

How Do I? Guide: On-Site Yearly Compliance and Complaint Visits

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Activities Prior to an Annual and Complaint On-site Visit

Check Supervisor and Provider List to Determine Who to Visit

- ♦ Supervisor's list is the complaints assigned to you. The complaint rules require an on-site visit.
 - Complaint process map identifies two sources of complaints:
 - Centralized complaint number to report provider complaints (844-786-1296)
 - Centralized Services Intake Unit for provider complaints that are suspected abuse
 - Your supervisor receives a complaint referral and consults with you. A
 determination is made whether the complaint is associated with a law or rule.
 - If yes, complaint visit assigned and referral entered into the Child Care Regulatory System (CRIS)
 - If no, complaint referral entered into CRIS and complaint intake is rejected by the supervisor
- Provider list is the list of providers that need an annual compliance visit.
- ◆ If you receive a complaint and have not completed an annual compliance visit, do both a complaint and annual compliance visit. You would complete two reports – complaint and annual compliance visit.

Check Provider Past History

- Provider paper and electronic files.
 - Check KT Provider Summary page for Type of Care and <u>dates of approval</u> and Provider page for current address.
 - Check KT Provider Notes page.
 - Check KT Provider Contacts page for household members, assistants, and substitutes.
 - Check KT Provider Compliance page for a summary of previous compliance visits.
 - Check KT Provider Families page for authorized CCA children. If there are authorized CCA children in care, check the KT Provider Payments page for payments and actual hours children were in child care. The KT Reports page under Provider file has a Provider Enrollment Report which shows the number of children in care and hours of operation. Copy this report into the "Master Spreadsheet" to see hours of operation and number of children in care by infant, preschool, and school age for the two week time period selected.
 - Check the provider paper file for complaint and compliance reports before reports were uploaded to CRIS.

 If there is a past history of noncompliance, read the history and take notes on repeated history of noncompliance and serious safety issues. You can only use regulatory reports that were sent to the provider.

Visit

What to Bring

- Your DHS identification
- ♦ Compliance checklist: Checklist for Child Development Home Registration, form 470-0625, or Health, Safety, and Fire Standards Checklist for Child Care Homes with a Child Care Assistance Provider Agreement, form 470-5385
- ♦ Relevant laws and rules: 237A, 441 IAC 110(237A) or 441 IAC 120(237A)
- Relevant provider handbooks: Child Development Home Registration Guidelines, Comm. 143, or Guidelines for Child Care Homes With a Child Care Assistance Provider Agreement, Comm. 95
- ♦ Child Care Home and Child Development Home Safety Plan, form 470-5280
- Samples and resources
- Pre-visit notes, questions, and paper to take notes
- ♦ Something hard to write on
- ♦ Cell phone
- ◆ Flashlight
- ◆ Camera
- ◆ Tape measure
- Comfortable shoes (easy to take off and on or shoe covers)

What to Do

- ♦ When approaching the house, look for any health and safety concerns, such as, pre-1960 house with chipping paint
- If early afternoon hours, knock gently, as children may be sleeping
- If no one answers the door, try calling the provider

Answers the Door

- 1. Identify yourself, show DHS identification, and explain that a compliance check is required each calendar year or that you have a complaint.
 - a. If the provider does not want you to enter, show them 441 IAC 110(237A) if the home is a registered child development home or 441 IAC 120(237A) if the home is a child care home. Annual compliance and complaint visits are required.
 - **441—110.4(237A) Compliance checks**... An unannounced compliance visit shall be conducted not less than annually for compliance with health, safety, and fire standards, as well as, all child care regulatory standards. Completed evaluation checklists shall be placed in the registration files.
 - **441—110.12(237A) Complaints**. The department shall conduct an on-site visit when a complaint is received.
 - **110.12(1)** After each complaint visit, the department shall document whether the child development home was in compliance with registration requirements.
 - **110.12(2)** The written documentation of the department's conclusion as to whether the child development home was in compliance with requirements shall be available to the public. However, the identity of all complainants shall be confidential, unless expressly waived by the complainant.
 - **441—120.4(237A) Compliance checks**. An unannounced compliance visit shall be conducted not less than annually for compliance with health, safety, and fire standards. Completed evaluation checklists shall be placed in agency files.
 - **441—120.12(237A) Complaints**. The department shall conduct an on-site visit when a complaint is received.
 - **120.12(1)** After each complaint visit, the department shall document whether the child care home was in compliance with requirements.
 - **120.12(2)** The written documentation of the department's conclusion as to whether the child care home was in compliance with requirements shall be available to the public. However, the identity of all complainants shall be confidential, unless expressly waived by the complainant.
 - b. If you do not see a health and safety concern or have a complaint, you can agree to come back. However, if the provider does not allow you to complete the annual visit on the second visit, initiate a revocation for a child development home or a cancellation for a nonregistered home.

