



School readiness attendance and reimbursement training  
guide

# SR Attendance

Detailed instructions at Frequently-Used Links:

<https://providerservices.floridaearlylearning.com>

Provider Portal User Guide  
Pages 106-110



Provider Portal User Guide

Version 4.2



# 6M-4.500 Child Attendance and Provider Reimbursements.

- ▶(a) A school readiness provider shall not receive payment for a student prior to the student's first day of attendance or after the student is terminated from the school readiness program.
- ▶(b) Reimbursement rates shall be paid based on a child's care level and unit of care as defined by the coalition's approved provider rate schedule for the county in which the provider's facility is located.
- ▶(c) Daily attendance documentation shall be maintained by each school readiness provider based on the terms of the Statewide School Readiness Provider Contract, specified in Rule 6M-4.610, Florida Administrative Code (F.A.C.). The provider must record daily child attendance using a paper sign-in and sign-out form or electronic attendance-tracking system that is maintained at the provider site to validate the attendance data.
- ▶(f) The provider must report any discrepancy, overpayment, or underpayment within sixty (60) calendar days of transmission of the reimbursement summary. Reported changes must include supporting documentation. Discrepancies validated by the coalition will be corrected for reimbursement purposes

# SR Attendance

Requirements before submitting the attendance:

Active Provider Profile

Closures and Paid Holidays

Enrolled SR Children

Attendance sheets should be submitted in month order by the **3<sup>rd</sup> business day of each month**. Any attendance received after the 3<sup>rd</sup> business day of the month, will be processed the following month.



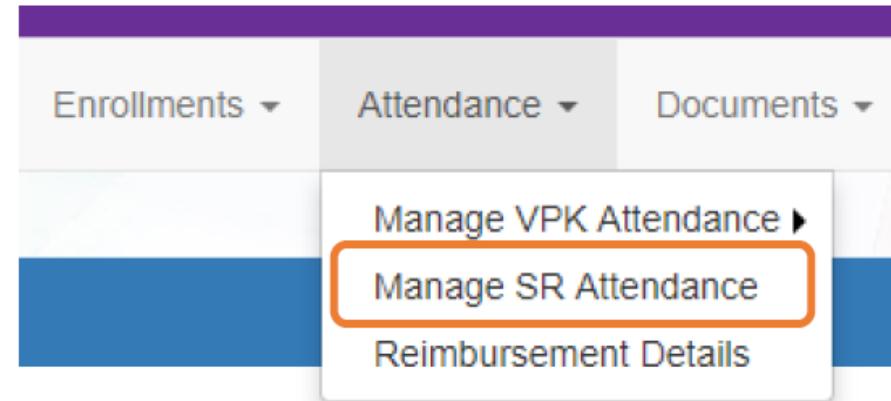
# Provider Processing

## Provider issues:

- ▶ – Missing enrollments
- ▶ – Duplicates with identical or overlapping schedules
- ▶ – Too many open days
- ▶ – Missing closed days (\*)
- ▶ – Missing paid holidays
- ▶ – Missing wrap unit of care
- ▶ – Missing summer/school unit of care changes

# SR Attendance

1



Enrollments ▾ Attendance ▾ Documents ▾

Manage VPK Attendance ▾

Manage SR Attendance

Reimbursement Details

2

Program Type\* :

Service Period\* :

Coalition\* :

School Readiness (SR)

Due Date : 11/4/2020

3

ⓘ Attendance has NOT been submitted to ELC of Indian River, Martin, Okeechobee.

Care Level	INF, TOD, 2YR, PR3, PR4, PR5, SCH
Hours Of Operation	M-F 7:00am-5:30pm
SR/Local Funding Students	64
Paid Holidays	

# SR Attendance

Program Type\* : SR

Service Period\* : October 2020

Coalition\* : ELC of Indian River, Martin, Okeechobee

School Readiness (SR)

Due Date : 11/4/2020

Summary

Attendance has NOT been submitted to ELC of Indian River, Martin, Okeechobee.

