

March 2020

Trends in Child Care Center Licensing Requirements and Policies for 2017

Research Brief #1



NATIONAL CENTER ON

Early Childhood Quality Assurance

Acknowledgements

This document was developed with funds from Grant # 90TA0002-01-00 for the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start, Office of Child Care, and Health Resources and Services Administration, by the National Center on Early Childhood Quality Assurance. This resource may be duplicated for noncommercial uses without permission.

Research Brief 1: Trends in Child Care Center Licensing Requirements and Policies

Contents

Introduction	3
Scope and Purpose	3
Methodology	4
Compilation of State Licensing Requirements	4
NARA Survey of Licensing Programs and Policies	4
Comparative Analysis	4
Summary of Key Findings	5
Trends in State Licensing Requirements for Child Care Centers	7
Child Care Centers Licensed	7
Number of Licensed Child Care Centers	7
Licensed Capacity in Child Care Centers	8
Definition of Licensed Child Care Centers	8
Licensing Exemptions	9
Staff Roles and Age Requirements	9
Staff Education and Ongoing Training Requirements	10
Orientation Training	11
Health and Safety Topics Required in Preservice and Orientation Training	11
Background Checks	13
Staff Health and Hiring Requirements	14
Child-Staff Ratios and Group Sizes	14
Supervision of Children	16
Health Requirements and Medical Care	16
Nutrition and Maintaining Healthy Weight	17
Activities, Equipment, and Materials	18
Family Involvement	19
Behavioral Guidance and Discipline	19
Child Assessment	19
Care of Infants and Toddlers	19
Care of School-Age Children	20
Care of Children with Disabilities or Other Special Needs	21

Transportation	21
Facility Health and Safety Requirements	22
Trends in State Licensing Agency Policies	24
Licensing Staff Assignments and Caseloads for All Facility Types	24
Frequency of Licensing for Child Care Centers	24
Types of Inspections for Child Care Centers	24
Frequency of Inspections for Child Care Centers	25
Monitoring Tools Used with All Facility Types	26
Use of Technology for Licensing Child Care Facilities	28
Enforcement Actions Used with Child Care Centers	29
Illegally Operating Child Care Providers	29
Complaint Investigations in Child Care Facilities	30
Licensing Fees for Child Care Centers	31
Child Care Licensing Staff Requirements	31
Child Care Licensing Staff Supports	33
Conclusion	33
References	34

Introduction

Within the early care and education system, licensing provides the baseline of protection for children and covers the broadest content, the largest number of children from birth to school age, and the largest population of providers. 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, or developmentally appropriate activities.

Licensing is a process administered by state and territory governments that sets a baseline of requirements below which it is illegal for facilities to operate.¹ States have regulations with which facilities must comply and policies to support the enforcement of those regulations. Some states may call their regulatory processes “certification” or “registration,” but for consistency, this research brief uses the terms “licensing” and “licensed” to represent all regulatory processes.

The data presented in this brief are from the 2017 Child Care Licensing Study, which is the latest in a series of large-scale research studies of requirements for child care providers and facilities as well as policies and practices for licensing agencies. Data are collected for the Child Care Licensing Studies through a document review of state child care licensing regulations and a survey of state licensing agencies. The National Center on Early Childhood Quality Assurance (ECQA Center) has conducted these studies in partnership with the National Association for Regulatory Administration (NARA) every three years since 2005.

The data and findings from this research allow states and territories to compare their licensing requirements and policies to national data and track trends over time. These national findings can also inform comparisons with other systems in early care and education, such as quality improvement systems. We encourage other researchers to conduct further analysis with these data to answer questions for the field.

Scope and Purpose

The purpose of this research brief is to report on the licensing requirements and policies for **child care centers** for all 50 states and the District of Columbia. The term “state” will be used for all 51 jurisdictions.

States may define child care centers differently in their licensing requirements. For the purpose of categorizing the types of center-based child care settings states regulate, the following definition is used:

Child care services for fewer than 24 hours per day per child in a nonresidential setting, unless care in excess of 24 hours is due to the nature of the parent(s)’ work (National Center on Early Childhood Quality Assurance, 2015).

In other research briefs in this series, licensing requirements and policies for family child care homes and group child care homes are addressed.

Using data compiled from state child care licensing regulations and the results from a survey of state licensing agencies by the National Association for Regulatory Administration (NARA), the National Center on Early Childhood Quality Assurance conducted an analysis that examines the state of licensing in 2017 and identifies trends that have emerged during several years of data collection.

¹“Licensing” or “licensed” is defined as permission that providers must obtain from a state to operate a child care facility, which requires meeting specific program standards.

Methodology

Compilation of State Licensing Requirements

For this research, all data regarding **child care center requirements** were compiled from the regulations posted in the [National Database of Child Care Licensing Regulations](#) that were in effect as of **December 31, 2017**. The licensing requirements data presented in this research brief include information only from state child care licensing regulations. Additional requirements for child care facilities may be in state statutes; administrative codes; or other local, state, or federal laws. It was not in the scope of this work to review all laws that pertain to child care facilities.

