Final Report

Evaluating the New Key Indicator Inspection Tool: Phase Two Pilot Results

Prepared for the Community Care Licensing Division, California Department of Social Services

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KIT Phase Two Appendix

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Phase Two Child Care Program Area KIT 3 Forms

	Inspection Type:			KIT 3: FAMILY (CHILD CARE	TIOWE	LPA Code:	-			
1	Facility Lic Num:		Facility Name:				KIT Date:				
	In compliance										
	Yes No N/A*			licator Description		*					
	1 000	102417 (g)(5)(A-B)	ZT - All pools, spas, hot tubs, fish ponds, or similar bodies of water are made inaccessibl by covering or fencing as specified by regulation ZT - Storage areas for firearms and other dangerous weapons are inaccessible to childre								
	2 000	102417 (g)(4)(A-C)	Ammunition is lo	ocked separately			75 000 000				
Walk Through	3 000	102417(g)(4) & (g)(4)(A)				ounds, medications ar naccessible to childrer					
Ē	4 000	102417(g)(1)	Fireplaces and o	pen face heaters are	screened to pre	vent access by children	n				
ĕ	5 000	102417(g)(1)	Fire extinguisher	rs and smoke detecto	rs meet State Fi	re Marshall standards					
3	6 000	102417(b)	The home is kep	t clean and orderly, w	vith heating and	ventilation for safety	and comfort				
	7 000	102417(g)(3)	Where children	less than five years ol	d are in care, st	airs are fenced or barr	icaded				
	8 000	102417(d)	The home provid	he home provides safe toys, play equipment, and materials							
	9 000	H&S 1597.543	Facility has one	or more functioning o	arbon monoxide	e detectors that meet	the statutory re	equiremen			
vision	10 0 0 0	102417(a) & H&S 1597.58 (c)(2)	ZT - The licensee	is present in the hon	ne and ensures	that children in care a	re supervised a	t all times			
ě	11000	102417(k)(2)	ZT -Children are	not left in parked veh	nicles						
Care and Supervision	12 0 0 0	102417(a)		ily absent from the ho	ome, the license	e arranges for a subst	itute adult to ca	are for and			
area	13 0 0 0	102416.5(a)	The licensee maintains capacity specified on the license.								
_	14 0 0 0	102423(a)(2)	Each child has sa	afe, healthful, and cor	nfortable accom	nmodations, furnishing	s, and equipme	ent			
>	15 0 0 0	102417(g)(8)	The home has a	current roster of the	children						
Record Review	16 0 0 0	102417 (g)(9)(A)(1)	The home condu		drills at least one	ce every six months, a	nd documents	the date			
2	17 0 0 0	102418(g)/(g)(1)	Licensee docum	ents immunizations a	nd maintains an	d updates records for	children in care	2			
Š	18 0 0 0	102419(d)	Licensee provide Notification of P		r representative	with a copy of the Fa	mily Child Care	Home			
	19 0 0 0	102391(a)		zed employee of the l nd services at anytime		y enter and inspect an	y place providir	ng			
Administration	20 0 0 0	102417(r)(1)	1596.871(c)(2), o licensee immedi	or to exclude an indiv	idual from the h	lividual from the home some, pursuant to H&S vents them from retur	Code 1596.88	97, the			
Admir	21 0 0 0	102370(d)(1)	All individuals su			e obtained a criminal	record clearanc	e or			
	22 0 0 0	102416(c)	The licensee and			ompleted training on p	reventive heal	th practice			
	Number of	f staff records re	viewed today		Number of chil	dren's records review	ed today				
						r not observable during this					
	Did this inspection o more than one date	ccur on (Yes	Was a com	prehensive inspection luring this inspection?	Yes No	If so, was the comprehe triggered by items on th	nsive inspection	C Yes			
Co	mments or sugge	stions about this	KIT:				Fi	nal July 27			
	Print Form	A comprehensi	ve inspection is trig	gered if: one Zero Tolero	ance and/or two T	Type A violations are cited	d. 1	by Email			

	Inspection Type:			KIT 3: CHILD CARE INFANT CENTER	LPA Code:							
	Facilit	ty Lic Num:		Facility Name:	KIT Date:							
		ompliance	? A* Regulation	Compliance Indicator Description								
		000	101238(e)	ZT - All pools, spas, hot tubs, fish ponds, or similar bodies of water are fer to be inaccessible to children	nced or covered as s	pecified						
	2	000	101238(g)(2)	Firearms and other weapons are not allowed or stored on the premises of a child care center								
	3	000	101238(g)	isinfectants, cleaning solutions, poisons and other items that are dangerous to children, shall be accessible to children								
	4	000	101239(n)	Furniture and equipment are in good condition, free of sharp, loose or po	ointed parts							
	5	000	101238.2(d)(2)	The surface of the outdoor activity space is maintained in a safe condition	n, and is free of haza	ırds						
	6	000	101239(f)(1)	All storage containers for solid waste, including moveable bins, have tight on, and are in good repair	t fitting covers that a	are kept						
	7	000	101238.2(e)	The areas around or under high climbing equipment, swings, slides, and scushioned with material that absorbs falls	imilar equipment ar	e						
	8	000	101238(a)(1)	The licensee takes measures to keep the facility free of flies, other insect	s, and rodents							
nong,	9	000	101439	The facility has age-appropriate furniture and equipment including, but n mats; changing tables, and feeding chairs	ot limited to, cribs, o	cots, or						
Walk Through	10	000	101439(d)(2)	A baby walker is not allowed on the premises of a child care center in acc Section 1596.846	ordance with H & S	Code						
š	11	000	101439.1	he facility has sufficient infant napping equipment that meets the requirements of 101439.1(a)-(t								
	12	000	101438.3	The facility shall have indoor activity space for infants that is physically se preschool child care center/school-age child care center components, and 101438.3 (a) - (e)								
	13	000	101238(a)	The child care center is clean, safe, sanitary, and in good repair at all time well-being of children, employees, and visitors	es to ensure the safe	ty and						
	14	000	101417(a)(6)	The toddler program is conducted in areas physically separate from those children. Space planning and usage for the toddler component is governed Section 101438.3. Plans to alternate use of outdoor play space must be a	ed by the provisions	of						
	15	000	H&S 1596.954	Facility has one or more functioning carbon monoxide detectors that me	et statutory requirer	ments						
	16	000	101427(j)	Bottles, dishes, and containers of food brought by the infant's authorized with the infant's name and the current date	representative are I	labeled						
	17	000	101439(h)(4)	While in use, infant changing tables are placed within arm's reach of a sin	ık							
_	18	000	101229(a)(1)	ZT - No child(ren) are left without the supervision, including visual supervitime, except as specified in sections 101216.2(e)(1) and 101230(c)(1)	ision, of a teacher at	t any						
ervision	19	000	101429(a)(1)	ZT - The facility ensures that each infant is never left unattended, and und supervision of a staff person at all times	der the direct visual							
Care and Supe	20	000	101416.5	The facility is in compliance with the staff-infant ratios required in 101410	5.5 (a)-(e)							
ear	21	000	101416.5(b)	There is a ratio of one teacher for every four infants in attendance								
Car	22	000	101216.2(b)	Notwithstanding Section 101216(d), centers may use aides who are less teither: high school graduates, or are currently participating in an occupate by an accredited high school or college	9 33 6	rite us						
		Not applicab	le or not observable.	In the comment section, please explain why an item was not applicable or not observable du	uring this KIT inspection.							
				FORM CONTINUES ON PAGE 2								

Page 2 KIT 3: CHILD CARE INFANT CENTER, continued

	In o	compliance:	?							
		Yes No N/A*	Regulation	Compliance Indicator Description						
	23	000	101200(a)	\ensuremath{ZT} - The Department has inspection authority as specified in H&S Code sections 1596.852, 1596.853, and 1596.8535						
	24	000	101170.1(a)	ZT - The department shall notify a licensee to remove/bar, any person with specified convictions or for other reasons. The licensee shall comply with the notice						
	25	25 C C 101161(a) ZT - The licensee does not exceed the approved capacity of the fire clearance fo								
	26	000	101170(e)(1)	Prior to working or volunteering in a licensed child care facility, all individuals subject to criminal record review have obtained a clearance or criminal record exemption						
ords	27	000	101217	The licensee ensures that personnel records are maintained on the licensee, administrator, and each employee						
Administration/Staff Records	28	000	101416.2(b)	Prior to employment, an infant care teacher has completed, with passing grades, at least three postsecondary semester or equivalent quarter units in early childhood education or child development, and three postsecondary semester or equivalent quarter units related to the care of infants, at an accredited or approved college or university						
nistratio	29	000	101226(e)	In centers where the licensee chooses to handle medications, all medications are centrally stored, maintained with the child's name, and are dated, and follow the conditions as prescribed in (e)(1) through (e)(6)						
Admi	30	000	101229.1(b)	The person who brings the child to, and removes the child from the center, signs the child in/out						
	31	000	101212(ь)	The name of the child care center director or fully qualified teacher(s) designated to act in the director's absence is reported to the Department within 10 days of a change.						
	32	000	101416.2	The facility ensures that staff being utilized as infant teachers during the compliance review meet the qualification requirements of 101416.2 (a), (b), (c) and (g).						
	33	000	101227(a)(6)	Menus are posted at least one week in advance in a place visible by the child's authorized representative, dated, and kept on file for 30 days, and are made available on request						
	34	000	101216(f)	At least one person trained in CPR and Pediatric First Aid is present when children are at the facility or at offsite activities						
	35	000	101161(a)	The licensee does not exceed the conditions, limitations, and capacity specified on the license (if fire clearance capacity is exceeded, use Zero Tolerance item located above)						
ds	36	000	101221(a)	The licensee ensures that a separate, complete, and current record for each child is maintained						
Š	37	000	101221(b)(8)	Each child's record contains a medical assessment						
Child Records	38	000	101427	The facility has an individual feeding plan for each infant that meets the requirements of 101427 (b) (1)-(5)						
ಕ	39	000	101419.2 & .3	The facility ensures that each infant has an Infant Needs and Services Plan that meets the requirements of 101419.2 (a)-(b) and 101419.3 (a)						
		Number of	f staff records re	eviewed today Number of children's records reviewed today						
-	• 61	Emble		e comment section, please explain why an item was not applicable or not observable during this KIT inspection.						
	IVOL	applicable of no	K ooservable. In th	e comment section, prease explain why an item was not applicable or not observable during this NT Inspection.						
Die	1 this	inspection o	ccur on C Yes	Was a comprehensive inspection Yes If so, was the comprehensive inspection Yes						
		nan one date								
Co	mme	ents or sugges	stions about this	s KIT: Final July 27						
L	D.		A comprehens	ive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited.						
	Pri	nt Form	Call ISR at 80	00-311-4906 for technical assistance. Email: KIT3_CCC@csus.edu Fax: 916-278-5150						

F	acilit	ty l	ic N	lum:		Facility Name: KIT Date:					
	In	co	mp	liance	?						
	05.00				* Regulation	Compliance Indicator Description					
1 () () 101238(e)						ZT - All pools, spas, hot tubs, fish ponds, or similar bodies of water are fenced or covered as specified to be inaccessible to children					
	2	(00	00	101238(g)(2)	ZT - Firearms and other weapons are not allowed or stored on the premises of a child care center					
	3	(00	00	101238(a)	The child care center is clean, safe, sanitary and in good repair at all times to ensure the safety and well-being of children, employees, and visitors					
	4	(0.0	00	101538.3(b)	In combination programs, outdoor activity space provided for school-age children is physically separate from space provided for infant care and child care center children					
	5	(0 0	00	101238(g)	Disinfectants, cleaning solutions, poisons and other items that are dangerous to children, are inaccessible to children					
	6	(00	0.0	101238(g)(1)	Storage areas for poisons are locked					
	7	(00	00	101239(n)	Furniture and equipment is in good condition, free of sharp, loose, or pointed parts					
•	8	(0	00	101239(e)(4)	All toilets, hand washing, and bathing facilities are in safe and sanitary operating condition					
9	9	(0	00	101238.3(b)	All floors are clean and safe					
	10	(0.0	00	101227(a)(18)	All kitchen, food preparations and storage areas are kept clean, free of litter, rubbish, and free of rodents and other vermin					
	11	(00	00	101239(f)(1)	All storage containers for solid waste, including moveable bins, have tight-fitting covers that are kept on, and in good repair					
	12	(0.0	00	101239.2(a)	Uncontaminated drinking water is readily available both indoors and out					
	13	(0	00	101238.2(d)(2)	Outdoor activity space surfaces are free of hazards					
	14	(0 0	00	101238.2(e)	The areas around or under high climbing equipment, swings, slides and similar equipment are cushioned with material that absorbs a fall					
	15	(0.0	00	101516.5 &.5(b)	The facility maintains compliance with staff-child ratios required in 101516.5(a)-(d)					
	16	(0.0	00	101227(a)(6)	Menus are posted at least one week in advance, in a place visible by the child's authorized representative, dated and kept on file for 30 days, and made available on request					
	17	(00	00	H&S 1596.954	Facility has one or more functioning carbon monoxide detectors that meet statutory requirements					
cillia recolus	18	(0.0	00	101221(a)	There is a separate, complete, and current record maintained for each child enrolled in the child care center					
	- 1	Vot	appli	icable o	r not observable. In t	he comment section, please explain why an item was not applicable or not observable during this KIT inspection.					
						FORM CONTINUES ON PAGE 2					

Page 2 KIT 3: CHILD CARE CENTER - SCHOOL AGE, continued In compliance? Yes No N/A" Regulation **Compliance Indicator Description** H&S ZT - A licensee's failure to comply with the departments's exclusion order after being notified of the 19 0 0 0 1596.8897(g) order shall be grounds for disciplining the licensee pursuant to Section 1596.885 or1596.886 20 (() 101200(a) ZT - The department has inspection authority as specified in Health & Safety Code sections 1596.852, 1596.853, and 1596.8535 21 (() 101170.1(a) ZT - The department shall notify a licensee to remove/bar any person with specified convictions or for other reasons. The licensee shall comply with the notice. Administration/Staff Records 22 0 0 0 101161(a) ZT - The licensee shall not exceed the approved capacity of the fire clearance for the facility 23 (() 101229(a)(1) ZT - No child(ren) shall be left without the supervision, including visual supervision, of a teacher at any time except as specified in sections 101216.2(e)(1) and 101230(c)(1) Prior to working or volunteering in a licensed child care facility, all individuals subject to criminal 24 ((() 101170(e)(1) record review have obtained a clearance or criminal record exemption, or clearance as specified in & (e)(2) 101170 (f) The licensee does not exceed the conditions, limitations, and capacity specified on the license (if fire 25 C C C 101161(a) clearance capacity is exceeded, use Zero Tolerance item located above) 26 C C C 101216(f) At least one person trained in CPR and Pediatric First Aid is present when children are at the facility or at offsite activities 27 O O O 101212(b) The name of the child care center director or fully qualified teacher(s) designated to act in the director's absence shall be reported to the Department within 10 days of a change 28 C C 101229.1(a)(1) The person who signs the child in/out uses their full legal signature and records the time of day 101217(a) 29 000 Personnel records are maintained on the licensee, administrator, and each employee which includes &(a)(6) documentation of the educational background, training, and/or experience specified in this chapter 30 (() 101217(a)(11) Each personnel record contains a health screening as specified in section 101216(g) 31 (() (101216(g)(1) All personnel are in good health, verified by a health screening, including a test for tuberculosis, performed or supervised by a physician not more than one year prior to, or seven days after, employment or licensure Number of staff records reviewed today Number of children's records reviewed today * Not applicable or not observable. In the comment section, please explain why an item was not applicable or not observable during this KIT inspection. (Yes (Yes (Yes Was a comprehensive inspection Did this inspection occur on If so, was the comprehensive inspection triggered during this inspection? triggered by items on this KIT? more than one date? (No (No Comments or suggestions about this KIT: Final July 27 A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. Print Form Submit by Email Call ISR at 800-311-4906 for technical assistance. Email: KIT3_CCC@csus.edu Fax: 916-278-5150

	Inspe	ection Type:		KIT 3: CHILD CARE CENTER - MILDLY ILL LPA Code:								
	Facil	ity Lic Num:		Facility Name: KIT Date:								
	In	compliance	?									
	112000	Yes No N/A	* Regulation	Compliance Indicator Description								
	1	000	101238(e)	ZT - All pools, spas, hot tubs, fish ponds, or similar bodies of water are fenced or covered as specified to be inaccessible to children								
	2	000	101238(g)(2)	ZT - Firearms and other weapons are not allowed or stored on the premises of a child care center								
	3	000	101238(g)	isinfectants, cleaning solutions, poisons and other items that are dangerous to children, are naccessible to children								
	4	000	101238(g)(1)	torage areas for poisons are locked								
	5	000	101226(e)(1)(A)	Medications are kept in a safe place inaccessible to children								
_	6	000	101239(f)(1)	All storage containers for solid waste, including moveable bins, have tight fitting covers that are kep on, and are in good repair								
gno	7	000	101239(e)(4)	All toilets, hand washing, and bathing facilities are in safe and sanitary operating condition								
Ě	8	000	101238.3(b)	All floors are clean and safe								
Walk Through	9	000	101238(a)(1)	The licensee takes measures to keep the facility free of flies, other insects and rodents								
>	10	000	101239(n)	Furniture and equipment are in good condition, free of sharp, loose, or pointed parts								
	11	000	101639(e)	Not withstanding Section 101239(b), the total licensed capacity of a center does not exceed 10 mildly ill children for every toilet and hand washing sink								
	12	000	101639(e)(2)	Toilets used by mildly ill school-age children provide for individual privacy								
	13	000	101626.2(b)(1)	The isolation area is physically separate from the indoor activity area and is located to afford easy observation of, and access to, children requiring isolation								
	14	000	101638.3(b)	In combination centers with a Level I or Level II component for mildly ill children, indoor activity space for the Level I or Level II component is physically separate from indoor activity space for any other child care center component								
	15	000	H&S 1596.954	$\label{prop:control} \textbf{Facility has one or more functioning carbon monoxide detectors that meet statutory requirements}$								
- s	16	000	101239(q)	All materials and surfaces accessible to children, including toys, shall be free from toxic substances								
8	17	000	101238.2(d)(2)	The surface of the outdoor activity space is maintained in a safe condition, and is free of hazards								
Outdoors	18	000	101238.2(e)	The areas around or under high climbing equipment, swings, slides, and similar equipment are cushioned with material that absorbs falls								
	19	000	101239(o)	Playground equipment is in safe condition, free of sharp, loose or pointed parts								
ice	20	000	101227(a)(18)	All food prep and storage areas are kept clean, free of litter, and rubbish, and are free of rodents an other vermin								
ě	21	000	101227(a)(19)	All food is protected against contamination. Contaminated food is discarded immediately								
Food Service	22	000	101639.2(b)	Each child uses a cup or bottle labeled with his/her name, or a single-use disposable cup								
ß	23	000	101227(a)(15)	All foods capable of spoiling and causing food intoxications are stored in covered containers at 45 F								
-	24	000	101229(a)(1)	ZT - No child(ren) are left without the supervision, including visual supervision, of a teacher at any time, except as specified in sections 101216.2(e)(1) and 101230(c)(1)								
Care and Supervision	25	000	101216(f)	At least one person trained in CPR and Pediatric First Aid is present when children are at the facility or at offsite activities								
Sup	26	000	101616.5(b)	There is a ratio of one teacher to every 3 infants in attendance								
pue		000	101616.5(c)	There is a ratio of one teacher to every 6 preschool aged child in attendance								
are a		000	101616.5(d)	There is a ratio of one teacher to every 8 school-aged child in attendance								
ర		000	101616.5(e)	When groups are mixed, staffing ratio will be based on the youngest child in the group								
	* Not applicable or not observable. In the comment section, please explain why an item was not applicable or not observable during this KIT inspection.											

iment section, please explain why an item was not applicable or not observable during this kill insp

FORM CONTINUES ON PAGE 2

Page 2 KIT 3: CHILDCARE CENTER - MILDLY ILL, continued

	In compliance Yes No N/A*		Compliance Indicator Description							
_	30 000	101200(a)	ZT - The Department has inspection authority as specified in H&S Code sections 1596.852, 1596.853, and 1596.8535							
	31 000	101170.1(a)	ZT - The department shall notify a licensee to remove/bar, any person with specified convictions or for other reasons. The licensee shall comply with the notice.							
	32 000	ZT - The licensee does not exceed the approved capacity of the fire clearance for the facility								
cords	33 000	H & S 1596.8897(g)	ZT - A licensee's failure to comply with the department's exclusion order after being notified of the order shall be grounds for disciplining the licensee							
aff Re	34 000	101170(e)(1)	Prior to working or volunteering in a licensed child care facility, all individuals subject to criminal record review have obtained a clearance or criminal record exemption							
ion/St	35 C C C	101212(b)	The name of the child care center director or fully qualified teacher(s) designated to act in the director's absence is reported to the Department within 10 days of a change.							
strat	36 000	101217(a)(11)	Each personnel record contains a health screening							
Administration/Staff Records	37 C C C	101217(a)(6)	Each personnel record contains documentation of the educational background, training, and/or experience of the employee							
4	38 000	101629.1(b)	The licensee shall require that each child be signed in and out by his/her authorized representative							
	39 O O O	101161(a)	The licensee does not exceed the conditions, limitations, and capacity specified on the license (if fire clearance capacity is exceeded, use Zero Tolerance item located above)							
	40 000	101615(b)	The director of a Level I or Level II child care center for mildly ill children shall, prior to employment, meet the requirements of Section 10161b5(1) OR (b)(2)							
	41 000	101227(a)(6)	Menus are posted at least one week in advance in a place visible by the child's authorized representative, dated, and kept on file for 30 days, and are made available on request							
s	42 0 0 0	101621(b)(5)	Each child's record contains the daily inspection form completed by the qualified staff who performed the inspection							
200	43 000	101626(c)	Each child has a written plan of care that is updated daily							
Child Records	44 000	101221(b)(5)	Each child's record contains information including; the name, address and telephone number of the child's authorized representative, and of relatives, or others who can assume responsibility for the child if the authorized representative cannot be reached when necessary							
	45 000	101221(b)(8)	Each child's record contains a medical assessment							
	N	umber of staff re	cords reviewed today Number of children's records reviewed today							
	* Not applicable or n	ot observable. In the	comment section, please explain why an item was not applicable or not observable during this KIT inspection.							
	Did this inspection on more than one		Was a comprehensive inspection C Yes triggered during this inspection? C No triggered by items on this KIT? C No							
C	omments or sugge	stions about this	KIT: Final July 27							
	Print Form		e inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. 311-4906 for technical assistance. Email: KIT3_CCC@csus.edu Fax: 916-278-5150 Submit by Email							

Phase Two Children's Residential Care KIT 3 Forms

In	spec	ction Type:		K	T 3: FOSTER FAMILY HON	VIE LP/	A Code:						
Fa	cilit	y Lic Num:		Facility Name:		KI	T Date:						
	In	complianc											
_	_	Yes No N/A	* Regulation	Compliance Indicate	r Description								
	1	000	89387(d)	Swimming pools and years old or who are	all other bodies of water are inacces disabled	ssible to children who a	are under the age of 10						
_	2	000	H&S 1503.2	Facility has one or m	Facility has one or more functioning carbon monoxide detectors that meet the statutory rec								
gno	3	000	89387.2(a)(1)	Storage areas for fire	orage areas for firearms/dangerous weapons are locked								
Ē	4	000	89387(a)(7)	Children have comfo	hildren have comfortable mattresses, clean linens, blankets, and pillows, all in good repair								
Walk Through	5	000	89387(b)	The home is clean, sa	he home is clean, safe, sanitary, and in good repair								
-	6	000	89387.2(a)	Medicines, disinfecta	ledicines, disinfectants, and cleaning solutions are inaccessible to children								
	7	000	89387(n)	Hot water is kept at a	t water is kept at a safe temperature								
	8	000	89387(a)(1)	No more than two ch	o more than two children share a bedroom								
Ē	9	000	89378(a)	Adequate supervision	is provided for children in care (Cor	nsider Prudent Parent I	Exception)						
visio	10	000	89376(a)	Caregiver ensures the	ee nutritious meals, snacks, and spe	ecial diets							
Supervision	11	000	89372(a)	Children are accorde	personal rights								
2	12	000	89361 (a)	Caregiver submits sp	cial incident reports as required								
Child Records	13	000	89468(a)	Needs and Services p	ans are in children's files								
d Re	14	000	89370(a)	For each child in the	ome, the caregiver maintains a sep	parate, complete, and c	urrent record on file						
Ë													
	15	000	89319	Caregivers/adults residing in the home have Child Abuse Index checks, and have DOJ/FBI criminal record clearances									
cords	16	000	89405(a)	Caregivers have 12 h thereafter	Caregivers have 12 hours foster parent training prior to placement, and 8 hours annual training thereafter								
Staff Records	17	000	89219(d)	Prior to presence in t record clearance or e	ne home, all persons (unless exempt emption	t under subsection (b))	obtained a CA criminal						
8	18	000	89405(b) & (b)(1)	agency offering such Heart Association, a	regivers have First Aid and CPR train training including, but not limited to raining program approved by the St n accredited college or university	o, the American Red Cro	oss, the American						
dministration	19	000	89420(a)	Appropriate fire clea foster children are in	ance is maintained as required whe	n a non-ambulatory ch	ild or more than six (6)						
inist	20	000	89410(a)	Home operates within	capacity/limitations of license								
Admi	21	000	89475(b)	Caregiver maintains	ge appropriate first aid supplies								
		Number	of staff records r	eviewed today	Number of childre	en's records reviewed t	oday						
	* No	t applicable or	not observable. In ti	ne comment section, please	explain why an item was not applicable or no	ot observable during this KIT	inspection.						
		is inspection than one dat	occur on Yes e? No	Was a comprehe triggered during		o, was the comprehensive gered by items on this KIT							
Co	mm	ents or sugg	estions about th	is KIT:			Draft: July 2015						
	Print Form A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. Call ISR at 800-311-4906 for technical assistance. Email: KIT3_CRES@csus.edu Fax: 916-278-5150 Submit by Email												