Care Level INF, TOD, 2YR, PR3, PR4, PR5, SCH

Hours Of Operation M-F 7:00am-5:30pm

SR/Local Funding Students 64

Paid Holidays

1 to 2 of 64 enrolled

	Child Name	DOB	Age	Billing Group	Status
10.	Messiah	11/17/2016	3y	BG8	 PND
58.	MA'LIYAH	3/15/2015	5y	BG8	

Previous Next

Search: si

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar

October 2020

Sun	Mon	Tue	Wed	Thu	Fri	Sat
27	28	29	30	1	2	3
4	5	6	7	8	9	10

Select a child from enrollees to edit attendance



# SR Attendance

## Provider Processing

SR Attendance Roster

Program Type\* : SR

Service Period\* : 7/1/2018 to 7/31/2018

Coalition\* : ELC of Santa Rosa

Search:

1 to 20 of 66 enrolled

Child Name	DOB	Age	Billing Group	Status
1. [REDACTED]	9/13/2014	4y	BGS	<input type="radio"/> SUB
2. [REDACTED]	12/17/2013	5y	BGS	<input type="radio"/> SUB
3. [REDACTED]	12/7/2013	5y	BGS	<input type="radio"/> SUB
4. [REDACTED]	6/13/2015	3y	BGS	<input type="radio"/> SUB
5. [REDACTED]	10/15/2014	4y	BGS	<input type="radio"/> SUB
6. [REDACTED]	12/16/2012	6y	BG1	<input type="radio"/> SUB
7. [REDACTED]	1/5/2016	3y	BG1	<input type="radio"/> SUB
8. [REDACTED]	9/11/2015	3y	BGS	<input type="radio"/> SUB
9. [REDACTED]	4/7/2013	6y	BGS	<input type="radio"/> SUB
10. [REDACTED]	2/11/2013	6y	BG1	<input type="radio"/> SUB
11. [REDACTED]	4/25/2013	5y	BGS	<input type="radio"/> SUB
12. [REDACTED]	12/9/2013	5y	BG1	<input type="radio"/> SUB
13. [REDACTED]	6/28/2014	3y	BGS	<input type="radio"/> SUB
14. [REDACTED]	9/13/2016	2y	BGS	<input type="radio"/> SUB
15. [REDACTED]	4/26/2014	4y	BG1	<input type="radio"/> SUB
16. [REDACTED]	4/26/2014	4y	BG1	<input type="radio"/> SUB
17. [REDACTED]	6/3/2009	9y	BGS	<input type="radio"/> SUB
18. [REDACTED]	11/27/2007	11y	BGS	<input type="radio"/> SUB
19. [REDACTED]	12/12/2013	5y	BGS	<input type="radio"/> SUB
20. [REDACTED]	8/24/2015	3y	BGS	<input type="radio"/> SUB

Previous

School Readiness (SR)

Due Date : 8/3/2018

Roster was submitted to ELC of Santa Rosa on 4/22/2019 by [REDACTED]

Care Level: TOD, 2YR, PR3, PR4, PR5, SC

Hours Of Operation: M-F 6:30am-5:30pm

SR/Local Funding Students: 66

Paid Holidays: 2018-07-04

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library

Attendance Calendar

July 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
●	X	X	●	X	X	●
●	FT	FT		FT	FT	
●	X	X	NS	X	X	●
●	FT	FT		FT	FT	
●	X	X	NS	X	X	●
●	FT	FT		FT	FT	
●	X	X	NS	A	A	●
●	FT	FT		FT	FT	
●	A	A				

Child's Current Information

Name: [REDACTED]

DOB: 10/15/2014 Age: 4

Copay: \$5.20 BGrp: BGS

Status: Enrollment Ended (Terminated)

Monthly Attendance Summary

Anticipated Start Date: 10/16/2017

Absences

7/26/2018: 7/30/2018

7/27/2018: 7/31/2018

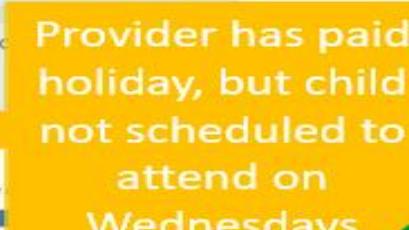
Days Absent: 4

Days Present: 14

Reimbursed Holidays: 0

Non-Reimbursable Days: 3









# SR Attendance

1 to 2 of 64 enrolled

	Child Name	DOB	Age	Billing Group	Status
10.	[REDACTED]	11/17/2016	3y	BG8	⚠️ PND
58.	[REDACTED]	3/15/2015	5y	BG8	