NARA Survey of Licensing Programs and Policies

The data about states' **licensing policies**, including facility monitoring, enforcement of licensing regulations, and licensing program staffing, were gathered by NARA in the [2017 NARA Child Care Licensing Programs and Policies Survey](#). NARA sent the online survey via SurveyMonkey to all state child care licensing agencies in March 2018. Respondents submitted their answers electronically, and by January 2019, all 50 states and the District of Columbia had responded.

Comparative Analysis

This brief includes a comparison with the findings from the 2014 Child Care Licensing Study that were reported in the ECQA Center's [Research Brief #1: Trends in Child Care Center Licensing Regulations and Policies for 2014](#). The brief, published in 2015, includes a comparison of the 2014 data with previous Child Care Licensing Studies from 2005, 2007, 2008, and 2011.²

The number of states included in the data set for 2017 differs from 2014. This is because two U.S. territories did not respond to the 2017 NARA Child Care Licensing Programs and Policies Survey. Throughout the brief, notes explain that the data set for 2017 has 51 states, including the District of Columbia, and the data set from 2014 has 53 states, including the District of Columbia and 2 territories (Guam and the Virgin Islands).

In this brief, findings that show a significant increase or decrease in the number or percentage of states with a specific requirement or policy are identified with upward and downward facing arrows, shown below:



If there is no arrow next to a finding, the number or percentage of states changed by a very small amount or stayed the same from 2014 to 2017. Please note that some changes may also be due to the differences in the number of states in each set of data.

² Findings from the 2011 Child Care Licensing Study are available in Research Brief #1: *Trends in Child Care Center Licensing Regulations and Policies for 2011* at <https://childcareta.acf.hhs.gov/resource/research-brief-1-trends-child-care-center-licensing-regulations-and-policies-2011>. Reports from the 2005, 2007, and 2008 studies are available at <http://www.naralicensing.org/child-care-licensing-study>.

Summary of Key Findings

Key findings emerged from review and comparison of all data collected in 2014 and 2017. The data for these findings and many other indicators are detailed in the remaining sections of this research brief.

Findings: Licensing Requirements for Child Care Centers

Since 2014, more than two-thirds of states (36; 71 percent) have made changes to their licensing regulations for child care centers, and many significant trends have emerged:

- The number of licensed child care centers has decreased by 0.66 percent, but the licensed capacity in centers has increased by 3.35 percent.
- States have increased the preservice qualifications required for teachers and directors, including the amount of administrative training required for directors.
- States have increased the number of annual training hours for at least one center role. The median number of required training hours for all center roles is 15.
- Many states added a requirement that staff must complete orientation training to work in a center. This has increased from 29 states to 47 since 2014.
- Several states added preservice or orientation training requirements in health and safety topics from 2014 to 2017. The largest increases were in the topics related to the care of infants—reducing sudden infant death syndrome (16 states to 29) and prevention of shaken baby syndrome (11 states to 26).
- Several more states required five types of background checks—criminal history records, state fingerprints, federal fingerprints, child abuse and neglect registries, and the sex offender registry—for center staff. This number has increased from 16 to 34 states between 2014 and 2017.
- Since 2014, 4 states have lowered child-staff ratios for at least one age group.
- In 2017, 35 states had group-size requirements for all age groups, and 7 states had group-size requirements for least one age group. This is an increase from 2014, when 31 states regulated group size for all ages, and 10 states regulated group size for at least one age group.
- Nine states added requirements for centers about emergency preparedness procedures or having an emergency and evacuation plan.
- Six states added requirements for centers about having a fire extinguisher; with three of them also adding requirements about having a smoke detector.
- Eight states added requirements about reporting injuries or deaths that occur to children in child care centers since 2014.

Findings: Licensing Agency Policies for Child Care Centers

There are several promising trends in child care licensing policies about monitoring and enforcement in child care centers and all child care facilities from 2014 to 2017. Some of these findings are about policies for child care centers and some are about policies for all types of licensed facilities.

- The average caseload for licensing line staff decreased from 97 centers and homes in 2014 to 81 centers and homes in 2017.
- The percentage of states that conduct unannounced routine compliance inspections of centers increased from 75 percent in 2014 to 98 percent in 2017.
- Ninety-four percent of states reported conducting inspections of centers at least once a year, compared to 89 percent in 2014.
- Most states continue to use monitoring strategies—such as using abbreviated compliance forms and determining the frequency of monitoring based on compliance history—that promote efficiency and allow better allocation of resources and staff. More states report using a key indicator system to determine the rules to include on an abbreviated compliance form (up from 8 states to 10).
- More states (65 percent, up from 53 percent) report having conducted a risk assessment of requirements to identify those that pose the greatest risk of harm to children if a child care facility is not in compliance.
- The most common enforcement actions are revocation, denial, or nonrenewal of a license; emergency or immediate closure of a facility; issuance of a conditional license; and civil fines.
- Since 2005 the number of states posting inspection reports has more than quadrupled, increasing from 9 states to 43 states in 2017.
- More states require licensing line staff to complete training each year (73 percent, up from 53 percent).