In	spe	ction Typ	e:		KIT 3: ADOPTION AGENCY LPA Code:							
Fa	acilit	ty Lic Nur	n: [Facility Name: KIT Date:							
	In	complia	nce?									
_		Yes No	N/A* F	Regulation	Compliance Indicator Description							
rough	1	00	0 8	9164(a)(2)	Agency provides separate waiting rooms for adoptive parents and for natural parents							
Walk Through	2	00	C 8	9165(a)(3)	Agency provides play and viewing rooms when extensive child placing activities are conducted							
	3	00	0 8	9179(b)	Agency retains adoption case records indefinitely							
	4	00	0 8	9182(a)	Agency maintains a case record for each family unit or individual served in its program							
ò	5	00	0 8	9182(b)(1)	Each case record includes: A face sheet or application form							
articipant Records	6	00	0 8	9182(b)(2)	each case record includes: A typewritten record of the study							
ipan	7	00	C 8	9182(b)(3)	Each case record includes: Medical and other reports							
artic	8	00	0 8	9182(b)(5)	Each case record includes: Applicable legal documents							
۵	9	00	0 8	9182(ь)(10)	Each case record includes: Court reports							
	10	00	0 8	9182(d)	All case records shall be available to the licensing agency to inspect, audit, and copy upon demand during normal business hours							
	11	00	0 8	9034(a)	Personnel of private adoption agencies have submitted fingerprints as required in Section 80019 ch. 1							
	12	00		30019(e)(1) k (e)(2)	All individuals subject to a criminal record review have obtained a California clearance or a criminal record exemption as required by the Department, or requested a transfer of a criminal record clearance prior to working, residing or volunteering in a licensed facility							
rds	13	00	0 8	9155(b)	Agency social workers have master's degrees from accredited graduate schools of social work, or meet additional requirements							
Reco	14	00	C 8	9143	Staff members are qualified for their responsibilities by education, training, experience, personality, and health							
acility/Staff Records	15	00	100	30066(a)(10) k (a)(11)	Personnel records are maintained on the licensee, administrator, and each employe, e which contain health screening and tuberculosis test documents							
acilit	16	00	0 8	30022	Licensee has, and maintains on file, a current, written, definitive plan of operation							
ŭ.	17	00	0 8	9040(a)	Adoption services are limited to those specified on the license							
	18	00	0 8	9155(a)	Agency employs social workers to provide social services in the adoption program							
	19	00	C 8	9158	Agency employs professional and clerical staff in sufficient numbers to perform adoption agency functions							
	20	00	0 8	9164(a)(6)	Agency maintains adoption case records in locked files							
			Nur	mber of staff r	records reviewed today Number of participant records reviewed today							
6	* No	t applicable	e or not	observable. In th	ne comment section, please explain why an item was not applicable or not observable during this KIT inspection.							
		his inspect than one		cur on Yes	triggered during this inspection? triggered by items on this KIT?							
Co	mm	ents or s	uggest	ions about thi	is KIT: Draft: July 2015							
	Print Form A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. Call ISR at 800-311-4906 for technical assistance. Email: KIT3_CRES@csus.edu Fax: 916-278-5150 Submit by Email											

	Inspection Type:		tion Type:		KIT	T 3: FOSTER FAMILY AGENCY	LPA Code:						
	Fac	ility	y Lic Num:		Facility Name:		KIT Date:						
_		In	compliance	e?									
			Yes No N/A	 Regulation 	Compliance Indica	ator Description							
×p.		1	000	88087(b)	Agency ensures tha	at all confidential records are kept in locked cabinets	in administrativ	e/sub offices					
Administration Records		2	000	88022(a)(4)(C)		peration contains a description of the services to be ter family home licensee(s) including the treatment by program	700일 이 맛이 하는데 없는데 이번 없는데 없다.						
atic		3	000	88061(a)		ports to the licensing agency as required							
ministr		4	000	88063(c)(3)		ency board of directors actively ensures accountability, and accesses and maintains the level of nds necessary to cover FFA operational costs							
Ad		5	000	88068.2(d)	Agency completes	a Needs and Services plan within 30 days of child pla	cement						
	13	6	000	88019(a)(2)		obtain DOJ or FBI criminal record clearances or exen	nptions prior to b	peing home					
Staff Records		7	000	88064(a)&(a)(1) &(a)(1)(A)	work or social welfa psychology; or equi	a Master's Degree from an accredited or state appro are; marriage, family, and child counseling: counseli ivalent education, and has a minimum of three year ices, two years of which have been in an administra	ng psychology; s s of experience i	ocial n the field of					
StaffR		8	000	88065.3 (g)(3)&(g)(6)	for continued super	Social work personnel are responsible for the evaluation and assessment of a child for placement a for continued supervision of the placement of the child, including direct contact with the child and the certified parent(s) or foster family home licensee(s)							
		9	000	88065.2(b) &.3(b)	Social work supervi	isors and social workers have required education an	d experience						
		10	000	88066(a)(1)(A)	Agency personnel r	records document that staff completed required tra	ining						
Γ		11	000	88019(a)(1)	CFH applicants and exemption prior to	all adults residing in the home have obtained a crin certification	ninal record clea	rance or					
CFH Records		12	000	88030(b)& (c)(1)&(c)(2)		FH with a signed Certificate of Approval, which inclu tified, and the age range of children to be served	des the capacity	for which the					
Seco		13	000	88069.7(b)(2)	CFH case records co	ontain written records of the home study							
E		14	000	88069.7(b)(11)	CFH case records co	ontain each child's records and the date the child w	as placed in care						
٠	0	15	000	88069.7(c)(4)	CFH case records or	ontain a copy of the Certificate of Approval							
		16	000	88069.7(c)(5)	CFH case records de	ocument 12 hours training for certified parents							
ş		17	000	88070(a)(1)(E)		at child's records, if available, contain medical/denta	Il history, immur	nization					
Child Records		18	000	88070(a)(1)(J)	Agency ensures that representatives.	at child's records contain medical consent forms sign	ed by authorize	d					
hild		19	000	88070(a)(1)(K)	Agency ensures tha	at child's records contain copies of original and mod	ified Needs and	Services Plans					
_		20	000	88070(a)(1)(M)	Agency ensures tha	at child's records contain vaccination documentation	1						
					ds reviewed today	Number of children's records							
Г				/ ***		explain why an item was not applicable or not observable durin							
			is inspection than one dat		A CONTRACTOR OF THE PARTY OF TH	orehensive inspection Yes If so, was the con uring this inspection? No triggered by item	nprehensive inspe s on this KIT?	ction (Yes					
-	Con	nme	ents or sugg	estions about this	KIT:		Dra	ft: July 2015					
		Pri	nt Form			ed if: one Zero Tolerance and/or two Type A violations are Il assistance. Email: KIT3_CRES@csus.edu Fax: 916-278-	Subn	nit by Email					

In	spection Type:		KI	T 3: SMALL FAMILY HON	ΛE	LPA Code:						
Fa	scility Lic Num:		Facility Name:			KIT Date:						
_	In compliance	?					,,					
	Yes No N/A*		Compliance Indicator Description									
	1000	80010(a)	ZT - The home is opera	ating within the capacity and limit	ations of the licens	e						
	2 000	80087(e)	ZT - All licensees ensure the inaccessibility of pools (in-ground & above-ground), wading pools, hot tubs, spas, fish ponds, or similar bodies of water through a pool cover or surrounding fence.									
	3 000	80087(g)(1)	ZT - Storage areas for	firearms and dangerous weapons	are locked							
	4 000	80087(g)(2)	ZT - Firing pins are sto									
Walk Through	5 000	80087(g)(3)	ZT - Ammunition is sto	red and locked separately from fir	rearms							
	6 000	83023(b)	ALL PROPERTY OF THE PROPERTY O	ppropriate fire clearance								
₽	7 000	80087(a)	The home is clean, saf	e, sanitary, and in good repair								
粪	8 000	83087.2(a)		is free of obstructions and hazard								
3	9 000	83088(c)	Children have individu good repair	ildren have individual beds, comfortable mattresses, clean linens, blankets, and pillows, that are in od repair								
	10 000	83087(b)(5)	Except for infants, chil	dren do not share a bedroom with	an adult							
	11 000	83087(b)(3)	No room commonly us	sed for other purposes is used as a	bedroom							
	12 000	83076(b)		There is fresh perishable and nonperishable food in the home in a quantity to meet the needs of the next three meals and the between meal snacks								
	13 000	H&S 1503.2	Facility has one or mo	re functioning carbon monoxide d	etectors that meet	t the statutory	requirements					
5	14 000	83075(f)		in the home, at least one of the pass current training in first aid and	맛있었다. 아이지 아이지 아이가 되었다.	egular and ro	utine direct					
Care and Supervision	15 O O O	83078(a)(1)	Licensee provides services identified in child's needs and services plan, and individualized health care plan, for children with special health care needs									
od Sup	16 O O O	83064(b)(2)	When absent from the home while children are present, the licensee provides for supervision of the children by a responsible adult unless otherwise agreed to in advance by the licensing agencies									
are a	17 O O O	83072(c)(20)	Children have the right to attend school and participate in extracurricular, cultural, and personal enrichment activities consistent with the child's age and developmental level									
_	18 O O O	83072(c)(5)	Each school age child I	nas access to an individual storage	space for his/her	private use						
ords	19 000	83070(b)(5)	Caregiver has written	authorization to obtain medical ar	nd dental care							
æ	20 00 0	83072(c)	Personal rights forms	are in the children's files								
Child Records	21 000	83070(b)(7)		ntains dental and medical history, any medically necessary diet	including immuniz	ation records	and any					
ation	22 O O O	80026(h)	Licensee maintains acc	curate records of clients' accounts	of cash resources	, personal pro	perty, and					
str	23 000	80066(a)(6)		document that staff meet training	g requirements							
Administration	24 O O O	80019(c)	9563796	t, administrator, and any adult oth ord clearance or exemption	er than a client, re	esiding in the f	facility, has a					
	Number o	f staff records r	eviewed today	Number of childre	en's records reviev	ved today						
_	* Not applicable or no	ot observable. In th	e comment section, please e	plain why an item was not applicable or n	ot observable during th	nis KIT inspection	per .					
	Did this inspection o more than one visit?	ccur on (Yes	Was a compre	hensive inspection (Yes II	f so, was the compre riggered by items on	hensive inspec						
Co	mments or sugge	stions about thi	s KIT:			Dra	ft: July 2015					
	A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited.											
	Print Form	Call ISR at 80	0-311-4906 for technical a	ssistance. Email: KIT3_CRES@csus.e	du Fax: 916-278-515	50	nit by Email					

In	spect	tion Type:		KIT 3: CRISIS NURSERY LPA Code:								
Fa	cility	Lic Num:		Facility Name: KIT Date:								
	In	complianc	e?									
		Yes No N/A	* Regulation	Compliance Indicator Description								
4	1	000	86587(g)(4)	ZT - Firearms and other dangerous weapons are not be allowed into or stored on the premises								
Walk Through	2	000	86587(e)	ZT - Swimming pools, hot tubs, spas, fish ponds and similar bodies of water are made inaccessible by covers or fences								
alk	3	000	86587(a)	Crisis nurseries are clean, safe, sanitary, and in good repair								
₹	4	000	86587(g)	Disinfectants, cleaning solutions, poisons, and other dangerous items are inaccessible								
	5	000	H&S 1503.2	acility has one or more functioning carbon monoxide detectors that meet the statutory requirements								
cords	6	000	86568.1(c)(1)(A)	Upon admission or placement, the crisis nursery completes an admission form that includes a family instory, child health information, emergency information, dietary requirements, daily needs, habits or outlines, and the disciplinary methods used by the parents or guardian								
Child Records	7	000	86568.1(c)(1)	pon admission or placement, the crisis nursery obtains information and signed consent forms pecified in 86570(b)(1) to (16)								
3	8	000	86568.1(c)(4)(A)	Jpon admission or placement, the crisis nursery ensures that the authorized representatives understand, sign, and receive a copy of the child's personal rights								
	9	000	86519(e)(1)	Prior to working or volunteering in a crisis nursery, all individuals obtained a California Criminal Record Clearance or exemption								
cords	10	000	86519.2(b)	Prior to employment, residence, or initial presence in a crisis nursery, all individuals completed a Child Abuse Index Check (LIC 198A)								
Staff Records	11	000	86565(h)(1)	All crisis nursery personnel, including the administrator, staff and volunteers, have a health screening report signed by a physician not more than one year prior to, or seven days after employment								
	12	000	86565(n)	Lead caregivers, caregivers, and volunteers have a current and valid certificate verifying successful completion of pediatric first aid and pediatric cardiopulmonary resuscitation training								
	13	000	86510(a)	ZT - A crisis nursery shall not operate beyond the conditions and limitations specified on the license, Including the capacity limitation								
ç	14	000	86505.1(a)	ZT - The maximum capacity of a crisis nursery shall be 14								
Administration	15	000	86502(a)	ZT - All crisis nurseries shall obtain and maintain a fire clearance								
nistr	16	000	85665.5(a)	ZT - There is at least one fully qualified and employed lead caregiver on site at all times								
dmi	17	000	86522(a)	Crisis nursery maintains a written plan of operation								
Þ	18	000	86523(a)	Crisis nursery posts current written emergency plans								
	19	000	86561(a)(4)	Any suspected physical or psychological abuse or neglect of any child in care is reported to the Department and to other reporting agencies by the next business day (PC 11165.6 and PC 11166)								
		Num	ber of staff recor	rds reviewed today Number of children's records reviewed today								
	* No	ot applicable or	not observable. In t	he comment section, please explain why an item was not applicable or not observable during this KIT inspection.								
		nis inspection than one dat	occur on (Yes e? (No	Was a comprehensive inspection								
Co	omme	ents or sugg	estions about thi	is KIT: Draft: July 2015								
	Print Form A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. Call ISR at 800-311-4906 for technical assistance. Email: KIT3_CRES@csus.edu_Fax: 916-278-5150 Submit by Email											

Ins	pec	tion Type:		KIT 3: Transitional Housing Placement Program LPA Code:										
Fa	cility	Lic Num:		Facility Name: KIT Date:										
_	In	compliance	?											
_		Yes No N/A	• Regulation	Compliance Indicator Description										
	1	000	80087 (e)	ZT - All licensees ensure the inaccessibility of pools (in-ground & above-ground), wading pools, hot tubs, spas, fish ponds, or similar bodies of water through a pool cover or surrounding fence.										
	2	000	80010 (a)	ZT - Licensee shall not operate a facility beyond the conditions and limitations specified on the license, including the capacity limitation.										
3 C C 86078(a)(2) ZT - Licensee ensures that THPP participants provide care and supervision for participant's children and supervision for participant and supe														
hrou	4	000	86087(d)	ZT - Firearms and other weapons are not stored in THPP living units										
Walk Through	5	000	86087(e)(1)	If the children of the participant reside in the THPP living unit, disinfectants, cleaning solutions, poisons, and other items that could pose a danger are not accessible										
	6	000	80087(a)	he facility is clean, safe, sanitary, and in good repair for the safety and well-being of clients, mployees, and visitors										
	7	000	86088(a)(2)	THPP participants and their minor children are provided with household essentials including, but not limited to: cooking utensils, furniture, equipment, supplies, and linens										
	8	000	H&S 1503.2	Facility has one or more functioning carbon monoxide detectors that meet the statutory requirements										
Participant Records	9	000	86070(b)	Each THPP participant's record contains copies of important documents as listed in subsection 86070(b)(1 through 9) - Including, but not limited to: copies of school records, immunization records, and medical records.										
nt R	10	000	86068.2	Each THPP participant's records include a personalized Needs and Services plan										
cipa	11	000	86068.2(c)	The Needs and Services plan is completed within 30 calendar days from the date of placement										
Part	12	000	86066(a)	Personnel records include documentation that THPP personnel meet the education and experience requirements										
sp	13	000	80019(d)	THPP licensee and staff have criminal record clearances										
lecol	14	000	80019.2	THPP licensee and staff have child abuse index checks										
Staff Records	15	000	86075(d)(2)	Employees responsible for direct care and supervision of participants have current training, from persons qualified to provide such training, in CPR and First Aid										
tration	16	000	86020(b)	ZT - THPP licensee requests fire clearances for participant living units prior to residence of non- ambulatory individuals										
Administration	17	000	80065(g)	All personnel, including the licensee, administrator, and volunteers, are in good health, and are physically, mentally, and occupationally capable of performing assigned tasks										
`		Number	of staff records	reviewed today Number of participant records reviewed today										
	* No	t applicable or r	not observable. In t	he comment section, please explain why an item was not applicable or not observable during this KIT inspection.										
		nis inspection than one date												
Co	mm	ents or sugge	estions about th	is KIT: Draft: July 2015										
L														
	Pri	int Form	11 10 10 10 10 10 10 10 10 10 10 10 10 1	sive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. 800-311-4906 for technical assistance. Email: KIT3_CRES@csus.edu Fax: 916-278-5150										

Phase Two Adult and Senior Care KIT 3 Forms

Ir	nspe	ection Type:		KIT 3: ASC - ADULT RESIDENTIAL LPA Code:							
Facility Lic Num:				Facility Name: KIT Date:							
	In	compliance	? Regulation	Compliance Indicates Description							
	1	000	80020(a)	ompliance Indicator Description T - Facility fire clearance is maintained in conformity with State Fire Marshall regulations							
				· · · · · · · · · · · · · · · · · · ·							
	2	000	80087(e)	ZT - All pools and bodies of water are appropriately secured							
	3	000	80087(g)(1)	ZT - Storage areas for firearms and other dangerous weapons are locked							
	4	000	80087(c)	All outdoor and indoor passageways are free of obstruction							
ngn	5	000	80087(g)	Disinfectants, cleaning solutions, poisons are inaccessible to clients.							
2	6	$\circ \circ \circ$	80088(d)	Lamps or lights are present in all rooms to ensure the comfort and safety of all clients							
walk Inrougn	7	000	80088(e)(1)	Hot water temperature is maintained between 105 degrees F and 120 degrees F							
	8	000	80088(e)(3)	All toilets, hand washing, and bathing facilities are safe, sanitary, and in operating condition with additional equipment for physically handicapped clients							
	9	000	85088(c)(4)	The licensee ensures that each client has clean linen in good repair, including lightweight warm blankets and bedspreads, top and bottom sheets, pillow cases, mattress pads, rubber or plastic sheeting when necessary, and bath towels, hand towels, and washcloths							
	10	000	H&S 1503.2	Facility has one or more functioning carbon monoxide detectors that meet statutory requirements							
3	11	000	80076(a)(1)	All food is selected, stored, prepared, and served in a safe and healthful manner							
rood service	12	000	85076(d)(1)	Supplies of nonperishable foods are maintained on the premises to last for a minimum of one week and fresh perishable foods for a minimum of two days							
2	13	000	80076(a)(18)	All foods are protected against contamination. Contaminated food is discarded immediately							
	14	000	85065(b)	ZT - The licensee employs staff as necessary to ensure provision of care and supervision to meet clients' needs							
ile dilu supei visioli	15	000	80072(a)(2)	Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipmen to meet his/her needs							
9	16	000	85078(a)(1)	The licensee provides those services identified in the client's needs and services plan as necessary to meet the client's needs							
care	17	000	80075(n)(3)	All medications are labeled and are maintained in compliance with label instructions, and state and federal law							
inc. Med. Care	18	000	80075(n)(1)	Medication is kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication							
	* No	t applicable or n	ot observable. In t	he comment section, please explain why an item was not applicable or not observable during this KIT inspection.							

