provide stability of funding and encourage more child care providers to serve children through the CCDBG program, this section requires States to certify that their payment practices for child care providers that serve children who receive assistance through CCDBG reflect generally accepted payment practices of child care providers in the State that serve children who do not receive assistance through CCDBG.

Early learning and developmental guidelines

This section requires States to provide an assurance that they will develop or implement early learning and developmental guidelines that are appropriate for children from birth through entry into kindergarten, describing what such children should know and be able to do, and covering the essential domains of early childhood education and care and early childhood development for use statewide by child care providers. These will apply to child care providers who are licensed or regulated by the State and not a relative of all children for whom the provider provides child care services. The guidelines shall be research-based, developmentally appropriate, and aligned with State standards for kindergarten through grade 3. States must provide an assurance that CCDBG dollars will not be used to develop or implement an assessment that will be the sole basis in a child care provider being determined to be ineligible to participate in the program, will not be used as the primary or sole basis to provide a reward or sanction for an individual provider, will not be used as the primary or sole method for assessing program effectiveness, or will not be used to deny eligibility to participate in the program. However, nothing in this section shall preclude a State from using a single assessment (if appropriate) for children for supporting learning or improving classroom environment; targeting professional development to a provider; determining the need for health, mental health, disability, developmental delay, or family support services; obtaining information for the quality improvement process; or conducting a program evaluation for the purposes of providing program improvement and parental involvement. Finally, nothing in this section shall be construed to authorize the Federal Government to mandate, direct, or control a State's early learning guidelines.

Direct services

This section requires States to use at least 70 percent of CCDBG funding to pay for direct services (funding for access to eligible families for child care services).

Payment rates

This section requires States to certify that payment rates for the provision of child care services for which assistance is provided through CCDBG are sufficient to ensure equal access for eligible children to child care services in the State that are provided to children whose parents are not eligible to receive CCDBG assistance. Nothing in this section shall be construed to prevent a State from differentiating payment rates on the basis of geography, age or particular needs of children, whether the providers provide child care during weekends and other non-traditional hours, or the State's determination that different payment rates are needed to enable a parent to choose high quality child care.

*Section 6. Activities to improve the quality of child care**Reservation*

This section requires that States spend a certain percentage of their CCDBG funding on improving the quality of child care (the "quality set-aside"): no less than 6 percent of such funds in first 2

fiscal years after date of enactment of law; no less than 8 percent of such funds in third and fourth fiscal years after date of enactment; and no less than 10 percent of such funds in the fifth fiscal year after date of enactment and each succeeding year. In addition, States are required to spend at least another 3 percent of funds in the first fiscal year after enactment, and each succeeding year, to improve the quality of child care for infants and toddlers.

Allowable activities

This section lays out allowable activities with which “quality set-aside” dollars must be spent. States are required to use this money to carry out no less than two of the below activities, provided directly or through grants or contracts with appropriate entities such as child care resource and referral organizations, to improve the quality of child care:

1. Support the training, professional development, and professional advancement of the child care workforce through such activities as:

- Offering child care providers training and professional development that is intentional and sequential and leads to a higher level of skill or certification;
- Establishing or supporting programs designed to increase the retention and improve the competencies of child care providers, including wage incentive programs and initiatives that establish tiered payment rates for providers that meet or exceed child care services guidelines, as defined by the State;
- Offering training, professional development, and educational opportunities for child care providers that relate to the use of developmentally appropriate and age-appropriate curricula, and early childhood teaching strategies, that are scientifically based and aligned with the social, emotional, physical, and cognitive development of children, including offering specialized training for child care providers who care for infants and toddlers, children who are English learners, and children with disabilities;
- Providing training concerning the State early learning and developmental guidelines, where applicable, including training concerning early mathematics and early language and literacy development and effective instructional practices to support mathematics and language and literacy development in young children;
- Incorporating effective use of data to guide instruction and program improvement;
- Including effective behavior management strategies and training, such as positive behavioral interventions and supports, that promote positive social and emotional development and reduce challenging behaviors;
- At the option of the State, incorporating feedback from experts at the State’s institutions of higher education and other early learning and development experts and early childhood experts;
- Providing training corresponding to the nutritional and physical activity needs of children to promote their healthy development;
- Providing training or professional development for child care providers to serve and support children with disabilities;
- Providing training and outreach on engaging parents and families in culturally and linguistically appropriate ways to expand

their knowledge, skills, and capacity to become meaningful partners in supporting their children's learning and development; and

- Providing training or professional development for child care providers regarding the early neurological development of children.

2. Support the use of early learning guidelines by:

- Developing and implementing the State's early learning and developmental guidelines; and

- Providing technical assistance to enhance early learning for preschool and school-aged children, to promote language and literacy skills, to foster school readiness, and to support later school success.

3. Developing and implementing a tiered quality rating system for child care providers which shall:

- Support and assess the quality of child care providers in the State;

- Build on licensing standards and other State regulatory standards for such providers;

- Be designed to improve the quality of different types of child care providers;

- Describe the quality of early learning facilities;

- Build the capacity of State early learning programs and communities to promote parents' and families' understanding of the State's early learning system and the ratings of the programs in which the child is enrolled; and

- Provide, to the maximum extent practicable, financial incentives and other supports designed to achieve and sustain higher levels of quality.

4. Improving the supply and quality of child care programs and services for infants and toddlers through activities which may include:

- Establishing or expanding neighborhood-based high-quality comprehensive family and child development centers, which may serve as resources to child care providers in order to improve the quality of early care and development services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality care to infants and toddlers from low-income families;

- Establishing or expanding the operation of community or neighborhood-based family child care networks;

- Supporting statewide networks of infant and toddler child care specialists, including specialists who have knowledge regarding infant and toddler development and curriculum and program implementation, as well as the ability to coordinate services with early intervention specialists who provide services for infants and toddlers with disabilities under Part C of the Individuals with Disabilities Education Act;

- Carrying out initiatives to improve the quality of the infant and toddler child care workforce, such as providing relevant training, professional development or mentoring opportunities and linking such opportunities to career pathways, developing career pathways for such providers, and improving the State credentialing of eligible providers caring for infants and toddlers; and

- If applicable, developing infant and toddler components within the State's quality rating system described in paragraph (2)(F) for

child care providers for infants and toddlers, or development of infant and toddler components in a State's child care licensing regulations or early childhood guidelines;

- Improving the ability of parents to access information about high-quality infant and toddler care; and

- Carrying out other activities determined by the State to improve the quality of infant and toddler care provided in the State and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler development, or infant and toddler well-being, including providing training (including training in safe sleeping practices, first aid, and cardiopulmonary resuscitation).

5. Promoting broad child care provider participation in the Quality Rating System;

6. Establishing or expanding a statewide system of child care resource and referral services;

7. Facilitating compliance with State requirements for inspection, monitoring, training, health and safety, and with State licensing standards;

8. Evaluating and assessing the quality and effectiveness of child care programs and services offered in the State, including evaluating how such programs and services may improve the overall school readiness of young children;

9. Supporting child care providers in their pursuit of accreditation by an established national accrediting body with demonstrated, valid, and reliable program standards of high quality;

10. Supporting State or local efforts to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development and/or provide resources to enable eligible child care providers to meet, exceed, or sustain success in meeting or exceeding such standards; and

11. Carrying out other activities determined by the State to improve the quality of child care services provided in the State, and for which measurement of outcomes relating to improved provider preparedness, child safety, child well-being, or school readiness is possible.

Certification

Beginning with fiscal year 2014, this section requires States to annually submit a certification to the Secretary containing an assurance that they were in compliance with the quality set-aside requirements and describes how the State complied with these requirements in the preceding year.

Reporting requirements

This section requires each State to annually submit a report, which shall include information regarding: (1) the amount of funds that are used to carry out quality-related activities; (2) the types of quality-related activities the State uses funding for; and (3) the measures that the State will use to evaluate progress in improving the quality of child care programs and services.

Technical assistance

This section directs the Secretary of HHS to use its administrative funds to offer technical assistance to States.

Construction

Nothing in this section shall be construed to provide the Secretary with the authority to regulate, direct, or dictate State child care quality activities or progress in implementing those activities.

Section 7. Criminal background checks

This section requires States that receive funds under the Child Care and Development and Block Grant (CCDBG) program to conduct comprehensive background checks (State and Federal fingerprint checks, sex offender registry check, and check of the child abuse and neglect registry) for all licensed, regulated, or registered providers.

Further, this section makes individuals ineligible to be employed by a child care provider, operate a family child care home, or receive child care subsidies if such individual:

- Refuses to consent to a criminal background check;
- Makes false statements in connection with a background check;
- Is registered or required to be registered on a State sex offender registry; or
- Has been convicted of a violent crime (murder; a crime against children, including child pornography; spousal abuse; a crime involving rape or sexual assault; kidnapping; arson; or physical assault, battery, or a drug-related offense committed within the past 5 years and subject to an individual review, at the choice of the State, for extenuating circumstances).

This section requires that background checks be processed as expeditiously as possible, but not to exceed 45 days, and restricts fees to the actual cost (or less) to the State for the administration of background checks. Complete background checks are required to be repeated every 5 years and States must have an appeals process in place by which a child care staff member may appeal the results of a criminal background check, to challenge the accuracy or completeness of the information contained in the individual's criminal background report.