Trends in State Licensing Requirements for Child Care Centers

The information in this section was compiled and analyzed from the licensing regulations for child care centers posted in the [National Database of Child Care Licensing Regulations](#) that were in effect on December 31, 2017.

Child Care Centers Licensed

- ◆ All states and the District of Columbia license child care centers.

Dates of Regulations

- Thirty-six states (71 percent) made changes to their child care center licensing regulations since the data were last collected in 2014. Of these 36 states, 31 had new regulations go into effect in 2016 and 2017.
- One state (Hawaii) has not changed its regulations since 2002.

Number of Licensed Child Care Centers

- ◆ In 2017, a total of 109,414 licensed child care centers were in the United States, with a total of 233,230 licensed facilities (child care centers, family child care homes, and group child care homes) overall, as shown in table 1. Child care centers are 47 percent of the total number of licensed child care facilities.

↓ The number of child care centers has decreased slightly (0.66 percent) since 2014. The total number of licensed centers and homes decreased by 10 percent.

- States reported that increased regulations and the economy are reasons for the decrease. They also mentioned that many providers are aging and retiring.

Table 1. Number of Licensed Child Care Centers, 2014 and 2017

Number of Facilities ^a	2014	2017	Difference	Percentage Change
Child care centers	110,146	109,414	-732	-0.66%
Total number of licensed facilities	260,014	233,230	-26,784	-10.30%

Notes: *N* = 51 states (including the District of Columbia).

^a Data about the number of licensed facilities were collected in the NARA Child Care Licensing Programs and Policies Survey.

Licensed Capacity in Child Care Centers

- ◆ In 2017, there were 9.9 million licensed slots in all child care facility types, as shown in table 2.³
 - ↑ The number of licensed slots in child care centers increased by 3.35 percent from 2014 to 2017. The total licensed capacity for centers as well as family and group child care homes increased by 0.54 percent during that same time period.
- ◆ Eighty-seven percent of licensed child care slots are in child care centers.

Table 2. Licensed Capacity in Child Care Centers, 2014 and 2017

Licensed Capacity ^a	2014	2017	Difference	Percentage Change
Child care centers	8,357,762	8,638,085	280,323	+3.35%
Total licensed capacity	9,844,604	9,897,679	53,075	+0.54%

Notes: *N* = 49 states (including the District of Columbia). Two states (Alabama and Idaho) were not included because they did not provide data about licensed capacity in both 2014 and 2017.

^a Data about licensed capacity were collected in the NARA Child Care Licensing Programs and Policies Survey.

Definition of Licensed Child Care Centers

There are several common elements in states' definitions of center-based facilities that must be licensed.

- ◆ Three-quarters of states (78 percent) define a center by the minimum number of children in the facility.
- ◆ Most states (71 percent) define a center as a facility that operates for less than 24 hours or for any part of a 24-hour day.
- ◆ Nearly half of states (47 percent) also define a center as operating on an ongoing and regular or scheduled basis.
- ◆ Other common definition elements include services provided for compensation, ages of the children in the facility, and the number of hours that services are provided.

³ Data are based on responses from 49 states (including the District of Columbia). Two states (Alabama and Idaho) did not provide data about licensed capacity in both 2014 and 2017 and were not included in the analysis of licensed capacity.

Licensing Exemptions

State child care licensing regulations include definitions of the types of center-based facilities that are exempt from licensing. Table 3 shows the most common exemptions from licensing for center-based facilities.

Table 3. Most Common Licensing Exemptions, 2017

Licensing Exemptions	Percentage of States
Facilities where parents are on the premises (for example, child care services in a shopping mall or health club)	59%
Preschool programs operated by public schools or approved by the state's department of education	57%
Recreation programs, instructional classes, and club programs	55%
Summer day camps	55%
Facilities with a small number of children in care	51%
Facilities operating a small number of hours per day or week	37%
Child care offered during religious services	31%

Note: $N = 51$ states (including the District of Columbia).

- ◆ Twelve states have various licensing exemptions for child care programs operated by religious organizations:
 - Six states exempt these programs from all licensing requirements and processes—Alabama, Florida, Indiana, Missouri, South Carolina, and Virginia.
 - Three states exempt child care programs that are operated by private educational institutions affiliated with religious organizations—Illinois, Tennessee, and Texas.
 - Three states exempt these programs from some licensing requirements and processes—Arkansas, Maryland, and North Carolina.

