The 2005 Child Care Licensing Study Executive Summary

Prepared by the National Association for Regulatory Administration and the National Child Care Information and Technical Assistance Center

Introduction

State child care licensing regulations and monitoring and enforcement policies help provide a baseline of protection for the health and safety of children in out-of-home care. Licensing helps prevent various forms of harm to children—risks from the spread of disease, fire and other building safety hazards, injury, and developmental impairment from the lack of healthy relationships with adults, adequate supervision, and developmentally appropriate activities.

The publication of child care licensing studies began more than 20 years ago by the Children's Foundation. In 2003, the Children's Foundation began partnering with the National Association for Regulatory Administration (NARA) on these studies. When the Children's Foundation closed its doors in 2005, NARA assumed responsibility and formed a partnership with the National Child Care Information and Technical Assistance Center (NCCIC) to continue this important work.

Purpose and Methodology

The purpose of the 2005 Child Care Licensing Study is to report two aspects of child care licensing from 2005 for all 50 states and the District of Columbia¹: **state child care licensing programs and policies** and **child care center licensing regulations.**

To collect information on states' licensing policies, including staffing, monitoring, and enforcement of licensing regulations, NARA disseminated the 2005 NARA Child Care Licensing Program Survey to all state child care licensing agencies in February 2005. Responses were received from all states. Data on child care center licensing regulations were compiled from the regulations posted on the National Resource Center for Health and Safety in Child Care and Early Education Web site between January 1 and December 31, 2005, at http://nrc.uchsc.edu/STATES/states.htm.

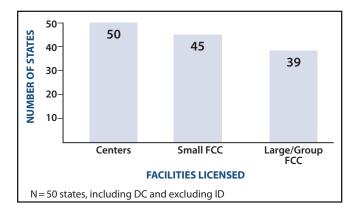
The full report of the 2005 Child Care Licensing Study will include detailed tables and charts for all data collected as well as State Data Profiles, which will provide a complete set of data for each state. In 2007, NARA and NCCIC will complete a licensing study on family child care home regulations.

¹ For purposes of this study, the District of Columbia is considered a state.

Findings on State Child Care Licensing Programs in 2005

NUMBER OF LICENSED FACILITIES

■ Fifty states license child care facilities. One state, Idaho, does not have child care licensing at the state level.



- There are a total of 335,520 licensed facilities in the United States. Of these facilities, there are 105,444 licensed child care centers and 213,966 licensed family child care (FCC) homes (small and large homes combined).
- There are more than nine million licensed child care slots in the United States. More than 70 percent of slots are in center-based programs.

NUMBER OF LICENSING STAFF

NARA and NCCIC estimate there is an average caseload of 130 centers and family child care homes for licensing line staff.² Caseloads are an estimate of the number of facilities assigned to one staff person. Across states, the estimated caseloads range from 25 facilities to 591 facilities. Most state licensing agencies assign licensing line staff to inspect both child care centers and family child care homes.

TYPES OF INSPECTIONS

an inspection prior to issuing a license. Eighty percent of states that license small family child care homes and 95 percent of states that license large/group family child care homes conduct an inspection prior to issuing a license. Almost all states that license these facilities also conduct routine inspections to monitor compliance.

FREQUENCY OF LICENSING

■ Licenses are valid in most states for either one or two years. Non-expiring licenses are issued in 12 states.

INSPECTIONS AND MONITORING

- Most states inspect child care facilities once a year. Most states conduct a full compliance review once a year for centers and either once a year or once every two years for family child care homes.
- States are using various methods to streamline monitoring processes:
 - Using abbreviated compliance forms that shorten the list of requirements that are checked in programs during inspections;
 - Basing the frequency and/or depth of monitoring on an assessment of facilities' level of compliance with regulations;
 - Providing technical assistance and consultation to help facilities achieve compliance with regulations and move beyond minimum requirements; and
 - Using portable devices to help staff efficiently inspect and monitor licensed facilities.

NARA and NCCIC calculated the licensing staff caseload by dividing the total number of licensed facilities, both centers and family child care homes, in a state by the total number of full-time equivalent licensing line staff reported by the state licensing agency.

LICENSING COMPLAINTS

As reported by all state licensing agencies, the most common types of licensing complaints are on issues of (1) child-staff ratios, (2) supervision, (3) discipline/behavior management, and (4) health/safety/cleanliness/nutrition.