Section 8. Reports & information

National toll-free hotline & Web site

This section requires the Secretary to operate a national toll-free hotline and Web site to develop and disseminate information to help parents access safe, affordable, and quality child care in their community and to allow persons to report suspected child abuse or neglect or safety violations by an eligible child care provider that receives assistance through CCDBG.

Request for relief

Allows States to submit to the Secretary of HHS a request for relief from any provision of Federal law that might conflict with requirements outlined in this law (request must detail provision of Federal law that is in conflict, describe how modifying compliance with Federal law will improve delivery of services for children in the State, and certify that the health, safety, and well-being of children served will not be compromised as a result). The Secretary of HHS shall consult with the State and head of each Federal agency

with responsibility for administering the Federal law detailed in the State’s request. After this consultation, the head of the Federal agency involved shall have the authority to waive any statutory provision unless they determine that such a waiver is inconsistent with the objectives of this law.

Section 9. Reservation for toll-free hotline & Web site; payment to benefit Indian children

Authorization for toll-free hotline & Web site

This section requires the Secretary to reserve at least \$1 million annually for the operation of the national toll-free hotline and Web site.

Licensing and standards for Indian children

This section requires the Secretary of HHS, in consultation with Indian tribes or tribal organizations, to develop minimum child care standards that shall be applicable to Indian tribes and tribal organizations receiving assistance through the CCDBG program. Such standards shall include standards requiring a publicly available application, health and safety standards, and standards requiring a reservation of funds for activities to improve the quality of child care provided to Indian children.

Section 10. Definitions

This section includes new definitions for the following terms:

- “Child with a disability”;
- “English learner”; and
- “Scientifically valid research”.

Section 11. Studies on waiting lists

This section requires the GAO to conduct studies to determine, for each State, the number of families that: (1) are eligible to receive assistance through CCDBG; (2) have applied for CCDBG assistance; and (3) have been placed on a waiting list for CCDBG assistance. The study shall be submitted to Congress within 2 years of enactment of this law and every 2 years thereafter.

IX. CHANGES IN EXISTING LAW

In compliance with paragraph 12 of rule XXVI of the Standing Rules of the Senate, changes in existing law made by the bill as reported are shown as follows: Existing law proposed to be omitted is enclosed in [black brackets], new matter is printed in *italic*, existing law in which no change is proposed is shown in roman:

* * * * *

CHILD CARE AND DEVELOPMENT BLOCK GRANT ACT OF 1990

* * * * *

[SEC. 658A. SHORT TITLE AND GOALS.]

[(a) SHORT TITLE.—This subchapter may be cited as the “Child Care and Development Block Grant Act of 1990”.

[(b) GOALS.—The goals of this subchapter are—

【(1) to allow each State maximum flexibility in developing child care programs and policies that best suit the needs of children and parents within such State;

【(2) to promote parental choice to empower working parents to make their own decisions on the child care that best suits their family’s needs;

【(3) to encourage States to provide consumer education information to help parents make informed choices about child care;

【(4) to assist States to provide child care to parents trying to achieve independence from public assistance; and

【(5) to assist States in implementing the health, safety, licensing, and registration standards established in State regulations.】

SEC. 658A. SHORT TITLE AND PURPOSES.

(a) *SHORT TITLE.*—*This subchapter may be cited as the “Child Care and Development Block Grant Act of 1990”.*

(b) *PURPOSES.*—*The purposes of this subchapter are—*

(1) to allow each State maximum flexibility in developing child care programs and policies that best suit the needs of children and parents within that State;

(2) to promote parental choice to empower working parents to make their own decisions regarding the child care that best suits their family’s needs;

(3) to assist States in providing high-quality child care services to parents trying to achieve independence from public assistance;

(4) to assist States in improving the overall quality of child care services and programs by implementing the health, safety, licensing, training, and oversight standards established in this subchapter and in State law (including regulations);

(5) to improve school readiness by having children, families, and child care providers engage in activities, in child care settings, that are developmentally appropriate and age-appropriate for the children and that promote children’s language and literacy and mathematics skills, social and emotional development, physical health and development, and approaches to learning;

(6) to encourage States to provide consumer education information to help parents make informed choices about child care services and to promote involvement by parents and family members in the education of their children in child care settings;

(7) to increase the number and percentage of low-income children in high-quality child care settings; and

(8) to improve the coordination and delivery of early childhood education and care (including child care).

SEC. 658B. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to carry out this [subchapter \$1,000,000,000 for each of the fiscal years 1996 through 2002.]subchapter, such sums as may be necessary for each of fiscal years 2015 through 2020.

* * * * *

SEC. 658D. LEAD AGENCY.

(a) DESIGNATION.—The **[chief executive officer]***Governor* of a State desiring to receive a grant under this subchapter shall **[designate, in an application submitted to the Secretary under section 658E, an appropriate State agency that complies with the requirements of subsection (b) to act as the lead agency.]***designate an agency (which may be an appropriate collaborative agency), or establish a joint interagency office, that complies with the requirements of subsection (b) to serve as the lead agency for the State under this subchapter.*

(b) DUTIES.—

(1) IN GENERAL.—The lead agency shall—

(A) * * *

* * * * *

(C) in conjunction with the development of the State plan as required under subparagraph (B), hold at least one hearing in the State with sufficient time and Statewide distribution of the notice of such hearing, to provide to the public an opportunity to comment on the provision of child care services under the State plan; **[and]**

(D) coordinate the provision of services under this subchapter with other Federal, State and local child care and early childhood development programs**[.]; and**

(E) at the option of an Indian tribe or tribal organization in the State, collaborate and coordinate with such Indian tribe or tribal organization in the development of the State plan.

* * * * *

SEC. 658E. APPLICATION AND PLAN.

(a) APPLICATION.— * * *

* * * * *

(b) PERIOD COVERED BY PLAN.—The State plan contained in the application under subsection (a) shall be designed to be implemented during a **[2-year]***3-year* period.

(c) REQUIREMENTS OF A PLAN.—

(1) LEAD AGENCY.—The State plan shall identify the lead agency designated *or established* under section 658D.

(2) POLICIES AND PROCEDURES.—The State plan shall:

(A) PARENTAL CHOICE OF PROVIDERS.—Provide assurances that—

(i) * * *

* * * * *

(B) UNLIMITED PARENTAL ACCESS.—Certify that procedures are in effect within the State to ensure that child care providers who provide services for which assistance is made available under this subchapter afford parents unlimited access to their children and to the providers caring for their children, during the normal hours of operation of such providers and whenever such children are in the care of such providers, and provide a detailed description of such procedures.

* * * * *

[(D) CONSUMER EDUCATION INFORMATION.—Certify that the State will collect and disseminate to parents of eligible children and the general public, consumer education information that will promote informed child care choices.

[(E) COMPLIANCE WITH STATE LICENSING REQUIREMENTS.—

[(i) IN GENERAL.—Certify that the State has in effect licensing requirements applicable to child care services provided within the State, and provide a detailed description of such requirements and of how such requirements are effectively enforced. Nothing in the preceding sentence shall be construed to require that licensing requirements be applied to specific types of providers of child care services.

[(ii) INDIAN TRIBES AND TRIBAL ORGANIZATIONS.—In lieu of any licensing and regulatory requirements applicable under State and local law, the Secretary, in consultation with Indian tribes and tribal organizations, shall develop minimum child care standards (that appropriately reflect tribal needs and available resources) that shall be applicable to Indian tribes and tribal organizations receiving assistance under this subchapter.

[(F) ESTABLISHMENT OF HEALTH AND SAFETY REQUIREMENTS.—Certify that there are in effect within the State, under State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers that provide services for which assistance is made available under this subchapter. Such requirements shall include—

[(i) the prevention and control of infectious diseases (including immunization);

[(ii) building and physical premises safety; and

[(iii) minimum health and safety training appropriate to the provider setting.

[Nothing in this subparagraph shall be construed to require the establishment of additional health and safety requirements for child care providers that are subject to health and safety requirements in the categories described in this subparagraph on the date of enactment of this subchapter under State or local law.

[(G) COMPLIANCE WITH STATE AND LOCAL HEALTH AND SAFETY REQUIREMENTS.—Certify that procedures are in effect to ensure that child care providers within the State that provide services for which assistance is provided under this subchapter comply with all applicable State or local health and safety requirements as described in subparagraph (F).