- c. If you see a health and safety concern or have a complaint and the provider does not allow you access to the home, inform the provider that they are required to comply with the unannounced compliance and complaint visits by the Department as a condition of their registration. Inform the provider that failure to allow a visit will result in revocation of their registration. Nonregistered homes are required to comply as a condition of their child care assistance provider agreement. Failure to allow a visit of a nonregistered home will result in cancellation of their child care assistance provider agreement.
- d. If the provider says they no longer want to be registered or have a child care assistance provider agreement, do the following:
 - (1) Have the provider sign and date the last page of the relevant checklist after the provider has written a note on the checklist that the provider does not want a compliance check and wants to relinquish their CDH registration with a CCA PA or a Nonregistered CCA PA today. Once the provider signs, sign and date the last page of the checklist. Provide a copy to the provider.
 - (2) When a provider is registered, you need from the provider the *Certificate* of *Registration*.
 - (3) Close the provider in KT. See *How Do I? Guide: Revocation and Cancellation*.
- e. Complete a full checklist every calendar year. Always remember, don't mark "yes" on the checklist if you personally can't verify compliance (files, upstairs, yard, etc.). Gather complete compliance information around rules associated with a complaint before identifying whether an item is in compliance or not. You can leave an item blank with a note that further information is being gathered. Be fair, objective, respectful, and impartial.
- f. When conducting an on-site visit, assess the safety of the location, as follows:

Indoors:

- Is the area accessible to children or a part of the home used during regular child care hours? This also includes areas that household members or staff access, but not necessarily the children.
 - If so, you should feel comfortable looking in areas such as under kitchen sinks, drawers accessible to the children, the location where child and household medications are stored, the cabinets of a changing table, location of chemicals, etc.
 - You may ask a provider where they keep items. The provider may show you by opening areas instead of you having to open or request they be opened.

- What do you see? Can you hear anything out of the ordinary? Do you smell anything that may be abnormal?
 - What is the concern that you have and will opening the item or viewing the location either confirm or alleviate this concern? (Example: closet could have children, unapproved persons, belief there may be hazardous materials, belief there may be child pornography, etc.)
 - Does the restricted area or container seem out of place for the location?
 - Is there information that a person that has been prohibited from involvement with child care may be residing in the home?
 - If so, there may be supporting information of this in a closet or dresser drawers (clothing, shoes, and other items).
 - Is the item big enough to house a hidden risk to children in a childoccupied area of the home?
 - Is there a specific complaint?
 - An over-numbers complaint as opposed to a concern about drugs in the home may change where you feel you need to look.
 - Is the area a room or location that is blocked off or that the provider wishes you to not enter?
 - All rooms should be observed for compliance. If a room is inaccessible, ask for entry. If entry is denied, document and talk with your supervisor.

Basements:

- Basements may be finished, unfinished, or partially finished. Basements
 must be viewed to assure that the furnace and water heater are not near
 combustible materials and flammable areas. Electrical cords are properly
 used and maintained. Assure safety of a tornado shelter if this is the area
 used.
- ♦ Is there an area that appears closed off or away from view? It may require more inspection.

Outdoors:

- Are there outbuildings?
- Where are the buildings located on the property and are they accessible to children as a result of their location?
- ◆ If a building is a distance away, it may not be necessary to look unless children access or go near that area.

Consider what you know and observe about the provider:

- Does the provider have a history of dishonesty, hiding things, etc?
- How is the provider acting during the inspection? Does the provider appear nervous or appear to restrict access to certain areas?
- ♦ Have you asked the provider what is in the area or item? If so, what is the provider's response?

Communication with the provider:

Provide an explanation to the provider on why you wish to view an area.

- ♦ Have an upfront discussion and provide rationale.
 - Example: "You mentioned that you keep weapons in this area. I would like to view the area to assure the weapons are appropriately contained."
- ◆ It may be okay to give the provider an example of something you have seen before, to help them understand your rationale. Be careful to not give out confidential information. General statements are appropriate.
 - Example: "You have indicated that your basement is unfinished and you do not provide care down there but I have previously found ____ (drugs, meth lab, hidden room, children, etc). and would like to view the area."