Staff Roles and Age Requirements

- ◆ All states that license child care centers have requirements that relate to director and teacher staff roles.
 - ↑ Since 2014, three states (Delaware, Iowa, and North Dakota) added the role of master teacher to their child care center requirements. States with this role typically require higher qualifications for education than they do for the typical teacher role. States may call this role lead teacher, supervisor, or another title.

- ◆ The most common age requirements are that directors be a minimum of 21 years old; master teachers and teachers be at least 18 years old, and assistant teachers and aides be 16 years of age or older.

Defining Child Care Center Roles

The child care center **director** is the administrator who is ultimately responsible for establishing the program, choosing and supervising all other staff, managing both income and expenditures, and maintaining quality.

The role of **master teacher** in this study reflects that this person is required to have more training, experience, or skills than other teachers. This position is often called a lead teacher, head teacher, chief caregiver, fully qualified teacher, child care associate, or supervisor by the states. The **teacher** is the adult in a center classroom who can be solely responsible for a group of children. **Assistant teachers** and **aides** meet fewer qualifications and must always be supervised in their work with children.

Staff Education and Ongoing Training Requirements

- ◆ Nearly all states require center directors to have a high school diploma or General Educational Development (GED) certificate, have preservice training or experience, and complete a minimum number of hours of training each year, as shown in table 4. This is also true for states with requirements for the master teacher role.

↑ Since 2014, 2 states (Maryland and New York) have added the requirement that assistant teachers must have a high school diploma or GED.

Table 4. Number of States with Requirements for High School Diploma or GED, Preservice Qualifications, and Ongoing Training, 2017

Center Staff Role	Role Regulated	High School Diploma or GED ^a	Preservice Qualifications	Ongoing Training
Director	51	47	49	48
Master teacher	19	16	19	17
Teacher	51	34	41	49
Assistant teacher	30	15	21	27
Aide	19	5	10	13

Notes: *N* = 51 states (including the District of Columbia).

^a Required qualifications vary by role and state. In some cases, only a high school diploma or equivalent is required, but most of the time, other preservice qualifications—such as training, credentials, or experience—are also necessary.

- ◆ The most common **minimum preservice 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 GED. Many states have requirements for the type of experience needed.⁴

⁴ In most states, directors must have a high school diploma in addition to other preservice qualifications such as training, credentials, or experience. For teachers, a high school diploma is usually the only required qualification, or it may be paired with experience.

- ↑ Five states have changed the amount of preservice training required for directors since 2014—Arkansas, Delaware, the District of Columbia, Maryland, and Vermont.
 - Two of these states increased the amount of administrative training required for directors—Maryland and Vermont.
- ↑ Seven states changed the amount of preservice training required for teachers since 2014—the District of Columbia, Maryland, New York, North Dakota, Tennessee, Texas, and Vermont.
- ◆ The number of **ongoing training hours** required annually ranges from 4 to 33 for center directors and 4 to 30 for teachers. The median number of required training hours for all center roles is 15. Many states specify the content of ongoing training, especially for teachers (88 percent) and directors (88 percent).
- ↑ Eight states have increased the number of ongoing training hours for at least one center role since 2014—Alaska, the District of Columbia, Louisiana, New Hampshire, Nevada, Ohio, Vermont, and Wyoming.
- ↑ Four states added an ongoing training requirement for assistant teachers—Colorado, Maryland, New York, and Rhode Island.

Orientation Training

- ◆ Forty-seven states (92 percent) require child care center staff to complete some type of orientation training to work in a center.
 - ↑ In 2014, there were 29 states (55 percent) that required center staff to complete an orientation training.
- ◆ Thirty states require centers to provide orientation training to new employees and volunteers. Orientation training is often the responsibility of the center director.

Health and Safety Topics Required in Preservice and Orientation Training

First Aid and CPR

- ◆ As shown in table 5, 51 states require center teachers to complete first aid training, and 50 states require cardiopulmonary resuscitation (CPR) training before working with children or soon after employment. Thirty-nine of the states requiring CRP training (78 percent) specify that the training must focus on infants and children.

Table 5. Number of States with First Aid and CPR Training Included in Preservice or Orientation Licensing Requirements, 2014 and 2017

First Aid and CPR Training	2014 (N = 53)	2017 (N = 51)
First aid training required	51	51
Require at least one staff member with training to always be on duty	35	42
Training focused on infants and children	15	22
CPR training required	51	50
Require at least one staff member with training to always be on duty	39	42
Training focused on infants and children	38	39

Notes: *N* = 53 states (including the District of Columbia and 2 territories) in 2014. *N* = 51 states (including the District of Columbia) in 2017.

Health and Safety Training Topics

- ◆ As shown in table 6, in 2017, 78 percent of states required center staff to complete preservice or orientation training related to detecting and reporting child abuse and neglect. Sixty-nine percent require center staff to complete training in emergency preparedness, and 63 percent require training in preventing the spread of infectious disease.
- ↑ Table 4 also shows that several states added preservice or orientation training requirements from 2014 to 2017. The largest increases were in the topics related to the care of infants—reducing sudden infant death syndrome and preventing shaken baby syndrome.