[(H) MEETING THE NEEDS OF CERTAIN POPULATIONS.—Demonstrate the manner in which the State will meet the specific child care needs of families who are receiving assistance under a State program under part A of title IV of the Social Security Act, families who are attempting through work activities to transition off of such assistance

program, and families that are at risk of becoming dependent on such assistance program.】

(D) *MONITORING AND INSPECTION REPORTS.*—*The plan shall include a certification that the State, not later than 1 year after the State has in effect the policies and practices described in subparagraph (K)(i), will make public by electronic means, in a consumer-friendly and easily accessible format, organized by provider, the results of monitoring and inspection reports, including those due to major substantiated complaints about failure to comply with this subchapter and State child care policies, as well as the number of deaths, serious injuries, and instances of substantiated child abuse that occurred in child care settings each year, for eligible child care providers within the State. The results shall also include information on the date of such an inspection and, where applicable, information on corrective action taken.*

(E) *CONSUMER EDUCATION INFORMATION.*—*The plan shall include a certification that the State will collect and disseminate (which dissemination may be done, except as otherwise specified in this subparagraph, through resource and referral organizations or other means as determined by the State) to parents of eligible children and the general public—*

(i) information that will promote informed child care choices and that concerns—

(I) the availability of child care services provided through programs authorized under this subchapter and, if feasible, other child care services and other programs provided in the State for which the family may be eligible;

(II) if available, information about the quality of providers, including information from a Quality Rating and Improvement System;

(III) information, made available through a State Web site, describing the State process for licensing child care providers, the State processes for conducting background checks, and monitoring and inspections, of child care providers, and the offenses that prevent individuals and entities from serving as child care providers in the State;

(IV) the availability of assistance to obtain child care services;

(V) other programs for which families that receive child care services for which financial assistance is provided in accordance with this subchapter may be eligible, including the program of block grants to States for temporary assistance for needy families established under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.), Head Start and Early Head Start programs carried out under the Head Start Act (42 U.S.C. 9831 et seq.), the program carried out under the Low-Income Home Energy Assistance Act of 1981 (42 U.S.C. 8621 et seq.), the supplemental nutrition as-

assistance program established under the Food and Nutrition Act of 2008 (7 U.S.C. 2011 et seq.), the special supplemental nutrition program for women, infants, and children established under section 17 of the Child Nutrition Act of 1966 (42 U.S.C. 1786), the child and adult care food program established under section 17 of the Richard B. Russell National School Lunch Act (42 U.S.C. 1766), and the Medicaid and State children's health insurance programs under titles XIX and XXI of the Social Security Act (42 U.S.C. 1396 et seq., 1397aa et seq.);

(VI) programs carried out under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.); and

(VII) research and best practices concerning children's development, including language and cognitive development, development of early language and literacy and mathematics skills, social and emotional development, meaningful parent and family engagement, and physical health and development (particularly healthy eating and physical activity);

(ii) information on developmental screenings, including—

(I) information on existing (as of the date of submission of the application containing the plan) resources and services the State can deploy, including the coordinated use of the Early and Periodic Screening, Diagnosis, and Treatment program under the Medicaid program carried out under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) and developmental screening services available under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.), in conducting developmental screenings and providing referrals to services, when appropriate, for children who receive assistance under this subchapter; and

(II) a description of how a family or eligible child care provider may utilize the resources and services described in subclause (I) to obtain developmental screenings for children who receive assistance under this subchapter who may be at risk for cognitive or other developmental delays, which may include social, emotional, physical, or linguistic delays; and

(iii) information, for parents receiving assistance under the program of block grants to States for temporary assistance for needy families under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.) and low-income parents, about eligibility for assistance provided in accordance with this subchapter.

(F) COMPLIANCE WITH STATE LICENSING REQUIREMENTS.—

(i) *IN GENERAL.*—The plan shall include a certification that the State involved has in effect licensing requirements applicable to child care services provided within the State, and provide a detailed description of such requirements and of how such requirements are effectively enforced.

(ii) *LICENSE EXEMPTION.*—If the State uses funding received under this subchapter to support a child care provider that is exempt from the corresponding licensing requirements described in clause (i), the plan shall include a description stating why such licensing exemption does not endanger the health, safety, or development of children who receive services from child care providers who are exempt from such requirements.

(iii) *REQUESTS FOR RELIEF.*—As described in section 658I(d), a State may request relief from a provision of Federal law other than this subchapter that might conflict with a requirement of this subchapter, including a licensing requirement.

(G) *TRAINING REQUIREMENTS.*—

(i) *IN GENERAL.*—The plan shall describe the training requirements that are in effect within the State that are designed to enable child care providers to promote the social, emotional, physical, and cognitive development of children and that are applicable to child care providers that provide services for which assistance is provided in accordance with this subchapter in the State.

(ii) *REQUIREMENTS.*—The plan shall provide an assurance that such training requirements—

(I) provide a set of workforce and competency standards for child care providers that provide services described in clause (i);

(II) are developed in consultation with the State Advisory Council on Early Childhood Education and Care (designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)));

(III) include an evidence-based training framework that is designed to promote children's learning and development and school readiness and to improve child outcomes, including school readiness;

(IV) incorporate knowledge and application of the State's early learning and developmental guidelines (where applicable), and the State's child development and health standards; and

(V) to the extent practicable, are appropriate for a population of children that includes—

(aa) different age groups (such as infants, toddlers, and preschoolers);

(bb) English learners;

(cc) children with disabilities; and

(dd) Native Americans, including Indians, as the term is defined in section 4 of the In-

dian Self-Determination and Education Assistance Act (25 U.S.C. 450b) (including Alaska Natives within the meaning of that term), and Native Hawaiians (as defined in section 7207 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7517)).

(iii) *PROGRESSION OF PROFESSIONAL DEVELOPMENT.*—*In developing the requirements, the State shall develop a statewide progression of professional development designed to improve the skills and knowledge of the workforce—*

(I) which may include the acquisition of course credit in postsecondary education or of a credential, aligned with the framework; and

(II) which shall be accessible to providers supported through Indian tribes or tribal organizations that receive assistance under this subchapter.

(iv) *ALIGNMENT.*—*The State shall engage the State Advisory Council on Early Childhood Education and Care, and may engage institutions of higher education (as defined in section 102 of the Higher Education Act of 1965 (20 U.S.C. 1002)), and other training providers in aligning training opportunities with the State's training framework.*

(v) *CREDENTIALS.*—*The Secretary shall not require an individual or entity that provides child care services for which assistance is provided in accordance with this subchapter to acquire a credential to provide such services. Nothing in this section shall be construed to prohibit a State from requiring a credential.*

(H) *CHILD-TO-PROVIDER RATIO STANDARDS.*—

(i) *STANDARDS.*—*The plan shall describe child care standards, for child care for which assistance is made available in accordance with this subchapter, appropriate to the type of child care setting involved, that address—*

(I) group size limits for specific age populations;

(II) the appropriate ratio between the number of children and the number of providers, in terms of the age of the children in child care, as determined by the State; and

(III) required qualifications for such providers.

(ii) *CONSTRUCTION.*—*The Secretary may offer guidance to States on child-to-provider ratios described in clause (i) according to setting and age group but shall not require that States maintain specific child-to-provider ratios for providers who receive assistance under this subchapter.*

(I) *HEALTH AND SAFETY REQUIREMENTS.*—*The plan shall include a certification that there are in effect within the State, under State or local law, requirements designed to protect the health and safety of children that are applicable to child care providers that provide services for which assistance is made available in accordance with this subchapter. Such requirements—*

(i) shall relate to matters including health and safety topics (including prevention of shaken baby syndrome and abusive head trauma) consisting of—

(I) the prevention and control of infectious diseases (including immunization) and the establishment of a grace period that allows homeless children to receive services under this subchapter while their families are taking any necessary action to comply with immunization and other health and safety requirements;

(II) handwashing and universal health precautions;

(III) the administration of medication, consistent with standards for parental consent;

(IV) the prevention of and response to emergencies due to food and other allergic reactions;

(V) prevention of sudden infant death syndrome and use of safe sleeping practices;

(VI) sanitary methods of food handling;

(VII) building and physical premises safety;

(VIII) emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1));

(IX) the handling and storage of hazardous materials and the appropriate disposal of biocontaminants;

(X) identification of and protection from hazards that can cause bodily injury such as electrical hazards, bodies of water, and vehicular traffic;

(XI) for providers that offer transportation, if applicable, appropriate precautions in transporting children;

(XII) first aid and cardiopulmonary resuscitation; and

(XIII) minimum health and safety training, to be completed pre-service or during an orientation period, appropriate to the provider setting involved that addresses each of the requirements relating to matters described in subclauses (I) through (XII); and

(ii) may include requirements relating to nutrition, access to physical activity, or any other subject area determined by the State to be necessary to promote child development or to protect children's health and safety.

(J) COMPLIANCE WITH STATE AND LOCAL HEALTH AND SAFETY REQUIREMENTS.—The plan shall include a certification that procedures are in effect to ensure that child care providers within the State, that provide services for which assistance is made available in accordance with this subchapter, comply with all applicable State and local health and safety requirements as described in subparagraph (I).