Child's Current Information			
Name	MA'LIYAH SILAS	Age	5
DOB	3/15/2015	BGrp	BG8
Copay	\$1.00		
Status			
Enrolled			
Monthly Attendance Summary			
Anticipated Start Date	8/11/2020		
Days Absent	0		
Days Present	9		
Reimbursed Holidays	0		
Non-Reimbursable Days	0		
RWA	No		



Select a child and their schedule shows on the calendar

October 2020						
Sun	Mon	Tue	Wed	Thu	Fri	Sat
	27	28	29	30	1	2
					X	X
				PT	PT	
	4	5	6	7	8	9
*	X	X	X	X	X	X
	PT	PT	PT	PT	PT	PT
	11	12	13		14	15
*	X	X				16
	PT	PT				



# Wrap Unit of Care FTV/PTV

## Provider Processing

SR Attendance Roster

Program Type* :	SR	School Readiness (SR)																																																																																																									
Service Period* :	8/1/2018 to 8/31/2018	Due Date : 9/6/2018																																																																																																									
Coalition* :	ELC of Santa Rosa	<a href="#">Summary</a>																																																																																																									
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# SR Attendance

September 2020

Sun	Mon	Tue	Wed	Thu	Fri	Sat
			30	31	1	2
			X FTV	X FTV	X FTV	X FTV
			6	7	8	9
*	H FTV	X FTV	X FTV	X FTV	X FTV	*
			13	14	15	16
*	X FTV	X FTV	X FTV	X FTV	X FTV	*
			20	21	22	23
*	X FTV	X FTV	X FTV	X FTV	X FTV	*
			27	28	29	30
*	X FTV	X FTV	X FTV		1	2
						3

X	Enrolled/Present
A	Absent
N	Non-Reimbursable Day
NS	Non-Scheduled Day
H	Paid Holiday
T	Terminated/Enrollment Ended
*	Closed
	Attendance has not started



## **Consecutive absences Extraordinary circumstances does not include vacation or recreational time.**

- ▶ To change a present day to absent, click on the “X.” A pop-up message appears to collect more information.
- ▶ Include a message to the coalition regarding the absence in the Note area. *(optional for most reasons)*
- ▶ c. Attach a file for supporting documentation by clicking **Choose File**. *(optional)*
- ▶ d. Click **Save** when done and the pop-up message will close.
- ▶ e. The “X” for present will now appear as an “A” for absent.
- ▶ Consecutive absences can be entered by using a date range. A document can be attached to the absence range and the document will be associated to every day entered in the date span.
- ▶ g. Absences entered by mistake can be changed back to present by clicking on the “A.” The below pop-up message appears. To undo the absence, click the **Remove Absence** button. That day will show an “X”, the absence reason is removed, and the attachment is removed.

## Absences per calendar month

Reimbursement shall be authorized for no more than three (3) absences per calendar month per child except in the event of extraordinary circumstances in which case the coalition or its designee shall document approval for payment based on written documentation provided by the parent justifying the excessive

- ▶ absence for an additional ten (10) days. Extraordinary circumstances does not include vacation or recreational time.
- ▶ Examples of extraordinary circumstances include but are not limited to the following:
- ▶ 1. Hospitalization of the child or parent with appropriate documentation (i.e., doctor's note, hospital admission),
- ▶ 2. Illness requiring home-stay as documented (i.e., doctor's note, parent statement),
- ▶ 3. Death in the immediate family with appropriate documentation (i.e., obituary, death certificate, parent statement),
- ▶ 4. Court ordered visitation with appropriate documentation (i.e., court order),
- ▶ 5. Unforeseen documented military deployment or exercise of the parent(s) (i.e., military orders of deployment, reserve duty),
- ▶ 6. Doctor appointments or other health related appointments (i.e., therapy, routine).
- ▶ (b) Total monthly reimbursed absences shall not exceed thirteen (13) calendar days.

