INTRODUCTION

While States' licensing systems’ primary goal is to improve the health and safety of children in child care, important decisions must be made in order to also maximize administrative cost efficiencies. With limited resources, licensing administrators work to ensure that monitoring visits focus on what is most important in keeping children safe. In the absence of research that assesses the efficacy of various approaches, States are moving ahead with different methods to identify and reduce the risk of harm to children. Some strategies include:

- Identifying licensing rules1 where violations pose a greater risk to children;
- Assigning a weight to each rule to further distinguish levels of regulatory compliance;
- Focusing monitoring visits on key indicators from the rules that predict compliance and reduce risks;
- Increasing monitoring frequency for programs with low levels of compliance;
- Increasing monitoring depth for programs with low levels of compliance;
- Helping providers, parents, and licensing staff better understand the potential consequences of serious noncompliance;
- Identifying providers in need of technical assistance; and
- Using more sophisticated data systems to target case management and improve consistency in enforcement actions.

The purpose of this report is to describe various methods States are using to monitor child care facilities efficiently and effectively. It provides descriptions and examples of these methods and details of States’ practices.

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1 Because licensing of child care facilities most often occurs at the state level, there are variances in terminology from State to State. For the purposes of this report, the terms identified are defined as follows and are used interchangeably throughout: Regulations, Rules, Requirements, Policies and Administrative Code, Laws, Statutes.
Methodology

To support the Office of Child Care’s goal of children served in safe, healthy child care settings, the National Center on Child Care Quality Improvement (NCCCQI) contracted with a group of nationally-recognized consultants with expertise in administering and researching licensing systems to prepare a series of written reports about critical licensing issues.

The information provided in these reports was obtained by surveying and interviewing representatives of state licensing agencies in nine States: CT, FL, GA, NC, OH, OK, TX, UT, and WA. The States selected are not a representative sample but were chosen based on the consultants’ knowledge that they are implementing effective and innovative practices which may be helpful to other state licensing agencies. Additionally, an effort was made to achieve some degree of geographic representation through the States selected.

Licensing personnel from the nine States selected first completed a written survey instrument and then spoke with the consultants in a telephone interview. All individuals interviewed were licensing agency directors or top-level administrators.

Information from Research Brief #1: Trends in Child Care Center Licensing Regulations and Policies for 2011 (NCCCQI, 2013) and The 50-State Child Care Licensing Study: 2011-2013 Edition (National Association for Regulatory Administration [NARA], 2013) are also included to provide national data and context to the information gathered from the nine States. Both of these reports include data gleaned from a national survey of licensing agencies conducted by NARA. Responses to the NARA survey were received from licensing agencies in all 50 States and the District of Columbia.²

Methods for Monitoring for Compliance

In an effort to ensure the health and safety of children in child care facilities, States seek to identify and assess the risk of harm to children and increase monitoring in programs with lower levels of compliance. At the same time, state licensing agencies need to make the most efficient and effective use of available, and often shrinking, resources.

NARA, in Recommended Best Practices for Human Care Regulatory Agencies (2009), presents the characteristics of a strong licensing agency, including:

Maintains a research-based risk-assessment method whereby industry-wide and facility-specific risks, including both immediate and cumulative risks, are identified and prioritized; focuses inspections and technical assistance accordingly; and, applies the agency’s enforcement continuum systematically to avert or abate priority risks, to build consistent compliance, and to improve overall consumer protection across all relevant domains. (p. 6)

² In the NCCCQI and NARA reports, and in this report, the District of Columbia is included in state counts and not listed separately.
There are a variety of methods that many States are using, often in combination, in their monitoring and enforcement of licensing rules and regulations. This report explores these methods:

- **Differential Monitoring**: A regulatory method for determining the *frequency or depth of monitoring* based on an assessment of a facility’s history of compliance with rules;

- **Full and Abbreviated Compliance Reviews**: Conducting an inspection by monitoring *all rules* (full review) or a *selected set of rules* (abbreviated review);

- **Risk Assessment**: An approach that focuses on identifying and monitoring those rules that place children at *greater risk of mortality or morbidity* if violations or citations occur; and

- **Key Indicators**: An approach that focuses on identifying and monitoring those rules that statistically predict compliance with all the rules.