(K) ENFORCEMENT OF LICENSING AND OTHER REGULATORY REQUIREMENTS.—

(i) **CERTIFICATION.**—*The plan shall include a certification that the State, not later than 2 years after the date of enactment of the Child Care and Development Block Grant Act of 2014, shall have in effect policies and practices, applicable to licensing or regulating child care providers that provide services for which assistance is made available in accordance with this subchapter and the facilities of those providers, that—*

(I) ensure that individuals who are hired as licensing inspectors in the State are qualified to inspect those child care providers and facilities and have received training in related health and safety requirements, child development, child abuse prevention and detection, program management, and relevant law enforcement;

(II) require licensing inspectors (or qualified inspectors designated by the lead agency) of those child care providers and facilities to perform inspections, with—

(aa) not less than 1 precensure inspection for compliance with health, safety, and fire standards, of each such child care provider and facility in the State; and

(bb) not less than annually, an inspection (which shall be unannounced) of each such child care provider and facility in the State for compliance with all child care licensing standards, which shall include an inspection for compliance with health, safety, and fire standards (although inspectors may or may not inspect for compliance with all 3 standards at the same time); and

(III) require the ratio of licensing inspectors to such child care providers and facilities in the State to—

(aa) be maintained at a level sufficient to enable the State to conduct inspections of such child care providers and facilities on a timely basis in accordance with Federal and State law; and

(bb) be consistent with research findings and best practices.

(ii) **CONSTRUCTION.**—*The Secretary may offer guidance to a State, if requested by the State, on a research-based minimum standard regarding ratios described in clause (i)(III) and provide technical assistance to the State on meeting the minimum standard within a reasonable time period, but shall not prescribe a particular ratio.*

(L) COMPLIANCE WITH CHILD ABUSE REPORTING REQUIREMENTS.—*The plan shall include a certification that child care providers within the State will comply with the child abuse reporting requirements of section 106(b)(2)(B)(i) of*

the Child Abuse Prevention and Treatment Act (42 U.S.C. 5106a(b)(2)(B)(i)).

(M) MEETING THE NEEDS OF CERTAIN POPULATIONS.—The plan shall describe how the State will develop and implement strategies (which may include the provision of compensation at higher payment rates and bonuses to child care providers, the provision of direct contracts or grants to community-based organizations, or other means determined by the State) to increase the supply and improve the quality of child care for—

- (i) children in underserved areas;*
- (ii) infants and toddlers;*
- (iii) children with disabilities, as defined by the State; and*
- (iv) children who receive care during nontraditional hours.*

(N) PROTECTION FOR WORKING PARENTS.—

(i) MINIMUM PERIOD.—

(I) 12-MONTH PERIOD.—The plan shall demonstrate that each child who receives assistance under this subchapter in the State will be considered to meet all eligibility requirements for such assistance and will receive such assistance, for not less than 12 months before the State redetermines the eligibility of the child under this subchapter, regardless of a temporary change in the ongoing status of the child's parent as working or attending a job training or educational program or a change in family income for the child's family, if that family income does not exceed 85 percent of the State median income for a family of the same size.

(II) FLUCTUATIONS IN EARNINGS.—The plan shall demonstrate how the State's processes for initial determination and redetermination of such eligibility take into account irregular fluctuations in earnings.

(ii) REDETERMINATION PROCESS.—The plan shall describe the procedures and policies that are in place to ensure that working parents (especially parents in families receiving assistance under the program of block grants to States for temporary assistance for needy families under part A of title IV of the Social Security Act (42 U.S.C. 601 et seq.)) are not required to unduly disrupt their employment in order to comply with the State's requirements for redetermination of eligibility for assistance provided in accordance with this subchapter.

(iii) PERIOD BEFORE TERMINATION.—At the option of the State, the plan shall demonstrate that the State will not terminate assistance provided to carry out this subchapter based on a factor consisting of a parent's loss of work or cessation of attendance at a job training or educational program for which the family was receiving the assistance, without continuing the assistance for a reasonable period of time, of not less than

3 months, after such loss or cessation in order for the parent to engage in a job search and resume work, or resume attendance at a job training or educational program, as soon as possible.

(iv) *GRADUATED PHASEOUT OF CARE.*—The plan shall describe the policies and procedures that are in place to allow for provision of continued assistance to carry out this subchapter, at the beginning of a new eligibility period under clause (i)(I), for children of parents who are working or attending a job training or educational program and whose family income exceeds the State's income limit to initially qualify for such assistance, if the family income for the family involved does not exceed 85 percent of the State median income for a family of the same size.

(O) *COORDINATION WITH OTHER PROGRAMS.*—

(i) *IN GENERAL.*—The plan shall describe how the State, in order to expand accessibility and continuity of quality early childhood education and care, and assist children enrolled in prekindergarten, Early Head Start, or Head Start programs to receive full-day services, will coordinate the services supported to carry out this subchapter with—

(I) programs carried out under the Head Start Act (42 U.S.C. 9831 *et seq.*), including the Early Head Start programs carried out under section 645A of that Act (42 U.S.C. 9840a);

(II) programs carried out under part A of title I, and part B of title IV, of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 6311 *et seq.*, 7171 *et seq.*);

(III) programs carried out under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 *et seq.*);

(IV) the maternal, infant, and early childhood home visiting programs authorized under section 511 of the Social Security Act (42 U.S.C. 711), as added by section 2951 of the Patient Protection and Affordable Care Act (Public Law 111-148);

(V) State, Indian tribe or tribal organization, and locally funded early childhood education and care programs;

(VI) programs serving homeless children and services of local educational agency liaisons for homeless children and youths designated under subsection (g)(1)(J)(ii) of section 722 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11432(g)(1)(J)(ii)); and

(VII) other Federal programs supporting early childhood education and care activities, and, where applicable, child care programs funded through State veterans affairs offices.

(ii) *RULE OF CONSTRUCTION.*—Nothing in clause (i) shall be construed to affect the priority of children de-

scribed in clause (i) to receive full-day prekindergarten or Head Start program services.

(P) *PUBLIC-PRIVATE PARTNERSHIPS.*—The plan shall demonstrate how the State encourages partnerships among State agencies, other public agencies, Indian tribes and tribal organizations, and private entities to leverage existing service delivery systems (as of the date of the submission of the application containing the plan) for early childhood education and care and to increase the supply and quality of child care services for children who are less than 13 years of age, such as by implementing voluntary shared services alliance models.

(Q) *PRIORITY FOR LOW-INCOME POPULATIONS.*—The plan shall describe the process the State proposes to use, with respect to investments made to increase access to programs providing high-quality early childhood education and care, to give priority for those investments to children of families in areas that have significant concentrations of poverty and unemployment and that do not have such programs.

(R) *CONSULTATION.*—The plan shall include a certification that the State has developed the plan in consultation with the State Advisory Council on Early Childhood Education and Care designated or established pursuant to section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)).

(S) *PAYMENT PRACTICES.*—The plan shall include a certification that the payment practices of child care providers in the State that serve children who receive assistance under this subchapter reflect generally accepted payment practices of child care providers in the State that serve children who do not receive assistance under this subchapter, so as to provide stability of funding and encourage more child care providers to serve children who receive assistance under this subchapter.

(T) *EARLY LEARNING AND DEVELOPMENTAL GUIDELINES.*—

(i) *IN GENERAL.*—The plan shall include an assurance that the State will develop or implement early learning and developmental guidelines that are appropriate for children from birth through entry into kindergarten, describing what such children should know and be able to do, and covering the essential domains of early childhood education and care and early childhood development for use statewide by child care providers. Such child care providers shall—

(I) be licensed or regulated under State law; and

(II) not be a relative of all children for whom the provider provides child care services.

(ii) *ALIGNMENT.*—The guidelines shall be research-based, developmentally appropriate, and aligned with State standards for education in kindergarten through grade 3.

(iii) *PROHIBITION ON USE OF FUNDS.*—The plan shall include an assurance that funds received by the State to carry out this subchapter will not be used to develop or implement an assessment for children that—

(I) will be the sole basis for a child care provider being determined to be ineligible to participate in the program carried out under this subchapter;

(II) will be used as the primary or sole basis to provide a reward or sanction for an individual provider;

(III) will be used as the primary or sole method for assessing program effectiveness; or

(IV) will be used to deny eligibility to participate in the program carried out under this subchapter.

(iv) **EXCEPTIONS.**—Nothing in this subchapter shall preclude the State from using a single assessment (if appropriate) for children for—

(I) supporting learning or improving a classroom environment;

(II) targeting professional development to a provider;

(III) determining the need for health, mental health, disability, developmental delay, or family support services;

(IV) obtaining information for the quality improvement process at the State level; or

(V) conducting a program evaluation for the purposes of providing program improvement and parent information.

(v) **NO FEDERAL CONTROL.**—Nothing in this section shall be construed to authorize an officer or employee of the Federal Government to—

(I) mandate, direct, or control a State's early learning and developmental guidelines, developed in accordance with this section;

(II) establish any criterion that specifies, defines, or prescribes the standards or measures that a State uses to establish, implement, or improve—

(aa) early learning and developmental guidelines, or early learning standards, assessments, or accountability systems; or

(bb) alignment of early learning and developmental guidelines with State standards for education in kindergarten through grade 3; or

(III) require a State to submit such standards or measures for review.

(3) **USE OF BLOCK GRANT FUNDS.**—

(A) **GENERAL REQUIREMENT.**—The State plan shall provide that the State will use the amounts provided to the State for each fiscal year under this subchapter [as required under] *in accordance with* subparagraphs (B) through (D).