# Rilya Wilson Act

Pursuant to s. 39.604, Florida Statutes, a child from birth to the age of school entry, who is under court-ordered protective supervision or in out-of-home care and is enrolled in an early education or child care program must attend the program 5 days a week unless the court grants an exemption. A child enrolled in an early education or child care program who meets the requirements of this act may not be withdrawn from the program without prior written approval of the Department or community-based care lead agency. If a child covered by this act is absent, the program shall report any unexcused absence or seven excused absences to the Department or the community-based care lead agency by the end of the business day following the unexcused absence or seventh consecutive excused absence.

Educational stability and transition are key components of this act to minimize disruptions, secure attachments and maintain stable relationships with supportive caregivers of children from birth to school age. Successful partnerships are imperative to ensure that these attachments are not disrupted due to placement in out-of-home care or subsequent changes in out-of-home placement. A child must be allowed to remain in the child care or early education setting that he/she attended before entry into out-of-home care, unless the program is not in the best interest of the child. If a child from birth to school-age leaves a child care or early education program, a transition plan needs to be developed that involves cooperation and sharing of information among all persons involved, respects the child's developmental stage and associated psychological needs, and allows for a gradual transition from one setting to another.

This law provides priority for child care services for specified children who are at risk of abuse, neglect, or abandonment. These children are also known as Protective Services children.

## **Rilya Wilson Act Requirements:**

- ✓ Protective services children **MUST** be enrolled to participate 5 days per week.
- ✓ Protective services children **MAY NOT** be withdrawn without prior written approval from the Department of Children and Families (DCF) or Community Based Care (CBC).
- ✓ If a Protective Services child has 7 consecutive excused or any unexcused absence, the child care provider **MUST** notify the appropriate community based care staff.
- ✓ The Department and child care providers **MUST** follow local protocols set up by the CBC to ensure continuity.
- ✓ If it is not in the best interest of the child to remain at the child care or early education program, the caregiver **MUST** work with the Case Manager, Guardian Ad Litem, child care and educational staff, and educational surrogate, if one has been appointed, to determine the best setting for the child.

### **Community-Based Care Lead Agencies Contact Information:**

<https://www.myflfamilies.com/service-programs/community-based-care/docs/leadagencycontacts.pdf>

**\*\* If you have concerns regarding any child that you may care for, please contact the Florida Abuse Hotline at 1-800-96-ABUSE\*\***

# Reporting BG1-At Risk Designated Child Absences

- ▶ An at-risk child as defined in Section 1002.81(1), F.S.,
- ▶ may not be disenrolled from the program without the written approval of the Child Welfare Program Office of the Department of Children and Families or the community-based lead agency. A notice of termination shall be maintained in the case file and provided to the parent, provider and referring agency.
- ▶ (e) When an at-risk child under the age of school entry has one (1) unexcused absence or seven (7) consecutive days of excused absences, the school readiness provider shall notify the Department of Children and Families or community-based lead agency and the early learning coalition prior to the close of business on the day of the absence.
- ▶ The provider shall maintain documentation of the notification. The coalition shall document any contact made with the provider, referring agency and parent in the case file.



## Rilya Wilson Reporting Requirements

Pursuant to s. 39.604, Florida Statutes, a child from birth to the age of school entry, who is under court-ordered protective supervision or in out-of-home care and is enrolled in an early education or childcare program must attend the program 5 days a week unless the court grants an exemption.

A child enrolled in an early education or childcare program who meets the requirements of this act may not be withdrawn from the program without prior written approval of the Department or community-based care lead agency. If a child covered by this act is absent, the childcare provider shall report any unexcused absence or seven excused absences to the Early Learning Coalition by the end of the business day following the unexcused absence or seventh consecutive excused absence.