The relationship among these methodologies is often confused, partly because of varying definitions. The graphic below explains the relationship of the methodologies with differential monitoring as the overarching approach and risk assessment and key indicators as types of abbreviated compliance.
**Differential Monitoring**

Differential monitoring is a regulatory method for determining the frequency or depth of monitoring based on an assessment of a facility’s history of compliance with licensing rules. A differential monitoring system can be used to recognize a provider’s strong record of licensing compliance with abbreviated or less frequent inspections if there have been no serious violations for a period of time. For providers with rule violations and compliance issues, licensing agencies can use differential monitoring to focus more attention on those facilities with additional monitoring visits, targeting visits on the problem areas, and providing technical assistance. When inspections are focused on a subset of rules, States often have an option for licensing staff to conduct a full review when necessary.

In its analysis of licensing trends, NCCQI (2013) noted that more than 50 percent of States report having a method for determining the frequency or depth of monitoring based on an assessment of compliance with regulations. *The number of States using differential monitoring increased significantly from 11 States in 2005 to 26 States in 2011.*

**Differential Monitoring Policies in Oklahoma**

Oklahoma increases the number of monitoring visits from the required three annual visits if there is a pattern of noncompliance. Technical assistance is provided during all visits as needed. According to the Oklahoma Department of Human Services’ (2012) policies:

After each monitoring visit, licensing staff enter the monitoring frequency plan... [in] the licensing database. Any changes in the monitoring plan must be reviewed by the supervisor. Examples of the required number of visits include:

- One visit per year for inactive child care centers, part-day, or school-age facilities;
- Two visits per year for part-year programs;
- Three visits per year for facilities with a history of compliance;
- Six visits per year for applications, six-month permits, and changes in facility class except a large FCC home changing to a FCC home; and
- Twelve visits per year for seriously noncompliant facilities.

On occasions when licensing staff visit a facility between monitoring visits for purposes such as picking up paperwork, providing consultation on a specific issue, or verifying a required repair or purchase, a full monitoring visit is not required and the visit is not counted toward the required number of visits. If numerous, repeated or serious noncompliance is observed during the visit, a complete monitoring visit is conducted. If caseloads prevent licensing staff from conducting the required number of monitoring visits, the supervisor consults with the staff on case management, and the number of required visits may be reduced if approved by the regional program manager. This adjustment is approved and documented in the case record by the supervisor. Required visits to nonproblematic licensed facilities may be reduced by one visit per year for no longer than a one-year period. More information about 340:110-1-9. Case Management, Instructions to Staff, is available at [http://www.okdhs.org/library/policy/oac340/110/01/0009000.htm](http://www.okdhs.org/library/policy/oac340/110/01/0009000.htm).
**Full and Abbreviated Compliance Reviews**

States generally conduct **full compliance reviews** during monitoring visits where all possible areas of regulatory compliance are measured and every rule is checked for compliance. According to NARA (2013), States typically conduct a full compliance review of programs every 1 – 2 years, most often as part of the license renewal process.

A growing number of States are using an **abbreviated compliance review** to conduct at least some inspections. NCCCQI (2013) reported that more than 55 percent of States in 2011 were using abbreviated compliance reviews for some inspections, mostly during routine compliance reviews.