(B) **CHILD CARE SERVICES AND RELATED ACTIVITIES.**—**[The State]**

(i) **IN GENERAL.**—*The State* shall use amounts provided to the State for each fiscal year under this subchapter for child care services on a sliding fee scale basis, activities that improve the quality or availability of such services, **[and any other activity that**

the State deems appropriate to realize any of the goals specified in paragraphs (2) through (5) of section 658A(b)] *activities that improve access to child care services, including use of procedures to permit immediate enrollment (after the initial eligibility determination and after a child is determined to be eligible) of homeless children while required documentation is obtained, training and technical assistance on identifying and serving homeless children and their families, and specific outreach to homeless families, and any other activity that the State determines to be appropriate to meet the purposes of this subchapter (which may include an activity described in clause (ii)), with priority being given for services provided to children of families with very low family incomes (taking into consideration family size) and to children with special needs.*

(ii) *CHILD CARE RESOURCE AND REFERRAL SYSTEM.—*

(I) *IN GENERAL.—A State may use amounts described in clause (i) to establish or support a system of local or regional child care resource and referral organizations that is coordinated, to the extent determined appropriate by the State, by a statewide public or private nonprofit, community-based or regionally based, lead child care resource and referral organization.*

(II) *LOCAL OR REGIONAL ORGANIZATIONS.—The local or regional child care resource and referral organizations supported as described in subclause (I) shall—*

(aa) *provide parents in the State with consumer education information referred to in paragraph (2)(E) (except as otherwise provided in that paragraph), concerning the full range of child care options, analyzed by provider, including child care provided during nontraditional hours and through emergency child care centers, in their political subdivisions or regions;*

(bb) *to the extent practicable, work directly with families who receive assistance under this subchapter to offer the families support and assistance, using information described in item (aa), to make an informed decision about which child care providers they will use, in an effort to ensure that the families are enrolling their children in high-quality care;*

(cc) *collect and analyze data on the coordination of services and supports, including services under section 619 and part C of the Individuals with Disabilities Education Act (20 U.S.C. 1419, 1431 et seq.), for children with disabilities (as defined in section 602 of such Act (20 U.S.C. 1401));*

(dd) *collect and analyze data on the supply of and demand for child care in political sub-*

divisions or regions within the State and submit such data and analysis to the State;

(ee) work to establish partnerships with public agencies and private entities to increase the supply and quality of child care services in the State; and

(ff) as appropriate, coordinate their activities with the activities of the State lead agency and local agencies that administer funds made available in accordance with this subchapter.

(C) LIMITATION ON ADMINISTRATIVE COSTS.—* * *

(D) ASSISTANCE FOR CERTAIN FAMILIES.—A State shall ensure that a substantial portion of the amounts available (after the State has complied with the requirement of section 418(b)(2) of the Social Security Act with respect to each of the fiscal years ~~1997 through 2002~~ *2015 through 2020*) to the State to carry out activities under this subchapter in each fiscal year is used to provide assistance to low-income working families other than ~~families described in paragraph (2)(H)~~ *families with children described in clause (i), (ii), (iii), or (iv) of paragraph (2)(M).*

(E) DIRECT SERVICES.—*From amounts provided to a State for a fiscal year to carry out this subchapter, the State shall—*

(i) reserve the minimum amount required to be reserved under section 658G, and the funds for costs described in subparagraph (C); and

(ii) from the remainder, use not less than 70 percent to fund direct services (provided by the State) in accordance with paragraph (2)(A).

[(4) PAYMENT RATES.—

[(A) IN GENERAL.—The State plan shall certify that payment rates for the provision of child care services for which assistance is provided under this subchapter are sufficient to ensure equal access for eligible children to comparable child care services in the State or substate area that are provided to children whose parents are not eligible to receive assistance under this subchapter or for child care assistance under any other Federal or State programs and shall provide a summary of the facts relied on by the State to determine that such rates are sufficient to ensure such access.

[(B) CONSTRUCTION.—Nothing in this paragraph shall be construed to create a private right of action.]

(4) PAYMENT RATES.—

(A) IN GENERAL.—The State plan shall certify that payment rates for the provision of child care services for which assistance is provided in accordance with this subchapter are sufficient to ensure equal access for eligible children to child care services that are comparable to child care services in the State or substate area involved that are provided to children whose parents are not eligible to receive assistance under this subchapter or to receive child care assistance under any other Federal or State program and shall

provide a summary of the facts relied on by the State to determine that such rates are sufficient to ensure such access.

(B) SURVEY.—The State plan shall—

(i) demonstrate that the State has, after consulting with the State Advisory Council on Early Childhood Education and Care designated or established in section 642B(b)(1)(A)(i) of the Head Start Act (42 U.S.C. 9837b(b)(1)(A)(i)), local child care program administrators, local child care resource and referral agencies, and other appropriate entities, developed and conducted (not earlier than 2 years before the date of the submission of the application containing the State plan) a statistically valid and reliable survey of the market rates for child care services in the State (that reflects variations in the cost of child care services by geographic area, type of provider, and age of child);

(ii) demonstrate that the State prepared a detailed report containing the results of the State market rates survey conducted pursuant to clause (i), and made the results of the survey widely available (not later than 30 days after the completion of such survey) through periodic means, including posting the results on the Internet;

(iii) describe how the State will set payment rates for child care services, for which assistance is provided in accordance with this subchapter—

(I) in accordance with the results of the market rates survey conducted pursuant to clause (i);

(II) taking into consideration the cost of providing higher quality child care services than were provided under this subchapter before the date of enactment of the Child Care and Development Block Grant Act of 2014; and

(III) without, to the extent practicable, reducing the number of families in the State receiving such assistance to carry out this subchapter, relative to the number of such families on the date of enactment of that Act; and

(iv) describe how the State will provide for timely payment for child care services provided in accordance with this subchapter.

(C) CONSTRUCTION.—

(i) NO PRIVATE RIGHT OF ACTION.—Nothing in this paragraph shall be construed to create a private right of action.

(ii) NO PROHIBITION OF CERTAIN DIFFERENT RATES.—Nothing in this subchapter shall be construed to prevent a State from differentiating the payment rates described in subparagraph (B)(iii) on the basis of such factors as—

(I) geographic location of child care providers (such as location in an urban or rural area);

(II) the age or particular needs of children (such as the needs of children with disabilities and children served by child protective services);

(III) *whether the providers provide child care during weekend and other nontraditional hours; or*
 (IV) *the State's determination that such differentiated payment rates are needed to enable a parent to choose child care that is of high quality.*

(5) SLIDING FEE SCALE.—The State plan shall provide that the State will establish and periodically revise, by rule, a sliding fee scale that provides for cost sharing (*that is not a barrier to families receiving assistance under this subchapter*) by the families that receive child care services for which assistance is provided under this subchapter.

(d) APPROVAL OF APPLICATION.—* * *

* * * * *

SEC. 658F. LIMITATIONS ON STATE ALLOTMENTS.

(a) NO ENTITLEMENT TO CONTRACT OR GRANT.—Nothing in this subchapter shall be construed—

(1) * * *

* * * * *

(b) CONSTRUCTION OF FACILITIES.—

(1) IN GENERAL.—* * *

(2) SECTARIAN AGENCY OR ORGANIZATION.—In the case of a sectarian agency or organization, no funds made available under this subchapter may be used for the purposes described in paragraph (1) except to the extent that renovation or repair is necessary to bring the facility of such agency or organization into compliance with health and safety requirements referred to in [section 658E(c)(2)(F)]*section 658E(c)(2)(I)*.

[SEC. 658G. ACTIVITIES TO IMPROVE THE QUALITY OF CHILD CARE.]

[A State that receives funds to carry out this subchapter for a fiscal year, shall use not less than 4 percent of the amount of such funds for activities that are designed to provide comprehensive consumer education to parents and the public, activities that increase parental choice, and activities designed to improve the quality and availability of child care (such as resource and referral services).]

SEC. 658G. ACTIVITIES TO IMPROVE THE QUALITY OF CHILD CARE.

(a) RESERVATION.—

(1) RESERVATION FOR ACTIVITIES RELATING TO THE QUALITY OF CHILD CARE SERVICES.—*A State that receives funds to carry out this subchapter for a fiscal year referred to in paragraph (2) shall reserve and use a portion of such funds, in accordance with paragraph (2), for activities provided directly, or through grants or contracts with local child care resource and referral organizations or other appropriate entities, that are designed to improve the quality of child care services and increase parental options for, and access to, high-quality child care, provided in accordance with this subchapter.*

(2) AMOUNT OF RESERVATIONS.—*Such State shall reserve and use—*

(A) *to carry out the activities described in paragraph (1), not less than—*

(i) *6 percent of the funds described in paragraph (1), for the first and second full fiscal years after the date*

of enactment of the Child Care and Development Block Grant Act of 2014;

(ii) 8 percent of such funds, for the third and fourth full fiscal years after the date of enactment; and

(iii) 10 percent of such funds, for the fifth full fiscal year after the date of enactment and each succeeding fiscal year; and

(B) in addition to the funds reserved under subparagraph (A), 3 percent of the funds described in paragraph (1), for the first full fiscal year after the date of enactment and each succeeding fiscal year, to carry out the activities described in paragraph (1) and subsection (b)(4), as such activities relate to the quality of care for infants and toddlers.