ENFORCEMENT ACTIONS

The most common enforcement actions used against facilities that are in violation of the regulations are revocation of a license, denial of a license, immediate closure of a facility, non-renewal of a license, and civil fines.

LICENSING INFORMATION ON THE INTERNET

■ Ten states post licensing information about child care on the Internet for parents and the general public to access. Most of these states post full inspection reports and information about substantiated complaints.

LICENSING FEES

More than 60 percent of states charge child care centers a fee to obtain a license. Approximately half the states charge a fee to family child care homes. Fees are sometimes based on the number of children in a facility or are the same for all facilities.

LICENSING STAFF REQUIREMENTS

- Thirty-six states require licensing line staff to have a bachelor's degree. The content and/ or major of the degree or coursework must be early childhood education, child development, or a related topic in 13 states. Nineteen states also require experience working in a setting with children.
- Twenty-one states require licensing line staff to complete additional training each year. Almost all states make training available to licensing staff through local, state, and national conferences, the licensing agency, and other sources in the community.
- More than 85 percent of states use the Child Care and Development Fund to hire and support child care licensing staff. Three-quarters of states use general state funds for this purpose.

Findings on State Child Care Center Licensing Regulations in 2005

EFFECTIVE DATES AND TYPES OF REGULATIONS

- There is a wide range of effective dates for child care center licensing regulations. One state has regulations that have not changed since 1987. Nearly half of the states' regulations became effective in either 2004 or 2005.
- In addition to their center regulations, many states have separate regulations for specific types of care, such as school-age care and infant and toddler care.

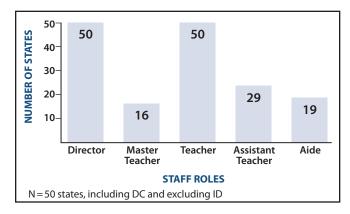
DEFINITION OF LICENSED CHILD CARE CENTERS

- There are several common elements in states' definitions of center-based facilities that are required to be licensed. Three-quarters of states define a center by the minimum number of children in the facility. Most states also define a center as a facility that operates for less than 24 hours or any part of a 24-hour day.
- State child care licensing regulations include definitions of the types of center-based facilities that are exempt from licensing. Common types of exemptions include facilities where parents are on the premises (i.e., child care services in a shopping mall or health club), facilities with a small number of children in care, recreation

programs, and facilities operating a small number of hours per day or week.

STAFF ROLES AND AGE REQUIREMENTS

All states that license child care centers have requirements in their regulations for the director and teacher staff roles.



■ The most common minimum age requirements are 21 years of age for directors, 18 for master teachers and teachers, and 16 for assistant teachers and aides.

STAFF QUALIFICATIONS AND ONGOING TRAINING REQUIREMENTS

Nearly all states require center directors to have a high school diploma or equivalent, have preservice training or experience, and

Center Staff Roles	Number of States with Preservice and Ongoing Training Requirements			
	Regulated	High School Diploma or GED	Preservice Qualifications	Ongoing Training
Director	50	47	49	43
Master Teacher	16	14	16	15
Teacher	50	30	40	47
Assistant Teacher	29	9	17	23
Aide	19	5	10	11

N = 50 states, including DC and excluding ID

complete hours of training each year. The same is true for states with requirements for the master teacher role.

- The most common minimum qualification for both center directors and master teachers is the Child Development Associate credential. For states that have minimum qualifications for teachers, the most common type is experience—either alone or with a high school diploma or General Education Development Test (GED). Many states have requirements on the type of experience needed.
- Across the states and center roles, the number of ongoing hours required annually ranges from 3 to 30. The median number of required training hours for most roles is 12. Many states specify the content and approved delivery methods for ongoing training.

STAFF HIRING REQUIREMENTS

- Thirty-two states require center staff to have a physical exam or provide a health statement from a physician prior to working with children. Thirty-nine states require center staff to have a tuberculosis screening.
- Most states require criminal background checks for center staff prior to hiring.
 - Forty-one states require a check of criminal history records;
 - Twenty-four states require checks of child abuse and neglect registries; and
 - Eighteen states require checks of fingerprints.

HEALTH AND SAFETY TRAINING

■ Forty-six states require center staff to complete first aid, and 44 states require CPR training. Thirty-three states specify that CPR training must focus on infants and children. Several states require center staff to complete training on child abuse and neglect or the prevention of communicable diseases.