Page 2 KIT 3: ADULT RESIDENTIAL, Continued In compliance? Yes No N/A* Regulation **Compliance Indicator Description** ZT - Licensee does not operate beyond the conditions and limitations specified on the license, 19 000 80010(a) including the capacity 20 C C C 80046(a) ZT - Pursuant to H & S Code sections 1558 and 1558.1, an individual can be prohibited from serving as a member of a board of directors, executive director, or officer; from being employed or allowed in a adlity/Staff Records licensed facility ZT - Employees of CCLD are allowed to enter the facility to conduct inspections, as specified in 21 000 80044(a) H & S Code sections 1526.5,1533, 1534, and 1538 80019(e)(1) All staff have a criminal record clearance or a criminal record exemption 22 0 0 0 23 C C C 80075(j)(i) Staff responsible for direct care and supervision have current first aid training 24 C C C 80023(d) Disaster drills are conducted at least every six months 25 C C C 85064(b) The adult residential facility has a certified administrator The licensee ensures that each client receives first aid and other needed medical or dental services, 26 C C 80075(a) including arrangement for and/or provision of transportation to the nearest available services 27 C C C 80069(b) Prior to accepting a client into care, the licensee obtained and kept on file documentation of the client's medical assessment Resident Records The client's medical assessment includes the results of an examination for communicable tuberculosis 28 0 0 0 80069(c)(1) and other contagious/infectious diseases Cash resources, personal property, and valuables of clients are kept separate and intact, and are not 29 000 80026(e) co-mingled with facility funds or petty cash 30 000 80070(a) The licensee ensures that a separate, complete, and current record is maintained for each client 31 (() 85068.3(a) Initial needs and services plan is updated as necessary The licensee completes an individual written admission agreement with each client and the client's 32 C C C 80068(a) authorized representative if any Number of staff records reviewed today Number of resident records reviewed today * Not applicable or not observable. In the comment section, please explain why an item was not applicable or not observable during this KIT inspection. Did this inspection occur on (Yes Was a comprehensive inspection If so, was the comprehensive inspection triggered during this inspection? more than one date? triggered by items on this KIT? C No Comments or suggestions about this KIT: Final July 27 A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. Submit by Email Print Form Call ISR at 800-311-4906 for technical assistance. Email: KIT3_ASC@csus.edu Fax: 916-278-5150

npliance No N/A'	e? Regulation 82020 82087(f) 80087(g)(1) 82087(a)(3) 82088(e)(1) 82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	with provisions/equipment for handicapped individuals							
No N/A* C C C C C C C C C C C C C C C C C C C	*Regulation 82020 82087(f) 80087(g)(1) 82087(a)(3) 82088(e)(1) 82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	ZT - Facility fire clearance is maintained in conformity with State Fire Marshall regulations ZT - All pools and bodies of water are appropriately secured ZT - Storage areas for firearms/poisons/other dangerous weapons is locked Disinfectants, cleaning solutions, and poisons are inaccessible to clients Hot water temperature is maintained between 105 degrees F and 120 degrees F All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary, operating condition, with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being or clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
	82020 82087(f) 80087(g)(1) 82087(a)(3) 82088(e)(1) 82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	ZT - Facility fire clearance is maintained in conformity with State Fire Marshall regulations ZT - All pools and bodies of water are appropriately secured ZT - Storage areas for firearms/poisons/other dangerous weapons is locked Disinfectants, cleaning solutions, and poisons are inaccessible to clients Hot water temperature is maintained between 105 degrees F and 120 degrees F All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary, operating condition, with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being of clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
	82087(f) 80087(g)(1) 82087(a)(3) 82088(e)(1) 82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	ZT - All pools and bodies of water are appropriately secured ZT - Storage areas for firearms/poisons/other dangerous weapons is locked Disinfectants, cleaning solutions, and poisons are inaccessible to clients Hot water temperature is maintained between 105 degrees F and 120 degrees F All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary, operating condition, with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being of clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
	80087(g)(1) 82087(a)(3) 82088(e)(1) 82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	ZT - Storage areas for firearms/poisons/other dangerous weapons is locked Disinfectants, cleaning solutions, and poisons are inaccessible to clients Hot water temperature is maintained between 105 degrees F and 120 degrees F All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary, operating condition, with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being of clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
00	82087(a)(3) 82088(e)(1) 82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	Disinfectants, cleaning solutions, and poisons are inaccessible to clients Hot water temperature is maintained between 105 degrees F and 120 degrees F All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary, operating condition, with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being of clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
00	82088(e)(1) 82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	Hot water temperature is maintained between 105 degrees F and 120 degrees F All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary, operating condition, with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being of clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
00	82088(e)(3) 82087(a) H&S 1503.2 82072(a)(2)	All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary, operating condition, with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being of clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
00	82087(a) H&S 1503.2 82072(a)(2)	with provisions/equipment for handicapped individuals The program site is clean, safe, sanitary, and in good repair at all times for the safety and well-being of clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
00	H&S 1503.2 82072(a)(2)	clients, employees, and visitors Facility has one or more functioning carbon monoxide detectors that meet statutory requirements Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
	82072(a)(2)	Each client is accorded safe, healthful, and comfortable accommodations, furnishings and equipment							
00									
•									
00	82076(a)(1)	All food is selected, stored, prepared, and served in a safe and healthful manner							
00	82076(a)(16)	All kitchen, food preparation, and storage areas are kept clean, free of litter and rubbish, and measures are taken to keep all such areas free of rodents and other vermin							
00	82078(a)	ZT - There is care and supervision necessary to meet the client's needs and all services specified in the admissions							
00	82065(e)	ZT - There is direct supervision of clients during participation in, or presence at, potentially dangerous activities or areas							
00	82072(a)(8)	Clients' personal rights include not being placed in a restraining device. Postural supports may be used, under conditions listed in 82072(a)(8)(A - E)							
00	82075(b)	Clients are assisted with self-administration of medications							
00	82075(f)(1)	Medication is kept in a safe and locked place that is not accessible to persons other than employees responsible for the supervision of the centrally stored medication							
	or not observable.	In the comment section, please explain why an item was not applicable or not observable during this KIT inspection.							
•	00	82072(a)(8) 82075(b) 82075(f)(1)							

Page 2 KIT 3: ADULT DAY, Continued In compliance? Yes No N/A* Regulation Compliance Indicator Description ZT - The licensee is operating the day program within the conditions and limitations specified on 17 (() 82010 the license, including the capacity limitation ZT - Program personnel are at all times sufficient in numbers and competent to provide the services 18 (() 82065(a) necessary to meet individual client needs 19 ((82046(a) ZT - Excluded person - Department may prohibit an individual from serving as a member of a board of directors, executive director, or officer; or from being employed or present in a licensed facility ZT - Pursuant to the authority specified in H&S code sections 1526.5,1533,1534, and 1538; the 20 C C 82044(a) licensing agency shall evaluate and inspect Adult Day Programs 21 0 0 0 82075(f) Staff responsible for direct care and supervision have current first aid and CPR training 82064(a)(1) 22 000 The program administrator either has a baccalaureate degree in psychology, social work, or a related Facility/Staff Records & (a)(2) human services field and has a minimum of one year experience in the management of a human services delivery system, or has three years of experience in a human services delivery system including at least one year in a management or supervisory position 23 0 0 0 82065.1(d)(1) Direct care staff receive a minimum of 8 documented hours of training per year 82066(a)(10) Personnel records contain a health screening from a licensed medical professional 25 000 82019(e)(1) Prior to working, residing, or volunteering in a licensed day program, all individuals subject to criminal & (e)(2) record review obtain a California clearance or a criminal record exemption, or request the licensee or applicant for a license to request a transfer of a criminal record clearance 26 C C C 82022(a) Licensee has, and maintains on file, a current, written, definitive plan of operation 27 O O O 82066(a) Licensee ensures that personnel records are maintained on the licensee, administrator, and each employee The administrator receives and documents a minimum of 30 clock hours of continuing education every 28 (() 82064(d) 24 months of employment 29 C C C 82065(g)(1) The good physical health of each employee and individual licensee is verified by a health screening, including negative test results for tuberculosis, performed by or under the supervision of a physician not more than one year prior to, or seven days after, employment or licensure 30 0 0 0 82068(a) The licensee completes and maintains an individual written admission agreement with each client and the client's authorized representative, if any 31 C C C 82068.2(e) The written Needs and Services plan is maintained in the client's file The licensee ensures that each client's written Needs and Services plan is updated as often as 32 (C (82068.3(a) necessary, but at least annually, to ensure its accuracy, and to document significant occurrences that result in changes in the clients's physical, mental, psychological, and/or social functioning Number of staff records reviewed today Number of resident records reviewed today * Not applicable or not observable. In the comment section, please explain why an item was not applicable or not observable during this KIT inspection. (Yes Was a comprehensive inspection (Yes (Yes Did this inspection occur on If so, was the comprehensive inspection triggered by items on this KIT? more than one date? triggered during this inspection? (No C No Comments or suggestions about this KIT: Final July 27 A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. Print Form Submit by Email Call ISR at 800-311-4906 for technical assistance. Email: KIT3_ASC@csus.edu Fax: 916-278-5150

	Inspection Type:	KIT 3: ASC - Social Rehab Facility LPA Code: Facility Name: KIT Date:								
	· · · · · · · · · · · · · · · · · · ·									
	In compliance?									
_	Yes No N/A* Regulation	Compliance Indicator Description								
	1 (C) (B) 80087(e)	ZT - All pools and bodies of water are appropriately secured								
	2 C C 80087(g)(1	ZT - Storage areas for firearms and other dangerous weapons are locked.								
	3 C C 80020(a)	ZT - Facility fire clearance is maintained in conformity with State Fire Marshall regulations								
	4 0 0 0 80087(c)	All outdoor and indoor passageways are kept free of obstruction								
	5 C C 80087(g)	Disinfectants, cleaning solutions, and poisons are inaccessible to clients								
	6 C C 80088(d) Lamps or lights are in all rooms to ensure comfort and safety									
ygno	7 C C C 80088(e)(1) Hot water temperature is maintained between 105 degrees F and 120 degrees F								
Walk Through	8 C C C 80087(a)	The facility is clean, safe, sanitary and in good repair for the safety and well-being of clients, employees, and visitors								
_	9 C C C H&S 1503.	2 Facility has one or more functioning carbon monoxide detectors that meet statutory requirements								
	10 (C) (81076(c)(4) Freezers and refrigerators are kept clean and maintain their temperature								
	11 (C (80088(e)(3	All toilets, hand washing and bathing facilities are in safe, sanitary operating condition with additional equipment for physically handicapped individuals								
	12 C C C 80088(e)	Faucets used by clients for personal care such as shaving and grooming deliver hot water								
	13 C C 81088(c)(4	The licensee ensures provision of clean linen in good repair, including lightweight, warm blankets and bedspreads, to and bottom bed sheets, pillow cases, mattress pads, rubber or plastic sheeting when necessary, and bath towels, hand towels, and washcloths								
	14 (() 80072(a)(2	Each client is accorded safe, healthful, and comfortable accommodations, furnishings, and equipment to meet his/her needs								
Food Service	15 () (80076 (a)(17-19)	In facilities providing meals to clients, all kitchen, food preparation, and storage areas are kept clean, free of litter and rubbish, and measures are taken to keep all such areas free of rodents, and other vermin. All food is protected against contamination. Contaminated food is discarded immediately and all equipment, dishes, and utensils are kept clean and maintained in safe condition								
Foc	16 C C C 81076(c)(1	Food supplies include nonperishable foods to last a minimum of 1 week, and perishable foods for a minimum of 2 days are available								
	* Not applicable or not observat	ole. In the comment section, please explain why an item was not applicable or not observable during this KIT inspection.								
		FORM CONTINUES ON PAGE 2								

	In	c	on	pl	ianc	e?									
		Y	es	No	N/A	* Regulation	Compliance Indicator Description								
. Care	17	(0	C	0	80075(n)(1)	Medications are safe, locked, and inaccessible								
Inc. Med. Care	18	(0	С	0	80075 (n)(7)(A-D)	The licensee maintains a record of centrally stored prescription medications for each client which includes the name of the client, the prescribing physician, the name, strength and quantity of the dru and the date filled, and the client's record of prescription medications is retained for at least one year								
	19	(0	C	0	80065(a)	ZT - Facility personnel are competent to provide the services necessary to meet individual client need								
	20	(0	C	0	80010(a)	ZT - Licensee does not operate beyond the conditions and limitations specified on the license								
Records	21 () () 80046(a)					80046(a)	ZT - An individual can be prohibited from serving as a member of a board of directors, executive director or officer, from being employed or allowing an individual in a licensed facility								
Administration/Staff Records	22 C C 80044(a)					80044(a)	ZT - Employees of CCLD shall be allowed to enter the facility to conduct inspections								
	23 () () 81065(f)				0	81065(f)	All direct care staff receive a minimum of 20 clock hours of continuing education per year, which provides the staff with the knowledge and skills as appropriate to their job assignment								
	24	(0	C	0	80019(e)(1) All individuals subject to a criminal record review obtain a criminal record clearance or record exemption									
	25	(0	C	0	80075(i)	Staff responsible for direct care and supervision have current first aid training								
	26	-	0	C	0	80065(g)(1)	All personnel, including the licensee, administrators, and volunteers are in good health, and are physically, mentally, and occupationally capable of performing tasks, as verified by a health screening including a test for tuberculosis, performed by or under the supervision of a physician not more than one year prior to, or seven days after employment or licensure								
colors	27	(0	C	0	81068.2(b)	Prior to admission, the licensee completes a written Needs and Services Plan for each client admitted								
resident records	28	(0	C	0	80069 (c)(1)/(c)(4)	The licensee obtains a medical assessment which includes the results of an examination for communicable tuberculosis and other contagious/infectious diseases, and a determination of the clients' ambulatory status								
					Nu	umber of staff re	cords reviewed today Number of resident records reviewed today								
	* No	ot :	app	lica	ble or	r not observable. In	the comment section, please explain why an item was not applicable or not observable during this KIT inspection.								
				-	ction e dat	occur on C Yes te? No	Was a comprehensive inspection (Yes triggered during this inspection? (No triggered by items on this KIT? (No								
Со	mm	er	nts	or	sugg	estions about th	is KIT: Final July 23								

9	Inspe	ection Type:		KIT 3: ASC - ARFSHN	LPA Code:										
	Facili	ity Lic Num:		Facility Name:	KIT Date:										
	In	compliance Yes No N/A	? Regulation	Compliance Indicator Description											
	1	000	80087(e)	ZT - All pools and bodies of water are appropriately secured											
	2	000	80087(g)(1)	T - Storage areas for firearms and other dangerous weapons are locked											
	3	000	80020(a)	all regulations											
	4	000	80087(a)	The facility is clean, safe, sanitary, and in good repair											
ugno	5	000	80075(e)(2)(E)	Oxygen tanks that are not portable are secured either in a stand or to the w	bygen tanks that are not portable are secured either in a stand or to the wall										
Walk Through	6	000	80087(b)(1)	Facility uses protective devices including but not limited to nonslip material	on rugs										
š	7	000	80087(g)(1)	Storage areas for disinfectants, cleaning solutions, and poisons are locked											
	8	000	H&S 1503.2	Facility has one or more functioning carbon monoxide detectors that meet	statutory requirements										
	9	000	80088(e)(1)	Hot water delivered to fixtures used by clients is maintained between 105 degrees F and 120 deg											
	10	000	itary operating condition, ically handicapped												
Care/Supervision Food Service	11	000	80076(a)(1)	Meals are at least 1/3 of the servings recommended in the USDA Basic Food group served, and are selected, stored, prepared, and served in a safe and I	A Designation of the contract										
ervision	12	000	80065(a)	ZT - Facility personnel are competent to provide the services necessary to needs and are, at all times, employed in numbers necessary to meet such r											
Care/Sup	13	000	80078(a)	The licensee provides care and supervision as necessary to meet the client's	s needs										
cal Care	14	000	80092.10(a)(4)	The licensee ensures that gastrostomy feeding, hydration, medication admigastrostomy, and stoma cleaning are provided by a licensed professional wiprovide his/her own feeding, hydration, and care											
ncidental Medical	15	000	80075(n)(3)	Medications are labeled and maintained in compliance with label instruction laws	ns and state and federal										
Incident	16	16 C C 80075(n)(1) Medication is kept in a safe and locked place, inaccessible to persons other than er responsible for the supervision of the centrally stored medication													
	• N	ot applicable or	not observable. In t	he comment section, please explain why an item was not applicable or not observable during the	nis KIT inspection.										
				FORM CONTINUES ON PAGE 2											

		Page 2 KIT 3: ARFSHN, Continued									
	In compliance? Yes No N/A* Regulation	Compliance Indicator Description									
	17 C C 80010(a)	ZT - Facility does not operate beyond the conditions and limitations specified on the license, including the maximum number of persons who may receive services at any one time									
	18 C C C 80046(a)	ZT - An individual can be prohibited from serving as a member of a board of directors, executive director, or officer and from being employed, or allowed to enter, a licensed facility									
ords	19 (() 80044(a)	ZT - Any authorized employee of the licensing agency may, upon presentation of proper identification, enter and inspect any place providing personal care, supervision, and services at any time, with or without advance notice									
Facility/Staff Records	20 C C C 80065(g)(1)	All personnel, including the licensee, administrator, and volunteers, are in good health, and are physically, mentally, and occupationally capable of performing assigned tasks									
acility/	21 (C) (C) 80019(e)(1)	All staff have a criminal record clearance, or a criminal record exemption									
Fa	22 (() 80075(i)	Staff providing care and supervision have first aid training from qualified agencies including, but not limited to, the American Red Cross									
	23 C C C 80023(d)(2)	Disaster drills are documented and the documentation is maintained in the facility for at least one year									
	24 C C C 80024(a)	Licensee maintains continuous compliance with licensing regulations unless prior written licensin agency approval is received									
	25 C C 80066(a)	Licensee ensures that personnel records are maintained on the licensee, administrator, and each employee									
ords	26 C C 80077.2 (b)(2)(C)	Prior to accepting a client into care, the licensee completes a Needs and Services Plan that includes a method for determining the client's needs									
Resident Records	27 C C 80026(h)	Licensee maintains accurate records of accounts of cash resources, personal property, and valuables intrusted to his/her care									
Resid	28 C C C 80070(a)	A separate, complete, and current record is maintained in the facility for each client									
_	29 C C C 80072(b)	At admission, a client and their authorized representative are advised of, and given a list of their rights									
	Number of staff recor	ds reviewed today Number of resident records reviewed today									
	* Not applicable or not observable. In	the comment section, please explain why an item was not applicable or not observable during this KIT inspection.									
	id this inspection occur on Yes nore than one date? No	Was a comprehensive inspection									
Co	omments or suggestions about th	is KIT: Final July 27									
L	A comprehen	sive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited.									
	Print Form Call ISR at 8	500-311-4906 for technical assistance. Email: KIT3_ASC@csus.edu Fax: 916-278-5150									

	Insp	ectio	n Type:		KIT 3: ASC - RCFCI	LPA Code:		
	Facil	lity Li	c Num:		Facility Name:	KIT Date:		
	In		plianc		B 8 8 8 8 8 8			
_		Yes	No N/A	* Regulation	Compliance Indicator Description			
	1	0	00	87887(f)	ZT - All pools and bodies of water are appropriately secured			
	2	0	00	87820(a)	ZT - Facility fire clearance is maintained in conformity with State Fire Marsh	all regulations		
	3	0	00	87887(a)	The facility is clean, safe, sanitary, and in good repair at all times			
ng,	4 C C C 87887(b)(1)				All clients are protected against hazards including protective devices which ito, nonslip material on rugs	nclude, but are not limited		
Walk Through	5	0	00	87887(c)	All outdoor and indoor passageways are free of obstruction	n		
Wall	6	0	A comfortable temperature for clients is maintained at all times					
	7	0	00	87887(h)(1)	Storage areas for poisons, firearms, and other dangerous weapons are locke	d		
	8	0	00	87888(e)(1)	Hot water temperature is maintained between 105 degrees F and 120 degree	es F		
	9	0	00	87889(a)	Contaminated and hazardous waste, such as soiled diapers, used needles and dressings, disposable wipes, gloves, and other items and/or equipment used treatment of residents, shall be disposed of by a hazardous waste company			
	10	0 C C H&S 1568.043 Facility has one or more functioning carbon monoxide detector				tatutory requirements		
	11	0	00	87888(d)	Lamps or lights are installed in all rooms to ensure the comfort and safety of	f residents		
	12	0	00	87888(e)(3)	All toilets, hand washing, and bathing facilities are safe, sanitary, and in good additional equipment for physically handicapped individuals as needed	d operating condition with		
vice	13	0	00	87876(a)(1)	All food is protected from contamination and is of the quality and quantity needs of the residents	necessary to meet the		
Food Service	14	0	00	87876(a)(20)	Facility has an operable dishwasher that meets regulatory requirements			
S.	15	0	00	87876(a)(13)	All persons engaged in food preparation and service observe personal hygie sanitation practices which protect the food from contamination	ne and food services		
sion	7000.00	_						
pervi	16	0	00	87878(a)	ZT - The licensee provides care and supervision as necessary to meet the res	ident's needs		
Care/Supervision	17	0	00	87865.1(b)	For daytime hours, the minimum staffing ratio is one direct care staff person for every ten residents on the premises	up, awake, and on duty		
		Not :	pplicable	or not observable. I	n the comment section, please explain why an item was not applicable or not observable during	this KIT inspection.		
					FORM CONTINUES ON PAGE 2			

Page 2 KIT 3: RCFCI, continued In compliance? Yes No N/A* Regulation **Compliance Indicator Description** Medications are kept in a safe and locked place that is not accessible to persons other than employees 18 (() 87915(a)(1) inc. Med. Care responsible for the supervision of the centrally stored medication Each resident record contains a record of any illness or injury requiring treatment by a physician or 19 000 87870(b)(10) dentist and for which the facility provided assistance to the resident in meeting his/her medical and/or dental needs ZT - Licensee does not operate the facility beyond the conditions and limitations specified on the 20 (() 87810(a) ZT - The Department has the authority to conduct an inspection of any licensed residential care facility 21 (() 87844(a) or residential care facility which has applied to be licensed at any time ZT - The Department may prohibit an individual from serving as a member of the board of directors, 22 C C C 87846(a) executive director, or officer; being employed or allowed in a licensed facility 23 000 87819(a)(1) Facility/Staff Records Criminal record clearance for all required persons is associated to the license The licensee has submitted fingerprints to the California Department of Justice, along with a second 24 0 0 0 87819(a)(4) set of fingerprints for the purpose of searching the records of the Federal Bureau of Investigation, prior to any individual's employment, residence, or initial presence in the facility The licensee ensures that personnel records are maintained on the licensee, administrator, and each 25 000 87866(a) employee 26 C C C 87826(h) Licensee maintains accurate records of accounts of cash resources, personal property, and valuables entrusted to his/her care Disaster drills are conducted and documented at least every 6 months and documents are maintained 27 C C 87823(d)(2) for at least one year. All direct care staff and the facility manager have current first aid training and a copy of the current 28 (() 87923(a)(1) first aid card is maintained in the personnel record Number of staff records reviewed today * Not applicable or not observable. In the comment section, please explain why an item was not applicable or not observable during this KIT inspection. Did this inspection occur on (Yes Was a comprehensive inspection (Yes If so, was the comprehensive inspection (Yes more than one date? triggered during this inspection? (No triggered by items on this KIT? No Comments or suggestions about this KIT: Final July 27 A comprehensive inspection is triggered if: one Zero Tolerance and/or two Type A violations are cited. Print Form Submit by Email Call ISR at 800-311-4906 for technical assistance. Email: KIT3_ASC@csus.edu Fax: 916-278-5150

Appendix Tables 3.1 through 9.1

Appendix Table 3.1: Common KIT Item Frequencies: Supporting Documentation for Figure 3.1 (FCCH)

			Average		Perc	Perc
KIT item	KIT 1	KIT 2	KIT 1/2	KIT 3	KIT 1/2	KIT 3
ZT 102417(g)(5)(A-B)	5	0	2.5	8	0%	1%
ZT 102417(g)(4)(A)-(C)	11	10	10.5	25	1%	3%
ZT 102417(a)	6	5	5.5	9	1%	1%
ZT 102391(a)	0	0	0	1	0%	0%
102417(g)(4)	154	148	151	207	19%	24%
102417(g)(1)	92	164	128	13	16%	2%
102417(b)	13	18	15.5	22	2%	3%
102417(g)(3)	24	12	18	21	2%	2%
102416.5(a)	23	27	25	42	3%	5%
102370(d)(1)	35	52	43.5	51	6%	6%
102416(c)	157	211	184	235	24%	27%
102416.5(c)	-	3	3	6	0%	1%
102417(d)	-	29	29	38	4%	4%
102417(g)(8)	-	166	166	188	21%	22%
Total N/Percent			781.5	866	100%	100%

Appendix Table 4.1: Common KIT Item Frequencies: Supporting Documentation for Figure 4.1 (Infant)

			Average		Perc	Perc
KIT item	KIT 1	KIT 2	KIT 1/2	KIT 3	KIT 1/2	KIT 3
ZT 101238(e)	0	0	0	0	0%	0%
ZT 101238(g)(2)	0	0	0	0	0%	0%
ZT 101200(a)	0	0	0	0	0%	0%
ZT 101229(a)(1)	0	3	1.5	0	6%	0%
ZT 101429(a)(1)	4	1	2.5	4	10%	7%
ZT 101161(a)	0	0	0	0	0%	0%
ZT 101170.1(a)	0	-	0	0	0%	0%
101238(g)	1	2	1.5	6	6%	10%
101239(n)	0	4	2	2	8%	3%
101238.2(d)(2)	0	2	1.5	2	6%	3%
101239(f)(1)	1	1	1	2	4%	3%
101238.2(e)	0	2	1.5	2	6%	3%
101238(a)(1)	0	0	0	1	0%	2%
101170(e)(1)	0	4	2	1	8%	2%
101216(f)	2	4	3	3	12%	5%
101212(b)	0	0	0	0	0%	0%
101227(a)(6)	0	1	0.5	3	2%	5%
101439.1	1	0	0.5	1	2%	2%
101438.3	0	0	0	1	0%	2%
101416.5	1	3	2	3	8%	5%
101427	0	0	0	2	0%	3%
101419.2	0	1	0.5	8	2%	13%
101419.3	1	2	1.5	3	6%	5%
101416.2	1	4	2.5	3	10%	5%
101161(a)	0	-	0	2	0%	3%
101221(b)(8)	2	-	2	11	8%	18%

101439	0	-	0	0	0%	0%
Total N/Percent			26	60	100%	100%

Appendix Table 5.1: Common KIT Item Frequencies: Supporting Documentation for Figure 5.1 (School Age)

Appendix rable 3.1. commo		·	Average		Perc	Perc
KIT item	KIT 1	KIT 2	KIT 1/2	KIT 3	KIT 1/2	KIT 3
ZT 101238(e)	0	0	0	0	0%	0%
ZT 101238(g)(2)	0	0	0	0	0%	0%
ZT 101229(a)(1)	2	2	2	3	7%	10%
ZT 101200(a)	0	0	0	0	0%	0%
ZT 101161(a)	0	1	0.5	1	2%	3%
101238(g)	2	3	2.5	1	9%	3%
101238(g)(1)	0	0	0	0	0%	0%
101239(n)	0	2	1	1	3%	3%
101238.2(d)(2)	1	1	1	0	3%	0%
101239(e)(4)	1	3	2	2	7%	7%
101238.3(b)	0	3	1.5	1	5%	3%
101227(a)(18)	0	1	0.5	0	2%	0%
101239(f)(1)	2	0	1	3	3%	10%
101239.2(a)	1	1	1	1	3%	3%
101238.2(e)	1	2	1.5	2	5%	7%
101170(e)(1)	1	2	1.5	2	5%	7%
101216(f)	7	3	5	4	17%	13%
101212(b)	1	3	2	0	7%	0%
101161(a)	1	0	0.5	0	2%	0%
101227(a)(6)	0	4	2	1	7%	3%
101516.5	0	1	0.5	0	2%	0%
ZT 101170.1(a)	0	-	0	0	0%	0%
ZT H&S 1596.8897(g)	-	0	0	0	0%	0%
101229.1(a)(1)	0	-	0	6	0%	20%
101217(a)(11)	0	-	0	1	0%	3%
101217(a)(6)	-	3	3	1	10%	3%
Total N/Percent			29	30	100%	100%