(b) **ACTIVITIES.**—Funds reserved under subsection (a) shall be used to carry out not fewer than 2 of the following activities:

(1) Supporting the training, professional development, and professional advancement of the child care workforce through activities such as—

(A) offering child care providers training and professional development that is intentional and sequential and leads to a higher level of skill or certification;

(B) establishing or supporting programs designed to increase the retention and improve the competencies of child care providers, including wage incentive programs and initiatives that establish tiered payment rates for providers that meet or exceed child care services guidelines, as defined by the State;

(C) offering training, professional development, and educational opportunities for child care providers that relate to the use of developmentally appropriate and age-appropriate curricula, and early childhood teaching strategies, that are scientifically based and aligned with the social, emotional, physical, and cognitive development of children, including offering specialized training for child care providers who care for infants and toddlers, children who are English learners, and children with disabilities (as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401));

(D) providing training concerning the State early learning and developmental guidelines, where applicable, including training concerning early mathematics and early language and literacy development and effective instructional practices to support mathematics and language and literacy development in young children;

(E) incorporating effective use of data to guide instruction and program improvement;

(F) including effective behavior management strategies and training, including positive behavioral interventions and supports, that promote positive social and emotional development and reduce challenge behaviors;

(G) at the option of the State, incorporating feedback from experts at the State's institutions of higher education, as defined in section 102 of the Higher Education Act of 1965 (20 U.S.C. 1002), and other early childhood develop-

ment experts and early childhood education and care experts;

(H) providing training corresponding to the nutritional and physical activity needs of children to promote healthy development;

(I) providing training or professional development for child care providers to serve and support children with disabilities;

(J) providing training and outreach on engaging parents and families in culturally and linguistically appropriate ways to expand their knowledge, skills, and capacity to become meaningful partners in supporting their children's learning and development; and

(K) providing training or professional development for child care providers regarding the early neurological development of children.

(2) Supporting the use of the early learning and developmental guidelines described in section 658E(c)(2)(T) by—

(A) developing and implementing the State's early learning and developmental guidelines; and

(B) providing technical assistance to enhance early learning for preschool and school-aged children in order to promote language and literacy skills, foster school readiness, and support later school success.

(3) Developing and implementing a tiered quality rating system for child care providers, which shall—

(A) support and assess the quality of child care providers in the State;

(B) build on licensing standards and other State regulatory standards for such providers;

(C) be designed to improve the quality of different types of child care providers;

(D) describe the quality of early learning facilities;

(E) build the capacity of State early childhood education and care programs and communities to promote parents' and families' understanding of the State's early childhood education and care system and the ratings of the programs in which the child is enrolled; and

(F) provide, to the maximum extent practicable, financial incentives and other supports designed to help child care providers achieve and sustain higher levels of quality.

(4) Improving the supply and quality of child care programs and services for infants and toddlers through activities, which may include—

(A) establishing or expanding neighborhood-based high-quality comprehensive family and child development centers, which may serve as resources to child care providers in order to improve the quality of early childhood education and care and early childhood development services provided to infants and toddlers from low-income families and to help eligible child care providers improve their capacity to offer high-quality care to infants and toddlers from low-income families;

(B) establishing or expanding the operation of community or neighborhood-based family child care networks;

(C) supporting statewide networks of infant and toddler child care specialists, including specialists who have knowledge regarding infant and toddler development and curriculum and program implementation as well as the ability to coordinate services with early intervention specialists who provide services for infants and toddlers with disabilities under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.);

(D) carrying out initiatives to improve the quality of the infant and toddler child care workforce, such as providing relevant training, professional development, or mentoring opportunities and linking such opportunities to career pathways, developing career pathways for providers in such workforce, and improving the State credentialing of eligible providers caring for infants and toddlers;

(E) if applicable, developing infant and toddler components within the State's quality rating system described in paragraph (3) for child care providers for infants and toddlers, or the development of infant and toddler components in a State's child care licensing regulations or early learning and developmental guidelines;

(F) improving the ability of parents to access information about high-quality infant and toddler care; and

(G) carrying out other activities determined by the State to improve the quality of infant and toddler care provided in the State, and for which there is evidence that the activities will lead to improved infant and toddler health and safety, infant and toddler development, or infant and toddler well-being, including providing training (including training in safe sleep practices, first aid, and cardiopulmonary resuscitation).

(5) Promoting broad child care provider participation in the quality rating system described in paragraph (3).

(6) Establishing or expanding a statewide system of child care resource and referral services.

(7) Facilitating compliance with State requirements for inspection, monitoring, training, and health and safety, and with State licensing standards.

(8) Evaluating and assessing the quality and effectiveness of child care programs and services offered in the State, including evaluating how such programs and services may improve the overall school readiness of young children.

(9) Supporting child care providers in the pursuit of accreditation by an established national accrediting body with demonstrated, valid, and reliable program standards of high quality.

(10) Supporting State or local efforts to develop or adopt high-quality program standards relating to health, mental health, nutrition, physical activity, and physical development and providing resources to enable eligible child care providers to meet, exceed, or sustain success in meeting or exceeding, such standards.

(11) Carrying out other activities determined by the State to improve the quality of child care services provided in the State, and for which measurement of outcomes relating to improved

provider preparedness, child safety, child well-being, or school readiness is possible.

(c) *CERTIFICATION.*—Beginning with fiscal year 2015, at the beginning of each fiscal year, the State shall annually submit to the Secretary a certification containing an assurance that the State was in compliance with subsection (a) during the preceding fiscal year and a description of how the State used funds received under this subchapter to comply with subsection (a) during that preceding fiscal year.

(d) *REPORTING REQUIREMENTS.*—Each State receiving funds under this subchapter shall prepare and submit an annual report to the Secretary, which shall include information about—

- (1) the amount of funds that are reserved under subsection (a);
- (2) the activities carried out under this section; and
- (3) the measures that the State will use to evaluate the State's progress in improving the quality of child care programs and services in the State.

(e) *TECHNICAL ASSISTANCE.*—The Secretary shall offer technical assistance, in accordance with section 658I(a)(3), which may include technical assistance through the use of grants or cooperative agreements, to States for the activities described in subsection (b).

(f) *CONSTRUCTION.*—Nothing in this section shall be construed as providing the Secretary the authority to regulate, direct, or dictate State child care quality activities or progress in implementing those activities.

SEC. 658H. CRIMINAL BACKGROUND CHECKS.

(a) *IN GENERAL.*—A State that receives funds to carry out this subchapter shall have in effect—

- (1) requirements, policies, and procedures to require and conduct criminal background checks for child care staff members (including prospective child care staff members) of child care providers described in subsection (c)(1); and
- (2) licensing, regulation, and registration requirements, as applicable, that prohibit the employment of child care staff members as described in subsection (c).

(b) *REQUIREMENTS.*—A criminal background check for a child care staff member under subsection (a) shall include—

- (1) a search of each State criminal and sex offender registry or repository in the State where the child care staff member resides and each State where such staff member resided during the preceding 10 years;
- (2) a search of State-based child abuse and neglect registries and databases in the State where the child care staff member resides and each State where such staff member resided during the preceding 10 years;
- (3) a search of the National Crime Information Center;
- (4) a Federal Bureau of Investigation fingerprint check using the Integrated Automated Fingerprint Identification System; and
- (5) a search of the National Sex Offender Registry established under the Adam Walsh Child Protection and Safety Act of 2006 (42 U.S.C. 16901 et seq.).

(c) *PROHIBITIONS.*—

(1) *CHILD CARE STAFF MEMBERS.*—A child care staff member shall be ineligible for employment by a child care provider that is licensed, regulated, or registered by the State or for which assistance is provided in accordance with this subchapter, if such individual—

(A) refuses to consent to the criminal background check described in subsection (b);

(B) knowingly makes a materially false statement in connection with such criminal background check;

(C) is registered, or is required to be registered, on a State sex offender registry or repository or the National Sex Offender Registry established under the Adam Walsh Child Protection and Safety Act of 2006 (42 U.S.C. 16901 et seq.); or

(D) has been convicted of a felony consisting of—

(i) murder, as described in section 1111 of title 18, United States Code;

(ii) child abuse or neglect;

(iii) a crime against children, including child pornography;

(iv) spousal abuse;

(v) a crime involving rape or sexual assault;

(vi) kidnaping;

(vii) arson;

(viii) physical assault or battery; or

(ix) subject to subsection (e)(4), a drug-related offense committed during the preceding 5 years.

(2) *CHILD CARE PROVIDERS.*—A child care provider described in paragraph (1) shall be ineligible for assistance provided in accordance with this subchapter if the provider employs a staff member who is ineligible for employment under paragraph (1).

(d) *SUBMISSION OF REQUESTS FOR BACKGROUND CHECKS.*—

(1) *IN GENERAL.*—A child care provider covered by subsection (c) shall submit a request, to the appropriate State agency designated by a State, for a criminal background check described in subsection (b), for each child care staff member (including prospective child care staff members) of the provider.

(2) *STAFF MEMBERS.*—Subject to paragraph (4), in the case of an individual who became a child care staff member before the date of enactment of the Child Care and Development Block Grant Act of 2014, the provider shall submit such a request—

(A) prior to the last day described in subsection (i)(1); and

(B) not less often than once during each 5-year period following the first submission date under this paragraph for that staff member.

