



Illinois Department of Children and Family Services (DCFS)
Key Indicator Report Summary
June 4, 2014

This document accompanies Dr. Richard Fiene's May 21, 2014 *NARA Illinois Key Indicator Report for Centers, Group Homes, and Family Homes* report. A copy of the report is attached. The purpose of this document is to present the report's findings for persons who are unacquainted with formal research methodology.

Method

The most important step in developing a key indicator model involves identifying how closely certain regulations are related to overall regulatory compliance. For the DCFS study, licensing data from 200 child care center (center) inspections, 119 group child care home (group home) inspections, and 200 family child care home (family home) inspections was analyzed.

We began by identifying the centers, group homes, and family homes that had the fewest violations during their most recent full inspections as well as the centers, group homes, and family homes that had the most violations during their most recent full inspections. Centers, group homes, and family homes that had the fewest violations were considered highly compliant. Centers, group homes, and family homes that had the most violations were considered minimally compliant.

Once these groups were identified, statistical tests were conducted to measure the strengths of associations between each regulation and high or minimal compliance. The regulations with the strongest association to high compliance were identified as key indicators.

Key indicators for Child Care Centers

Section 407.310(a)(1). A medical report on forms prescribed by the Department shall be on file for each child. The initial medical report shall be dated less than 6 months prior to enrollment of infants, toddlers and pre-school children. For school-age children, a copy of the most recent regularly scheduled school physical may be submitted (even if more than 6 months old) or the day care center may require a more recent medical report by its own enrollment policy. If a health problem is suspected, the day care center may require additional documentation of the child's health status.

Section 407.120(a)(3). A confidential file shall be maintained on each staff person and contain at least the following information: Three written character references, verified by the day care center

Section 407.100(f). Staff shall have physical re-examinations every two years and whenever communicable disease or illness is suspected.

Section 407.120(a)(4). A confidential file shall be maintained on each staff person and contain at least the following information: Proof of educational achievement as required

for the individual's position. Foreign credentials require additional documentation providing a statement of the equivalency in the U.S. educational system.

Section 407.250(d). The facility shall distribute a summary of the licensing standards, provided by the Department, to the parents or guardian of each child at the time that the child is accepted for care in the facility. In addition, consumer information materials provided by the Department including, but not limited to, information on reporting and prevention of child abuse and neglect and preventing and reporting communicable disease shall be distributed to the parents or guardian of each child cared for when designated for such distribution by the Department.

Section 407.380(b). Such equipment and materials for infants, toddlers and pre-school children shall be provided in the quantity and variety specified in Appendix A: Equipment for Infants and Toddlers, Appendix B: Equipment for Pre-school Children and Appendix C: Equipment for School-Age Children of the Rules.

Section 407.120(a)(1). A confidential file shall be maintained on each staff person and contain at least the following information: A copy of a form prescribed by the Department which contains information on persons employed in the day care center.

Section 407.260(f). All day care centers shall have a written policy that explains to parents and staff the actions the center will take if a parent or guardian does not pick up, or arrange to have someone pick up, his or her child at the designated, agreed upon time. The policy shall consist of the provider's expectations clearly presented to the parent or guardian in the form of a written agreement that shall be signed by the parent or guardian and shall include at least the following elements: (1)-(4).

Section 407.270. The day care center shall develop a guidance and discipline policy for staff use that is also provided to parents. Staff shall sign the guidance and discipline policy at the time of employment and parents shall sign the policy when their child is enrolled. The policy shall include: (1)-(5).

Key indicators for Group Child Care Homes

Section 408.70 (a)(2). A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. If the child is in a high-risk group, as determined by the examining physician, a tuberculin skin test by the Mantoux method and the results of that test shall be included in the initial examination for all children who have attained one year of age, or at the age of one year for children who are enrolled before their first birthday. The tuberculin skin test by the Mantoux method shall be repeated when children in high-risk groups begin elementary and secondary school.

Section 408.70(a)(3). A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. The initial examination shall show that children from 6 months through 6 years of age have been screened for lead poisoning for children residing in an area defined as high-risk by the Illinois Department of Public Health in its

Lead Poisoning Prevention Code (77 Ill. Adm. Code 845) or that a lead risk assessment has been completed for children residing in an area defined as low risk by the Illinois Department of Public Health.