Appendix Table 6.1: Common KIT Item Frequencies: Supporting Documentation for Figure 6.1 (FFH)

			Average		Perc	Perc
KIT item	KIT 1	KIT 2	KIT 1/2	KIT 3	KIT 1/2	KIT 3
89387(d)	2	0	1	2	5%	3%
89378(a)	0	0	0	0	0%	0%
89410(a)	2	0	1	4	5%	5%
89387(a)(7)	0	0	0	3	0%	4%
89387(b)	5	3	4	13	18%	17%
89387.2(a)	2	1	1.5	1	7%	1%
89376(a)	0	0	0	0	0%	0%
89319	0	2	1	6	5%	8%
89405(a)	4	3	3.5	14	16%	19%
89405(b)	9	3	6	22	27%	29%
89475(b)	2	0	1	2	5%	3%
89387.2(a)(1)	0		0	0	0%	0%
89372(a)	0		0	1	0%	1%
89468(a)	0		0	1	0%	1%
89387(n)		0	0	4	0%	5%
89387(a)(1)		1	1	2	5%	3%
89361(a)		2	2	0	9%	0%
Total N/Percent			22	75	100%	100%

Appendix Table 8.1: Common KIT Item Frequencies: Supporting Documentation for Figure 8.1 (ARES

			Average		Perc	Perc
KIT item	KIT 1	KIT 2	KIT 1/2	KIT 3	KIT 1/2	KIT 3
ZT 80010(a)	0	0	0	1	0%	0%
ZT 80087(e)	2	0	1	2	1%	1%
ZT 80087(g)(1)	18	6	12	28	9%	10%
ZT 85065(b)	2	5	3.5	2	3%	1%
ZT 80046(a)	0	0	0	0	0%	0%
ZT 80044(a)	0	0	0	0	0%	0%
80088(e)(1)	29	27	28	61	21%	23%
80076(a)(1)	6	7	6.5	17	5%	6%
85076(d)(1)	19	18	18.5	30	14%	11%
80019(e)(1)	0	1	0.5	3	0%	1%
80075(n)(3)	0	0	0	0	0%	0%
80075(n)(1)	0	1	0.5	3	0%	1%
80087(c)	9	-	9	21	7%	8%
80087(g)	23	-	23	40	17%	15%
80088(d)	4	-	4	8	3%	3%
80088(e)(3)	7	-	7	15	5%	6%
85068.3(a)	8	-	8	12	6%	4%
85088(c)(4)	-	8	8	18	6%	7%
80026(e)	-	2	2	3	1%	1%
80068(a)	-	2	2	6	1%	2%
Total N/Percent	118	77	97.50	249	100%	100%

Appendix Table 9.1: Common KIT Item Frequencies: Supporting Documentation for Figure 9.1 (A Day)

			Average		Perc	Perc
KIT item	KIT 1	KIT 2	KIT 1/2	KIT 3	KIT 1/2	KIT 3
ZT 82010	1	0	0.5	0	4%	0%
ZT 82087(f)	0	0	0	0	0%	0%
ZT 82065(e)	0	0	0	0	0%	0%
ZT 82046(a)	0	0	0	0	0%	0%
ZT 82044(a)	0	0	0	0	0%	0%
82087(a)(3)	3	6	4.5	5	38%	29%
82088(e)(1)	3	1	2	6	17%	35%
82088(e)(3)	2	0	1	0	8%	0%
82076(a)(1)	0	0	0	0	0%	0%
82068.2(e)	0	0	0	0	0%	0%
82019(e)(1)	1	0	0.5	0	4%	0%
82075(f)	2	4	3	5	25%	29%
82075(b)	1	0	0.5	0	4%	0%
ZT 82065(a)	-	0	0	0	0%	0%
82066(a)(10)	0	-	0	1	0%	6%
82072(a)(8)	-	0	0	0	0%	0%
Total N/Percent			12	17	100%	100%

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Executive Summary

California has more than 75,000 licensed community care facilitates with the capacity to serve roughly 1.4 million children, disabled adults, and elderly persons needing care and supervision. The Community Care Licensing Division (CCLD) of the California Department of Social Services (CDSS) is the agency designated by California's Health and Safety Code to protect and promote the health, safety, and quality of life of each person in such community care facilities, through the administration of an effective regulatory enforcement system. Within CCLD, more than 475 Licensing Program Analysts (LPAs) perform direct inspections of facilities for compliance with health and safety regulations.

In late 2010, in an effort to increase the number of routine inspections CCLD could perform per year, CCLD developed several Key Indicator Tools (KIT) and began using them as a complement to their comprehensive inspection processes. KITs are intended to (1) standardize the inspection protocol between facilities and between inspectors, (2) enhance the efficiency of the inspection process, and (3) appropriately identify whether a more comprehensive inspection is warranted.

In 2012, CCLD began a collaborative effort with the Institute for Social Research (ISR) at Sacramento State University to evaluate and improve the Key Indicator Tools. In the end, this collaborative effort produced new KITs for 18 CCLD facility types that are contained within the three overarching program areas: Child Care, Children's Residential, and Adult/Senior Care).

To evaluate and improve the KITs, the ISR proceeded in several stages. We:

- 1. Reviewed existing inspection/investigation data
- 2. Job shadowed LPAs in each of the three program areas
- 3. Conducted stakeholder meetings (internal and external)
- 4. Facilitated extended discussions with LPA workgroups and CCLD upper management¹
- 5. Created a new "KIT 3" for each facility type, based on a hybrid methodology that integrated three data-driven processes to overcome weaknesses associated with any single approach
- 6. Conducted extended pilot tests of the new KITs in two phases, analyzing the resulting data to form the basis of our evaluation.

KIT 3 Development Methodology (in brief)

Using four years of CCL facility inspection data (within program area and facility type), we identified a list of "key indicator" violations that can be used to predict when a facility has violated a large number of regulatory codes or has at least one severe code violation. Specifically, we devised a hybrid methodology that incorporated three analytical strategies. First, we performed logistic regression analyses to identify and rank the specific violations that predict high-frequency violation inspections. Second, to take account of violation severity, we examined how such key indicator rankings differed between routine visits and complaint visits, adding indicators that rank highly during complaint visits even if they did not appear in the broader analysis. Third, to further account for violation severity, we identified additional violations recorded during complaint visits that were associated with domain clusters of violations during routine inspection visits.

¹ See *Key Indicator Tool Development Project: Phase I and II: Final Report* (June 2014) for an in-depth discussion of this aspect of the project (Institute for Social Research, June 2014).

After identifying the list of key indicators, ISR created the KIT 3 tool itself using Adobe LiveCycle, which provides for electronic submission of a form's data and does not allow submission of incomplete forms. This prohibition against incomplete data submission encouraged LPAs to systematically review facility compliance of *every* regulatory item on KIT 3 (in contrast to the earlier KITs, which were simply printed out checklists of specific regulations). The forced data submission also enhanced the quality of data, compensating to some degree for shortcomings in the inspection data repository system that CCLD currently uses (the Lotus Notes-based Field Automated System (FAS)).

Pilot Data Research Objectives and Specific Research Questions

Broadly speaking, ISR's analyses of KIT 3 pilot data sought to evaluate KIT 3—relative to KITs 1 and 2—based on four criteria: validity, reliability, efficiency, and utility. These objectives led us to evaluate KIT 3 (including the new data collection and submission procedures) with regard to six primary indicators:

- 1. The number and rate of regulatory violations cited, overall (validity)
- 2. The number of zero tolerance violations cited (validity)
- 3. The number of comprehensive visits triggered (validity)
- 4. The percent of regulatory violations cited at least once (efficiency)
- 5. The consistency and accuracy with which LPAs submitted KIT forms (reliability and utility)
- 6. The qualitative feedback received from LPAs, program managers, and other CCLD staff (utility).

Pilot Test Procedures

After internal pilot tests with a small sample of LPAs, ISR commenced large-scale pilot testing statewide—in two phases. The first phase, which took place for two months during the Fall of 2014, tested the new KITs developed for (1) preschool centers, (2) children's group homes, and (3) residential care facilities for the elderly (RCFEs).² We pilot tested 15 KIT 3s pertaining to all of the remaining facility types in the late Summer/Fall of 2015.³

After each phase of piloting, we cleaned, merged, and matched the electronically submitted KIT 3 data with CCLD's FAS inspection data, forming the complete study period data set. Ultimately, we used four sources of data for analysis:

- Four years of FAS inspection data (2008 to 2011)
- FAS inspection data from Fall 2013, 2014, and 2015
- > The merged KIT 3 and FAS inspection data from the Phase One pilot period in Fall 2014
- > The merged KIT 3 and FAS inspection data from the Phase Two pilot period in Fall 2015

² We created two KITs for Residential Care Facilities for the Elderly, according to their size (1-6 beds vs. 7 or more beds)

³ Child Care Program facility types: Infant Centers, School Age Centers, Day Care Centers for the Mildly Ill; Children's Residential facility types: Adoption Agencies, Foster Family Agencies, Small Family Homes, Foster Family Homes, Crisis Nurseries, Transitional Housing Placement Programs; Adult/Senior Care facility types: Adult Residential, Adult Day, Social Rehabilitation, Residential Care for those with Special Health Care Needs, and Residential Care for the Chronically Ill.

Major Conclusions from Phase Two Pilot

This section summarizes the results from Phase Two of the pilot test (Fall 2015), which reviewed the performance of KIT 3, relative to KITs 1 and 2, with regard to 15 of the 18 CCL facility types (though, as we will discuss below, nine of them did not include enough inspections or citations from which to draw conclusions). Generally speaking, the findings we report here are very much in keeping with those from the Phase 1 pilot. For a detailed review of the performance of the facility types piloted in Phase 1 (Fall 2014: preschool centers, children's group homes, and residential care facilities for the elderly), see our earlier report: "KIT 3 Phase One Pilot Test of Four KITs", submitted to CCLD August 2015.

Across all facility types, we can draw a few general conclusions about the reliability and utility of the new KIT 3s:

- ➤ By design, KIT 3 accurately captures specific regulation and statute code sections, since LPAs do not hand-type entries on the forms themselves. In itself, this change significantly enhances inspection reliability.
- The electronic submission process, using Adobe LiveCycle, enhances the reliability of data submission.
- ➤ Based on email correspondence and other communication with LPAs and regional managers, LPAs tended to find the new KIT 3 forms, recording process (on tablets) and submission process to be user friendly, which is also reflected in the generally high percentage of forms that LPAs correctly completed and submitted during the data collection.
- In terms of the six criteria listed above that we used to evaluate KIT 3 relative to KITs 1 and 2, KIT 3 frequently outperforms KITS 1 and 2, and performs equally well in other instances.
- ➤ The specific criterion on which KIT 3 outperformed the earlier KITs most consistently was with respect to tool efficiency: the percentage of KIT items that LPAs cited at least once during the comparable study periods was regularly higher—often much higher—for KIT 3 than for the earlier KITs.
- ➤ In no facility type did KIT 3 lead to a higher frequency of total violations (KIT and non-KIT) than KITs 1 and 2.⁴ This may indicate all KIT versions perform similarly in identifying poorly performing facilities.
- > Overall, for no individual facility type did KIT 3 perform worse than the earlier KITs.

The remainder of this section summarizes the findings with respect to each Phase Two facility type, in turn:

Family Child Care Homes: KIT 3 added five new regulatory violations to the tool. Performance-wise, KIT 3 outperformed KITs 1 and 2 with respect to the average number of KIT violations cited, the percentage of KIT inspections triggering a comprehensive inspection, and the number of individual KIT items cited at least once during the comparison time periods. With the five additional items, KIT 3 proves to be a statistically sound instrument to aid in the efficiency of the KIT inspection process in family day care homes.

⁴ There are exceptions to this statement. Statistical testing was not possible in several facility types due to limited numbers of KIT inspections: One facility type in the child care program, five in children's residential, and three in adult/senior care. Details are provided in the relevant chapters.

Infant Centers: KIT 3 added 14 new regulatory violations to the tool, four of which were never cited and might be considered candidates for removal going forward. In terms of their relative performance, KIT 3 outperformed KITs 1 and 2 in terms of the number of KIT violations cited and the percentage of inspections that triggered comprehensive inspections (barely). Furthermore, KIT 3 appears to be a much more efficient tool: the percentage of KIT 3 items that LPAs cited at least once was roughly 30-40% greater than on KITs 1 and 2. However, while KIT 3 appeared to generally outperform KITS 1 and 2 on the other criteria as well, the differences tended to be small and not statistically significant. Finally, LPAs cited identical KIT items at very different rates across the three KITs—an unusual result that we find difficult to interpret. In general, then, while the Infant Center results generally favor KIT 3, we cannot say this with as much confidence as we did with respect to Family Child Care Homes.

School Age Child Care Facilities: KIT 3 added eight new regulatory violations to the KIT, three of which were never cited and could be candidates for removal going forward. In terms of its relative performance on the criteria we have identified, KIT 3 does not tend to differ significantly from KITs 1 and 2. Thus, while we cannot say with any confidence that KIT 3 outperformed KITs 1 and 2, we can say that KIT 3 performed at least as well—indicating that KIT 3 is a viable alternative.

Foster Family Homes: KIT 3 included four new regulatory violations to the tool, three of which were cited at least once. Across most of the evaluation criteria we have measured, KIT 3 did not differ statistically from KITs 1 and 2. However, if nothing else, KIT 3 appears to be a much more efficient tool: the percentage of KIT 3 items that LPAs cited at least once during the pilot period was more than 40 percentage points higher than for KITs 1 or 2 during comparable periods.

Adult Residential Facilities (General): KIT 3 added eleven new regulatory violations to the tool. Performance-wise, while KIT 3 performs similarly to KITs 1 and 2 on some evaluative criteria, it out-performs KITs 1 and 2 in several others—most notably the average number of violations cited, the average number of comprehensive triggering citations, and the percentage of KIT items that LPAs cited at least once during the comparable study periods. This facility type presents one of the clearest indications of KIT 3 superiority, relative to the earlier KITs.

Adult Day Care Facilities: KIT 3 added 14 new regulatory violations to the tool. In terms of performance, KIT 3 radically outperformed the earlier KITs in terms of the number of violations that it identified during the comparable study periods—catching almost twice as many. Moreover, KIT 3 was more likely to trigger a comprehensive inspection than were KITs 1 or 2, and as has been a consistent theme across facility types, the percentage of KIT 3 items that LPAs cited at least once during the study period was greater than the percentage for KITs 1 or 2 during comparable periods (though the difference is not as great for this facility type as it was for some of the others). On the other hand, LPAs cited identical KIT items at quite different rates across the comparison periods—more in some cases during KIT 3, and less in others. Thus, while KIT 3 does not appear to outperform the earlier KITs across the board, it fares quite well overall.

Although the KIT 3 forms appear to have performed well with regard to the facility types listed below, the pilot period did not produce enough data, in terms of inspections or citations, to perform large scale statistical analysis: Mildly III Child Care Facilities, Adoption Agencies, Foster Family Agencies, Small Family Homes, Crisis Nurseries, Transitional Housing Placement Programs, Social Rehabilitation facilities, and Residential Care for those with Special Health Care Needs and the Chronically III.

Recommendations

1. KIT 3 should be implemented as an inspection tool, but least one alternative version of each KIT be produced to maintain the fidelity of the inspection process.

- 2. The new KIT 3 Adobe LiveCycle form be continued for KIT inspections. The KIT 3 format will be helpful in the future design of a new FAS-type database to collect CCLD inspection data. Furthermore, in the interim, it can be used with database programs such as Access, Excel, or SPSS to collect and analyze inspection data for decision-making and policy analysis purposes.
- 3. A comprehensive training program should be developed (much as was done with the original implementation of the KITs), to ensure all LPAs are familiar with the form and comfortable in its use. Such training will help the KIT 3's ability to standardize the KIT inspection process.
- 4. CCLD should conduct or sponsor additional research to determine why some regulations are very infrequently / never cited (excluding zero tolerance items) in inspections. Inspection items falling into this category would appear to have limited utility, and might be removed or combined into a more general category within that facility type. Results from the ISR KIT 3 development analysis also could be used for training purposes to focus LPAs' attention in this area.
- 5. Zero tolerance and other regulations that must be checked at every inspection should not be included in future analysis of empirically identified KIT items. The mandated KIT items could be placed in a separate section on the KIT in future modifications.

Organization of the Remainder of the Report

The remainder of this report consists of four sections. Section 1 provides an introduction to the project (Chapter 1) and discusses the pilot study's research questions in greater detail, and discusses the data and measures used to analyze those research questions (Chapter 2). Section 2 describes the Phase Two pilot test results as they pertain to the Child Care program area facilities (with the exception of Preschools, which ISR piloted in Phase 1). Section 3 does the same with regard to the Children's Residential program area facilities (with the exception of Group Homes, which was piloted in Phase 1), and Section 4 considers the Adult and Senior Care program area facilities (with the exception of Residential Care Facilities for the Elderly, also piloted in Phase 1). The Phase 1 Pilot Results [Preschools, Group Homes, and Residential Care Facilities for the Elderly can be reviewed in "KIT 3 Phase One Pilot Test of Four KITs", submitted to CCLD August 2015). For those interested in results as they pertain to only a subset of program areas or facility types, we have structured this report so that each specific facility chapter may be read independently.

SECTION 1: BACKGROUND AND METHODOLOGY

This section provides a general overview of the project in Chapter 1, and details the specific research questions, data, and measurement strategy in Chapter 2.

Chapter 1: Introduction

California has more than 75,000 licensed community care facilitates with the capacity to serve roughly 1.4 million children, disabled adults, and elderly persons needing care and supervision. The Community Care Licensing Division (CCLD) of the California Department of Social Services (CDSS) is the agency designated by California's Health and Safety Code to protect and promote the health, safety, and quality of life of each person in community care, through the administration of an effective regulatory enforcement system. CCLD has more than 475 Licensing Program Analysts (LPAs) who directly monitor facilities for compliance with health and safety requirements typically through routine facility inspections.

In late 2010, in an effort to increase the number of routine inspections CCLD could perform per year, CCLD developed Key Indicator Tools (KIT) and began using them as a complement to their comprehensive inspection processes. KITs are intended to standardize the inspection protocol between facilities and between inspectors, enhance the efficiency of the inspection process, and appropriately identify when a more comprehensive inspection is warranted.

In 2012, CCLD began a collaborative effort with the Institute for Social Research (ISR) at Sacramento State University to evaluate and improve the Key Indicator Tools. The partnership also included guidance from the National Association of Regulatory Agencies (NARA). In the end, this collaborative effort produced new KIT tools for each of the 18 community care facility types (as contained within the three CCLD program areas).

This report (1) describes the new KITs (hereafter referred to as "KIT 3," (2) elaborates the methods used to create them, (3) summarizes pilot test procedures, and (4) evaluates the validity, reliability, utility and overall effectiveness of the new KITs, relative to their predecessors.

KIT 3 Development and Modifications (In Brief)

The goal in developing any KIT is to identify specific indicators (in this case, violations) that can efficiently predict whether a facility stands a good chance of being low-performing—either in terms of violation frequency or violation severity—so as to focus initial inspections on identifying such predictive violations (thereby triggering comprehensive inspections). Thus, to create a useful KIT, one must devise a methodology that efficiently identifies specific violations that are not only associated with high numbers of violations within a facility but also with the presence of severe (e.g., zero tolerance) violations.

Using four years of CCL facility inspection data (within program area and facility type), we accomplished this goal by devising a hybrid methodology that incorporated three analytical strategies: (1) logistic regression, (2) ranking, and (3) correlation/clustering by violation domain.⁵

We used logistic regression analysis as our starting point, which robustly identified and ranked specific violations that are associated with a facility violating a high number of codes. This produced an initial list of "key indicator" violations. However, this logistic regression approach did not differentiate violations in terms of severity.

Therefore, we augmented the list of key indicators by distinguishing between routine inspections and complaint-driven inspections—which typically involve more severe violations. We added key indicators that ranked highly in their predictive capacity during complaint investigations, even if they had not ranked highly during the routine inspection analysis.

⁵ As noted in prior reports, several data-system challenges complicated the creation of a useful methodology – rendering impossible the simple replication of approaches previously used in other states.

Finally, to refine the list even further, we deepened our focus on complaint investigations—adding additional violations to the key indicator list that tended to correlate with given clusters of violations during routine inspections.

This process resulted in significant changes to KIT 3, relative to KITs 1 and 2, in terms of the specific regulatory violations (i.e. "key indicators") that are listed on each form. For a comprehensive list of changes as they relate to such indicators, per facility type, see the earlier report: "KIT Task 7 Phase Two KITs", submitted to CCLD June 2015.

We also modified the way that LPAs use and submit KIT data. When LPAs used KIT 1 or 2 during a facility inspection, they did not indicate anywhere—either on the form, in the facility file, or in FAS—that they had examined each and every KIT item. In other words, LPAs used KITs 1 or 2 as guides during inspections, but not as record-keeping tools. As a result, without such records, researchers could not draw valid conclusions about a facility's compliance with each KIT item. We designed the new KIT 3s to address this problem; when LPAs use the form during inspections, they cannot submit the form before recording whether the facility is in compliance with each regulation listed on the form. This practice eliminates missing/partial responses, thereby greatly enhancing the soundness of the data collected. Finally, we added additional questions to the bottom of each KIT 3 form, which we included to test various aspects of the KIT 3's validity and efficacy.⁶

In summary, the major differences between CCLD's KITs 1 and 2 and ISR's KIT 3 lie in how ISR selected items for inclusion, the requirement that each item be examined, and KIT 3's additional validity questions. For more detailed information, see *Key Indictor Tool Development Project: Phase I and II: Final Report*. Please see the 15 new KIT 3 forms in the Appendix.

Evaluating the New KITs: Objectives and Specific Research Questions

Broadly speaking, ISR's analyses of KIT 3 pilot data sought to evaluate KIT 3s—relative to KITs 1 and 2—on four criteria: validity, reliability, utility, and overall effectiveness. More specifically, we examined the extent to which KIT 3 differs from the earlier KITs with regard to the following indicators:

- > The overall number and rate of regulatory violations cited
- > The number of zero tolerance violations cited
- > The number of comprehensive visits that it triggers
- ➤ The range of different violations cited
- The utility of KIT 3's empirically identified regulatory items on KIT 3

Chapter Two provides the rationale underlying each of these evaluator indicators/research questions, and details the data, measures, and analytical methods used to address them.

KIT 3 Pilot Testing Procedures

Pilot data collection took place in two phases. In the first phase, which took place from July 27 to Oct 30 2014, CCLD and ISR jointly selected three facility types to complete pilot testing: Preschool Child Care Centers (CCC), Children's Group Homes (GH), and Residential Care Facilities for the Elderly (RCFE). In the latter case, we designed and tested two KIT 3s: one for smaller RCFE facilities (one-to-six bed capacity) and another for larger RCFE facilities (seven or more bed capacity).

⁶ For example: one question asked if a comprehensive inspection was triggered during the KIT visit, and if so, did KIT items trigger the comprehensive inspection.

During the second phase, the remaining 15 facility types completed pilot testing from July 27 to Oct 30, 2015

In order to ensure the new KIT 3s were error-free and ready for distribution, Regional Office managers selected one or two LPAs from their staff to pre-test them before implementing the division-wide data collection. Once ISR reviewed the results of this pre-test and completed minor adjustments to the form, CCLD's regional managers trained the general LPA workforce on how to use the improved KIT 3.

Prior to starting official data collection, we allotted time for all LPAs to become comfortable using the new KIT 3. To that end, we asked all newly trained LPAs to submit one or two practice KIT 3s, electronically, to ensure that they could fill out and submit the forms properly and that we were able to receive their submissions successfully.

Data Collection

To facilitate the collection of the KIT 3 test data, we developed a protocol to guide participating LPAs through the electronic submission process and to provide: (1) ongoing error checking during the test data collection period, (2) feedback to LPAs so as to reduce submission errors, and (3) a standardized process for handling incoming data, thereby maintaining quality and consistency in data prepared for analysis. Within each program area, we initiated facility-specific KIT 3 inspection data collections in a staggered fashion.