(3) *PROSPECTIVE STAFF MEMBERS.*—Subject to paragraph (4), in the case of an individual who is a prospective child care staff member on or after that date of enactment, the provider shall submit such a request—

(A) prior to the date the individual becomes a child care staff member of the provider; and

(B) not less often than once during each 5-year period following the first submission date under this paragraph for that staff member.

(4) *BACKGROUND CHECK FOR ANOTHER CHILD CARE PROVIDER.*—A child care provider shall not be required to submit a request under paragraph (2) or (3) for a child care staff member if—

(A) the staff member received a background check described in subsection (b)—

(i) within 5 years before the latest date on which such a submission may be made; and

(ii) while employed by or seeking employment by another child care provider within the State;

(B) the State provided to the first provider a qualifying background check result, consistent with this subchapter, for the staff member; and

(C) the staff member is employed by a child care provider within the State, or has been separated from employment from a child care provider within the State for a period of not more than 180 consecutive days.

(e) *BACKGROUND CHECK RESULTS AND APPEALS.*—

(1) *BACKGROUND CHECK RESULTS.*—The State shall carry out the request of a child care provider for a criminal background check as expeditiously as possible, but in not to exceed 45 days after the date on which such request was submitted, and shall provide the results of the criminal background check to such provider and to the current or prospective staff member.

(2) *PRIVACY.*—

(A) *IN GENERAL.*—The State shall provide the results of the criminal background check to the provider in a statement that indicates whether a child care staff member (including a prospective child care staff member) is eligible or ineligible for employment described in subsection (c), without revealing any disqualifying crime or other related information regarding the individual.

(B) *INELIGIBLE STAFF MEMBER.*—If the child care staff member is ineligible for such employment due to the background check, the State will, when providing the results of the background check, include information related to each disqualifying crime, in a report to the staff member or prospective staff member.

(C) *PUBLIC RELEASE OF RESULTS.*—No State shall publicly release or share the results of individual background checks, however, such results of background checks may be included in the development or dissemination of local or statewide data related to background checks, if such results are not individually identifiable.

(3) *APPEALS.*—

(A) *IN GENERAL.*—The State shall provide for a process by which a child care staff member (including a prospective child care staff member) may appeal the results of a criminal background check conducted under this section to challenge the accuracy or completeness of the information contained in such member's criminal background report.

(B) *APPEALS PROCESS.*—The State shall ensure that—

(i) each child care staff member shall be given notice of the opportunity to appeal;

(ii) a child care staff member will receive instructions about how to complete the appeals process if the child care staff member wishes to challenge the accuracy or completeness of the information contained in such member's criminal background report; and

(iii) the appeals process is completed in a timely manner for each child care staff member.

(4) *REVIEW.*—The State may allow for a review process through which the State may determine that a child care staff member (including a prospective child care staff member) disqualified for a crime specified in subsection (c)(1)(D)(ix) is eligible for employment described in subsection (c)(1), notwithstanding subsection (c). The review process shall be consistent with title VII of the Civil Rights Act of 1964 (42 U.S.C. 2000e et seq.).

(5) *NO PRIVATE RIGHT OF ACTION.*—Nothing in this section shall be construed to create a private right of action if the provider is in compliance with State regulations and requirements.

(f) *FEES FOR BACKGROUND CHECKS.*—Fees that a State may charge for the costs of processing applications and administering a criminal background check as required by this section shall not exceed the actual costs to the State for the processing and administration.

(g) *CONSTRUCTION.*—

(1) *DISQUALIFICATION FOR OTHER CRIMES.*—Nothing in this section shall be construed to prevent a State from disqualifying individuals as child care staff members based on their conviction for crimes not specifically listed in this section that bear upon the fitness of an individual to provide care for and have responsibility for the safety and well-being of children.

(2) *RIGHTS AND REMEDIES.*—Nothing in this section shall be construed to alter or otherwise affect the rights and remedies provided for child care staff members residing in a State that disqualifies individuals as child care staff members for crimes not specifically provided for under this section.

(h) *DEFINITIONS.*—In this section—

(1) the term “child care provider” means a center-based child care provider, a family child care provider, or another provider of child care services for compensation and on a regular basis that—

(A) is not an individual who is related to all children for whom child care services are provided; and

(B) is licensed, regulated, or registered under State law or receives assistance provided in accordance with this subchapter; and

(2) the term “child care staff member” means an individual (other than an individual who is related to all children for whom child care services are provided)—

(A) who is employed by a child care provider for compensation;

(B) whose activities involve the care or supervision of children for a child care provider or unsupervised access to children who are cared for or supervised by a child care provider; or

(C) who is a family child care provider.

(i) *EFFECTIVE DATE.*—

(1) *IN GENERAL.*—A State that receives funds under this subchapter shall meet the requirements of this section for the provision of criminal background checks for child care staff members described in subsection (d)(1) not later than the last day of the second full fiscal year after the date of enactment of the Child Care and Development Block Grant Act of 2014.

(2) *EXTENSION.*—The Secretary may grant a State an extension of time, of not more than 1 fiscal year, to meet the requirements of this section if the State demonstrates a good faith effort to comply with the requirements of this section.

(3) *PENALTY FOR NONCOMPLIANCE.*—Except as provided in paragraphs (1) and (2), for any fiscal year that a State fails to comply substantially with the requirements of this section, the Secretary shall withhold 5 percent of the funds that would otherwise be allocated to that State in accordance with this subchapter for the following fiscal year.

SEC. 658I. ADMINISTRATION AND ENFORCEMENT.

(a) *ADMINISTRATION.*—The Secretary shall—

(1) * * *

(2) collect, publish, and make available to the public a listing of State child care standards at least once every 3 years; [and]

[(3) provide technical assistance to assist States to carry out this subchapter, including assistance on a reimbursable basis.]

(3) provide technical assistance to States (which may include providing assistance on a reimbursable basis), consistent with (as appropriate) scientifically valid research, to carry out this subchapter; and

(4) disseminate, for voluntary informational purposes, information on practices that scientifically valid research indicates are most successful in improving the quality of programs that receive assistance under this subchapter.

(b) *ENFORCEMENT.*—

(1) *REVIEW OF COMPLIANCE WITH STATE PLAN.*—* * *

* * * * *

(c) *PROHIBITION.*—Nothing in this subchapter shall be construed as providing the Secretary the authority to permit States to alter the eligibility requirements for eligible children, including work requirements that apply to the parents of eligible children.

(d) *REQUEST FOR RELIEF.*—

(1) *IN GENERAL.*—The State may submit to the Secretary a request for relief from any provision of Federal law (including a regulation, policy, or procedure) affecting the delivery of child care services with Federal funds, other than this subchapter, that conflicts with a requirement of this subchapter.

(2) *CONTENTS.*—Such request shall—

(A) detail the provision of Federal law that conflicts with that requirement;

(B) describe how modifying compliance with that provision of Federal law to meet the requirements of this subchapter will, by itself, improve delivery of child care services for children in the State; and

(C) *certify that the health, safety, and well-being of children served through assistance received under this subchapter will not be compromised as a result.*

(3) *CONSULTATION.—The Secretary shall consult with the State submitting the request and the head of each Federal agency (other than the Secretary) with responsibility for administering the Federal law detailed in the State’s request. The consulting parties shall jointly identify—*

(A) *any provision of Federal law (including a regulation, policy, or procedure) for which a waiver is necessary to enable the State to provide services in accordance with the request; and*

(B) *any corresponding waiver.*

(4) *WAIVERS.—Notwithstanding any other provision of law, and after the joint identification described in paragraph (3), the head of the Federal agency involved shall have the authority to waive any statutory provision administered by that agency, or any regulation, policy, or procedure issued by that agency, that has been so identified, unless the head of the Federal agency determines that such a waiver is inconsistent with the objectives of this subchapter or the Federal law from which relief is sought.*

(5) *APPROVAL.—Within 90 days after the receipt of a State’s request under this subsection, the Secretary shall inform the State of the Secretary’s approval or disapproval of the request. If the plan is disapproved, the Secretary shall inform the State, in writing, of the reasons for the disapproval and give the State the opportunity to amend the request.*

(6) *DURATION.—The Secretary may approve a request under this subsection for a period of not more than 3 years, and may renew the approval for additional periods of not more than 3 years.*

(7) *TERMINATION.—The Secretary shall terminate approval of a request for relief authorized under this subsection if the Secretary determines, after notice and opportunity for a hearing, that the performance of a State granted relief under this subsection has been inadequate, or if such relief is no longer necessary to achieve its original purposes.*

* * * * *

SEC. 658K. REPORTS AND AUDITS.

(a) **REPORTS.—**

(1) **COLLECTION OF INFORMATION BY STATES.—**

(A) **IN GENERAL.—*** * *

(B) **REQUIRED INFORMATION.—**The information required under this subparagraph shall include, with respect to a family unit receiving assistance under this subchapter information concerning—

(i) * * *

* * * * *

(ix) the cost of child care for such families; **[and]**

(x) the average hours per month of such care; and

(xi) *whether the children receiving assistance under this subchapter are homeless children;*

during the period for which such information is required to be submitted.