### DEL PROVIDER PORTAL [Identify children enrollment subject to Rilya Wilson Act](#)

Log into the OEL Provider Portal – [www.providerservices.floridaearlylearning.com](http://www.providerservices.floridaearlylearning.com)

From main menu select: Enrollments> Manage SR Enrollments> View/Edit SR Enrollments

Enrollments that are part of the Rilya Wilson Reporting Requirements will have a "YES" in the RW Column of the SR Enrollment screen.



### Requirements:

- Children **MUST** be enrolled to participate 5 days a week.
- Children **MAY NOT** be withdrawn without prior written approval from the Department of Children and Families (DCF) or local agency.
- If Child has 7 consecutive excused absences or any Unexcused absence, the childcare Provider **MUST** notify the referring agency and the Early Learning Coalition.
- If it is not in the best interest of the child to remain at the childcare or early education program, the caregiver **MUST** work with the Case Manager, Guardian Ad Litem, and educational surrogate, if appointed, to determine the best setting for the child.



### Contact information for Reporting Absences to Referring Agency:

#### DCF/Department of Children & Families

- Indian River (772) 770-6701
- Martin (772) 403-6030
- Okeechobee (863) 824-4085
- Circuit 19 Main (772) 467-4177

#### ccKids/Communities Connected for Kids

- Indian River (772) 617-1677
- Martin (772) 678-3555
- Okeechobee (863) 623-3145
- Corporate Office (772) 873-7800

### Notification of absences to ELC:

Email the completed Absence and Rilya Wilson Reporting Form to the assigned Family Services Specialist.

Suspicion of abuse or neglect of a child is **REQUIRED** be reported to **1-800-96-ABUSE**

Revise 11/29/2021

## Rilya Wilson Act Tracking Log

Month: \_\_\_\_\_ Year: \_\_\_\_\_

**(to be completed any day a Protective Custody child is absent, by the end of the following day)**

Absence From \* 10/08/2021

Absence To \* 10/08/2021

**Enzo Celestino**

**Reason \*** Military Deployment

**Note**

Max length allowed is 500 characters: 500 remaining.

Attach your document

PayStub2.docx Remove

→ Remove Absence Save Cancel

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

### Attendance Calendar

## October 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	1 X FT	2
3	4	5	6	7	8 X FT	9
*	X FT	A FT	A FT	A FT	*	
10	11	12	13	14	15	16
*	X FT	X FT	X FT	X FT	X FT	*
17	18	19	20	21	22	23
*	X FT	X FT	X FT	X FT	X FT	*
24	25	26	27	28	29	30
*	X FT					
31	1	2	3	4	5	6

### Child's Current Information

Name [REDACTED]

DOB 3/9/2018 Age 3

Copay \$2.15 BGrp BG8

Status Enrolled

### Monthly Attendance Summary

Anticipated Start Date 8/5/2021

### Absences

10/05/2021 10/07/2021

10/06/2021

Days Absent 3

Days Present 14

Reimbursed Holidays 0

Non-Reimbursable Days 0

RWA No

### Schedule Note

N/A

Note:

X - Enrolled/Present – Allows Date Span Absence

A - Absent – Allows Date Span Absence

CR - Reimbursable Temporary Closure Day - Partial – Allows Date Span Absence

CN - Non-Reimbursable Temporary Closure Day – Partial – Allows Date Span Absence

N - Non-Reimbursable Day – Does Not Allow Date Span Absence

NS - Non-Scheduled Day – Does Not Allow Date Span Absence

H - Paid Holiday – Does Not Allow Date Span Absence

T - Terminated/Enrollment Ended – Do Not Allow Date Span Absence

\* Closed – Does Not Allow Date Span Absence

CR - Reimbursable Temporary Closure Day - Whole Site – Does Not Allow Date Span Absence

CN - Non-Reimbursable Temporary Closure Day - Whole Site – Does Not Allow Date Span Absence

Attendance has not started – Does Not Allow Date Span Absence

# SR Attendance

Attendance ~ Sign and Certify

Funder Type: SR	Service Period: 8/1/2018 to 8/31/2018	Due Date: 9/6/2018	Coalition: ELC of the Big Bend Region
Provider ID: 9504	Site: Florida ChildCare Center A	Site Address: 6753 BRADFORDVILLE RD TALLAHASSEE, FL 32309	County: Leon