We instructed LPAs to use KIT 3 during all annual random, annual required, and five-year inspections ONLY IF the inspection was KIT-eligible. We further instructed LPAs to submit each KIT 3 form to ISR for every KIT inspection they performed during the data collection period. Preliminary record review (via FAS downloads) during Phase One of the pilot (the first four KITs listed above) revealed that not all LPAs were compliant with the data collection period directions; some LPAs continued to use KITs 1 or 2, and some LPAs used KIT 3s during inspections but neglected to submit the KIT 3 to ISR. We asked that CCLD instruct all LPAs to only perform KIT 3 inspections when warranted, and to always submit the KIT 3 to ISR during the data collection period.

Every time an LPA completed a KIT 3, the LPA transmitted it to the ISR as an email attachment. Each day during data collection, an ISR team member monitored and responded to LPA emails containing questions or raising problems—seeking help from CCLD program administrators/staff as necessary. Throughout this period, KIT 3 submissions were examined closely for possible misinterpretation of items by LPAs, mistakes in filling out the KIT, and/or questions regarding items on the KIT or for problems submitting the KIT through email. During the data collection period a fair amount of time was spent responding to LPAs regarding such matters.

KIT Pilot Test Data Received

As each facility type's data collection period ended, we combined all KIT 3 forms into facility-specific PDF data sets, which were examined for suitability in data analysis. Table 1.1 highlights the number of KIT 3 forms that we received, and the percentage that we deemed acceptable for analysis.

⁷ Some facilities only receive comprehensive inspections due to prior compliance issues or source of funding, and therefore were not eligible for a KIT inspection at all.

Table 1.1: Electronic KIT 3 Submissions, by Facility Type

		Number of KIT 3s	Number of KIT 3s	Percent of KIT 3s accepted
	Facility Type	received	after cleaning	for potential analysis
Phase One	Preschools	456	418	92%
	Group Homes	130	118	91%
	RCFE 1 to 6 Bed	136	128	94%
	RCFE 7 or more	47	45	96%
	Total	769	709	92%
Phase Two	FCCH	1631	1574	97%
	Infant	163	151	93%
	School Age	121	115	95%
	Mildly III	3	3	100%
	FFH	58	57	98%
	SFH	13	13	100%
	AA	5	5	100%
	FFA	5	5	100%
	THPP	4	4	100%
	CN	1	1	100%
	A Res	457	447	98%
	A Day	29	29	100%
	ARFSHN	9	7	78%
	SRF	11	9	82%
	RCFCI	5	5	100%
	Total	2515	2425	96%
Both Phases	Total	3284	3134	95%

RCFE: Residential care facilities for the elderly; FCCH: Family child care home; FFH: Foster family home; SFH: small family home; AA: Adoption agencies; FFA: Foster family agencies; THPP: Transitional housing placement programs; CN: Crisis nurseries; A Res: Adult residential facilities; A Day: Adult day programs; ARFSHN: Adult residential facilities for those with special health care needs; SRF: Social rehabilitation facilities; RCFCI: Residential care facilities for the chronically ill.

Inspection Data as Recorded in FAS

As noted, CCLD provided ISR with FAS inspection visit data, to provide a subset of data (i.e., inspections using KITs 1 and KIT 2 one year earlier) to compare to the new KIT 3 data. FAS data pulls arrived in .txt format, which we converted into Excel data. Next, we imported the cleaned Excel FAS data into SPSS, where we consolidated and matched inspection and violation files. We attempted to merge the appropriate facility-specific FAS SPSS file with the electronically submitted KIT 3 data. If no matching FAS

⁸ .txt format: this is a file format that is easily read by multiple data processing software, but needs to be converted to a more useable format prior to being used by data processing software.

⁹IBM's Statistical Package for Social Sciences, a program used extensively in social science research for more than 30 years.

¹⁰LPAs enter inspection data and cited violations data on two different forms in FAS and for ISR's purposes, required matching for a complete data picture of each inspection visit.

entry existed, we excluded the KIT 3 submission from further data analysis. If a KIT 3 inspection was present in FAS but no KIT 3 was submitted to ISR, the FAS KIT 3 data was included in analysis. Table 1.2 shows the adjusted number of KIT 3s considered appropriate for further analysis.¹¹

Table 1.2: Adjusted KIT 3 Sample Sizes, by Facility Type

		Electronic	KITs in FAS but not	Adjusted total KIT
	Facility Type	submissions	submitted	inspections
Phase One	Preschools	456	418	652
	Group Homes	130	118	168
	RCFE 1 to 6 Bed	136	128	229
	RCFE 7 or more	47	45	76
	Total	769	709	1125
Phase Two	FCCH	1574	653	2227
	Infant	151	0	140
	School Age	115	55	170
	Mildly III	3	0	3
	FFH	57	8	66
	SFH	13	33	46
	AA	5	*	1
	FFA	5	0	5
	THPP	4	*	2
	CN	1	0	1
	A Res	447	140	587
	A Day	29	10	39
	ARFSHN	7	0	2
	SRF	9	1	10
	RCFCI	5	*	2
	Total	2425	900	3301
Both Phases	Total	3194	1609	4426

^{*}Some submissions did not match FAS data because FAS indicated a non-triggered comprehensive inspection occurred.

¹¹ During data analysis, it is not uncommon to find additional problems with individual entries. Therefore, valid totals as reported in subsequent chapters may be slightly different than represented in Table 1.2.

Chapter 2: Pilot Study Data, Research Questions, and Measures

To analyze the Phase Two pilot study data for the purpose of evaluating KIT 3, we used two primary data sources. They are both FAS-based, and represent three different time periods:

- > FAS data from Fall 2014 ("Previous Period")
- > FAS data combined with KIT 3 electronic submissions from Fall 2015 ("Study Period")

The first FAS data set's date range was July 2014 through November 2014. The electronically submitted KIT 3 pilot data was cleaned, merged, and matched with the other 2015 FAS data whenever possible. 12

Research Questions

A fundamental purpose of designing a new hybrid KIT was to improve the validity and reliability of the existing KITs as an indicator tool for use in facility inspections. The new KIT also had to be practical in terms of being similar enough to past KITs to make its use familiar to LPAs, negating the need for extensive training on a new instrument. The new hybrid KIT also had to meet CCLD's requirements pertaining to regulatory inspections, such as including zero tolerance (ZT) violations. It was to serve as a better mechanism for data collection on the inspection process, providing administrators with information to improve the fidelity and efficiency of the inspection process. From these requirements, several research questions emerged which the pilot testing of KIT 3 was designed to answer. To guide the analysis, the research team proposed five general research questions. We present the research questions in this chapter as jargon-free to the greatest extent possible. For the interested reader, Appendix J contains the formal null hypotheses and alternative hypotheses for each research question.

Analysis of KIT data can be done with several different measures, and it is important to understand each of them:

- Number of KIT violations (instances of non-compliance with regulations listed on the KIT used during the inspection visit)
- ➤ Average number of KIT and non-KIT item citations
- ➤ Number of KIT inspection visits
- Number of KIT items (rows) cited found to be out of compliance (regardless of multiple violations of the item during the visit)

Research Question 1: Is there a difference between KITs 1 and 2 and KIT 3 with regard to the number of zero tolerance violations cited?

Rationale: All KITs contain zero tolerance regulations.¹³ Because CCLD defines review of ZT regulations as mandatory, KIT 3 included the same ZT items as found on KITs 1 and 2. There is no reason to expect LPAs citing ZT violations more (or less) often when they use KIT 3 than when they used KITs 1 or 2 during

¹² Each KIT visit in FAS was included in the analysis if it occurred during the previous periods. Only KIT 3 visits were included in the study period analysis. If the visit took place over more than one calendar date, the violations were combined and registered with the initial visit date. Some visits had more than one stated purpose (e.g., annual inspection and case management work done during the same visit). If we could not clearly identify which violations were relevant only to the inspection, we excluded the visit's results from analysis.

¹³ A zero-tolerance regulation is one so serious that if violated, would typically be considered grounds for civil penalties and possible facility closure.

inspections in the Fall 2014 Period. By extension, this would mean that differences between KITs 1 and 2 and KIT 3 on the measures studied would be due to the discretionary items added to KIT 3, or the discretionary items on KITs 1 and 2 that were removed in the construction of KIT 3 (see Research Question #2).

- Measure: Number of ZT KIT violations. This is the total of ZT violations as recorded in FAS.
- Example: A KIT 3 visit recorded two violations of the same ZT item on the KIT. Therefore, it has two ZT violations (but note that only one ZT KIT item was cited).

Research Question 2: Is there a significant difference in the average number of KIT and non-KIT item citations, overall, between KITs 1 and 2 and KIT 3?

Rationale: Because non-ZT items on KIT 3 were maintained, dropped, or added based on empirical assessment of four years of historical data during the KIT 3 development phase (including considering violation frequency, violation ranking, and clustering in problematic areas), there should be an increase in the number of KIT items cited when using KIT 3 during an inspection, compared to using KITs 1 and 2. In addition, compared to KITs 1 and 2, KIT 3 inspections should lead to a higher average number of total violations because KIT 3 is designed to identify poorly performing facilities that would have more violations.

- Measure: Average number of KIT and non-KIT items cited, per inspection.
- Example: Five KIT violations are cited during a KIT 3 visit, but only four KIT items were cited, because the facility had two instances of non-compliance with the same KIT item
- Example: The average number of all violations found during inspections using KITs 1 and 2 is much lower than KIT 3's average number. We can test these findings for statistical significance.

Research Question 3: Does the use of KIT 3 trigger comprehensive inspections more frequently? Is there a significant difference in the percentage of KIT 3 inspections triggering an in-depth comprehensive inspection, compared to KITs 1 and 2?

Rationale: Again, as in Question 2 (above), because we believed that the new KIT 3 would be more successful at identifying facilities that needed a comprehensive inspection, we expected that the percentage of KIT 3 visits triggering comprehensive inspections might be greater than that of KITs 1 and 2.

- ➤ Measure: The number of comprehensive inspections triggered during a KIT visit.¹⁴
- Example: During 100 KIT 1 visits, 25 comprehensive inspections were triggered (25%); during 100 KIT 3 visits, 33 comprehensive inspections were triggered (33%). We can test these findings for statistical significance between the KITs.

Research Question 4: Is there a significant difference in the range of different KIT items that LPAs cite or do not cite on the KITs?

Rationale: Again, assuming KIT 3 is a stronger tool in terms of the relevance of its items, it seems logical to assume that more items on the KIT 3 form will be cited, compared to KITs 1 and 2. In other words, are KIT 3's items more useful? Because LPAs occasionally cite multiple violations of one KIT item during an inspection, we count KIT items (rows on the KIT) rather than total KIT violations to assess the KITs. And, we

¹⁴ If a visit was marked as a KIT-triggered comprehensive inspection, but the LPA did not cite any KIT items, we excluded that visit from analysis.

focus on KIT items rather than number of KIT violations because this study is intended to examine the utility of the KIT items themselves.

- Measure: a count of KIT items (rows) cited during at least one KIT inspection.
- Example: KIT 1 has 20 separate items listed, and LPAs cited 15 of those items at least once during the previous period: 75 percent of KIT 1 items have ever been cited. KIT 3 has 24 separate items, and 20 of them were cited at least once during the study period: therefore 83 percent of KIT 3's items were cited at least once, a higher percent than the items on KIT 1.

The remaining chapters of this report summarize the Phase Two pilot test results for each program area and facility type, one by one. We begin with the Child Care program facility types (Section 2), continue with those in the Children's Residential program (Section 3), and conclude with those in the Adult and Senior Care program (Section 4).

SECTION 2: CHILD CARE CENTERS

In this section of the report, we discuss the pilot test results as they pertain to facility types within the Child Care Center program area: Family Child Care Homes (Chapter 3), Infant Centers (Chapter 4), and School Age Child Care Facilities (Chapter 5). We do not discuss Child Care Facilities for the Mildly III in detail, because there are only six such facilities in the state. CCLD LPAs conducted five total inspection visits in Mildly III centers across the two comparison periods (one KIT 1 and one KIT 2 inspections occurred during the prior period, and 3 KIT 3 inspections during the study period); no KIT violations were cited during any of those visits.

Chapter 3: Family Child Care Homes

In this chapter, we describe the KIT 3 pilot test results as applied to Family Child Care Homes (FCCH). We compare KIT 3 pilot test results to those of KITs 1 and 2 from the same time period in the prior year, observing the tools' relative tendency to identify code violations and trigger comprehensive inspections. Specifically, we examine:

- The relative frequency with which each tool identified at least one KIT item violation during an inspection and the total number of KIT and non-KIT violations during a KIT inspection
- The relative frequency with which each tool identified a zero tolerance violation
- > The relative frequency with which each tool triggered a comprehensive inspection
- > The relative average number of violations that each tool identified—both in general and after distinguishing between KITs which trigger comprehensive inspections and KITs that did not trigger comprehensive inspections
- The relative *percentage of individual KIT items (rows)* on the KITs cited at least once during the study periods
- The relative frequency with which the tools identified *specific* violations, both in raw numbers and as a percentage of the total number of KIT citations, for just items present on KITs during the two comparison periods

Frequency: At Least One Violation

First, we observe the relative frequency with which each tool identified at least one violation during a KIT inspection. As Table 3.1 shows below, KIT 3 was 5-6% more likely to identify at least one violation, a statistically significant finding.

Table 3.1: Comparing Proportion of KIT Inspections with at Least One KIT Regulation Cited, Previous and Study Periods (FCCH)

	Previous Period				Study Pe			
	KI	T 1	KI	T 2	KIT 3			
KIT Inspections	N	Percent	N	Percent	N	Percent	Total	Average
No KIT violations cited	1,003	71%	1,297	70%	1,449	65%	3,707	68%
At least one KIT violation cited	413	29%	546	30%	778	35%	1,779	32%
Total	1,416		1,843		2,227		5,486	

Frequency: Zero Tolerance Violations

What about zero tolerance violations? We see that none of the KITs identified zero tolerance violations very often, and that KIT 3 performs very similarly to KITs 1 and 2 in this respect.

- ➤ KIT 1 Zero Tolerance violations: 22 of 597 KIT violations (4%)
- ➤ KIT 2 Zero Tolerance violations: 11 of 885 KIT violations (2%)
- ➤ KIT 3 Zero Tolerance violations: 33 of 1421 KIT violations (3%)

Frequency: Comprehensive Inspection Trigger

How did KIT 3 compare to KITs 1 and 2 in terms of triggering comprehensive inspections? As Table 3.2 highlights, KIT 3 tended to trigger a comprehensive inspection more than twice as frequently as had KITs 1 and 2, a statistically significant finding. These results indicate a KIT 3 inspection triggers a comprehensive inspection roughly one out of seven inspections, whereas KITs 1 and 2 triggered a comprehensive inspection one out of 20 inspections.

Table 3.2: Number and Percent of KIT Inspections Which Triggered a Comprehensive Inspection, Previous and Study Periods (FCCH)

		Previous Period				y Period		
	k	(IT 1	KIT 2		KIT 3			
	N	Percent	N	Percent	Ν	Percent	Total	Average
Triggered a comprehensive inspection	84	6%	52	3%	107	14%	243	7.6%
Didn't trigger a comp inspection	1,332	94%	1,791	97%	671	86%	3,794	92.3%
Total	1,416		1,843		778		4,037	

Average Number of KIT Violations

Having looked at the relative frequency with which the KITs identified at least one violation and how often comprehensive inspections are triggered, we now turn our attention to comparing the KITs with respect to the overall number of violations that each tool identified. As we can see in Table 3.3 below, on average, KIT 3 identified more violations than the other KITs, both including and not including the zero tolerance regulations—differences that are statistically significantly different. Finally, the higher average number of all types of violations cited during a KIT 3 inspection (KIT and non-KIT violations), is not statistically significant. KIT 3 inspections were no more likely to identify poorly performing facilities more often than KITs 1 and 2. This finding may indicate that each KIT version is performing similarly in this aspect.

Table 3.3: Average Number of KIT Violations, for KIT Inspections with at Least One Violation, Previous and Study Periods (FCCH)

	Previo	us Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р
Average KIT violations per visit (Number of inspections)	1.46 (416)	1.62 (546)	1.91 (778)	.000
Average KIT violations per visit, excluding ZT items (Number of inspections)	1.42 (406)	1.59 (545)	1.87 (769)	.000
Average violations per KIT visit, all possible regulations (Number of inspections)	2.46 (559)	2.41 (741)	2.56(987)	.262

Triggered Comprehensive Inspections

As Table 3.4 highlights below, the average number of KIT violations cited during a KIT inspection that triggered a comprehensive is significantly higher for KIT 3 visits (2.71 KIT violations), compared to an average number for KITs 1 and 2 (2.36 KIT violations), a statistically significant finding. The difference between KIT 3 and KITs 1 and 2 in the average number of KIT violations for those inspections which did not trigger a comprehensive inspection is also significantly different (1.78 for KIT 3 versus an average 1.41 for the other KITs).

Table 3.4: Average Number of KIT Violations for Triggering and Non-Triggering KITs, Previous and Study Periods (FCCH)

	Previous	Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р
Average KIT violations when a comprehensive was triggered (Number of inspections)	2.00 (76)	2.71 (45)	2.71 (107)	.001
Average KIT violations for inspections that did not trigger a comprehensive (Number of inspections)	1.33 (337)	1.52 (501)	1.78 (671)	.000

NOTE: Some comprehensive inspections were triggered by two Type A violations of non-KIT items, and are excluded from the above findings.

Percentage of KIT Indicators Cited At Least Once

One of the best ways to evaluate the relative usefulness of the KITs is to analyze the utility of each item on the KITs. Specifically, what percentage of the indicators included on each KIT did LPAs cite at least once during the comparison and study periods? If the percentage is large, that suggests a more practical and efficient tool, in that LPAs spend less time reviewing regulations rarely, if ever, cited. In other words, KIT items should be relevant as well as useful. As Table 3.5 below reveals, KIT 3 outperformed KITs 1 and 2 by a substantial margin in this respect; ninety-one percent of KIT 3 items were cited at least once, compared to 78% of KIT 1 items and 79% of KIT 2 items.

Table 3.5: Number and Percent of KIT Items Cited During at Least One KIT Inspections, Previous and Study Periods (FCCH)

	Previo	us Period	Study Period
	KIT 1	KIT 2	KIT 3
Number of KIT items cited	14	15	20
Total KIT items present*	18	19	21
Percent KIT items cited	78%	79%	95%

^{*}These counts were not generated within the KIT data; they are simply counts using Table 3.6 below. No statistical testing was possible. Some regulations were combined on the KITs but are counted as individual items in this table.

Frequency: Specific Violations

Finally, it is useful to compare how frequently the KITs identified and cited specific violations. Table 3.6 makes these comparisons, distinguishing items that appear on all three KITs from those that appear on two of the KITs and those that appear on only one KIT. The table also distinguishes zero tolerance items from non-zero tolerance items.

Table 3.6: KIT Items Present on KITs 1, 2, and 3, Previous and Study Periods (FCCH)

		Nun	nber of viol	ations	Perce	ent of violat	ions
	KIT item	KIT 1	KIT 2	KIT 3	KIT 1	KIT 2	KIT 3
On all three KITs	ZT 102417(g)(5)(A-B)	5	0	8	1%	-	1%
	ZT 102417(g)(4)(A)-(C)	11	10	25	2%	1%	2%
	ZT 102417(a)	6	5	9	1%	1%	1%
	ZT 102391(a)	0	0	1	-	-	0.1%
	102417(g)(4)	154	148	207	26%	17%	15%
	102417(g)(1)	92	164	13	15%	19%	1%
	102417(b)	13	18	22	2%	2%	2%
	102417(g)(3)	24	12	21	4%	1%	1%
	102416.5(a)	23	27	42	4%	3%	3%
	102370(d)(1)	35	52	51	6%	6%	4%
	102416(c)	157	211	235	26%	24%	17%
On two KITs	ZT 102370.1(a)	1	0		0.2%	-	
	ZT 102417(k)(1)	0	0		-	-	
	102421(b)	51	38		9%	4%	
	102417(c)	3	1		0.5%	0.1%	
	102417(g)(6)	0	1		-	0.1%	
	102416.5(c)		3	6		0.3%	0.4%
	102417(d)		29	38		3%	3%
	102417(g)(8)		166	188		19%	13%
On one KIT	ZT 102417(r)(1)	0			-		
	ZT 102417(k)(2)			1			0.1%
	ZT H&S 1597.58(c)(2)			0			-
	102417(g)(9)(A)(1)	22			4%		
	102423(a)(2)			35			2%
	102418(g)/(g)(1)			164			12%
	102419(d)			88			6%
	102418(g)(1)			74			5%
	H&S 1597.543			193			14%
	Total KIT violations	597	885	1,421	100%	100%	100%

With regard to the zero tolerance items, we see that item while ZT $102417(g)(4)(A)-(C)^{15}$ appears far more likely to be cited than any other ZT item across the board, as a percentage of KIT violations, all three KITs cited that ZT item just 1 to 2% of the time.

As for non-zero tolerance items that appear on all three of the KITs, it is worth noting that no item was cited more frequently on KIT 3 than on the other KITs (as a percentage of cited violations), and several were cited much less frequently on KIT 3. The individual items that stand out in this regard are:

 $^{^{15}}$ ZT 102417(g)(4)(A)-(C) – The licensee shall be present in the home and shall ensure that children in care are supervised at all times, the home shall be kept clean and orderly, with heating and ventilation for safety and comfort, and the home shall maintain telephone service.

- > 102417(g)(1)¹⁶ (KIT 1 15%; KIT 2 19%; and KIT 3 1%)
- > 102416(c)¹⁷ (KIT 1 26%; KIT 2 24%; and KIT 3 17%)

Two of the three KIT items present on just KIT 2 and KIT 3 were cited at similar rates, and the third common item was cited much more frequently on KIT 2 than KIT 3: 102417(g)(8)18 (19% by KIT 2 vs. 13% by KIT 3). KIT 3 items included five that were not on KITs 1 or 2. As a percentage of all KIT 3 violations, these five new items comprised fully 39% of those violations.

Figure 3.1 displays the relative frequencies of 14 common KIT items with the exception of 102417(g)(1); the general distribution pattern appears remarkably similar.¹⁹ This indicates the KITs are being used similarly during the KIT inspections, and KIT 3's electronic format did not unduly influence how LPAs performed their KIT inspections during the study period.

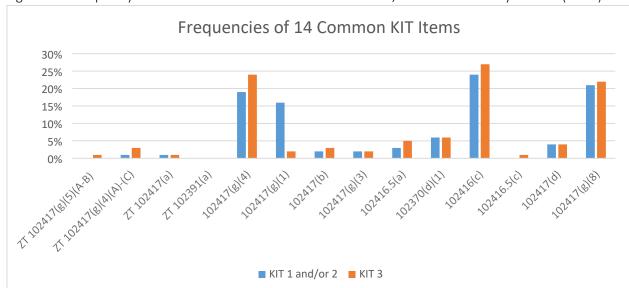


Figure 3.1: Frequency Distribution of Common KIT Item Violations, Previous and Study Periods (FCCH)

NOTE: These percentages are based on only the 14 items common to KIT 3 and KITs 1 and/or 2; percentages differ from those in Table 3.6 because these are based on 14 KIT items, not all possible KIT items. Please see Appendix Table 3.1 for supporting documentation.

In sum, while KIT 3 performs similarly to KITs 1 and 2 in some areas for KIT inspections occurring in family child care homes, it is statistically significantly different from the other two KITs in a few ways, namely the average number of KIT violations on KIT 3 and the percentage of KIT inspections triggering a comprehensive inspections. Additionally, the percent of individual KIT 3 items cited at least once during the comparison

¹⁶ 102417(g)(1) – The home shall be free from defects or conditions which might endanger a child. Fireplaces and open-face heaters shall be screened to prevent access by children. The home shall contain a fire extinguisher and smoke detector device which meet standards established by the State Fire Marshal.

¹⁷ 102416(c) – The licensee and other personnel as specified shall complete training on preventative health practices, including pediatric cardiopulmonary resuscitation and pediatric first aid, pursuant to Health and Safety Code Section 1596.866.

¹⁸ 102417(g)(8) – The home shall be free from defects or conditions which might endanger a child. Each family child care home shall have a current roster of children as specified in Health and Safety Code Section 1596.841.

