The Key Licensing Indicator System: A Kansas Journey

Erin Jackson
Kansas Health and Environment
Child Care Licensing

Background

- There are approximately 5,600 licensed out-of-home child care facilities in Kansas. Statute requires an inspection at least once every 12 months.
- During SFY 2013, roughly 8,000 routine inspections were requested by KDHE (initial, renewal and compliance).
- Inspections are conducted using a comprehensive checklist (survey instrument and automated templates).
- CLARIS is an automated database system that was created in 2004. Web based automated surveys were implemented February 2012 for licensed/group day care homes, child care centers, head start centers, and preschools.

What is an indicator system?

A licensing indicator system increases the efficiency and effectiveness of a licensing program by focusing the emphasis of the licensing process on rules most closely associated with regulatory compliance.

The Benefits of Key Indicator Systems

- The regulatory oversight agency is able to spend more time monitoring and providing technical assistance to noncompliant providers by spending less time in compliant programs.
- Providers benefit from shorter inspections by maintaining compliance.
- Children in care enjoy a higher degree of health and safety protection.
- The public is assured that strong licensing continues even if resources are reduced.

www.naralicensing.org
NARA and Timeline

**November 2012**
Contracted with NARA as the sole developer of the Kansas Licensing Key Indicators.

**January 2013**
Dr. Richard Fiene began the analysis of Kansas Child Care Licensing automated survey/inspection data. For the KDHE study, licensing data from 482 child care centers and 500 family/group child care homes was analyzed.

**February 2013**
The Kansas Child Care Licensing Key Indicator Study was completed. The data driven analysis resulted in 8 indicators for CCC and 6 indicators for home based programs. The KDHE system pulls 5 random regulations not directly associated with the indicators.

Kansas Licensing Indicator System

**High-risk regulations** were identified and must be measured in each indicator survey. Three regulations were identified for centers and preschools and six additional regulations for homes.

**May 2013**
Quality/other regulations were selected by the Bureau to be measured in each indicator survey. Eleven additional regulations for centers and preschools and thirteen for licensed and group day care homes.

In order to assure that full compliance with all regulations is maintained, five additional regulations will be selected by CLARIS at random, and measured during each indicator survey.

**September 2013**
The Criteria for Use of a Licensing Indicator System was completed. There are 10 points that must be met.

Kansas Licensing Indicator System

**• Stakeholder Presentations:**
  – Ron Melusky, Director, Pennsylvania Bureau of Human Services Licensing and President-Elect of NARA presented on the Key Indicator Model for Kansas in Wichita and Topeka April 2013

**Surveyor Training:**
  – Mardi Isler from NARA conducted surveyor training at six locations during scheduled regional trainings.
  – KDHE District Specialists provided on-site guidance and technical assistance to child care licensing surveyors during pilot and after implementation to all contracting counties.

**Surveyor Challenges**
  – The walkthrough
  – Trusting the “Science”
  – Surveyor “guilt”
  – Technology

Our Mission: To protect and improve the health and environment of all Kansans.
Kansas Licensing Indicator System

**Criteria**

- The facility has had a full license at the current address for the past two years.
- A facility with a temporary permit is not eligible.
- The facility has had an initial and one annual survey or at least two annual surveys completed within the past two years.
- There has been no change in ownership, licensed premises, or program type within the past two years.
- In the past year, administration of the facility has remained the same:
  - Program director for center or preschool has not changed.
  - The primary care provider (when owner is not the PCP) in a LDCH has not changed.
  - At least one primary care provider in a GDCH has not changed.
- The most recent survey (annual, complaint, or compliance) was in compliance or a corrective action plan was accepted. The CLARIS status indicates "complete".

**Criteria cont.**

- The facility is in compliance with the terms of the license (numbers and ages of children and the use of approved space) and any occupancy, building code, zoning, or fire safety violations have been resolved.
- There are no pending complaints or incidents currently under investigation by the Department.
- There have been no substantiated complaints within the past year.
- The facility has not had any of the following Administrative Orders or combination of administrative orders within the past two years:
  - Intent to Deny [K.S.A. 65-504];
  - Intent to Assess a Civil Penalty [K.S.A. 65-526];
  - Intent to Suspend [K.S.A. 65-523 (limit, modify or suspend)];
  - Intent to Revoke [K.S.A. 65-504 (for noncompliance) does not include a Notice of Intent to Revoke for a prohibited person that has been resolved];
  - Emergency Order of Suspension [K.S.A. 65-524 (limit, modify or suspend)].
- The facility does not have a consent agreement resolving an Administrative Order in effect.

The Key Indicator Inspection Process

- **Identify eligible providers.** Not all providers are eligible for indicator inspections. Exclusionary factors are developed through agency policy as an added means of quality assurance.
- **Conduct an inspection measuring compliance with the statistically-identified indicator regulations.**
- **Measure regulations identified at random in addition to the statistically-identified indicator regulations.** Additional regulations are identified at random as an added means of quality assurance.
- **Expand the scope of the inspection if necessary.** Indicator inspections may become full inspections if violations are identified.