States have different approaches to deciding if and when to use an abbreviated compliance form. NARA (2013) reported that in 2011, most of the States that use abbreviated compliance forms had policies on when to switch from an abbreviated compliance review to a full compliance review. The following examples illustrate how States determine when to use full and abbreviated compliance reviews:

- **Florida** inspects centers a minimum of three times per year and family child care (FCC) homes two times per year. As part of the 1996 WAGES Act, the Florida Legislature directed the Department of Children and Families and local licensing agencies to develop and implement an abbreviated inspection plan for child care facilities based on certain statutory criteria. Florida has an automated child care inspection system that tracks violation data and identifies the providers eligible for abbreviated inspections. Eligible providers have had no Class I or Class II (most serious) violations for two consecutive years. If violations are found during an abbreviated visit, the provider is no longer eligible to be monitored using the shorter form and must have a full compliance review. Florida’s laws about conducting abbreviated inspections are available in **2013 Florida Statutes Sections 402.26 – 402.319 Child Care** at [http://nrckids.org/default/assets/File/StateRegs/FL/FL_Statutes_402_26-402_319_Child_Care.pdf](http://nrckids.org/default/assets/File/StateRegs/FL/FL_Statutes_402_26-402_319_Child_Care.pdf).

- The **Georgia** licensing agency conducts a minimum of two visits per year, including a licensing study and a monitoring visit. The licensing study is a full inspection using an inspection form that includes all rules, with the core rules highlighted (see page 8 for more detail). Monitoring visits involve the use of an abbreviated form that only includes the core rules.

- **North Carolina**'s state statute requires that all providers are inspected by the licensing agency at least once per year, in addition to annual inspections by local or state health and fire inspection agencies. For programs to receive an abbreviated monitoring visit, they must have a four- or five-star license and a compliance score of 85 percent over the past 18 months prior to the scheduled visit date. In the rated license system, higher star levels are obtained by meeting additional requirements related to program quality standards and education levels of staff. “Chapter 110 Child Care Facilities,” in **North Carolina General Statutes** (2013) is available at [http://nrckids.org/default/assets/File/StateRegs/NC/07-13%20Article%2007.pdf](http://nrckids.org/default/assets/File/StateRegs/NC/07-13%20Article%2007.pdf).

- **Texas** inspectors and investigators determine which standards to evaluate prior to the inspection but have the ability to add standards during the inspection, if needed. All standards must be evaluated at least once every two years. Standards may be re-evaluated as a result of investigations, follow up on previous deficiencies, or as part of a corrective action. Texas policies on Preparing for Inspections are in Section 4140 in the Texas’ Licensing Policy and Procedures Handbook at [http://www.dfps.state.tx.us/handbooks/Licensing/Files/LPPH_pg_4000.asp#LPPH_4140](http://www.dfps.state.tx.us/handbooks/Licensing/Files/LPPH_pg_4000.asp#LPPH_4140).

- **Utah** inspects centers and FCC homes twice a year. All providers receive an abbreviated unannounced compliance review and a full announced compliance review annually. All of Utah’s announced (full) and unannounced (abbreviated) inspection checklists are available on its Web site at [http://health.utah.gov/licensing/centerinspectionchecklists.htm](http://health.utah.gov/licensing/centerinspectionchecklists.htm) (centers) and at [http://health.utah.gov/licensing/HomeInspectionChecklists.htm](http://health.utah.gov/licensing/HomeInspectionChecklists.htm) (FCC homes).
Approaches to Identifying Critical Rules

Often differential monitoring involves monitoring programs using a subset of the licensing rules to determine compliance. There are two methods that States have used to identify these critical rules:

- **Key Indicators**: An approach that focuses on identifying and monitoring those rules that *statistically predict compliance* with all the rules; and
- **Risk Assessment**: An approach that focuses on identifying and monitoring those rules that place children at *greater risk of mortality or morbidity* if violations or citations occur.

Focusing on specific rules, whether through a key indicator or risk assessment process or a combination of both, can assist the licensing agency to:

- Implement a differential monitoring policy;
- Guide case management such as targeted technical assistance or witnessed visits;
- Determine enforcement actions based on categories of violations; and
- Assist families in better understanding the potential impact of noncompliance on their child’s care.