 $^{^{19}}$ If an item was present on both KIT 1 and 2, the number of violations was averaged for the purposes of this figure

time periods was notably higher. With the five additional items, KIT 3 proves to be a statistically sound instrument to aid in the efficiency of the KIT inspection process in family day care homes.

In the next chapter, we review findings from the pilot test of the new KIT 3 used in Infant Child Care Centers.

Chapter 4: Infant Child Care Facilities

In this chapter, we describe the KIT 3 pilot test results as applied to Infant child care facilities (Infant). We compare KIT 3 pilot test results to those of KITs 1 and 2 from the same time period in the prior year, observing the tools' relative tendency to identify code violations and trigger comprehensive inspections.²⁰ Specifically, we examine:

- The relative frequency with which each tool identified at least one KIT item violation during an inspection and the total number of KIT and non-KIT violations during a KIT inspection
- The relative frequency with which each tool identified a zero tolerance violation
- > The relative frequency with which each tool triggered a comprehensive inspection
- ➤ The relative average number of violations that each tool identified—both in general and after distinguishing between KITs which trigger comprehensive inspections and KITs that did not trigger comprehensive inspections
- The relative *percentage of individual KIT items (rows)* on the KITs cited at least once during the study periods
- The relative frequency with which the tools identified *specific* violations, both in raw numbers and as a percentage of the total number of KIT citations, for just items present on KITs during the two comparison periods

Frequency: At Least One Violation

First, we observe the relative frequency with which each tool identified at least one violation during a KIT inspection. As Table 4.1 shows below, KIT 3 was 17% more likely to identify at least one violation: 29% of KIT 3 inspections had at least one KIT violation, compared to 12-19% of KIT 1 or KIT 2 inspections.

Table 4.1: Comparing Proportion of KIT Inspections with at Least One KIT Regulation Cited, Previous and Study Periods (Infant)

	Previous Period			Study	Period			
	KI	Ts 1	KI ⁻	Γ2	KI	T 3		
KIT Inspections	N	Percent	N	Percent	N	Percent	Total	Average
No KIT violations cited	104	88%	117	81%	170	71%	391	97%
At least one KIT violation cited	14	12%	28	19%	70	29%	112	3%
Total	118		145		140		403	

Frequency: Zero Tolerance Violations

As for zero tolerance violations, KIT 3 did not tend to cite such violations with the same regularity as had KITs 1 or 2. Specifically:

²⁰ Previous period dates: July 27 to Oct 30 2014; Study period dates: July 27 to Oct 30 2015

- ➤ KIT 1 Zero Tolerance violations: 4 of 18 KIT violations (22%)
- ➤ KIT 2 Zero Tolerance violations: 4 of 45 KIT violations (9%)
- ➤ KIT 3 Zero Tolerance violations: 4 of 126 KIT violations (3%)

Frequency: Comprehensive Inspection Trigger

How did KIT 3 compare to KITs 1 and 2 in terms of triggering comprehensive inspections? As Table 4.2 highlights, KIT 3 tended to trigger a comprehensive inspection slightly less frequently (3% vs. an average 5% with KITs 1 and 2).

Table 4.2: Number and Percent of KIT Inspections Which Triggered a Comprehensive Inspection, Previous and Study Periods (Infant)

	Previous Perio :				Stuc	ly Period		
		KIT 1	KIT 2		KIT 3			
	N	Percent	N	Percent	N	Percent	Total	Average
Triggered a comprehensive inspection	6	5%	4	3%	7	2.9%	17	3.6%
Didn't trigger a comp. inspection	112	95%	141	97%	233	97%	486	96.3%
Total	118		145		240		503	

Average Number of KIT Violations

Having looked at the relative frequency with which the KITs identified at least one violation, and how often they triggered comprehensive inspections, we now turn our attention to comparing the overall average number of violations that each KIT identified. As we can see in Table 4.3 below, the KITs performed fairly similarly, in that each type of comparison (average KIT violations, average KIT violations excluding zero tolerance items, and average number of all types of violations) reveals a steady increase in the number of violations, from KIT 1 to KIT 2 to KIT 3. In all cases, though, the increases were small and not significantly different. KIT 3 inspections were no more likely to identify poorly performing facilities more often than KITs 1 and 2. This finding may indicate that each KIT version is performing similarly in this aspect.

Table 4.3: Average Number of KIT Violations, for KIT Inspections with at Least One Violation, Previous and Study Periods (Infant)

study i erious (irruint)				
	Previou	s Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р
Average KIT violations per visit (Number of inspections)	1.29(14)	1.61(28)	1.86(70)	.231
Average KIT violations per visit, excluding ZT items (Number of inspections)	1.17(12)	1.65(26)	1.83(69)	.231
Average violations per KIT visit, all possible regulations (Number of inspections)	2.13(39)	2.32(57)	2.38(101)	.761

Triggered Comprehensive Inspections

Similarly, as Table 4.4 highlights below, when a comprehensive inspection was triggered, the same pattern emerges: the average number of KIT violations increased from KIT 1 to KIT 2 to KIT 3, but the averages were not statistically different from each other. Note that this lack of statistical significance may be due to the

small number of cases, or may be due to chance. Keep in mind that a comprehensive inspection can be triggered by just one Type A violation of a KIT or a non-KIT item; if that situation occurs frequently, the average number of violations during such KIT inspections would not necessarily increase a great deal.

Table 4.4: Average Number of KIT Violations for Triggering and Non-Triggering KITs, Previous and Study Periods (Infant)

	Previous	Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р
Average KIT violations when a comprehensive was triggered (Number of inspections)	1.5(4)	3(2)	3.43 (7)	.295
Average KIT violations for inspections that did not trigger a comprehensive (Number of inspections)	1.2(10)	1.5(26)	1.68 (63)	.340

Percentage of KIT Indicators Cited At Least Once

One of the best ways to evaluate the relative usefulness of the KITs is to analyze the utility of each item on the tools. Specifically, what percentage of the indicators included on each tool did LPAs cite at least once? If the percentage is large, that suggests a more efficient tool, in that LPAs spend less time reviewing regulations rarely, if ever, cited. In other words, KIT items should be relevant as well as useful.

As Table 4.5 below reveals, the KIT 3 out-performed the older KITs by a substantial margin in this respect; seventy-three of KIT 3 items were cited at least once, compared to 29% of KIT 1 items and 42% of KIT 2 items.

Table 4.5: Number and Percent of KIT Items Cited During at Least One KIT Inspections, Previous and Study Periods (Infant)

	Previous	Period	Study Period
	KIT 1	KIT 2	KIT 3
Number of KIT items cited	12	18	30
Total KIT items present*	42	43	41
Percent KIT items cited	29%	42%	73%

^{*}These counts were not generated within the KIT data; they are simply counts using Table 4.6 below. No statistical testing was possible. Some regulations were combined on the KITs but are counted as individual items in this table.

Frequency: Specific Violations

It is useful to compare how frequently each KIT identified a violation, and which KIT items were cited. Table 4.6 makes these comparisons, presenting the KIT items in such a way that the reader can tell if a given KIT item was on one, two, or all three KITs, and how frequently the item was cited on each of those KITs. The table also distinguishes zero tolerance items from non-zero tolerance items.

As a percentage of violations, LPAs cited zero tolerance items less frequently with KIT 3: just three percent of KIT 3 violations were of the one KIT 3 zero tolerance item: 101429(a)(1).²¹ This particular item was cited

 $^{^{21}}$ 101429(a)(1) – In addition to Section 101229, each infant shall be constantly supervised and under direct visual observation and supervision by a staff person at all times. Under no circumstances shall ANY infant be left unattended.

on all three KITs, and was a full 22% of all of KIT 1's violations. Seven percent of KIT 2's violations were of the only other zero tolerance item cited during either period: 101229(a)(1).²²

As for non-zero tolerance items that appear on all three of the KITs, it is worth noting that on nearly all items KIT 3 cited the item less frequently than KITs 1 and 2 had. In general, as a percentage of all KIT citations, KIT 3 tended to cite items at roughly the same or lower frequently:

- ➤ 101239(n)²³ (9% on KIT 2 vs 2% on KIT 3 (no violations noted on KIT 1))
- \triangleright 101239(f)(1)²⁴ (6% on KIT 1 vs 2% on KIT 2 and KIT 3)
- > 101416.2²⁵ (6% on KIT 1, 9%, on KIT 2, and 2% on KIT 3)

With respect to the items that only appear on two of the three KITs, few items were cited during those inspections. Regarding KIT 3 specifically, only one of the four common items with KIT 1 was cited, and as a percentage of violations on those KITs, KIT 1 was cited 11% and KIT 3 9% (101221(b)(8)).²⁶

KIT 3 included 14 new items, although one health and safety statute did not exist when KITs 1 and 2 were developed: H&S 1596.954,²⁷ requiring carbon monoxide monitors in all facilities. Fully 53% of violations cited during KIT 3 inspections were cited at least once. Four of the new KIT 3 items were never cited; CCL might consider removing them from KIT 3.

Table 4.6: KIT Items Present on KITs 1, 2, and 3, Previous and Study Periods (Infant)

		Num	Number of violations			Percent of violations		
	KIT item	KIT 1	KIT 2	KIT 3	KIT 1	KIT 2	KIT 3	
On all three KITs	ZT 101238(e)	0	0	0	-	-	-	
	ZT 101238(g)(2)	0	0	0	-	-	-	
	ZT 101200(a)	0	0	0	-	-	-	
	ZT 101229(a)(1)	0	3	0	-	7%	-	
	ZT 101429(a)(1)	4	1	4	22%	2%	3%	
	ZT 101161(a)	0	0	0	-	-	-	
	101238(g)	1	2	6	6%	4%	5%	
	101239(n)	0	4	2	-	9%	2%	
	101238.2(d)(2)	0	2	2	-	4%	2%	
	101239(f)(1)	1	1	2	6%	2%	2%	

 $^{^{22}}$ 101229(a)(1) – No child(ren) shall be left without the supervision of a teacher at any time, except as specified in Sections 101216.2(e)(1) and 101230(c)

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²³ 101239(n) – Furniture and equipment shall be maintained in good condition, free of sharp, loose, or pointed parts.

²⁴ 101239(f)(1) – Solid waste shall be stored, located and disposed of in a manner that will not transmit communicable diseases or odors, create a nuisance, or provide a breeding place or food source for insects or rodents. All containers used for storage of solid wastes, including moveable bins, shall have a tightfitting cover that is kept on; shall be in good repair; and shall be leak-proof and rodent-proof

²⁵ 101416.2 – Infant Care Teacher Qualifications and Duties

 $^{^{26}}$ 101221(b)(8) – Each record shall contain information including, but not limited to, the following: medical assessment, including ambulatory status as specified in Section 101220

²⁷ H&S 1596.954 – Facility has one or more functioning carbon monoxide detectors that meet statutory requirements.

	101238.2(e)	0	2	2	-	4%	2%
	101238(a)(1)	0	0	1	-	-	1%
	101170(e)(1)	0	4	1	-	9%	1%
	101216(f)	2	4	3	11%	9%	2%
	101212(b)*	0	0	0	-	-	-
	101227(a)(6)	0	1	3	-	2%	2%
	101439.1	1	0	1	6%	-	1%
	101438.3	0	0	1	-	-	1%
	101416.5	1	3	3	6%	7%	2%
	101427	0	0	2	-	-	2%
	101419.2	0	1	8	-	2%	6%
	101419.3	1	2	3	6%	4%	2%
	101416.2	1	4	3	6%	9%	2%
On two KITs	ZT 101170.1(a)	0		0	-		-
	101238(g)(1)	0	0		-	-	
	101226(e)(1)(A)	0	0		-	-	
	101239(o)	0	0		-	-	
	101239(e)(4)	1	0		6%	-	
	101238.3(b)	0	4		-	9%	
	101227(a)(18)	0	0		-	-	
	101239.2(a)	0	0		-	-	
	101239(q)	0	0		-	-	
	101229.1(a)(1)	2	3		11%	7%	
	101216.3(a)	0	0		-	-	
	101221(b)(5)	0	0		-	-	
	101438.2	0	0		-	-	
	101417	0	0		-	-	
	101161(a)	0		2	-		2%
	101221(b)(8)	2		11	11%		9%
	101439*	0		0	ı		-
On one KIT	ZT H&S 1596.8897 (g)		0			-	
	101227(a)(19)	1			6%		
	101217(a)(11)	0			-		
	101227(a)(15)		0			-	
	101439(h)(1)		2			4%	
	101439(h)(2)		0			-	
	101439(I)		0			-	
	101217(a)		2			4%	
	101217(b)		0			-	

101216.2(b)*			0			-
101217			1			1%
101226(e)*			0			-
101229.1(b)			9			7%
101238(a)			5			4%
101416.5(b)			9			7%
101416.2(b)			4			3%
101417(a)(6)*			0			-
101427(j)			9			7%
101439(d)(2)*			0			-
101439(h)(4)			2			2%
101221(a)			2			2%
H&S 1596.954			24			19%
101438.3(b)			1			1%
Total KIT violations	18	45	126	100%	100%	100%

^{*}KIT items CCLD could consider removing from KIT 3.

Finally, Figure 4.1 allows the reader to make a direct comparison of the 27 KIT items common to all three KITs; the general distribution pattern does not appear similar.²⁸ This is a finding difficult to interpret. We would like to see common KIT items cited relatively frequently regardless of the KIT, indicating that the electronic format did not have undue influence on how each KIT is used during the inspection. In this case, four common items were only cited during KIT 3 inspections.²⁹ While this may indicate CC LPAs treated the KIT 3 differently during those inspections, CC LPAs did not display this pattern when using KIT 3 forms in other child care facilities.

 $^{^{28}}$ If an item was present on both KIT 1 and 2, the number of violations was averaged for the purposes of this figure 29 101238(a)(1): The licensee takes measures to keep the facility free of flies, other insects, and rodents; 101438.3: The facility shall have indoor activity space for infants that is physically separate from space used by preschool child care center/school-age child care center components, and meets the requirements of 101438.3(a) – (e); 101427: The facility has an individual feeding plan for each infant that meets the requirements of 101427(b)(1) – (5); 101161(a): The licensee does not exceed the conditions, limitations, and capacity specified on the license.

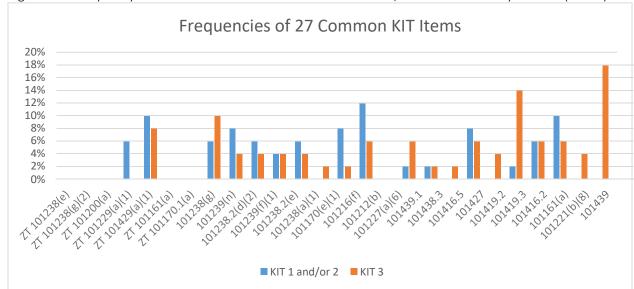


Figure 4.1: Frequency Distribution of Common KIT Item Violations, Previous and Study Periods (Infant)

NOTE: These percentages are based on only the 27 items common to KIT 3 and KITs 1 and/or 2; percentages differ from those in Table 4.6 because these are based on 27 KIT items, not all possible KIT items. Please see Appendix Table 4.1 for supporting documentation

In summary, KIT 3 added 14 new regulatory violations to the tool, four of which were never cited and might be considered candidates for removal going forward. In terms of their relative performance, KIT 3 outperformed KITs 1 and 2 in terms of the number of KIT violations cited and the percentage of inspections that triggered comprehensive inspections (barely). Furthermore, KIT 3 appears to be a much more efficient tool: the percentage of KIT 3 items that LPAs cited at least once was roughly 30-40% greater than on KITs 1 and 2. However, while KIT 3 appeared to generally outperform KITS 1 and 2 on the other criteria as well, the differences tended to be small and not statistically significant. Finally, LPAs cited identical KIT items at very different rates across the three KITs—an unusual result that we find difficult to interpret. In general, then, while the Infant Center results generally favor KIT 3, we cannot say this with as much confidence as we did with respect to Family Child Care Homes.

In the next chapter, we present pilot test results as they pertain to School Age Child Care Centers.

Chapter 5: School Age Child Care Facilities

In this chapter, we describe the KIT 3 pilot test results as applied to School Age child care facilities (School Age). We compare KIT 3 pilot test results to those of KITs 1 and 2 from the same time period in the prior year, observing the tools' relative tendency to identify code violations and trigger comprehensive inspections.³⁰ Specifically, we examine:

- The relative frequency with which each tool identified at least one KIT item violation during an inspection and the total number of KIT and non-KIT violations during a KIT inspection
- The relative frequency with which each tool identified a zero tolerance violation
- > The relative frequency with which each tool triggered a comprehensive inspection
- ➤ The relative *average number of violations* that each tool identified—both in general and after distinguishing between KITs which trigger comprehensive inspections and KITs that did not trigger comprehensive inspections
- The relative *percentage of individual KIT items (rows)* on the KITs cited at least once during the study periods
- The relative frequency with which the tools identified *specific* violations, both in raw numbers and as a percentage of the total number of KIT citations, for just items present on KITs during the two comparison periods

Frequency: At Least One Violation

First, we observe the relative frequency with which each tool identified at least one violation during a KIT inspection. As Table 5.1 shows below, KIT 3 was not statistically more or less likely to cite at least one violation.

Table 5.1: Comparing Proportion of KIT Inspections with at Least One KIT Regulation Cited, Previous and Study Periods (School Age)

	Previous Period				Study	Study Period			
	KIT	Ts 1	K	IT 2	K	IT 3			
KIT Inspections	N	Percent	N	Percent	N	Percent	Total	Average	
No KIT violations cited	98	84%	100	78%	133	78%	331	80%	
At least one KIT violation cited	19	16%	28	22%	37	22%	84	20%	
Total	117		128		170		415		

Frequency: Zero Tolerance Violations

What about zero tolerance violations? We see that none of the KITs identified zero tolerance violations very often, and that eight percent of KIT violations for all three KITs were zero tolerance violations.

 $^{^{30}}$ Previous period dates: July 27 to Oct 30 2014; Study period dates: July 27 to Oct 30 2015

- ➤ KIT 1 Zero Tolerance violations: 2 of 24 KIT violations (8%)
- ➤ KIT 2 Zero Tolerance violations: 3 of 40 KIT violations (8%)
- ➤ KIT 3 Zero Tolerance violations: 4 of 52 KIT violations (8%)

Frequency: Comprehensive Inspection Trigger

How did KIT 3 compare to KITs 1 and 2 in terms of triggering comprehensive inspections? As Table 5.2 highlights, KIT 3 triggered a comprehensive inspection much less frequently: Nine percent of KITs 1 and 2 inspections triggered a comprehensive, compared to three percent when LPAs used KIT 3. While this seems like a big difference, it is not a statistically significant one; due to the small number of observations in the data, the difference could have been a function of chance.

Table 5.2: Number and Percent of KIT Inspections Which Triggered a Comprehensive Inspection, Previous and Study Periods (School Age)

, (3 /	Previous Pe			d	Stud	y Period			
	KIT 1			KIT 2	ŀ	KIT 3			
	N	Percent	N	Percent	Ν	Percent	Total	Average	
Triggered a comprehensive inspection	2	11%	2	7%	1	3%	5	6%	
Didn't trigger a comp inspection	17	89%	26	93%	36	97%	79	94%	
Total	19		28		37		84		

Average Number of KIT Violations

Having looked at the relative frequency with which the KITs identified at least one violation, and how often comprehensive inspections are triggered, we now turn our attention to comparing the KITs with respect to the overall number of violations that each tool identified. As we can see in Table 5.3 below, KIT 3 does not statistically differ from KITs 1 or 2 on these dimensions. KIT 3 inspections were no more likely to identify poorly performing facilities more often than KITs 1 and 2. This finding may indicate that each KIT version is performing similarly in this aspect.

Table 5.3: Average Number of KIT Violations, for KIT Inspections with at Least One Violation, Previous and Study Periods (School Age)

	Previous	Period	Study Period		
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р	
Average KIT violations per visit (Number of inspections)	1.32 (19)	1.36 (28)	1.43 (37)	.912	
Average KIT violations per visit, excluding ZT items (Number of inspections)	1.28 (18)	1.4 (25)	1.44 (34)	.866	
Average violations per KIT visit, all possible regulations (Number of Inspections)	1.91 (33)	2.09 (47)	1.73 (56)	.457	

Triggered Comprehensive Inspections

As Table 5.4 highlights below, there is not much of a difference between KIT 3 and KITs 1 and 2 in the number of violations cited during inspections that triggered a comprehensive inspection. The average number of KIT violations cited during a triggering visit is not statistically significantly different across the two time periods. Likewise, the difference in the average number of violations cited during non-triggering

KIT visits is also not statistically significant. The low number of KIT-triggered comprehensive inspections in this study should be interpreted with caution.

Table 5.4: Average Number of KIT Violations for Triggering and Non-Triggering KITs, Previous and Study Periods (School Age)

	Previous	S Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р
Average KIT violations when a comprehensive was triggered (Number of inspections)	1.00 (2)	2.0 (2)	1.0 (1)	.872
Average KIT violations for inspections that did not trigger a comprehensive (Number of inspections)	1.35 (17)	1.14 (29)	1.44 (35)	.625

NOTE: Some comprehensive inspections were triggered by violations of non-KIT items, and are excluded from the above values.

Percentage of KIT Indicators Cited At Least Once

One of the best ways to evaluate the relative usefulness of the KITs is to analyze the utility of each KIT item. Specifically, what percentage of the indicators included on each tool did LPAs cite at least once during the comparison and study periods? If the percentage is large, that suggests a more efficient tool, in that LPAs spend less time reviewing regulations rarely, if ever, cited. In other words, KIT items should be relevant as well as useful. As Table 5.5 below reveals, KIT 2 and KIT 3 items were cited at functionally the same amount: 58% to 59% of items on those KITs. In contrast, just 42% of KIT 1 items were ever cited during the previous period.

Table 5.5: Number and Percent of KIT Items Cited During at Least One KIT Inspections, Previous and Study Periods (School Age)

, ,					
	Previous	s Period	Study Period		
	KIT 1	KIT 2	KIT 3		
Number of KIT items cited	14	18	20		
Total KIT items present*	33	31	34		
Percent KIT items cited	42%	58%	59%		

^{*}These counts were not generated within the KIT data; they are simply counts using Table 5.6 below. No statistical testing was possible. Some regulations were combined on the KITs but are counted as individual items in this table.

Frequency: Specific Violations

Finally, it is useful to compare how frequently the KITs identified and cited specific types of violations. Table 5.6 makes these comparisons, distinguishing items that appear on all three KITs from those that appear on two of the KITs and those that appear on only one KIT. The table also distinguishes zero tolerance items from non-zero tolerance items.

Table 5.6: KIT Items Present on KITs 1, 2, and 3, Previous and Study Periods (School Age)

Table 5.6: KIT It	tems Present on KITs 1, 2,			•				
		Num	ber of viola [.]			ent of viola	ations	
	KIT item	KIT 1	KIT 2	KIT 3	KIT 1	KIT 2	KIT 3	
On all three	ZT 101238(e)	0	0	0	-	-	-	
KITs	ZT 101238(g)(2)	0	0	0	-	-	-	
	ZT 101229(a)(1)	2	2	3	8%	5%	6%	
	ZT 101200(a)	0	0	0	-	-	-	
	ZT 101161(a)	0	1	1	-	3%	2%	
	101238(g)	2	3	1	8%	8%	2%	
	101238(g)(1)*	0	0	0	-	-	-	
	101239(n)	0	2	1	-	5%	2%	
	101238.2(d)(2)	1	1	0	4%	3%	-	
	101239(e)(4)	1	3	2	4%	8%	4%	
	101238.3(b)	0	3	1	-	8%	2%	
	101227(a)(18)	0	1	0	-	3%	-	
	101239(f)(1)	2	0	3	8%	-	6%	
	101239.2(a)	1	1	1	4%	3%	2%	
	101238.2(e)	1	2	2	4%	5%	4%	
	101170(e)(1)	1	2	2	4%	5%	4%	
	101216(f)	7	3	4	29%	8%	8%	
	101212(b)	1	3	0	4%	8%	-	
	101161(a)	1	0	0	4%	-	-	
	101227(a)(6)	0	4	1	-	10%	2%	
	101516.5	0	1	0	-	3%	-	
On two KITs	ZT 101170.1(a)	0		0	-		-	
	ZT H&S 1596.8897(g)		0	0		-	-	
	101226(e)(1)(A)	0	0		-	-		
	101239(o)	0	0		-	-		
	101239(q)	0	0		-	-		
	101238(a)(1)	1	3		4%	8%		
	101216.3(a)	0	0		-	-		
	101221(b)(5)	2	0		8%	-		
	101529.1	0	2		-	5%		
	101229.1(a)(1)	0		6	-		12%	
	101217(a)(11)	0		1	-		2%	
	101217(a)(6)		3	1		8%	2%	
On one KIT	101227(a)(19)	0			-			
	101227(a)(15)		0			-		
	101221(b)(8)	1			4%			
	101216(g)(1)			3			6%	
	101217(a)			0			-	
	101221(a)			3			6%	
	101238(a)			2			4%	
	101538.3(b)			0			-	
	101170(e)(2)			1			2%	
	101516.5(b)			0			-	

H&S 1596.954			13		25%
Total KIT violations	24	40	52		

^{*} KIT item CCLD could consider removing from KIT 3

Of the eight new items added to KIT 3, three were never cited during the study period, making them candidates for removal. Furthermore, one new item comprised fully 25% of all KIT 3 violations: the newly implemented Health and Safety statute 1596.954, which requires carbon monoxide detectors in day care centers.