Section 408.120 (a)(1). A facility shall maintain a record file on the children enrolled. A written application for admission of each child shall be on file with the signature of the parent or guardian.

Section 408.70 (a)(4). A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. The report shall indicate that the child has been immunized as required by the rules of the Illinois Department of Public Health for immunizations (77 Ill. Adm. Code 695). These required immunizations are poliomyelitis, measles, rubella, diphtheria, mumps, pertussis, tetanus, hepatitis B, haemophilus influenza B, and varicella (chickenpox) or provide proof of immunity according to requirements in Part 695.50 of the Department of Public Health.

Section 408.60(j). All group day care homes shall have a written policy that explains the actions the provider will take if a parent or guardian does not retrieve, or arrange to have someone retrieve, his or her child at the designated, agreed upon time. The policy shall consist of the provider's expectations, clearly presented to the parent or guardian in the form of a written agreement that shall be signed by the parent or guardian, and shall include at least the following elements:(1)-(4).

Section 408.45(f). The caregivers shall complete 15 clock hours of in-service training per licensing year in accordance with the requirements in Appendix G of the rules. Such training may be derived from programs offered by any of the entities identified in Appendix G of the rules. Courses or workshops to meet this requirement include, but are not limited to, those listed in Appendix G of the rules.

Section 408.70(a)(1). A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. The medical report shall be valid for 2 years, except that subsequent examinations for school-age children shall be in accordance with the requirements of Section 27-8.1 of the School Code [105 ILCS 5/27-8.1], provided copies of the exam are on file at the facility.

Section 408.45(f). The caregivers shall complete 15 clock hours of in-service training per licensing year in accordance with the requirements in Appendix G of the rules. Such training may be derived from programs offered by any of the entities identified in Appendix G of the rules. Courses or workshops to meet this requirement include, but are not limited to, those listed in Appendix G of the rules.

Section 408.35(f). The caregivers and all members of the household shall provide medical evidence that they are free of communicable disease that may be transmitted while providing child care; and, in the case of caregivers, that they are free of physical

or mental conditions that could interfere with child care responsibilities. The medical report for the caregivers shall be valid for 3 years.

Key indicators for Family Child Care Homes

Section 406.14(c)(3). A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. The initial examination shall show that children from 6 months through 6 years of age have been screened for lead poisoning for children residing in an area defined as high-risk by the Illinois Department of Public Health in its Lead Poisoning Prevention Code (77 Ill. Adm. Code 845) or that a lead risk assessment has been completed for children residing in an area defined as low risk by the Illinois Department of Public Health.

Section 406.14(c)(2). A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. If the child is in a high-risk group, as determined by the examining physician, a tuberculin skin test by the Mantoux method and the results of that test shall be included in the initial examination for all children who have attained one year of age, or at the age of one year for children who are enrolled before their first birthday. The tuberculin skin test by the Mantoux method shall be repeated when the children in high-risk groups begin elementary and secondary school.

Section 406.9(t). The caregivers shall complete 15 clock hours of in-service training per licensing year in accordance with the requirements in Appendix D of the rules. Such training may be derived from programs offered by any of the entities identified in Appendix D of the rules. Courses or workshops to meet this requirement include, but are not limited to, those listed in Appendix D of the rules. The records of the day care home shall document the training in which the caregiver has participated, and these records shall be available for review by the Department. Caregivers obtaining clock hours in excess of the required 15 clock hours per year may apply up to 5 clock hours to the next year's training requirements.

Section 406.8(a)(18). The physical facilities of the home, both indoors and outdoors, shall meet the following requirements for safety to children. There shall be written plans for fire and tornado emergencies. Caregivers and assistants in the home shall be familiar with these plans. The fire evacuation plan shall identify the exits from each area used for child care and shall specify the evacuation route. The fire evacuation plan shall identify a safe assembly area outside of the home. It shall also identify a near-by indoor location for post-evacuation holding if needed. The fire evacuation plan shall require that the home be evacuated before calling the local emergency number 911. The written tornado plan shall specify what actions will be taken in the event of tornado or other severe weather warning, including designation of those areas of the home to be used as the safe spots.

Section 406.8(a)(23). The physical facilities of the home, both indoors and outdoors, shall meet the following requirements for safety to children. The licensee shall inspect the home daily, prior to arrival of children, ensuring that escape routes are clear and

that exit doors and exit windows are operable. A log of these daily inspections shall be maintained for at least one year, and shall be available for review. The log shall reflect, at minimum, the date and time of each inspection and the full name of the person who conducted it.