**Key Indicators**

Here we describe the key indicator approach, where States identify those rules that *statistically predict overall compliance*. A methodology for key indicators was developed by Dr. Richard Fiene at Pennsylvania State University. Dr. Fiene (2014) states that “if a program is 100% in compliance with the Key Indicators, the program will also be in substantial to full compliance with all rules. The reverse is also true in that if a program is not 100% in compliance with the Key Indicators, the program will also have other areas of non-compliance with all the rules.” (p. 3)

The indicator methodology was based on research to study the impact of child care quality on children’s development and the relationship between program quality and compliance with state licensing rules (Fiene, 2013). Several conducted in Pennsylvania in the 1980s found that programs in substantial compliance with licensing rules had better quality than those with 100% compliance (with a focus on recordkeeping), which led to including more program items in licensing rules. The studies supported greater use of indicators to save monitoring time and permit more technical assistance and consultation on quality improvement (Fiene, 1986, Kontos & Fiene, 1987).

The key indicators approach is often used to determine the rules to include in an abbreviated inspection form or checklist. Some States have worked with Dr. Fiene to implement his statistical methodology; however, other States have determined indicators by reviewing their rules and choosing by consensus those considered most critical to protecting children’s health and safety. In addition, States that use key indicators often include a few additional rules in their inspections, based on level of risk or random selection.
Washington Employs Key Indicator System

Washington based its system of monitoring checklists on the thirteen indicators developed by Dr. Richard Fiene (2002) for the U.S. Department of Health and Human Services a number of years ago. These are used across all types of programs—centers, FCC homes, and school-age programs. Providers with nonexpiring full licenses are monitored using an abbreviated checklist when the site has demonstrated a high level of compliance since the prior visit. This includes, but is not limited to, no valid complaints, compliance agreements, or other information demonstrating noncompliance with licensing rules. Licensors are required by policy to move to a full checklist in cases where providers are not in compliance with any of the key indicators. Washington has started to use electronic licensing forms and data gathering that will allow for statistical weighting in future years, after the data have matured. Washington’s licensing agency includes some rules in addition to the key indicators in their abbreviated checklists.

- **Policies and Procedures**

- **Monitoring Tools**

**Risk Assessment**

A risk assessment approach can be used to determine the rules that pose a greater risk of harm to children if violated. Risk assessment is most often tied to classifying or categorizing rule violations and can be used to identify rules where violations pose a greater risk to children, distinguish levels of regulatory compliance, or determine enforcement actions based on categories of violations.

There are a number of ways licensing regulations can be assessed for risk, including the following:

- Probability of harm (high, medium, low);
- Severity of harm (extreme, serious, moderate, low); or
- Frequency of violation (numerous, repeated) based on those considered most critical to protecting children’s health and safety.

States that choose a risk assessment approach must determine whether to assign a risk category to all rules or a selected set of rules. A risk category might be assigned to all rules so that enforcement can be tied to level of risk. For example, Florida has categorized all rule violations based on the threat of harm to children:
“Class I Violations” are the most serious in nature, pose an imminent threat to a child including abuse or neglect, and could or do result in death or serious harm to the health, safety, or well-being of a child;

“Class II Violations” are less serious in nature than Class I violations, and could be anticipated to pose a threat to the health, safety, or well-being of a child, although the threat is not imminent; and

“Class III Violations” are less serious in nature than either Class I or Class II violations, and pose a low potential for harm to children.

Alternatively, a licensing agency might only assign a risk category to a subset of rules if the primary purpose of risk assessment is to determine the need for further monitoring visits. **Ohio** has defined Serious Risk Noncompliances (SRNC) for centers and group child care homes based on requirements with the highest risk of harm if violated. Regulations are organized into three large categories: 1) Lack of Supervision, 2) Administrative Negligence, and 3) Environmental Hazards. If a program has a certain number of serious risk violations, they receive additional full compliance inspections. A summary document of the requirements chosen as SRNC is available at [http://jfs.ohio.gov/cdc/RiskRules.pdf](http://jfs.ohio.gov/cdc/RiskRules.pdf).