If a summary check produces additional concern, further assessment may be required to confirm or deny your concern.

Be ready to support your decision as to why you access an area that may be considered questionable (areas a provider deems personal or would reasonably expect to be private: bedroom closet or dresser drawers, personal bathroom cabinets that are not accessible to children in care or on a floor that is not used for child care, etc.).

- g. Conduct an exit conference with the providers.
 - (1) Inform the provider what met or did not meet the rule requirements.
 - (2) Be prepared to say what the rule requires.
 - (3) Tell the provider how their practice met or did not meet the rule (i.e., A two foot pile of newspapers are within one foot of the gas water heater. 441 IAC 110.8(1)"c" requires the newspapers be three feet away.)
 - (4) Have the provider sign the checklist. Give a copy to the provider.
 - (5) Encourage the provider to monitor compliance between your yearly visits.
 - (6) Contact the provider by phone or in person if there will be anything different between the exit conference information and compliance letter.

Does Not Answer the Door

If the provider is not home for the annual compliance visit, send the provider a letter. The Compliance SharePoint site contains form letters you would put on your local letterhead for CDH and CCH with a CCA Provider Agreement.

It the visit is associated with a complaint, you must continue to attempt to find the provider.

In Compliance Found at Compliance Visit

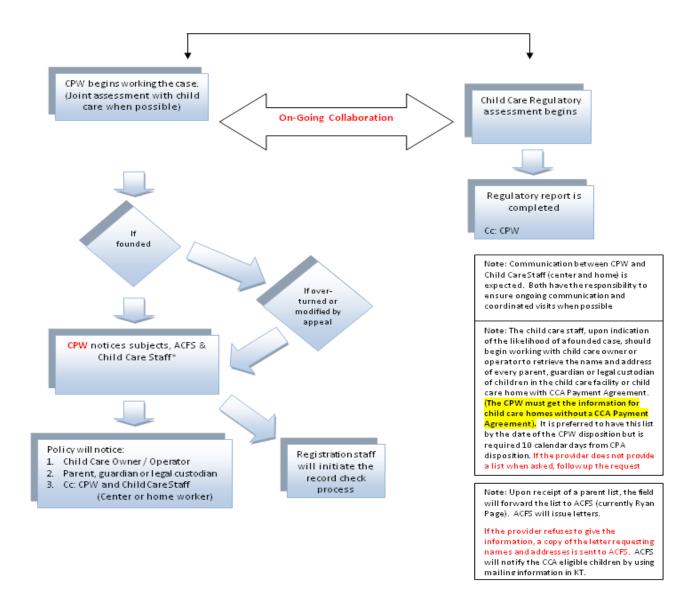
- 1. Complete the report for the type of on-site visit made. If you completed both an annual compliance visit and a complaint visit, complete two reports.
 - a. For annual compliance visits, complete the document in CRIS for annual and followup on-site visits.
 - b. For a complaint visit, complete form 470-5281. This form is in CRIS.
 - c. All findings reports are to be completed within 60 days of the visit.
- 2. Send a copy of the reports to the provider.
- 3. For the annual compliance visit, upload the checklist in CRIS.

Noncompliance Found at Compliance Visit

Not Safe or Safety Risk

Is there suspected child abuse? If it is suspected abuse and a referral has not been made to child abuse intake, make a referral to child abuse intake. If accepted, collaborate with the CPW.

If founded, the compliance worker will need to have their local record check decision team make a record check decision. Send a list of names and addresses of all parents, guardians or legal custodians with a child in care to the child care policy staff in ACFS. See Complaint Record Check Decisions PowerPoint and Employees' Manual 12-F. See the procedure on the next page.



Safety Plan

When the compliance worker identifies noncompliance with a law or rule AND the worker determines the situation to be a significant health and safety concern (the children's level of vulnerability or the caretaker's protective capacities do not offset the safety issue), complete a safety plan on form 470-5280, *Child Care Home and Child Development Home Safety Plan*. If you have questions about assessing safety or completing a safety plan, see Employees' Manual 12-F or the Safety Assessment document written in November 2015.

- 1. Consult and get approval for the safety plan as needed from your supervisor.
- 2. Give the provider a copy of the signed safety plan.