Section 406.12(h). All day care homes shall have a written policy that explains the actions the provider will take if a parent or guardian does not retrieve, or arrange to have someone retrieve, his or her child at the designated, agreed upon time. The policy shall consist of the provider's expectations, clearly presented to the parent or guardian, in the form of a written agreement that shall be signed by the parent or guardian, and shall include at least the following elements: The consequences of not picking up the child on time, including: Amount of late fee, if any, and when those fees begin to accrue; The degree of diligence the provider will use to reach emergency contacts, e.g., number of attempted phone calls to parents and emergency contacts, requests for police assistance in finding emergency contacts; and length of time the facility will keep the child beyond the pick-up time before contacting outside authorities, such as the child abuse hotline or police. Emphasis on the importance of having up-to-date emergency contact numbers on file. Acknowledgement of the provider's responsibility for the child's protection and well-being until the parent or outside authorities arrive. A reminder to the day care provider that the child is not responsible for the situation. All discussions regarding these situations shall be with the parent or guardian, never the child.

Section 406.8(a)(24). The physical facilities of the home, both indoors and outdoors, shall meet the following requirements for safety to children. The licensee shall hold monthly fire inspections of the day care home.

Section 406.8(a)(1). The physical facilities of the home, both indoors and outdoors, shall meet the following requirements for safety to children. The home shall have a first aid kit consisting of adhesive bandages, scissors, thermometer, non-permeable gloves, Poison Control Center telephone number (1-800-222-1222 or 1-800-942-5969), sterile gauze pads, adhesive tape, tweezers and mild soap.

Section 406.9(a). No individual may receive a license from the Department when the applicant, a member of the household age 13 and over, or any individual who has access to the children cared for in a day care home, or any employee of the day care home, has not authorized the background check required by 89 Ill. Adm. Code 385 (Background Checks) and been cleared in accordance with the requirements of Part 385.

Section 406.12(b)(3). Prior to acceptance of a child for care, the caregiver shall require that the parent or guardian provide a certified copy of the child's birth certificate. The caregiver: Shall provide a written notice to the parent or guardian of a child to be enrolled for the first time that within 30 days after enrollment the parent or guardian shall provide a certified copy of the child's birth certificate or other reliable proof of identity and age of the child. The caregiver shall promptly make a copy of the certified copy and return the original certified copy to the parent or guardian. If a certified copy of the birth certificate is not available, the parent or guardian must submit a passport, visa or other governmental documentation as proof of the child's identity and age and an affidavit or notarized letter explaining the inability to produce a certified copy of the

birth certificate [325 ILCS 50/5] . The notice to parent or guardian shall also indicate that the caregiver is required by law to notify the Illinois State Police or local law enforcement agency if the parent or guardian fails to submit proof of the child's identity within the 30 day time frame.

Section 406.14(c)(4). A medical report, on forms prescribed by the Department, shall be on file for each child, on the first day of care, and shall be dated no earlier than 6 months prior to enrollment. The report shall indicate that the child has been immunized as required by the rules of the Illinois Department of Public Health for immunizations (77 Ill. Adm. Code 695). These required immunizations are poliomyelitis, measles, rubella, diphtheria, mumps, pertussis, tetanus, hepatitis B, haemophilus influenza B, and varicella (chickenpox) or provide proof of immunity according to requirements in Part 695.50 of the Department of Public Health.

Association versus Causality

It is important to remember that key indicators do not cause compliance. Key indicators are associated with compliance – they “indicate” that overall compliance exists.

We do not know why certain regulations are associated with compliance – that would require more sophisticated tests – but we do not need to know the cause of the association to apply key indicators to the licensing process. Consider this analogy: it is largely unknown why certain medications successfully treat mental illness, but it is known that the medications are associated with successful treatment, so the medications are routinely prescribed.

What Happens Next

Identifying the statistically-validated key indicators is not enough to begin applying a key indicator model. Additional protections such as identifying which centers, group homes, and family homes are eligible for indicator inspections must be included to the key indicator model through the development of agency policies and procedures. NARA's policy development specialists have begun work on such policies, and will now begin regular contact with DCFS to finalize their development.