Kansas Licensing Indicator System

**Quality assurance**

A full annual survey must be conducted every third year (an indicator survey will not replace the full annual survey at a facility for more than two years).

Use of the indicator system will not be announced to the provider in advance of the survey.

Indicators will be re-calculated every three years.
Kansas Licensing Indicator System

• System Functionality:
  – 1 indicator found in noncompliance: regulation subsection extends
  – 2 indicators found in noncompliance: full survey expands and is conducted
  – Significant noncompliance identified that is not part of the checklist can be added through the Add Cite function; this does not expand survey

NOTE: Facility status may indicate full survey vs. KLIS

• Pending complaint not logged into CLARIS

• Change is primary provider or Program director

• Other environmental issues or changes (not approved) as deemed appropriate by surveyor and KDHE.

Key Indicators: Child Care Centers

K.A.R.28-4-126(b)(3)
Each person regularly caring for children shall have a health assessment conducted by a licensed physician or by a nurse trained to perform health assessments. The health assessment shall be conducted no earlier than one year before the date of employment or initial application for a license or certificate of registration, or not later than 30 days after the date of employment or initial application.

K.A.R.28-4-126(c)(2)
Each person living, working or regularly volunteering in the facility shall have a record of a negative tuberculin test or x-ray obtained not more than two years before the employment or initial application, for a license or certificate of registration or not later than 30 days after the date of employment or initial application.

K.A.R.28-4-423(a)(18)
The premises shall be maintained in good condition and shall be clean at all times, free from accumulated dirt and trash, and any evidence of vermin or rodent infestation. Each outdoor trash and garbage container shall be covered, and the contents shall be removed at least weekly.

Key Indicators: Child Care Centers

K.A.R.28-4-423a(23)
Medicines, household poisons, and other dangerous substances and instruments shall be in locked storage.

K.A.R.28-4-428a(c)(1)
Each staff member counted in the staff-child ratio, each volunteer counted in the staff-child ratio, and each program director shall obtain certification in pediatric first aid and in pediatric CPR as specified in this subsection either before the date of employment or volunteering or not later than 30 calendar days after the date of employment or volunteering.

K.A.R.28-4-430(c)(3)
Each staff member shall be trained to observe symptoms of illness, neglect, and child abuse, and shall observe each child’s physical condition daily.

K.A.R.28-4-437(d)
The outdoor play space shall be well drained and free of hazards.
Key Indicators: Licensed/Group Day Care Homes

K.A.R.28-4-115(g)(1)
All household cleaning supplies and all bodily care products bearing warning labels to keep out of reach of children or containing alcohol shall be in locked storage or stored out of reach of children under six years of age. Soap used for hand washing may be kept unlocked and placed on the back of the counter by a bathroom or kitchen sink.

K.A.R.28-4-115a(a)(1)(A)
Each applicant, each applicant with a temporary permit, and each licensee shall develop a supervision plan for children in care that includes all age ranges of children for whom care will be provided. A copy of the plan shall be available for review by the parents or legal guardians of children in care and by the department. The plan shall include the following: A description of the rooms, levels, or areas of the facility including indoor and outdoor areas in which the child will participate in activities, have snacks or meals, nap, or sleep.

K.A.R.28-4-117(c)
Immunizations for each child, including each child of the provider under 16 years of age shall be current as medically appropriate and shall be maintained current for protection from the diseases specified in K.A.R. 28-1-20(d). A record of each child's immunizations shall be maintained on the child's medical record.

K.A.R.28-4-127(b)(1)(A)
Emergency medical treatment: Each facility shall have on file at the facility for each child: written permission of the parent, guardian, or legal custodian for emergency medical treatment on a form that meets the requirements of the hospital or clinic where emergency medical care will be given.

Health and Safety Indicators

• 11 additional regulations were selected by the Bureau to be measured in each indicator survey for centers and preschools

• 13 additional quality regulations were selected to be measured in each indicator survey for Licensed and Group Day Care Homes

• In order to assure that full compliance with all regulations is maintained, five additional regulations will be selected by CLARIS at random, and measured during each indicator survey.
KLIS Data: Licensed/Group Day Care Homes

- Data range January 1-September 09, 2014
- Licensed and Group Day Care Homes:
  - 2488 annual surveys conducted
  - 1122 qualified for KLIS-45%
  - 21% completed without extending
  - 12% extended by one KLIS violation
  - 10% extended to full survey

- Child Care Centers, Head Start Centers, Preschools:
  - 423 annual surveys conducted
  - 139 qualified for KLIS-33%
  - 14% completed without extending
  - 8% extended by one violation
  - 8% extended to full survey

KLIS Data: Centers, HS Centers, Preschools

- Data range January 1-September 09, 2014
- Child Care Centers, Head Start Centers, Preschools:
  - 423 annual surveys conducted
  - 139 qualified for KLIS-33%
  - 14% completed without extending
  - 8% extended by one violation
  - 8% extended to full survey
Our Mission: To protect and improve the health and environment of all Kansans.

THANK YOU

http://www.kdheks.gov/bcclr/index.html