- 3. Upload the child care safety plan to CRIS. If the child care safety plan has confidential information in it, redact the confidential information before uploading the plan. Confidential information includes:
 - ◆ The names of children in child care or their parents or guardian (Iowa Code Section 237A.7)
 - ◆ Record check information that is not from a public criminal record source, such as, Division of Criminal Investigation (Iowa Code Section 692.2) and Federal Bureau of Investigation (28 Code of Federal Regulations Part 20)
 - ◆ Child abuse information (Code of Iowa Chapters 217, 232, 235A)
 - ◆ Dependent adult abuse information (Code of Iowa Chapters 235B and 235E)
 - Substance abuse treatment (Code of Iowa Chapter 125)
 - Mental health diagnosis and treatment (Code of Iowa Chapter 228)
 - ♦ HIV-AIDS (Code of Iowa Chapter 141A)
 - ◆ Domestic violence (Code of Iowa Chapters 236 and 915)
 - ◆ Criminal investigation [Code of Iowa Chapter 22.7(5)]
 - If you have questions about the confidentiality of information in a safety plan, contact the Service Help Desk.
- 4. Complete safety visits as identified in the safety plan.
- 5. If the provider is not in compliance with the tasks identified or there is evidence of serious noncompliance on the first visit to check for compliance with the safety plan, consult your supervisor as to whether you should revoke or cancel the provider.
 - See *How Do I? Guide: Revocation and Cancellation* for guidance in making a decision to revoke or cancel.

Not Revoke or Cancel Decision

- 1. Determine whether or not to do a recheck. Follow-up or recheck visits are required when found to be needed to determine compliance after an annual visit, complaint or due to a safety plan check. The following areas require a recheck.
 - Missing several fire and safety measures: no exit plans, alarms missing, wrong fire extinguisher, etc.
 - Extensive failure to maintain child file documentation
 - ◆ Failure to be in compliance with areas that were out-of-compliance at the previous annual inspection

- Substantial concerns of general noncompliance with checklist
- ♦ Concerns regarding over numbers or general supervision
- ♦ Concerns regarding safe sleep practices
- Concerns for outdoor safety (pools, fencing, hazards, etc.)
- Concerns regarding children's access to unsafe materials
- Physical location concerns such as electrical cords, fire hazards, smoking in the home, etc.
- Lead concerns
- Anything else that requires visual inspection in the home to verify compliance
- 2. Write a noncompliance findings report in CRIS. Do not include confidential information in these reports.
 - If this was only an annual visit, write an annual visit report.
 - ♦ If this was only a complaint, write a complaint report. For a complaint visit complete form 470-5281. This form is in CRIS.
 - If this was an annual visit and complaint report, write two reports (annual visit and complaint report).
 - ♦ If a recheck is required, make sure you so in the findings report.
 - All findings reports are to be completed within 60 days of the visit.
- 3. Send the findings report through CRIS to your supervisor for review and signature.
- 4. When you receive the signed report from your supervisor, send it to the provider and CCR&R.
- 5. If this this was an annual on-site visit, upload the checklist to CRIS.
- 6. If a recheck or safety visit is not needed, you are finished.
- 7. If a recheck was determined as being needed, complete the recheck.
- 8. If not in compliance at the recheck, consult with your supervisor if you should revoke or cancel. See *How Do I? Guide: Revocation and Cancellation* for guidance in making a decision to revoke or cancel. If the decision is not to revoke or cancel, does a safety visit or recheck need to occur? See 1. under "Not Revoke or Cancel Decision" for guidance on whether a recheck needs to occur.

- 9. If the provider is in compliance, another recheck does not need to occur unless it is part of an ongoing safety plan. If a recheck is conducted as part of a safety plan, write a findings report for any visits conducted.
- 10. Write a follow-up findings or recheck report. Follow up findings reports are a version of the annual visit report. Only write a complaint report, when you get a complaint.
 - All findings reports are to be completed within 60 days of the visit.
 - All findings reports cannot contain confidential information because the reports are public reports.
- 11. Send the finding reports in CRIS to your supervisor for review and signature.
- 12. When you receive the signed report from your supervisor, send it to the provider and CCR&R.
- 13. Upload any new or revised safety plans.
- 14. If a recheck was determined as being needed, complete the recheck. A findings report needs to be completed for each recheck visit. After a second recheck of noncompliance that is serious enough to require another recheck, you should revoke or cancel. Consult with your supervisor and see the *How Do I? Guide: Revocation and Cancellation* for guidance in making a decision to revoke or cancel.

Revoke or Cancel Decision

See the How Do I? Guide: Revocation and Cancellation.