Child Name	DOB	Age	Billing Group	Wed 8/1	Thu 8/2	Fri 8/3	Sat 8/4	Sun 8/5	Mon 8/6	Tue 8/7	Wed 8/8	Thu 8/9	Fri 8/10	Sat 8/11	Sun 8/12	Mon 8/13	Tue 8/14	Wed 8/15	Thu 8/16	Fri 8/17	Sat 8/18	Sun 8/19	Mon 8/20	Tue 8/21	Wed 8/22	Thu 8/23	Fri 8/24	Sat 8/25	Sun 8/26	Mon 8/27	Tue 8/28	Wed 8/29	Thu 8/30	Fri 8/31	A	X	H	N
1. Daphne Latham	3/3/2018	1y	BG8	X	X	X			X	X	X	X	X			X	X	X	X	X			A	X	X	X	X						1	22	0	0		
2. Fred Latham	3/3/2018	1y	BG8	X	X	X			X	X	X	X	X			X	X	X	X	X			X	X	X	X	X						0	23	0	0		
3. Scooby-Doo Latham	7/7/2015	3y	CCEP	X	X	X			X	X	X	X	X			X	X	X	X	X			X	X	X	X	X						0	23	0	0		

Authorized Electronic Signature

Full Name:

Certify by electronic signature \*

Submission Date: 8/9/2019

 Submit

Review of all attendance  
before final Sign and  
Certify



# Attendance Submitted

## Provider Processing

SR Attendance Roster

Program Type\* : SR

Service Period\* : 8/1/2018 to 8/31/2018

Coalition\* : ELC of Santa Rosa

School Readiness (SR)

Due Date : 9/5/2018

Summary

✓ Roster was submitted to ELC of Santa Rosa on 4/23/2019 by [redacted]  
Care Level: TOD, 2YR, PR3, PR4, PR5, SCH  
Hours Of Operation: M-F 6:30am-5:30pm  
SR/Local Funding Students: 61  
Paid Holidays:

Search: [ ]

1 to 20 of 61 enrolled

Child Name	DOB	Age	Billing Group	Status
1. [redacted]	8/13/2014	4y	BG5	<input checked="" type="radio"/> SUB
2. [redacted]	12/17/2013	5y	BG8	<input checked="" type="radio"/> SUB
3. [redacted]	12/7/2013	5y	BG8	<input checked="" type="radio"/> SUB
4. [redacted]	6/12/2015	3y	BG8	<input checked="" type="radio"/> SUB
5. [redacted]	10/15/2014	4y	BG8	<input checked="" type="radio"/> SUB
6. [redacted]	12/16/2012	6y	BG1	<input checked="" type="radio"/> SUB
7. [redacted]	1/5/2016	3y	BG1	<input checked="" type="radio"/> SUB
8. [redacted]	9/11/2015	3y	BG8	<input checked="" type="radio"/> SUB
9. [redacted]	9/11/2015	3y	BG8	<input checked="" type="radio"/> SUB
10. [redacted]	4/7/2013	6y	BG8	<input checked="" type="radio"/> SUB
11. [redacted]	2/11/2013	6y	BG1	<input checked="" type="radio"/> SUB
12. [redacted]	4/25/2013	5y	BG8	<input checked="" type="radio"/> SUB
13. [redacted]	3/24/2016	3y	BG8	<input checked="" type="radio"/> SUB
14. [redacted]	12/9/2013	5y	BG1	<input checked="" type="radio"/> SUB
15. [redacted]	6/20/2014	4y	BG8	<input checked="" type="radio"/> SUB
16. [redacted]	9/12/2016	2y	BG8	<input checked="" type="radio"/> SUB
17. [redacted]	4/26/2014	4y	BG1	<input checked="" type="radio"/> SUB
18. [redacted]	6/3/2009	9y	BG8	<input checked="" type="radio"/> SUB
19. [redacted]	11/27/2007	11y	BG8	<input checked="" type="radio"/> SUB
20. [redacted]	12/12/2013	5y	BG8	<input checked="" type="radio"/> SUB