CHILD-STAFF RATIOS AND GROUP SIZE

Ages of Children	Most Common Child-Staff Ratios	Most Common Group Size
Infants	4:1	8
Toddlers	6:1	12
Preschool-age children	10:1	20
School-age children	15:1	30

SUPERVISION OF CHILDREN

- Ninety percent of states have requirements for staff on the supervision of children in care. Among those states, some specify that staff must be able to see or hear children at all times or that staff must be free of other duties while supervising children.
- Many states have supervision requirements for specific times/activities during care.

Time/Activity	Number of States
Transportation in vehicles	47
Field trips	40
Naptime	38
Swimming/water activities	37
Evening/overnight care	33
Outdoor play	29
Large group activities	17

N=50 states, including DC and excluding ID

CARE OF CHILDREN

- All states that license centers require children to have immunizations to enroll in centers. However, most states allow exemptions from immunization requirements if written statements are provided from either a physician or parent.
- Twenty-nine states require children to have a physical exam to enroll.
- All states that license centers have requirements about the nutritional content of meals and snacks served to children. Forty-seven states have requirements on feeding infants.

- Forty-one states specify the types of discipline or behavior guidance that centers are allowed to use with children, and 49 states specify forms of discipline centers are not allowed to use with children. Three states allow corporal punishment.
- Forty-nine states specify the types of activities, such as outdoor play, active play, quiet play, naptime, and group activities, that must be included in the daily schedule for children.
- Forty-one states specify that the domains of children's development must be addressed in activities. Most of these states require centers to address children's social, physical, language/literacy, cognitive/intellectual, and emotional development. Nearly half require centers to address cultural development.
- More than three-quarters of states have requirements on the types of equipment/materials centers must have for children, such as indoor/outdoor gross motor equipment, fine motor manipulatives, books and other literacy materials, and art supplies.
- Forty-three states require centers to provide parents with access to the facility at all times, and 44 states have requirements about communication with parents.

Most states have requirements for different types of specialized care for children.

Types of Care	Number of States
Infant and toddler care	48
Care of mildly ill children	47
School-age care	46
Evening/overnight care	41
Drop-in care	15

N=50 states, including DC and excluding ID

- Among the 48 states that have requirements for infant and toddler care, 23 require that centers assign a primary, consistent caregiver to each child.
- Twenty-four states require that centers place infants on their backs to sleep in order to reduce the risk of Sudden Infant Death Syndrome. Twenty states allow physicians to authorize a different sleep position; five states allow parents to make this authorization. Seventeen states prohibit soft bedding/materials in cribs.

FACILITY REQUIREMENTS

The following table provides a summary of requirements for center-based facilities.

State Requirements for Center-Based Facilities	Number of States
Environmental Tests and Inspections	
Environmental tests (i.e., lead paint, lead in water, asbestos, radon)	12
Environmental inspections (i.e., fire, health, building code)	39
Indoor and Outdoor Space	
Amount of indoor space per child is 35 square feet	42
Amount of outdoor space per child is 75 square feet	29
Fence or other enclosure around outdoor space	34
Fire Safety and Emergency Preparedness	
Requirements on fire safety	45
Fire drills	37
Emergency preparedness (i.e., weather, utility-related, acts of terrorism)	33
Security	
Daily attendance records	34
Procedures for accepting and releasing children (i.e., signing in and out)	27

State Requirements for Center-Based Facilities	Number of States
Transportation	
Requirements on transporting children in vehicles	48
Driver requirements (i.e., must be licensed, minimum age requirements)	38
Safety restraints for children (i.e., seat belts, car seats)	41
Insurance	
Liability insurance	26
Automobile insurance	21
Medical Care	
Requirements on administration of medication	50
Allowance of centers to exclude ill children	38
Serious injuries reported to licensing agency	33
Deaths reported to licensing agency	30
Hand Washing	
Hand washing for staff	44
Hand washing for children	41
Diapering	
Requirements on diapering	47
Sanitation of diapering area	39
Specify when diapers are changed	30
Smoking Policies	
Smoking not allowed in facility	31
Firearms	
Firearms not allowed in facility	17

N=50 states, including DC and excluding ID

Conclusion

Strong licensing policies and regulations are key to ensuring the health and safety of our nation's children who spend time in out-of-home care. The potential for licensing to have a positive impact on children is great given that there are more than nine million licensed child care slots in the United States. However, there is still much research needed in order to determine which licensing policies and procedures are the most effective and which regulations are best at protecting children from harm. The data in this study will help inform the regulatory and early care and education fields and hopefully spark researchers' interest in pursuing further analyses.



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