Table 6. Number of States with Health and Safety Training Topics Included in Preservice or Orientation Licensing Requirements, 2014 and 2017

Health and Safety Training Topics	2014 (N = 53)	2017 (N = 51)
Recognition and reporting of child abuse and neglect	38	40
Emergency preparedness and response planning	30	35
Prevention and control of infectious diseases	30	32
Reduction of sudden infant death syndrome and use of safe sleeping practices	17	31
Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment	11	26
Administration of medication	16	24
Precautions in transporting children	7	19
Prevention of and response to emergencies due to food and allergic reactions	n.d.	15

Health and Safety Training Topics	2014 (N = 53)	2017 (N = 51)
Building and physical premises safety	n.d.	14
Handling and storage of hazardous materials and the appropriate disposal of bio contaminants	n.d.	14

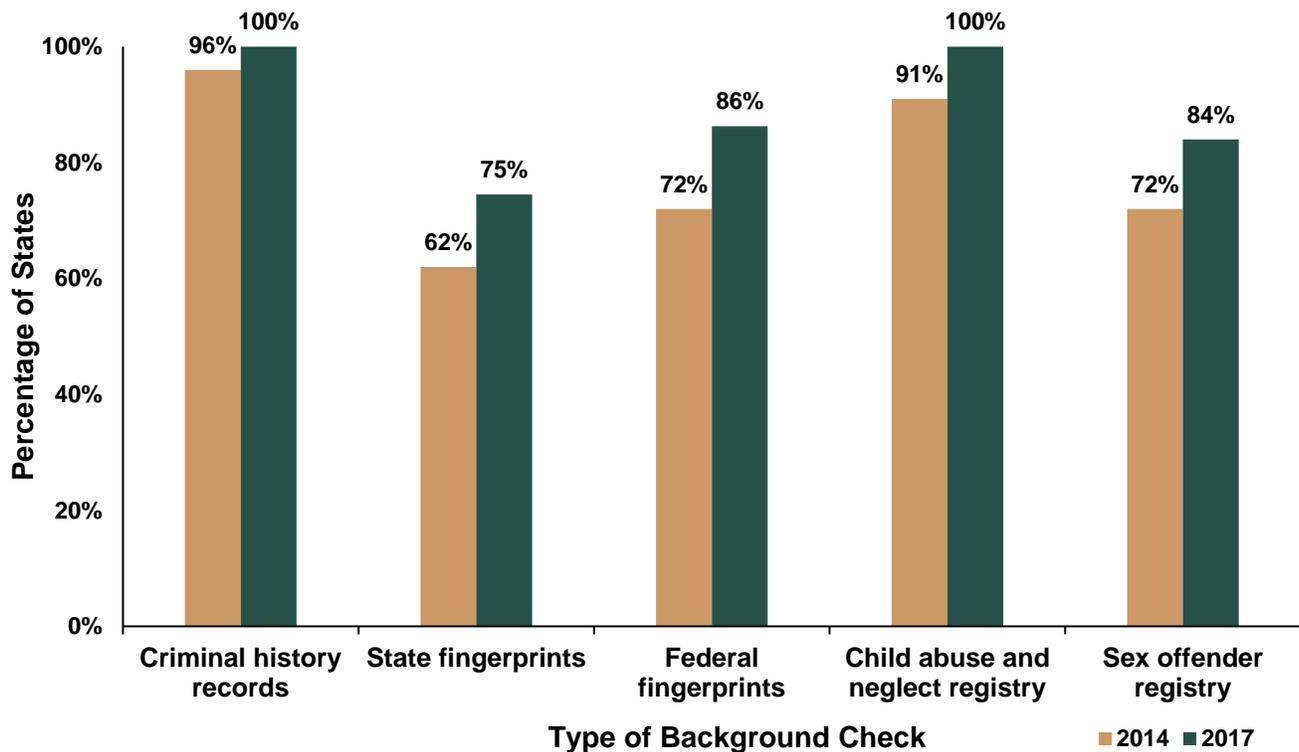
Notes: N = 53 states (including the District of Columbia and 2 territories) in 2014. N = 51 states (including the District of Columbia) in 2017.
n.d. = Data are not available from 2014.

Background Checks

- ◆ All states require at least one type of background check for center staff prior to hiring, with all states requiring checks of criminal history records and child abuse and neglect registries. Forty-five states (88 percent) require center staff to have fingerprint checks (either state, federal, or both).

↑ As shown in figure 1, the percentage of states that require checks of fingerprints, child abuse and neglect registries, and sex offender registries has increased since 2014.