Previous Next

Enrolled/Present

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar

August 2018

Select a child from enrollees to edit attendance

Roster shows "SUB" for submitted

Save Save & Exit Cancel Submit to Coalition

## Rejected Attendance

Coalition staff may reject submitted attendance. In this case, the individual that submitted the roster will receive an email notification. Instructions are provided to log in to the Provider Services Portal, review the roster, make necessary changes to records and re-submit. The rejected child records are displayed at the top of the roster list in red and show "REJ" for rejected in the status column. Only records with "REJ" may be edited.

rejected

## SR Attendance Issues that should be Address prior to submitting the Roster:

### Contact ELCIRMO when:

- Paid holidays are missing from the attendance calendar,
- Information on the roster is incorrect (such as child's date of birth, billing group, unit of care, scheduled days, termination date, etc.),
- Enrolled children are missing on the roster,
- Children appear on the roster more than once, or
- Absences get saved multiple times on the same day.



# SR Attendance

Not Submitted

*Attendance has NOT been submitted to ELC of Indian River, Martin, Okeechobee.*

Care Level INF, TOD, 2YR, PR3, PR4, PR5, SCH  
Hours Of Operation M-F 7:00am-5:30pm  
SR/Local Funding Students 64  
Paid Holidays

 Roster was verified at ELC of Indian River, Martin, Okeechobee on 10/5/2020 by [abarron@elcirmo.org](mailto:abarron@elcirmo.org).

Care Level INF, TOD, 2YR, PR3, PR4, PR5, SCH  
Hours Of Operation M-F 7:00am-5:30pm  
SR/Local Funding Students 89  
Paid Holidays 2020-09-07

Submitted

	Child Name	DOB	Age	Billing Group	Status
1.		3/3/2018	1y	BG8	<input checked="" type="checkbox"/> SUB
2.		3/3/2018	1y	BG8	<input checked="" type="checkbox"/> SUB
3.		7/7/2015	3y	CCEP	<input checked="" type="checkbox"/> SUB



# SR Attendance

## Submit Attendance

---

The due date for this service period has passed.  
Late attendance records may be processed in the next reporting period.

Clicking **Continue** will move to *Sign & Certify*.

---

Cancel

Continue



## SR Attendance

If you need assistance, please e-mail or

- ▶ 772-220-1220.
- ▶ If you need to leave a message



# Sign-In/Sign Out Sheets

## Sign in/out sheets must include:

- ▶ Name of child (must match name on the ELC Enrollment Certificate)
- ▶ Complete Date
- ▶ Time in-out (must be accurate to the minute, may not be rounded up or down)
- ▶ Full signature of person signing child in (in ink)
- ▶ Full signature of parent or person authorized by the parent to pick up child (in ink)
- ▶ Name of Facility/Provider (must match name on Enrollment / Attendance Certification)
- ▶ Month / Year
- ▶ Siblings must have individual sign in/out sheets
  - Signature Guidelines: Clear Full Signature (First and Last Name) required, of the parent or person authorized by the parent to drop off/pick up the child. Signature should be legible or match the parent's/authorized guardian's government

Data Red Flags discrepancy that will require additional training and technical assistances.

- ▶ Child marked present on the attendance, but not signed in or out on the sign-in sheet.
- ▶ child marked present, but sign-in and sign-out signatures are crossed out.
  
- ▶ Claiming “X” when child was not in attendance
  - ▶ - Claiming “X” before the service begin date
  - ▶ - Claiming “X” after the service end date
  - ▶ - Claiming more than 3 Excused Absences (“E”)

FRAUD



### Request for Adjustment Form

Child Care Provider: \_\_\_\_\_  
 Month/Year/Dates to be adjusted From: \_\_\_\_\_ To: \_\_\_\_\_  
 Please check:  School Readiness  VPK

Reason for Adjustment (check those which apply):

- Care level is incorrect (Example) Infant, Toddler, 2, 3, etc.)
- Inaccurate number of days attended listed
- Unit of care is incorrect (Example: full-time, part-time)
- Incorrect Daily Copay Fee:
- Missing Enrollment
- Fee Waiver not applied or has expired
- Child was not enrolled/not on attendance sheet
- Withdrawal status incorrect
- Incorrect Daily Fee
- Enrolled in incorrect Billing Group
- Other (Please explain) \_\_\_\_\_

Please complete the child's information as indicated and mark all days attended (X) and all days absent (E) for the month in question. Make sure to attach absentee documentation, if applicable.