Figure 5.1 displays the relative frequencies of 26 common KIT items; the general distribution pattern appears somewhat dissimilar.³¹ However, the number of violations of any one KIT item is quite small (typically cited less than four times for a given KIT), and readers should use caution when interpreting the results. Due to the small number of violations, we cannot know the impact of using KIT 3's electronic format during KIT inspections.

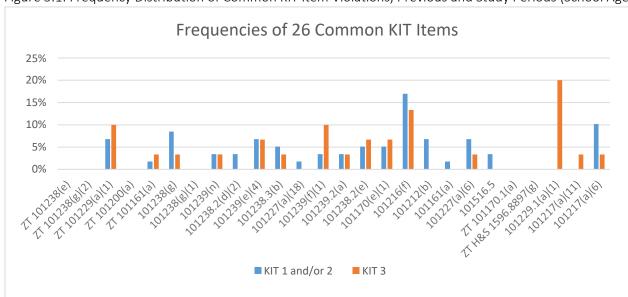


Figure 5.1: Frequency Distribution of Common KIT Item Violations, Previous and Study Periods (School Age)

NOTE: These percentages are based on only the 26 items common to KIT 3 and KITs 1 and/or 2; percentages differ from those in Table 5.6 because these are based on 26 KIT items, not all possible KIT items. Please see Appendix Table 5.1 for supporting documentation.

In conclusion, KIT 3 does not tend to differ significantly from KITs 1 and 2 with regard to the evaluative criteria that we have examined. Thus, while we cannot say with any confidence that KIT 3 outperformed KITs 1 and 2, we can say that it performed at least as well—indicating that KIT 3 is a viable alternative.

Thus concludes our analyses of the KIT 3 Pilot as it relates to Child Care facilities. In the next section of the report, we present pilot test results as they pertain to Children's Residential facilities.

 $^{^{31}}$ If an item was present on both KIT 1 and 2, the number of violations was averaged for the purposes of this figure

SECTION 3: CHILDREN'S RESIDENTIAL FACILITIES

In this section of the report, we discuss the pilot test results as they relate to Children's Residential Facilities. We begin, in Chapter 6, with a discussion of Foster Family Homes. Then, in Chapter 7, we briefly discuss several facility types that have very small sample sizes when it comes to the number of inspections performed during the study period, and especially with regard to the number of violations cited during those periods (Small Family Homes, Adoption Agencies, Foster Family Agencies, Crisis Nurseries, and Transitional Housing Placement Programs). Given the small numbers of inspections and citations in those five facility types, it is not feasible to conduct large-scale quantitative analyses. Thus, in Chapter 7, our discussion is limited with respect to these facility types.

Chapter 6: Foster Family Homes

In this chapter, we describe the KIT 3 pilot test results as applied to Foster Family Homes (FFH). We compare KIT 3 pilot test results to those of KITs 1 and 2 from the same time period in the prior year, observing the tools' relative tendency to identify code violations and trigger comprehensive inspections.³² Specifically, we examine:

- The relative frequency with which each tool identified at least one KIT item violation during an inspection and the total number of KIT and non-KIT violations during a KIT inspection
- > The relative frequency with which each tool identified a zero tolerance violation
- > The relative frequency with which each tool triggered a comprehensive inspection
- ➤ The relative *average number of violations* that each tool identified—both in general and after distinguishing between KITs which trigger comprehensive inspections and KITs that did not trigger comprehensive inspections
- The relative *percentage of individual KIT items (rows)* on the KITs cited at least once during the study periods
- The relative frequency with which the tools identified *specific* violations, both in raw numbers and as a percentage of the total number of KIT citations, for just items present on KITs during the two comparison periods

Frequency: At Least One Violation

First, we observe the relative frequency with which each tool identified at least one violation during a KIT inspection. As Table 6.1 shows below, KIT 3 cited at least one violation a little more frequently than had KITs 1 and 2 (35% to 30% each, respectively), but that higher percent was not statistically significant.

Table 6.1: Comparing Proportion of KIT Inspections with at Least One KIT Regulation Cited, Previous and Study Periods (FFH)

	Previous Period			Study I	Study Period			
	KIT	s 1	KI	T 2	KIT 3			
KIT Inspections	N	Percent	N	Percent	N	Percent	Total	Average
No KIT violations cited	54	70%	28	70%	43	65%	125	68%
At least one KIT violation cited	23	30%	12	30%	23	35%	58	32%
Total	77		40		66		183	

Frequency: Zero Tolerance Violations

There are no zero tolerance items on the KIT 3 inspection form for Foster Family Homes.

Frequency: Comprehensive Inspection Trigger

How did KIT 3 compare to KITs 1 and 2 in terms of triggering comprehensive inspections? As Table 6.2 highlights, KIT 3 tended to trigger a comprehensive inspection slightly more frequently (3.2% vs. 2.6% with

³² Previous period dates: July 27 to Oct 30 2014; Study period dates: July 27 to Oct 30 2015

KIT 1 [no comprehensive inspections were triggered when KIT 2 was used]). This difference in frequency between KIT 3 and KIT 1 is statistically significant, although one could argue that it is not really a substantively meaningful difference given the small number of instances.

Table 6.2: Number and Percent of KIT Inspections Which Triggered a Comprehensive Inspection, Previous and Study Periods (FFH)

	Previous Peri				Stud	ly Period		
	KIT 1		KIT 2		KIT 3			
	N	Percent	N	Percent	N	Percent	Total	Average
Triggered a comprehensive inspection	2	2.6%	0	0	6	3.2%	8	4.4%
Didn't trigger a comp. inspection	75	97.4%	40	100%	60	96.8%	297	95.6%
Total	77		40		66		305	

Average Number of KIT Violations

Having looked at the relative frequency with which the KITs identified at least one violation and how often they triggered comprehensive inspections, we now turn our attention to comparing the overall average number of violations that each KIT identified. As we can see in Table 6.3 below, while the average number of violations increased from KIT 1 to KIT 2 to KIT 3—both for average KIT item violations and for all violation types—the increases were small and not statistically significant. KIT 3 inspections were no more likely to identify poorly performing facilities more often than KITs 1 and 2. This finding may indicate that each KIT version is performing similarly in this aspect.

Table 6.3: Average Number of KIT Violations, for KIT Inspections with at Least One Violation, Previous and Study Periods (FFH)

, ,				
	Previous	Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р
Average KIT violations per visit (Number of inspections)	1.26 (23)	1.50 (12)	1.61 (23)	.351
Average violations per KIT visit, all possible regulations (Number of inspections)	1.59 (37)	2.11 (18)	2.41 (29)	.109

Triggered Comprehensive Inspections

During the previous period, KIT 1 only triggered one comprehensive inspection. The LPA cited three KIT violations during that inspection. By contrast, during the KIT 3 study period, there were five KIT-triggered comprehensive inspections, with an average number of 3.2 KIT violations. However, this difference is not statistically significant (meaning we cannot definitively distinguish the effect from zero). This lack of statistical significance may be due to the small number of cases, or may be due to chance.

Table 6.4: Average Number of KIT Violations for Triggering and Non-Triggering KITs, Previous and Study Periods (FFH)

	Previous Period		Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	
Average KIT violations when a comprehensive was triggered (Number of inspections)	3.00 (1)	n/a	3.20 (5)	
Average KIT violations for inspections that did not trigger a comprehensive (Number of inspections)	1.18 (22)	n/a	1.17 (18)	

NOTE: Some comprehensive inspections were triggered by violations of non-KIT items, and are excluded from the above findings. No comprehensive inspection was triggered by KIT 2 during the previous period.

Percentage of KIT Indicators Cited At Least Once

One of the best ways to evaluate the relative usefulness of the KITs is to analyze the utility of each item on the tools. Specifically, what percentage of the indicators included on each tool did LPAs cite at least once? If the percentage is large, it suggests a more efficient tool, in that LPAs spend less time reviewing regulations rarely, if ever, cited. In other words, KIT items should be relevant as well as useful. As Table 6.5 below reveals, KIT 3 outperformed the older KITs by a substantial margin in this respect; 73% of KIT 3 items were cited at least once, compared to 31% of KIT 1 items and 25% of KIT 2 items.

Table 6.5: Number and Percent of KIT Items Cited During at Least One KIT Inspections, Previous and Study Periods (FFH)

	Previous	Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	
Number of KIT items cited	8	8	16	
Total KIT items present*	26	32	22	
Percent KIT items cited	31%	25%	73%	

^{*}These counts were not generated within the KIT data; they are simply counts using Table 6.6 below. No statistical testing was possible. Some regulations were combined on the KITs but are counted as individual items in this table.

Frequency: Specific Violations

It is useful to compare how frequently each KIT identified a violation, and which KIT items were cited. Table 6.6 makes these comparisons, presenting the KIT items in such a way that the reader can tell if a given KIT item was present on one, two, or all three KITs, and how frequently the item was cited on each of those KITs

As a percentage of violations, LPAs cited two items with similar frequencies:

- > 89787(b)³³ (17%, 19%, and 15% on KITs 1, 2, and 3, respectively)
- > 89405(a)³⁴ (14%, 19%, 16%, KITs 1, 2, and 3)

LPAs cited three common KIT items three times more often on KITs 1 or 2 versus KIT 3:

³³ 89387(b):The home is clean, safe, sanitary, and in good repair

³⁴ 89405(a): Caregivers have 12 hours foster parent training prior to placement, and 8 hours annual training thereafter

- > 89387(d)³⁵ (7% on KIT 1, 2% on KIT 3)
- > 89475(b)³⁶ (7% on KIT 1, 2% on KIT 3)
- > 89387(a)(1)³⁷ (6% on KIT 2, 2% on KIT 3)

KIT 3 included four new items; three were cited at least once (the most often cited was the new Health and Safety statute requiring carbon monoxide monitors, H&S 1596.954).

Table 6.6: KIT Items Present on KITs 1. 2. and 3. Previous and Study Periods (FFH)

Previous Period Study Period Study Period Study Period Study Period								
		Number of violations			Percent of KIT violations			
	KIT item	KIT 1	KIT 2	KIT 3	KIT 1	KIT 2	KIT 3	
On all three	89387(d)	2	0	2	7%	-	2%	
KITs	89378(a)*	0	0	0	-	-	-	
	89410(a)	2	0	4	7%	-	4%	
	89387(a)(7)	0	0	3	-	-	3%	
	89387(b)	5	3	13	17%	19%	15%	
	89387.2(a)	2	1	1	7%	6%	1%	
	89376(a)*	0	0	0	-	-	-	
	89319	0	2	6	-	13%	7%	
	89405(a)	4	3	14	14%	19%	16%	
	89405(b)	9	3	22	31%	19%	25%	
	89475(b)	2	0	2	7%	-	2%	
On two KITs	89372(a)(10)(B)		0			-		
	89372(a)(9)		0			-		
	89372(a)(5)		0			-		
	89370(a)(6)	0	0		-	-		
	89370(a)(3)	0	0		-	-		
	11165.5PC	0	0		-	-		
	89387.2(a)(1)*	0		0	-			
	89372(a)	0		1	-		1%	
	89468(a)	0		1	-		1%	
	89387(n)		0	4		-	4%	
	89387(a)(1)		1	2		6%	2%	
	89361(a)		2	0		13%		
On one KIT	89387(h)	3			10%			
	89387.2(a)	0			-			
	89372(a)(4)	0			-			
	89361(a)(4)	0			-			
	89361(a)(9)	0			-			
	89387(k)		0			-		
	89387(a)(4)		1			6%		
	89323(a)		0			-		

³⁵ 89387(d): Swimming pools and all other bodies of water are inaccessible to children who are under the age of 10 years old or who are disabled

³⁶ 89475(b): Caregiver maintains age appropriate first aid supplies

³⁷ 89387(a)(1): No more than two children share a bedroom

89323(a)(1)		0			-	
89372(a)(1)		0			-	
89372(a)(10)(B)(8)		0			-	
89370(a)			0			-
89219(d)			1			1%
89405(b)(1)			1			1%
H&S 1503.2			13			15%
Total KIT violations	29	16	89	100%	100%	100%

^{*} KIT item CCLD could consider removing from KIT 3

Figure 6.1 allows the reader to make a direct comparison of the 17 KIT items common to all three KITs. ³⁸ For items cited by all KITs, the distribution pattern is quite similar. Three common items were never cited during any KIT inspection, and only four items were only cited during KIT 3 inspections. With these exceptions, the relatively similar distribution patterns may indicate the electronic format did not have undue influence on the use of KIT 3 during the inspection.

Frequencies of 17 common KIT items

35%
30%
25%
20%
15%
10%
5%
0%

Spanda Barre St. 1/2 KIT 3

Figure 6.1. Frequency Distribution of Common KIT Item Violations, Previous and Study Periods (FFH)

NOTE: These percentages are based on only the 17 items common to KIT 3 and KITs 1 and/or 2; percentages differ from those in Table 6.6 because these are based on 17 KIT items, not all possible KIT items. Please see Appendix Table 6.1 for supporting documentation.

In summary, KIT 3 included four new regulatory violations to the tool, three of which were cited at least once. Across most of the evaluation criteria we have measured, KIT 3 did not differ statistically from KITs 1 and 2. However, if nothing else, KIT 3 appears to be a much more efficient tool: the percentage of KIT 3 items that LPAs cited at least once during the pilot period was more than 40 percentage points higher than for KITs 1 or 2 during comparable periods.

Next, in Chapter 7, we briefly discuss our limited findings as they relate to several Children's Residential facility types that LPAs visited infrequently during the study period and for which they cited very few regulatory violations.

 $^{^{38}}$ If an item was present on both KIT 1 and 2, the number of violations was averaged for the purposes of this figure

Chapter 7: Specialized Children's Residential Facilities with Small Pilot Study Sample Sizes

In this chapter, we briefly discuss the Phase Two pilot test results regarding Children's Residential facility types that LPAs visited relatively infrequently during the KIT 3 pilot study period and in comparable KIT 1 or KIT 2 periods (in fact, CCLD did not create KIT 2 forms for these facility types): Small Family Homes, Adoption Agencies, Foster Family Agencies, Crisis Nurseries, and Transitional Housing Placement Programs.

We begin by discussing the 154 Small Family Homes in the state, which was the Children's Residential facility type in this category with the most visits during the study period (relatively speaking): LPAs conducted 46 KIT 3 inspections during the study period, and 31 visits during the comparable KIT 1 period—far more than they conducted in Adoption Agencies, Foster Family Agencies, Crisis Nurseries or Traditional Housing Placement Programs. As Table 7.1 highlights below, in Small Family Homes KIT 3 visits produced at least one cited violation 13% of the time, a ten-percentage point increase over the comparable KIT 1 period visits. Four individual KIT 3 items were cited, compared to only one KIT 1 item. This difference is 12 percentage points higher.

These results suggest that the KIT 3 tool improved the efficiency and overall effectiveness of the inspection process, relative to KIT 1. However, these results should be interpreted with extreme caution; the number of violations in both periods was very small—meaning these differences between KIT 1 and 3 are nowhere close to statistically significant.

Table 7.1: Small Family Homes Inspection and Violations Frequencies

	KIT 1	KIT 3
N visits	31	46
N KIT violations	1	4
N total violations	4	6
Percent KIT/comp visit with at least one KIT violation cited	3%	13%
N triggering Comprehensive Visits	0	1*
N KIT items cited	1	4
Number of KIT items	21	24
Percent KIT items cited	5%	17%

^{*}Triggered by two Type A violations

When it comes to the 242 Foster Family Agencies in the state, there are a few more data points to examine, but not many. As Table 7.2 displays below, in Foster Family agencies, LPAs conducted eight inspections during the KIT 1 period, producing five KIT violations. Thirteen percent of the individual 24 KIT 3 items were cited. By contrast, LPAs conducted five inspections of such facility types during the KIT 3 period, resulting in zero KIT violations. Again, nothing can really be made of these results, given the extremely small numbers.

Table 7.2: Foster Family Agencies Inspection and Violations Frequencies

	KIT 1	KIT 3
N visits	8*	5
N KIT violations	5	0
N total violations	6	1
Percent KIT/comp visit with at least one KIT violation cited	24%	0%
N triggering KIT visits	0	0
N KIT items cited	3	0
Number of KIT items	24	26
Percent KIT items cited	13%	0%

^{*}Two additional KIT visits were noted in FAS but only Certified Family Home-related deficiencies were recorded; those two KIT visits are not included in this number of KIT 1 visits.

Moving now to a discussion of Adoption Agencies, we cannot draw conclusions regarding the performance of KIT 3, relative to KIT 1, because LPAs only conducted three KIT 1 period visits and one KIT 3 period visit—none of which resulted in any cited KIT violations.

As for the five Crisis Nurseries in the state, there is even less to report. LPAs conducted two visits during the KIT 1 period, resulting in zero violations, and they conducted one visit during the KIT 3 period, resulting in one violation.

The story is much the same with regard to the 90 Transitional Housing Placement Programs in California. LPAs conducted a total of six inspections during the KIT 1 period and two during the KIT 3 period, none of which resulted in a KIT violation.

In sum, when it comes to the specialized Children's Residential facilities in the state, we simply do not have enough data to draw any conclusions about the relative utility or efficacy of KIT 3, relative to earlier tools.

SECTION 4: ADULT AND SENIOR CARE FACILITIES

In this section, we discuss KIT 3 pilot test results with respect to the Adult and Senior Care facility types that we examined during Phase Two of the pilot data collection. In Chapter 8, we discuss Adult Residential facilities, and in Chapter 9, we discuss Adult Day Centers. Finally, in Chapter 10, we discuss specialized Adult and Senior Care facilities that make up a relatively small percentage of adult facilities in the state: Social Rehabilitation facilities, Residential Facilities for Those with Special Health Care Needs, and for those who are Chronically III. During the Phase Two KIT 3 Pilot data collection period and comparable KIT 1 and 2 periods, LPAs conducted relatively few inspections of these facility types, and cited even fewer violations—rendering large-scale data analyses infeasible. Thus, as was the case with regard to specialized Children's Residential facilities for which there were few data points, our discussion is limited as it relates to such facility types.

Chapter 8: Adult Residential Facilities

In this chapter, we describe the Phase Two KIT 3 Pilot test results as applied to Adult Residential facilities (A Res). We compare KIT 3 Pilot test results to those of KITs 1 and 2 from the same time period in the prior year, observing the tools' relative tendency to identify code violations and trigger comprehensive inspections.³⁹ Specifically, we examine:

- The relative frequency with which each tool identified at least one KIT item violation during an inspection and the total number of KIT and non-KIT violations during a KIT inspection
- The relative frequency with which each tool identified a zero tolerance violation
- > The relative frequency with which each tool triggered a comprehensive inspection
- ➤ The relative *average number of violations* that each tool identified—both in general and after distinguishing between KITs which trigger comprehensive inspections and KITs that did not trigger comprehensive inspections
- The relative *percentage of individual KIT items (rows)* on the KITs cited at least once during the study periods
- The relative frequency with which the tools identified *specific* violations, both in raw numbers and as a percentage of the total number of KIT citations, for just items present on KITs during the two comparison periods

Frequency: At Least One Violation

First, we observe the relative frequency with which each tool identified at least one violation during a KIT inspection. As Table 8.1 shows below, KIT 3 was 17% more likely to identify at least one KIT item violation (39% of the time vs. an average 22% of the time).

Table 8.1: Comparing Proportion of KIT Inspections with at Least One KIT Regulation Cited, Previous and Study Periods (A Res)

		Previous	Period		Study	Study Period			
	KIT	Γ1	KIT 2		KIT 3				
KIT Inspections	N	Percent	N	Percent	N	Percent	Total	Average	
No KIT violations cited	254	73%	302	83%	360	61%	884	68%	
At least one KIT violation cited	96	27%	65	17%	227	39%	421	32%	
Total	350		367		587		1,305		

Frequency: Zero Tolerance Violations

What about zero tolerance violations? We see that none of the KITs identified zero tolerance violations very often, and that KIT 3 performs very similarly to KITs 1 and 2 in this respect (11% percent of the time vs. 13% of the time).

³⁹ Previous period dates: July 27 to Oct 302014; Study period dates: July 27 to Oct 30 2015

- ➤ KIT 1 Zero Tolerance items cited: 22 of 158 KIT violations (14%)
- ➤ KIT 2 Zero Tolerance items cited: 11 of 90 KIT violations (12%)
- ➤ KIT 3 Zero Tolerance items cited: 45 of 425 KIT violations (11%)

Frequency: Comprehensive Inspection Trigger

How did the KIT 3 compare to KITs 1 and 2 in terms of triggering comprehensive inspections? As Table 8.2 highlights, KIT 3 tended to trigger a comprehensive inspection slightly more frequently, but this difference in frequency between KIT 3 and the other KITs is not statistically significant.

Table 8.2: Number and Percent of KIT Inspections Which Triggered a Comprehensive Inspection, Previous and Study Periods (A Res)

		Previou	d	Stuc	ly Period			
		KIT 1	KIT 2		1	KIT 3		
	Ν	Percent	Ν	Percent	Ν	Percent	Total	Average
Triggered a comprehensive inspection	25	7%	20	5%	55	9%	100	7%
Didn't trigger a comp. inspection	325	93%	347	95%	531	91%	1,203	93%
Total	350		367		586		1,303	

Average Number of KIT Violations

Having looked at the relative frequency with which the KITs identified at least one violation, both in general and in terms of zero tolerance items, we now turn our attention to comparing the KITs with respect to the overall number of violations that each tool identified, on average. As we can see in Table 8.3 below, KIT 3 statistically tended to identify more violations than the other KITs, both when we include zero tolerance regulations in the calculation and when we do not. However, when we include both KIT and non-KIT violations, the slightly higher average number of violations found during KIT 3 visits is not statistically significantly different. KIT 3 inspections were no more likely to identify poorly performing facilities more often than KITs 1 and 2. This finding may indicate that each KIT version is performing similarly in this aspect.

Table 8.3: Average Number of KIT Violations, for KIT Inspections with at Least One Violation, Previous and Study Periods (A Res)

	Previou	ıs Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	p
Average KIT violations per visit (Number of inspections)	1.64 (96)	1.38 (64)	1.88 (226)	.003
Average KIT violations per visit, excluding ZT items (Number of inspections)	1.55 (88)	1.33 (60)	1.79 (212)	.004
Average violations per KIT visit, all possible regulations (Number of inspections)	2.80 (199)	2.58 (160)	3.04 (316)	.196

Triggered Comprehensive Inspections

As Table 8.4 highlights below, the starkest difference between KIT 3 and KITs 1 and 2 is in the number of violations cited during inspections that triggered a comprehensive inspection. KIT 3 tended to identify nearly 3 violations during such inspections, compared to fewer than 2 violations during KIT 1 and 2 visits—

a difference that is statistically significant. However, the average number of KIT violations for those KIT inspections which did not trigger a comprehensive inspection was not significantly different.

Table 8.4: Average Number of KIT Violations for Triggering and Non-Triggering KITs, Previous and Study Periods (A Res)

	Previou	s Period	Study Period	
	KIT 1 (N)	KIT 2 (N)	KIT 3 (N)	р
Average KIT violations when a comprehensive was triggered (Number of inspections)	2.00 (22)	1.67 (13)	2.94 (49)	.002
Average KIT violations for inspections that did not trigger a comprehensive (Number of inspections)	1.53 (74)	1.30 (53)	1.59 (177)	.131

NOTE: Some comprehensive inspections were triggered by two Type A violations of non-KIT items, and are excluded from the above values.