(C) SUBMISSION TO SECRETARY.—* * *

* * * * *

(2) ANNUAL REPORTS.—Not later than December 31, ~~1997~~2014, and every 12 months thereafter, a State described in paragraph (1)(A) shall prepare and submit to the Secretary a report that includes aggregate data concerning—

(A) the number of child care providers that received funding under this subchapter as separately identified based on the types of providers listed in ~~section 658P(5)~~section 658P(6);

(B) * * *

* * * * *

[SEC. 658L. REPORT BY SECRETARY.]SEC. 658L. REPORTS, HOTLINE, AND WEB SITE.

~~Not later~~(a) *REPORT BY SECRETARY.*—*Not later* than July 31, ~~1998~~2016, and biennially thereafter, the Secretary shall prepare and submit ~~to the Committee on Economic and Educational Opportunities of the House of Representatives and the Committee on Labor and Human Resources of the Senate~~to the *Committee on Education and the Workforce of the House of Representatives and the Committee on Health, Education, Labor, and Pensions of the Senate* a report that contains a summary and analysis of the data and information provided to the Secretary in the State reports submitted under section 658K. Such report shall include an assessment, and where appropriate, recommendations for the Congress concerning efforts that should be undertaken to improve the access of the public to quality and affordable child care in the United States.

(b) *NATIONAL TOLL-FREE HOTLINE AND WEB SITE.*—

(1) *IN GENERAL.*—*The Secretary shall operate a national toll-free hotline and Web site, to—*

(A) *develop and disseminate publicly available child care consumer education information for parents and help parents access safe, affordable, and quality child care in their community; and*

(B) *to allow persons to report (anonymously if desired) suspected child abuse or neglect, or violations of health and safety requirements, by an eligible child care provider that receives assistance under this subchapter.*

(2) *REQUIREMENTS.*—*The Secretary shall ensure that the hotline and Web site meet the following requirements:*

(A) *REFERRAL TO LOCAL CHILD CARE PROVIDERS.*—*The Web site shall be hosted by “childcare.gov”. The Web site shall enable a child care consumer to enter a zip code and obtain a referral to local child care providers described in subparagraph (B) within a specified search radius.*

(B) *INFORMATION.*—*The Web site shall provide to consumers, directly or through linkages to State databases, at a minimum—*

(i) *a localized list of all State licensed child care providers;*

(ii) any provider-specific information from a Quality Rating and Improvement System or information about other quality indicators, to the extent the information is publicly available and to the extent practicable;

(iii) any other provider-specific information about compliance with licensing, and health and safety, requirements to the extent the information is publicly available and to the extent practicable;

(iv) referrals to local resource and referral organizations from which consumers can find more information about child care providers, and a recommendation that consumers consult with the organizations when selecting a child care provider; and

(v) State information about child care subsidy programs and other financial supports available to families.

(C) NATIONWIDE CAPACITY.—The Web site and hotline shall have the capacity to help families in every State and community in the Nation.

(D) INFORMATION AT ALL HOURS.—The Web site shall provide, to parents and families, access to information about child care 24 hours a day.

(E) SERVICES IN DIFFERENT LANGUAGES.—The Web site and hotline shall ensure the widest possible access to services for families who speak languages other than English.

(F) HIGH-QUALITY CONSUMER EDUCATION AND REFERRAL.—The Web site and hotline shall ensure that families have access to child care consumer education and referral services that are consistent and of high quality.

(3) PROHIBITION.—Nothing in this subsection shall be construed to allow the Secretary to compel States to provide additional data and information that is currently (as of the date of enactment of the Child Care and Development Block Grant Act of 2014) not publicly available, or is not required by this subchapter.

* * * * *

SEC. 6580. AMOUNTS RESERVED; ALLOTMENTS.

(a) AMOUNTS RESERVED.—

(1) TERRITORIES AND POSSESSIONS.—* * *

* * * * *

(3) NATIONAL TOLL-FREE HOTLINE AND WEB SITE.—The Secretary shall reserve not less than \$1,000,000 of the amount appropriated under this subchapter for each fiscal year for the operation of a national toll-free hotline and Web site, under section 658L(b).

* * * * *

(c) PAYMENTS FOR THE BENEFIT OF INDIAN CHILDREN.—

(1) GENERAL AUTHORITY.—* * *

(2) APPLICATIONS AND REQUIREMENTS.—An application for a grant or contract under this section shall provide that:

(A) COORDINATION.—* * *

* * * * *

(D) LICENSING AND STANDARDS.—In lieu of any licensing and regulatory requirements applicable under State or local law, the Secretary, in consultation with Indian tribes and tribal organizations, shall develop minimum child care standards that shall be applicable to Indian tribes and tribal organizations receiving assistance under this subchapter. Such standards shall appropriately reflect Indian tribe and tribal organization needs and available resources, and shall include standards requiring a publicly available application, health and safety standards, and standards requiring a reservation of funds for activities to improve the quality of child care provided to Indian children.

(3) CONSIDERATION OF SECRETARIAL APPROVAL.—* * *

* * * * *

SEC. 658P. DEFINITIONS.

As used in this subchapter:

(1) CAREGIVER.—* * *

* * * * *

[(4) ELIGIBLE CHILD.—The term “eligible child” means an individual—

[(A) who is less than 13 years of age;

[(B) whose family income does not exceed 85 percent of the State median income for a family of the same size; and

[(C) who—

[(i) resides with a parent or parents who are working or attending a job training or educational program; or

[(ii) is receiving, or needs to receive, protective services and resides with a parent or parents not described in clause (i).]

(3) CHILD WITH A DISABILITY.—The term “child with a disability” means—

(A) a child with a disability, as defined in section 602 of the Individuals with Disabilities Education Act (20 U.S.C. 1401);

(B) a child who is eligible for early intervention services under part C of the Individuals with Disabilities Education Act (20 U.S.C. 1431 et seq.);

(C) a child who is less than 13 years of age and who is eligible for services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794); and

(D) a child with a disability, as defined by the State involved.

(4) ELIGIBLE CHILD.—The term “eligible child” means an individual—

(A) who is less than 13 years of age;

(B) whose family income does not exceed 85 percent of the State median income for a family of the same size; and

(C) who—

(i) resides with a parent or parents who are working or attending a job training or educational program; or

(ii) is receiving, or needs to receive, protective services and resides with a parent or parents not described in clause (i).

(5) *ENGLISH LEARNER.*—The term “English learner” means an individual who is limited English proficient, as defined in section 9101 of the Elementary and Secondary Education Act of 1965 (20 U.S.C. 7801) or section 637 of the Head Start Act (42 U.S.C. 9832).

[(5)](6) *ELIGIBLE CHILD CARE PROVIDER.*—The term “eligible child care provider” means—

(A) a center-based child care provider, a group home child care provider, a family child care provider, or other provider of child care services for compensation that—

(i) is licensed, regulated, or registered under State law as described in [section 658E(c)(2)(E)]section 658E(c)(2)(F); and

(ii) satisfies the State and local requirements, including those referred to in [section 658E(c)(2)(F)]section 658E(c)(2)(I);

applicable to the child care services it provides; or

(B) * * *

[(6)](7) *FAMILY CHILD CARE PROVIDER.*—* * *

[(7)](8) *INDIAN TRIBE.*—* * *

[(8)](9) *LEAD AGENCY.*—The term “lead agency” means the agency [designated under section 658B(a).]designated or established under section 658D(a).

[(9)](10) *PARENT.*—The term “parent” includes a legal guardian, foster parent, or other person standing in loco parentis.

(11) *SCIENTIFICALLY VALID RESEARCH.*—The term “scientifically valid research” includes applied research, basic research, and field-initiated research, for which the rationale, design, and interpretation are soundly developed in accordance with principles of scientific research.

[Paragraph 10 was repealed by section 614 of P.L. 104–193]

[(11)](12) *SECRETARY.*—* * *

[(12)](13) *SLIDING FEE SCALE.*—* * *

[(13)](14) *STATE.*—* * *

[(14)](15) *TRIBAL ORGANIZATION.*—

(A) *IN GENERAL.*—* * *

* * * * *

PUBLIC HEALTH SERVICE ACT

* * * * *

SEC. 319C-1. IMPROVING STATE AND LOCAL PUBLIC HEALTH SECURITY.

(a) IN GENERAL.— * * *

(b) ELIGIBLE ENTITIES.—To be eligible to receive an award under subsection (a), an entity shall—

(1)(A) * * *

* * * * *

(2) prepare and submit to the Secretary an application at such time, and in such manner, and containing such information as the Secretary may require, including—

(A) an All-Hazards Public Health Emergency Preparedness and Response Plan which shall include—

(i) * * *

* * * * *

(vii) a description of how the entity, as applicable and appropriate, will coordinate with State emergency preparedness and response plans in public health emergency preparedness, including State educational agencies (as defined in section 9101(41) of the Elementary and Secondary Education Act of 1965) and State child care lead agencies (designated or established under section 658D of the Child Care and Development Block Grant Act of 1990);

* * * * *