Figure 1. Background Check Requirements for Child Care Centers, 2014 and 2017



Notes: N = 53 states (including the District of Columbia and 2 territories) in 2014. N = 51 states (including the District of Columbia) in 2017.

- ◆ Thirty-four states (67 percent) require all five types of background checks—criminal history records, state fingerprints, federal fingerprints, child abuse and neglect registries, and the sex offender registry—for center staff.
 - ↑ The number of states that conducted all five types of background checks was 16 (30 percent) in 2014.
- ◆ Thirty-eight states (75 percent) require center staff to sign criminal-status statements.
- ◆ Twenty-seven states (53 percent) require background checks to be completed every 5 years. Twenty states (39 percent) require checks be completed more frequently, ranging from annually to every 4 years.

Staff Health and Hiring Requirements

- ◆ Thirty-five states (69 percent) require center staff to have a physical exam or provide a health statement from a physician before working with children.
- ◆ Thirty-six states (71 percent) require center staff to have a tuberculosis screening.
- ◆ Half of states (26; 51 percent) require references when hiring center directors or other staff.

Child-Staff Ratios and Group Sizes

- ◆ All states have requirements for child-staff ratios.
 - ↑ Since 2014, 4 states have lowered child-staff ratios for at least 1 age group—Arkansas, Louisiana, Nevada, and Vermont.
- ◆ Thirty-five states (69 percent) regulate group size for all age groups (see age of children column in table 5). An additional 7 states regulate group size for at least 1 age group.
 - ↑ In 2014, 31 states (59 percent) regulated group size for all age groups, and 10 states (19 percent) regulated group size for at least 1 age group. Since 2014, New Mexico and Nevada added group-size requirements for all age groups; Arkansas, Rhode Island, and Vermont added group-size requirements for at least 1 age group. Those 3 states now regulate group sizes for all ages.
 - ↑ Arkansas and Vermont lowered group sizes for at least 1 age group.
- ◆ Tables 7 and 8 show that only a few states with the lowest child-staff ratios and group sizes meet or exceed the recommendations in *Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs* (CFOC), 3rd edition (American Academy of Pediatrics et al., 2019).

Table 7. Range of State Child-Staff Ratio Requirements for Child Care Centers, 2017

Age of Children	Lowest Required Ratio	Number of States	Highest Required Ratio	Number of States	Most Common Ratio	Number of States	CFQC Guidelines
Infant							
6 weeks	3:1	3	6:1	2	4:1	33	3:1
11 months	3:1	3	6:1	3	4:1	32	3:1
Toddler							
18 months	3:1	1	9:1	2	6:1	15	4:1
35 months	4:1	2	12:1	1	8:1	13	4:1
Preschool							
3 years	6:1	1	15:1	4	10:1	22	7:1
4 years	8:1	1	20:1	2	10:1	17	8:1
School age							
5 years	9:1	1	25:1	2	15:1	13	8:1
10 years	10:1	1	26:1	1	15:1	16	12:1

Note: $N = 51$ states (including the District of Columbia) in 2017.

Table 8. Range of State Group-Size Requirements for Child Care Centers, 2017

Age of Children	Lowest Required Group Size	Number of States	Highest Required Group Size	Number of States	Most Common Group Size	Number of States	CFQC Guidelines
Infant							
6 weeks	6	1	20	1	8	20	6
11 months	6	1	20	1	8	19	6
Toddler							
18 months	8	6	20	2	12	14	8
35 months	8	2	22	1	20	9	8
Preschool							
3 years	14	1	30	2	20	18	14
4 years	20	17	36	1	20	17	16
School age							
5 years	20	9	40	2	30	13	16
10 years	20	2	50	1	30	16	24

Note: $N = 51$ states (including the District of Columbia).

- ◆ Forty-seven states (92 percent) allow child care centers to have mixed-age groups of children. All these states have requirements about child-staff ratios for mixed-age groups, and 29 (57 percent) have requirements about group size for mixed-age groups. Most states base mixed-age group ratios (22 of 47 states; 47 percent) and group size (14 of 29 states; 48 percent) on the age of the youngest child in the group.

Supervision of Children

- ◆ Forty-eight states (94 percent) have requirements for staff on the supervision of children in care. Among those states, some specify that staff must always be able to see or hear children or that staff must be free of other duties while supervising children.
- ◆ All states have specific requirements about the supervision of children during at least one of the times or activities listed in table 9.

Table 9. Supervision Requirements for Child Care Centers, 2017

Times and Activities	Number of States
Transportation in vehicles	48
Naptime	46
Field trips	44
Swimming or water activities	43
Evening or overnight care	37
Outdoor play	31
Large-group activities	17

Note: *N* = 51 states (including the District of Columbia).

Health Requirements and Medical Care

- ◆ Thirty-two states (63 percent) require children to have a physical exam when enrolling in a center.
- ◆ As shown in table 10, all states require children to have immunizations to enroll in centers. However, most of these states allow exemptions from immunization requirements if written statements are provided from a parent or guardian (71 percent) or a physician (67 percent).