Percentage of KIT Indicators Cited At Least Once

One of the best ways to evaluate the relative usefulness of the KITs is to analyze the utility of each item on the tools. Specifically, what percentage of the indicators included on the tool did LPAs cite at least once during the comparison and study periods? If the percentage is large, that suggests a more efficient tool, in that LPAs spend less time reviewing regulations that are rarely, if ever, cited. In other words, KIT items should be relevant as well as useful. As Table 8.5 below reveals, KIT 3 outperformed KITs 1 and 2 by a substantial margin in this respect; ninety-one percent of KIT 3 items were cited at least once, compared to 66% of KIT 1 items and 56% of KIT 2 items.

Table 8.5: Number and Percent of KIT Items Cited During at Least One KIT Inspections, Previous and Study Periods (A Res)

	Previou	Previous Period					
	KIT 1	KIT 2	KIT 3				
Number of KIT items cited	19	15	29				
Total KIT items present	29	27	32				
Percent KIT items cited	66%	56%	91%				

^{*}These counts were not generated within the KIT data; they are simply counts using Table 8.6 below. No statistical testing was possible. Some regulations were combined on the KITs but are counted as individual items in this table.

Frequency: Specific Violations

Finally, it is useful to compare how frequently the KITs identified and cited specific types of violations. Table 8.6 makes these comparisons, distinguishing items that appear on all three KITs from those that appear on two of the KITs and those that appear on only one KIT. The table also distinguishes zero tolerance items from non-zero tolerance items.

Table 8.6: KIT Items Present on KITs 1, 2, and 3, Previous and Study Periods (A Res)

	tems Present on KIIS .		ber of viola			nt of violat	ions
		Prev	ious	Study	Previ	ous	Study
		Per	iod	Period	Peri	od	Period
	KIT item	KIT 1	KIT 2	KIT 3	KIT 1	KIT 2	KIT 3
On all three	ZT 80010(a)	0	0	1	-	-	0.2%
KITs	ZT 80087(e)	2	0	2	1%	-	0.5%
	ZT 80087(g)(1)	18	6	28	11%	7%	7%
	ZT 85065(b)	2	5	2	1%	6%	0.5%
	ZT 80046(a)	0	0	0	-	-	-
	ZT 80044(a)	0	0	0	-	-	-
	80088(e)(1)	29	27	61	18%	30%	14%
	80076(a)(1)	6	7	17	4%	8%	4%
	85076(d)(1)	19	18	30	12%	21%	7%
	80019(e)(1)	0	1	3	-	1%	1%
	80075(n)(3)*	0	0	0	-	-	-
	80075(n)(1)	0	1	3	-	1%	1%
On two KITs	80088(a)	0	0		-	-	
	85088(c)(5)	7	4		4%	4%	
	80077.3(a)	2	0		1%	-	
	85070(a)(3)	0	4		-	4%	
	85069.3(a)	1	1		1%	1%	
	80075(i)	5	2		3%	2%	
	80024(a)	0	0		-	-	
	85064(e)	3	0		2%	-	
	80087(c)	9		21	6%		5%
	80087(g)	23		40	15%		9%
	80088(d)	4		8	3%		2%
	80088(e)(3)	7		15	4%		4%
	85068.3(a)	8		12	5%		3%
	85088(c)(4)		8	18		9%	4%
	80026(e)		2	3		2%	1%
	80068(a)		2	6		2%	1%
On one KIT	ZT 80020(a)			12			3%
	80087(b)	5			3%		
	85076(d)(4)	6			4%		
	85075(b)	2			1%		
	80072(b)	0			-		
	85088(f)(1)(A)		0			-	
	80023(d)(2)		2			2%	
	80076(a)(6)		0			-	
	85079(a)		0			-	
	85078(a)(1)			2			0.5%
	80072(a)(2)			9			2%
	80023(d)			21			5%
	80069(c)(1)			6			1%

80075(a)			4			1%
80069(b)			8			2%
80076(a)(18)			8			2%
80070(a)			14			3%
85064(b)			12			3%
80075(j)(i)			2			0.5%
H&S 1503.2**	n/a	n/a	57			13%
Total KIT violations	158	90	425	100%	100%	100%

^{*} KIT item CCLD could consider removing from KIT 3

With regard to the zero tolerance items, we see that item $80087(g)(1)^{40}$ is far more likely to be cited than any other item across the board, but that the new tool does not cite it any more frequently than KIT 2 had, and does so less frequently than KIT 1 had. We also observe that the addition of ZT $80020(a)^{41}$ to KIT 3 seems to have been a well advised change, given that the new tool identified that particular violation 12 times during the study period.

As for non-zero tolerance items that appear on all three of the KITs, it is worth noting that no KIT 3 item was cited more frequently than the other KITs (as a percentage of cited violations). In general, KIT 3 tended to cite items at about the same rates as KIT 1 had, but cited a few items less frequently than KIT 2 had. The individual items that stand out in this regard are: 42

- > 80088(e)(1) (14% to 30%, KIT 3 vs. KIT 2, respectively)
- > 80076(a)(1) (4% to 8%, KITs 1 & 3 vs. KIT 2)
- > 85076(d)(1) (7% to 21%, KIT3 vs. KIT 2)

With respect to the items that appear on two of the three KITs, KIT 3 also performs quite similarly to the other two KITs, but is again a little less likely to cite a couple of the items—specifically $80087.g^{43}$ (9% to 15%, KIT 3 vs KIT1) and $85088.c.4^{44}$ (4% to 9%, KIT3 vs KIT2).

Looking finally at the items that appear on only one of the KITs, the thing that stands out most starkly is that new Health and Safety statute 1503.2^{45} is 13% of all KIT violations cited during a KIT 3 visit, strongly validating its inclusion on KIT 3.

Figure 8.1 displays the relative frequencies of 20 common KIT items; the general distribution pattern appears similar. ⁴⁶ This indicates the KITs are being used similarly during the KIT inspections. This is a positive

^{**}H&S 1503.2 did not exist in statute when KITs 1 & 2 were developed.

⁴⁰ 80087(g)(1): Storage areas for firearms and other dangerous weapons are locked

⁴¹80020(a): Facility fire clearance is maintained in conformity with State Fire Marshall regulations

 $^{^{42}}$ 80088(e)(1): Hot water temperature is maintained between 105 and 120 degrees F; 80076(a)(1): All food is selected, stored, prepared, and served in a safe and healthful manner; 85076(d)(1): Supplies of nonperishable foods are maintained on the premises to last for a minimum of one week, and fresh perishable foods for a minimum of two days

⁴³ 80087(g): Disinfectants, cleaning solutions, poisons are inaccessible to clients

⁴⁴ 85088(c)(4): License ensures that each client has clean linen in good repair, including lightweight warm blankets and bedspreads, top and bottom sheets, pillow cases, mattress pads, rubber or plastic sheeting when necessary, and bath towels, hand towels, and washcloths

⁴⁵ Health and Safety Statute 1503.2: Facility has one or more functioning carbon monoxide detectors that meet statutory requirements

 $^{^{46}}$ If an item was present on both KIT 1 and 2, the number of violations was averaged for the purposes of this figure

finding in that the necessity of an LPA literally indicating compliance with each KIT 3 item (due to the new electronic format) in itself did not create a higher rate of non-compliance.

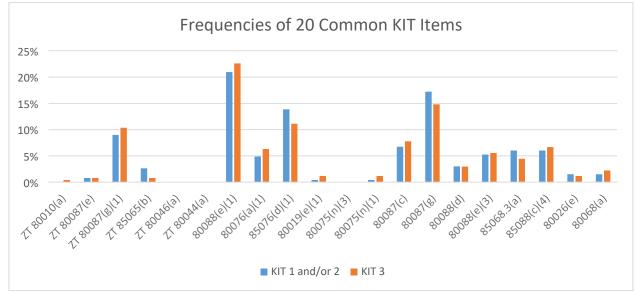


Figure 8.1: Frequency Distribution of Common KIT Item Violations, Previous and Study Periods (A Res)

NOTE: These percentages are based on only the 20 items common to KIT 3 and KITs 1 and/or 2; percentages differ from those in Table 8.6 because these are based on 20 KIT items, not all possible KIT items. Please see Appendix Table 8.1 for supporting documentation.

In short, while KIT 3 performs similarly to KITs 1 and 2 in some areas for inspections occurring in Adult Residential facilities, it out-performs KITs 1 and 2 in several others. With only a few items that CCLD may consider removing, KIT 3 proves to be a statistically sound instrument to aid in the efficiency and identification of code violations for inspections within adult residential facilities. Next, we will review the pilot test results for Adult Day center KITs.

Chapter 9: Adult Day Facilities

In this chapter, we describe the KIT 3 Pilot test results as applied to Adult Day programs (A Day). We compare KIT 3 Pilot test results to those of KITs 1 and 2 from the same time period in the prior year observing the tools' relative tendency to identify code violations and trigger comprehensive inspections.⁴⁷ Specifically, we examine:

- The relative frequency with which each tool identified at least one KIT item violation during an inspection and the total number of KIT and non-KIT violations during a KIT inspection
- The relative frequency with which each tool identified a zero tolerance violation
- > The relative frequency with which each tool triggered a comprehensive inspection
- ➤ The relative *average number of violations* that each tool identified—both in general and after distinguishing between KITs which trigger comprehensive inspections and KITs that did not trigger comprehensive inspections
- The relative *percentage of individual KIT items (rows)* on the KITs cited at least once during the study periods
- The relative frequency with which the tools identified *specific* violations, both in raw numbers and as a percentage of the total number of KIT citations, for just items present on KITs during the two comparison periods

Frequency: At Least One Violation

First, we observe the relative frequency with which each tool identified at least one violation during a KIT inspection. As Table 9.1 shows below, LPAs did not cite violations of KIT items more frequently when using KIT 3 versus KITs 1 and 2. The frequency was roughly the same for KITs 1 and 3 (52% to 51%), and slightly higher than KIT 2 (44%).

Table 9.1: Comparing Proportion of KIT Inspections with at Least One KIT Regulation Cited, Previous and Study Periods (A Day)

	Previous Period			Stu	dy Period			
	KIT 1			KIT 2	T 2 KIT 3			
KIT Inspections	N	Percent	N	Percent	N	Percent	Total	Average
No KIT violations cited	15	48%	22	56%	19	49%	56	51%
At least one KIT violation cited	16	52%	17	44%	20	51%	53	49%
Total	31		39		39		109	

Frequency: Zero Tolerance Violations

What about zero tolerance violations? Only one zero toleration was cited at all, during the previous period: 82010 (licensee shall not operate beyond the conditions and limitations of specified for the license).

⁴⁷ Previous period dates: July 27 to Oct 30 2014; Study period dates: July 27 to Oct 30 2015

Frequency: Comprehensive Inspection Trigger

How did KIT 3 compare to KITs 1 and 2 in terms of triggering comprehensive inspections? In general, there were very few KIT-triggering comprehensive inspections. As Table 9.2 highlights, KIT 3 tended to trigger a comprehensive inspection slightly more often than KIT 1 (5% versus 3%). However, this difference was not statistically significant. No KIT 2 inspection triggered a comprehensive inspection.

Table 9.2: Number and Percent of KIT Inspections Which Triggered a Comprehensive Inspection, Previous and Study Periods (A Day)

	Previous Perio d KIT 1 KIT 2				ly Period KIT 3			
	N	Percent	N	Percent	N	Percent	Total	Average
Triggered a comprehensive inspection	1	3%	0	0%	2	5%	3	3%
Didn't trigger a comp. inspection	30	97%	39	100%	37	95%	106	97%
Total	31		39		39		109	

Average Number of KIT Violations

Having looked at the relative frequency with which the KITs identified at least one violation, and how often they triggered comprehensive inspections, we now turn our attention to comparing the overall average number of violations that each KIT identified. As we can see in Table 9.3 below, LPAs cited a significantly higher average number of KIT violations with KIT 3 than they had with KITs 1 or 2, when including and excluding zero tolerance items in the analyses. By contrast, when counting violations of any regulation or statute cited during KIT inspections, there was no statistically significant difference in the average number of violations. KIT 3 inspections were no more likely to identify poorly performing facilities more often than KITs 1 and 2. This finding may indicate that each KIT version is performing similarly in this aspect.

Table 9.3: Average Number of KIT Violations, for KIT Inspections with at Least One Violation, Previous and Study Periods (A Day)

	Previo	us Period	Study Period	
	KIT 1	KIT 2	KIT 3	р
Average KIT violations per visit (Number of inspections)	1.20 (10)	1.18 (11)	2.23 (13)	0.002
Average KIT violations per visit, excluding ZT items (Number of inspections)	1.22 (9)	1.18 (11)	2.23 (13)	0.003
Average violations per KIT visit, all possible regulations (Number of inspections)	1.81 (16)	1.65 (17)	2.05 (20)	0.368

Triggered Comprehensive Inspections

As Table 9.4 highlights below, only three KIT inspections triggered comprehensive inspections: one KIT 1 inspection, and two KIT 3 inspections. Due to these low incidences, we could not perform statistical analyses. We did test the average number of violations between KITs for those inspections that did not trigger a comprehensive inspection, and found statistical significance between KIT 1 and KIT 3.

Table 9.4: Average Number of KIT Violations for Triggering and Non-Triggering KITs, Previous and Study Periods (A Day)

	Previous Period		Study Period	
	KIT 1	KIT 2	KIT 3	р
Average KIT violations when a comprehensive was triggered (Number of inspections)	1.0 (1)	n/a	2.0 (2)	0.667
Average KIT violations for inspections that did not trigger a comprehensive (Number of inspections)	1.22 (9)	n/a	2.27 (11)	0.003

NOTE: No comprehensive inspection was triggered by KIT 2 during the previous period.

Percentage of KIT Indicators Cited At Least Once

One of the best ways to evaluate the relative usefulness of the KITs is to analyze the utility of each item on the tools. Specifically, what percentage of the indicators included on each tool did LPAs cite at least once? If the percentage is large, that suggests a more efficient tool, in that LPAs spend less time reviewing regulations that are rarely, if ever, cited. In other words, KIT items should be relevant as well as useful. As Table 9.5 below reveals, the percentage of KIT items cited on KITs 1 and 3 were similar (27 and 33%, respectively), and were higher than the percentage of items on KIT 2 (17%).

Table 9.5: Number and Percent of KIT Items Cited During at Least One KIT Inspections, Previous and Study Periods (A Day)

	Previous	Study Period		
	Kit 1	Kit 2	Kit 3	
Number of KIT items cited	8	5	11	
Total KIT items present*	30	29	33	
Percent KIT items cited	27%	17%	33%	

^{*}These counts were not generated within the KIT data; they are simply counts using Table 9.6 below. No statistical testing was possible. Some regulations were combined on the KITs but are counted as individual items in this table.

Frequency: Specific Violations

It is useful to compare how frequently each KIT identified a violation, and which KIT items were cited. Table 9.6 makes these comparisons, presenting the KIT items in such a way that the reader can tell if a given KIT item was on one, two, or all three KITs, and how frequently the item was cited on each of those KITs. The table also distinguishes zero tolerance items from non-zero tolerance items.

In general, LPAs found few violations during KIT visits in the previous period (27 KIT violations total), and 40 KIT violations when using KIT 3 during the study period.

Notable findings:

- > Two KIT 2 items were cited much more frequently than on KITs 1 or 3
 - o 82087(a)(3)⁴⁸ (46% of KIT 2 violations, versus 21 and 13% on KITs 1 and 3, respectively)
 - o 82075(f)⁴⁹ (31% of KIT 2 violations, versus 14 and 13% on KITs 1 and 3)
- > Seven of the 14 new KIT 3 items were cited at least once, and seven were never cited
- ➤ The majority (59%) of KIT 3 violations are from the seven new KIT 3 items
 - o 15% are violations of the new Health and Safety statute 1503.2 (carbon monoxide detectors are required in all facilities)

Table 9.6: KIT Items Present on KITs 1, 2, and 3, Previous and Study Periods (A Day)

			ber of violat	ions		ent of violat	of violations	
	KIT item	KIT 1	KIT 2	KIT 3	KIT 1	KIT 2	KIT 3	
On all	ZT 82010	1	0	0	7%	-	-	
three	ZT 82087(f)	0	0	0	-	-	-	
KITs	ZT 82065(e)	0	0	0	-	-	-	
	ZT 82046(a)	0	0	0	-	-	-	
	ZT 82044(a)	0	0	0	-	-	-	
	82087(a)(3)	3	6	5	21%	46%	13%	
	82088(e)(1)	3	1	6	21%	8%	15%	
	82088(e)(3)	2	0	0	14%	-	-	
	82076(a)(1)*	0	0	0	-	-	-	
	82068.2(e)*	0	0	0	-	-	-	
	82019(e)(1)	1	0	0	7%	-	-	
	82075(f)	2	4	5	14%	31%	13%	
	82075(b)	1	0	0	7%	-	-	
On two	ZT 82078	0	0		-	-		
KITs	ZT 82065(a)		0	0		-	-	
	82074(c)	0	0		-	-		
	82087(b)(1)	0	0		-	-		
	82076(c)	0	0		-	-		
	82076(a)(7)	0	0		-	-		
	82077.4(b)(4)	0	0		-	-		
	82065.1(d)	0	0		-	-		
	82023(d)	1	1		7%	8%		
	82024(a)	0	0		-	-		
	82064(g)	0	0		-	-		
	82075(k)	0	0		-	-		
	82066(a)(10)	0		1	-		3%	
	82072(a)(8)*		0	0		-	-	
On one	ZT 82020			0			-	
KIT	ZT 82078(a)			0			-	
	ZT 80087(g)(1)			0			-	
	82087.2(a)(1)	0			-			

⁴⁸ 82087(a)(3): Disinfectants, cleaning solutions, and poisons are inaccessible to clients

⁴⁹ 82075(f): Staff responsible for direct care and supervision have current first and CPR training

82087.3(a)	0			-		
82088(a)	0			-		
82065.5(b)	0			-		
82075(a)(2)	0			-		
82087(d)		1			8%	
82066(e)		0			-	
82092(a)		0			-	
82022(a)*			0			-
82064(a)(1)/(a)(2)*			0			-
82064(d)			3			8%
82065(g)(1)			2			5%
82066(a)*			0			-
82068.3(a)			0			-
82068(a)			3			8%
82072(a)(2)*			0			-
82075(I)(1)*			0			-
82076(a)(16)*			0			-
82087(a)			2			5%
82019(e)(2)			1			3%
H&S 1503.2			6			15%
82065.1(d)(1)			6			15%
Total KIT violations	14	13	40	100%	100%	100%

^{*} KIT items CCLD could consider removing from KIT 3

Figure 9.1 allows the reader to make a direct comparison of the 16 items common to all three KITs, note that only eight of these common items were cited. The general distribution pattern does not appear similar. This finding is difficult to interpret. We would like to see common KIT items cited at relatively similar frequencies regardless of the KIT, indicating that the electronic format did not have undue influence on how a KIT is used during the inspection. In this case, four items were only cited during the previous period, one was cited only during a KIT 3 inspection, and just three common items were cited during both the previous and study periods. Eight of the 16 common items were never cited during either period. This may indicate ASC LPAs treated the KIT tools differently in the two comparison periods.

⁵⁰ If an item was present on both KIT 1 and 2, the number of violations was averaged for the purposes of this figure ⁵¹82010: The licensee is operating the day program within the conditions and limitations specified on the license, including the capacity limitation; 82088(e)(3): All toilets, hand washing, and bathing facilities are maintained in a safe, sanitary operating condition, with provisions/equipment for handicapped individuals; 82075(b): Clients are assisted with self-administration of medications; 82019(e)(1): Prior to working, residing, or volunteering in a licensed day program, all individuals subject to criminal record review obtain a California clearance or a criminal record exemption.

⁵² 82066(a)(10): Personnel records contain a health screening from a licensed medical professional.

⁵³ 82087(a)(3): Disinfectants, cleaning solutions, and poisons are inaccessible to clients; 82088(e)(1): Hot water temperature is maintained between 105 and 120 degrees F; 82075(f): Staff responsible for direct care and supervision have current first and CPR training.

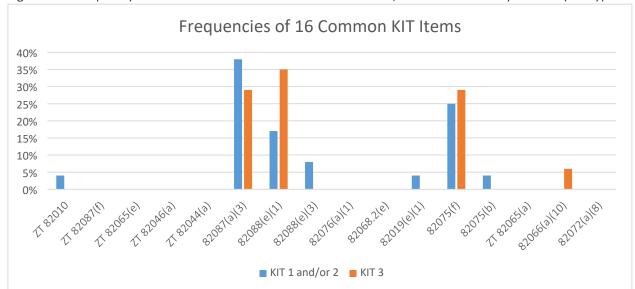


Figure 9.1: Frequency Distribution of Common KIT Item Violations, Previous and Study Periods (A Day)

NOTE: These percentages are based on only the 16 items common to KIT 3 and KITs 1 and/or 2; percentages differ from those in Table 9.6 because these are based on 16 KIT items, not all possible KIT items. Please see Appendix Table 9.1 for supporting documentation.

In summary, KIT 3 added 14 new regulatory violations to the tool. In terms of performance, KIT 3 radically outperformed the earlier KITs in terms of the number of violations that it identified during the comparable study periods—identifying almost twice as many. Moreover, KIT 3 was more likely to trigger a comprehensive inspection than were KITs 1 or 2, and as has been a consistent theme across facility types, the percentage of KIT 3 items that LPAs cited at least once during the study period was greater than the percentage for KITs 1 or 2 during comparable periods (though the difference is not as great for this facility type as it was for some of the others). On the other hand, LPAs cited identical KIT items at quite different rates across the comparison periods—more in some cases during KIT 3, and less in others. Thus, while KIT 3 does not appear to outperform the earlier KITs across the board, it fares quite well overall.

In the next chapter, we discuss pilot test results as they pertain to three Adult/Senior Care facility types (Social Rehabilitation facilities, Residential Care for those with Special Health Care Needs, and for those who are Chronically III) that LPAs rarely inspected during the study period or during the comparable KIT 1 and KIT 2 periods), and for which they rarely cited violations during those inspections (thereby preventing large-scale data analyses).

Chapter 10: Specialized Adult/Senior Care Residential Facilities with Small Pilot Study Sample Sizes

In this chapter, we briefly consider three specialized Adult Residential facilities for which very few inspections took place during the KIT 3 Pilot study period or during the comparable KIT 1 and 2 period: Social Rehabilitation facilities, Special Health Care Needs facilities, and facilities for the Chronically III. We begin by discussing the 103 Social Rehabilitation facilities in the state. As Table 10.1 illustrates below, LPAs conducted ten inspections of such facilities during the KIT 3 pilot period, citing nine KIT violations (including 18% of all the possible violation types at least once). LPAs cited at least one violation in 60% of all inspections during the study period.

By contrast, during the KIT 1 period, LPAs conducted 17 visits, citing eight KIT violations (17% of all possible violation types at least once), and citing at least one violation in 35% of all visits. During the KIT 2 period, LPAs conducted four visits, citing one KIT violation. These results suggest that KIT 3 might have proved more effective at identifying violations, but we cannot definitively draw any conclusions based on these small sample sizes.

Table 10.1: Social Rehabilitation Facilities Inspection and Violations Frequencies

	Previou	Study Period	
	KIT 1	KIT 2	KIT 3
N visits	17	4	10
N KIT violations	8	1	9
N total violations	18	3	16
Percent KIT/comp visit with at least one KIT violation cited	35%	25%	60%
N triggering KIT visits	2*	0	1**
N KIT items cited	5	1	3
Number of KIT items	29	28	34
Percent KIT items cited	17%	4%	18%

^{*}Both comprehensive inspections were triggered by two Type A violations

As for the 38 Special Health Care Needs facilities in California, LPAs only conducted two KIT 3 inspections during the pilot period, and only seven inspections during the KIT 1 and 2 periods combined. The KIT 3 inspections resulted in two Type A KIT violations, triggering a comprehensive inspection. By contrast, none of the KIT 1 or 2 inspections resulted in citations. Again, while it appears that KIT 3 might have proven more effective at identifying violations, no conclusions can be drawn from such infinitesimally small numbers.

When it comes to facilities for the Chronically III, the story is similar: LPAs conducted two KIT 3 inspections, matching the number that they had conducted during the comparable KIT 2 period (none were conducted during the KIT 2 period). The KIT 3 inspections resulted in three KIT violations, while the KIT 1 inspections resulted and two. None of the violations triggered a comprehensive inspection. Thus, nothing can be gleaned from these data with respect to the relative efficacy of KIT 3 relative to the earlier KITs.

^{**}Triggered by three Type A violations