**Oklahoma** has also identified serious noncompliances that expose children to conditions that present an imminent risk of harm. Their policies clarify that “Imminent risk of harm must be assessed based on the age of the child, the amount of time the caregiver was out of compliance, and the caregiver’s efforts to mitigate the risk. Serious noncompliances are identified through licensing observations, confirmed complaint investigations, and/or self-reported incidences.” The policies are available at [http://www.okdhs.org/library/policy/oac340/110/01/0009003.htm](http://www.okdhs.org/library/policy/oac340/110/01/0009003.htm).

Some States use risk assessment to classify violations and determine enforcement approaches. For example, in **Florida**, violations of the minimum health and safety standards are automatically classified as Class I, Class II, or Class III based on the potential for harm to a child. Enforcement actions, such as monetary fines, are determined by the classification of violations and number of occurrences in a progressive enforcement model. Licensing inspection reports are posted on the Florida Department for Children and Families Web site and include violation classifications. The definitions of the three classes are found in “Chapter 65C-22 Child Care Standards” of the **Florida Administrative Code (8/1/2013)** at [http://nrckids.org/default/assets/File/StateRegs/FL/FL_Chapter_65C-22.pdf](http://nrckids.org/default/assets/File/StateRegs/FL/FL_Chapter_65C-22.pdf).

In **Utah**, rule violations are classified as Level 1, 2, or 3 violations, depending on both the seriousness of harm to a child that could result from the violation, as well as the likelihood that harm will occur. Level 1 findings are categorized as “cited” findings the first time they occur. Level 2 and 3 findings are initially classified as “technical assistance” findings, which mean that providers are given technical assistance and the opportunity to correct the violation. The number of rule violations and the severity of the violations determine if providers may be placed on a conditional license with additional monitoring inspections. The frequency of monitoring inspections may also increase due to noncompliance during the conditional period. Definitions of the violation levels are available in the “Introduction” section of the **Child Care Center Rule Interpretation Manual** at [http://health.utah.gov/licensing/rules/interpretation/Center/Section%201-%20Introduction.pdf](http://health.utah.gov/licensing/rules/interpretation/Center/Section%201-%20Introduction.pdf). Utah’s interpretation manuals include noncompliance levels for each licensing requirement. The manuals are available at [http://health.utah.gov/licensing/rules.htm](http://health.utah.gov/licensing/rules.htm).
In **Texas**, all of the Child Care Licensing Minimum Standards have been assigned a weight (High, Medium High, Medium, Medium Low, or Low) based on the risk that a violation of that standard presents to children. Weights are noted within the minimum standards documents in the left margin next to each standard or subsection. Only those standards that can be violated (marked as a deficiency) are weighted. The weighted enforcement system utilizes the program’s operations compliance history including the repetition of violations, investigations, types, and number and weight of deficiencies to generate the enforcement recommendations. The Texas licensing standards are available at [http://nrckids.org/index.cfm/resources/state-licensing-and-regulation-information/texas-regulations/](http://nrckids.org/index.cfm/resources/state-licensing-and-regulation-information/texas-regulations/).

In Texas, inspectors and investigators determine which standards to evaluate prior to the inspection but have the ability to add standards during the inspection, if needed. All standards must be evaluated at least once every two years. Standards may be re-evaluated as a result of investigations, follow up on previous deficiencies, or as part of a corrective action. The weighted enforcement system utilizes the operations compliance history, including the repetition of violations, investigations, types, and number and weight of deficiencies to generate the enforcement recommendations.