Table 10. Immunization Requirements for Children in Centers, 2017

Immunization Requirements	Number of States
Immunization requirements for children	
Children are required to have immunizations to enroll in a center.	51
State sets time for when immunizations records must be submitted to the center after enrollment.	28
State has requirements that address immunization records for homeless families.	9

Immunization Requirements	Number of States
Immunization exemptions for children	
State allows parents and guardians to provide a written statement that they do not wish to have their child immunized.	36
State allows physicians to provide a written statement for exemption from immunizations for medical need.	34
State allows centers to exclude children until immunization records or exemption statements are provided	22
State allows centers to accept a child on a conditional basis if not all immunizations are complete.	11
State allows centers to refuse to accept children who have been exempted from immunization by parents.	2

Note: $N = 51$ states (including the District of Columbia).

- ◆ All states have requirements about the administration of medication to children. Centers in nearly all these states must
 - obtain permission from parents to administer medications (49 states; 96 percent),
 - keep records of medications given to children (47 states; 92 percent), and
 - get written instructions about how to give the medication to children (44 states; 86 percent).
- ◆ Twenty-four states (47 percent) require center staff to complete training about the administration of medication.
- ◆ Forty-one states (80 percent) allow centers to exclude children who are mildly ill, meaning that centers can require children to stay at home until they are well enough to return to the program. Sixteen states' requirements include a list of the symptoms of illness that can be used to determine whether a child should be at home.
- ◆ Nineteen states (37 percent) require centers to have a health consultant available to the center for medical advice and other medical services.

Nutrition and Maintaining Healthy Weight

- ◆ All states have requirements for centers about the nutritional content of meals and snacks served to children.
- ◆ Table 11 shows the number of states with requirements in their licensing regulations that help with preventing obesity and maintaining healthy weight in young children. Some of the small decreases and inconsistencies between 2017 and 2014 are due to two territories, which were included only in the 2014 data.

Table 11. Number of States with Requirements for Child Care Centers about Maintaining Healthy Weight in Children, 2014 and 2017

Healthy Weight Requirement	2014 (N = 53)	2017 (N = 51)
Nutrition		
Water for drinking must be freely available to children throughout the day.	43	44
Requirements are in place about breastfeeding or feeding breast milk to children in care.	43	45
Fruits or vegetables must be served at every meal.	19	19
Soft drinks or other sugary drinks are prohibited.	8	7
Providers must limit servings of 100 percent juice to one 4- to 6-ounce serving per day.	3	3
Low-fat or nonfat milk must be served to children age 2 and older.	3	4
Physical activity		
Daily outdoor play is required when weather permits.	47	46
Duration of daily physical activity is specified.	11	11
Screen time		
State has rules about children's use of television, computers, or other electronic media.	26	25
State requires that content of electronic media is age-appropriate, educational, nonviolent, and the like.	18	17
State sets limits on the amount of screen time allowed.	15	14
Use of electronic media is prohibited for children younger than age 2.	12	12

Notes: N = 53 states (including the District of Columbia and 2 territories) in 2014. N = 51 states (including the District of Columbia) in 2017.

Activities, Equipment, and Materials

- ◆ Forty-nine states (96 percent) specify the types of activities—such as outdoor play, active play, quiet play, naptime, and group activities—that must be included in children's daily schedules.
- ◆ Forty-two states (82 percent) 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 and literacy, cognitive and intellectual, and emotional development.
- ◆ Forty states (78 percent) have requirements for the types of equipment and materials centers must have for children, such as indoor and outdoor gross-motor equipment, fine-motor manipulatives, books and other literacy materials, and art supplies.

Family Involvement

- ◆ Twenty-three states (45 percent) have family involvement requirements for centers, including requiring centers to provide opportunities for parents to be involved in program activities.
- ◆ Forty-five states (88 percent) have requirements about communication with families, with half of these states (22; 49 percent) requiring centers to keep logs of children's care and communicate with families. More than a third of these states (16; 36 percent) require centers to hold regularly scheduled meetings with families.
- ◆ Forty-seven states (92 percent) require centers to provide families with access to the facility any time their child is present.

Behavioral Guidance and Discipline

- ◆ Forty-four states (86 percent) specify the types of discipline or behavior guidance that centers can use with children.
 - One state (South Carolina) allows corporal punishment by specifically listing it as a form of acceptable discipline in its licensing regulations.
- ↑ Since 2014, Louisiana removed requirements that allowed corporal punishment for children in centers.
- ◆ All states specify forms of discipline that centers are not allowed to use with children. More than 90 percent of states prohibit physical or corporal punishment (50 states), denial of food (49 states), and abusive language (47 states).
- ◆ Forty-three states (84 percent) require centers to have a written policy about behavioral guidance and discipline.
- ◆ Eleven states (22 percent) require centers to have policies about the expulsion of children from centers—Colorado, Connecticut, Florida, Massachusetts, Nebraska, New Hampshire, New Jersey, New Mexico, Rhode Island, Tennessee, and Vermont.