Child Name: \_\_\_\_\_ Care Level: \_\_\_\_\_ Unit of Care FT/PT: \_\_\_\_\_ Copay Fee: \_\_\_\_\_

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

Child Name: \_\_\_\_\_ Care Level: \_\_\_\_\_ Unit of Care FT/PT: \_\_\_\_\_ Copay Fee: \_\_\_\_\_

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
---	---	---	---	---	---	---	---	---	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----

Child Name: \_\_\_\_\_ Care Level: \_\_\_\_\_ Unit of Care FT/PT: \_\_\_\_\_ Copay Fee: \_\_\_\_\_

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Child Name: \_\_\_\_\_ Care Level: \_\_\_\_\_ Unit of Care FT/PT: \_\_\_\_\_ Copay Fee: \_\_\_\_\_

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Please provide the following documents with your request for adjustment:

- Documentation of Absence  Court Order Documents for Visitation
- Sign In & Out Sheet  Attendance Roster Summary/ Reimbursement Report
- VPK Certificate Sign In & Out Sheets / Short/ Long Forms

For Reimbursement Staff Only: Initials of Recipient: \_\_\_\_\_ Date Rcvd: \_\_\_\_\_ Adjustment Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
 Adjustment Denied: \_\_\_\_\_ Reason for Denial: \_\_\_\_\_



# Fraud

- ▶ Fraud” is an intentional deception, omission, or misrepresentation made by a person with knowledge that the deception, omission, or misrepresentation may result in unauthorized benefit to that person or another person, or any aiding and abetting of the commission of such an act. The term includes any act that constitutes fraud under applicable federal or state law.
- ▶ In accordance with Florida Statutes 1002.91 and Florida Administrative Code (FAC) Rule 6M-9.400 Each early learning coalition shall adopt an anti-fraud plan addressing the detection and prevention of overpayments, abuse, and fraud relating to the provision of and payment for School Readiness program and Voluntary Prekindergarten Education Program services.

# Post Audit

- ▶ VPK Providers acknowledge that the Coalition, the Office of Early Learning, and other local, state and federal officials have the right to examine any documents and records that contain information about the VPK program.
- ▶ All Documentation must be legible.
- ▶ White-out must **NOT** be used anywhere on the forms. If an error is made, Providers must mark through the error and write-in the correct entry and initial.
- ▶ The provider's noncompliance with any terms of the Statewide Provider Agreement (Form OEL-VPK 20) may result in financial penalties
- ▶ VPK child enrollment records are confidential and must be kept by the provider for at least three (5) years after the child's last day of attendance.

# Common types of fraud

## Child Care Providers:

- ▶ Asking a parent to sign a child in/out when they have not attended
- ▶ Signing a child in when the child is absent to be paid for that day
- ▶ Giving false information to the Coalition to receive payment for VPK
- ▶ Giving false information to become or remain contracted for VPK

# SR Attendance Data Issues/Error Messages

- ▶ Please email our team about the issues you are having. Send screen prints/error message that you are getting, etc.
- ▶ The more information you can provide, the more we can determine if we can help or if a ticket is needed.
- ▶ Please be patient as we work together to figure out the best way to help you.  
**Thank you, Finance Team.**
- ▶ **Mayra Garcia** [mgarcia@elcirmo.org](mailto:mgarcia@elcirmo.org),
- ▶ **Kelly Wilson** [kwilson@elcirmo.org](mailto:kwilson@elcirmo.org),
- ▶ **Sean Lewis** [slewis@elcirmo.org](mailto:slewis@elcirmo.org)
- ▶ **Erica Lopez** [elopez@elcirmo.org](mailto:elopez@elcirmo.org)





Questions?