Licensing staff document observations to capture the scope and severity of the deficiency, but the weighted standards are now part of the licensing database and decisionmaking process, resulting in more consistent and equitable enforcement practices. The Child Care Licensing Automation Support System (CLASS)* Risk Review is a tool that supplements the professional assessments of licensing staff. The CLASS Risk Review produces enforcement recommendations based upon the type, number, weight, and repetition of violations over the course of an operation’s two-year compliance history. A Risk Analysis summary can be requested by staff seeking feedback on corrective actions. Facilities with serious deficiencies or a significant number of deficiencies, repeat deficiencies, or that fail to make timely corrections, are inspected more frequently to monitor the level of risk to children.

For more information, see “Section 4500: Evaluating Risk to Children” in the *Texas Licensing Policy and Procedures Handbook* at [http://www.dfps.state.tx.us/handbooks/Licensing/Files/LPPH_pg_4300.asp#LPPH_4500](http://www.dfps.state.tx.us/handbooks/Licensing/Files/LPPH_pg_4300.asp#LPPH_4500).

*CLASS is the Child Care Licensing Automation Support System. It is a computer application used by Texas licensing staff for record management.*
Georgia’s Core Rules

Georgia uses a core rule reference chart to determine and assess the health and safety risk of noncompliance to children. When child care licensing consultants conduct inspections, they use the chart to assess the level of severity of the violation and guide their decisionmaking on issuing citations. Each time any core rule within the core rule categories is cited, the risk level of the citation is also assessed. Risk level is assigned at low, medium, high, and extreme levels. The number of core rule categories cited and the assigned risk level determines the annual compliance level. A facility’s annual compliance status is determined on June 30 of each year, based on the performance for the past fiscal year (July 1-June 30), is posted on the public Web site, and remains in place for the next fiscal year. Additional information about Georgia’s core rules is available at http://decal.ga.gov/ChildCareServices/CoreRulesInformation.aspx.

Family Day Care Home Rule Categories
- Criminal Records Check
- Discipline
- Field Trips
- Infant Sleeping Safety Requirements
- Overcrowding Registration Requirements
- Physical Plant
- Playgrounds
- Staff:Child Ratios
- Supervision
- Swimming Pools and Water Related Activities

Child Care Learning Center and Group Day Care Home Core Rule Categories
- Diapering Areas and Practices
- Discipline
- Field Trips
- Infant Sleeping Safety Requirements
- Hygiene
- Medications
- Physical Plant
- Playgrounds
- Staff:Child Ratios
- Supervision
- Swimming Pools and Water Related Activities
- Transportation

Issues To Consider

The goal of differential monitoring, abbreviated compliance tools, risk assessment and key indicators is to create efficiencies and greater effectiveness in monitoring and enforcement, permitting more time for monitoring, especially of those facilities with lower compliance that need more technical assistance and program consultation. It should be noted, however, that these strategies should only be implemented when built on a strong licensing structure with a foundation of adequate periodic unannounced inspections. The States surveyed for this report use different tools and methodologies for measuring compliance, and feel that this practice has increased their enforcement capability. The increased use of these methodologies across States raises some questions for the field to consider:

- While abbreviated compliance forms are widely used, most are not developed using a methodology that statistically predicts compliance. Are all of these methods equally effective in measuring the level of compliance with licensing rules?
- Are all abbreviated compliance systems successful in creating both efficient and effective use of resources? What are the similarities and differences and what is their impact on effective regulation?
- What is the best mix of the measurement methodologies discussed in this report for consistent and strong enforcement of the licensing rules?
How do these methods impact the relationship between licensing and other entities that monitor child care programs, such as Head Start, Quality Rating and Improvement Systems, prekindergarten, and national accreditation?

States must continue to educate providers on the importance of meeting all licensing rules, not only those that are identified as being critical to children’s health and safety. Licensing staff should receive training and guidance on remaining diligent during all on-site inspections, and carefully observing and assessing all facets of the physical facility and program including interaction between staff and children. Licensing policy and procedures should also guide staff on what factors will trigger a full compliance review at any inspection using an abbreviated tool. Lastly, research is needed to compare the various forms of abbreviated compliance systems for their effectiveness in measuring compliance levels and fostering improved compliance and quality.

References