Child Assessment

- ◆ Three states (Massachusetts, Nevada, and Vermont) require centers to use observation or assessment methods, or both, to document children's development and to share the results of assessments with families.

Care of Infants and Toddlers

- ◆ Forty-eight states (94 percent) require that infants be put on their backs to sleep to reduce incidences of sudden infant death syndrome (SIDS). As shown in table 12, most states have requirements about physician authorization for different sleep positions and prohibit the use of soft bedding in cribs.
- ↑ One state (Louisiana) has added these requirements since 2014.

Table 12. Number of States with Requirements for Child Care Centers about Reducing the Risk of SIDS, 2014 and 2017

SIDS Reduction Requirements	2014 (N = 53)	2017 (N = 51)
Infants must be placed on their backs to sleep.	47	48
Physicians may authorize different sleep positions for infants.	38	39
Soft bedding or materials must not be used in cribs.	30	31
Facilities must use cribs that meet the U.S. Consumer Product Safety Commission requirements.	28	27
Staff members are required to complete preservice or orientation training about reducing SIDS.	16	16
Parents can authorize a different sleep position for infants.	6	6

Notes: *N* = 53 states (including the District of Columbia and 2 territories) in 2014. *N* = 51 states (including the District of Columbia) in 2017.

- ◆ Among the 49 states that have requirements for infant/toddler care, 23 (47 percent) require that centers assign a primary, consistent caregiver to each child. This has not changed since 2014.
- ◆ Fifty states (98 percent) have requirements about how to feed infants, and 45 (88 percent) have requirements about breastfeeding or feeding breast milk to children in care.
- ◆ Seventeen (35 percent) states have specific qualifications for staff who work with infants and toddlers that include training on how to care for these age groups in addition to the required health and safety topics.

Care of School-Age Children

- ◆ Seventeen states have a separate set of regulations for facilities that care for only school-age children—Arkansas, California, Colorado, Florida, Hawaii, Indiana, Kansas, Nebraska, New Mexico, New York, North Dakota, South Dakota, Texas, Utah, Vermont, Washington, and West Virginia.
- ◆ In addition, 47 states (92 percent) have incorporated requirements for the care of school-age children into the regulations for mixed-age child care centers. Of these 47 states,
 - 43 states (91 percent) specify the types of activities centers should provide for school-age children,
 - 28 states (60 percent) have specific qualifications for staff that work with school-age children,
 - 28 states (60 percent) require centers to have specific types of equipment for school-age children, and
 - 20 states (43 percent) have requirements specific to the supervision of children in this age group.

Care of Children with Disabilities or Other Special Needs

- ◆ Thirty-eight states (75 percent) have requirements in their child care center regulations about the care of children with special needs. Table 13 includes some of the most common requirements for child care centers.

Table 13. Requirements about the Care of Children with Disabilities or Special Needs for Child Care Centers, 2017

Requirements about the Care of Children with Disabilities	Number of States
The facility must keep information about disabilities or special needs in children's records.	19
The facility must obtain information from parents about children's disabilities or special needs.	18
The facility must develop activity plans or accommodate existing plans for children with disabilities or special needs.	17
For children identified as having a disability or special need, the facility must keep individualized education program plans or individual family services plans in records.	10
The facility staff must communicate with families about children's progress concerning special needs.	10
The facility must develop plans for caring for children with disabilities or special needs.	10
The facility must obtain information from physicians about children's disabilities or special needs.	7

Note: $N = 51$ states (including the District of Columbia).

Transportation

- ◆ Forty-nine states (96 percent) have requirements about transporting children in vehicles. Table 14 shows other requirements states have for transporting children.

Table 14. Transportation Requirements for Child Care Centers, 2017

Transportation Requirements	Number of States
Safety restraints for children (for example, seat belts, car seats)	45
Driver requirements (for example, driver's license, minimum-age requirements)	46
Specific child-staff ratio requirements for transporting children in vehicles	38
Supervision of children when they board and exit vehicles	23
Attendance records of children being transported	19
Additional checks for children remaining on board once vehicles are unloaded	7

Note: $N = 51$ states (including the District of Columbia).

Facility Health and Safety Requirements

- ◆ As shown in table 15, between 2014 and 2017, there have been some increases in the number of states with common health and safety requirements for child care centers, especially in emergency preparedness and reporting requirements. Some of the small decreases and inconsistencies between 2017 and 2014 are caused by the difference in sample size (two territories were included only in the 2014 data).
- ↑ Six states gave added requirements about having **fire extinguishers** at centers—Colorado, Minnesota, Texas, Utah, Vermont, and Wisconsin. Three of these states also added requirements about having **smoke detectors**—Colorado, Utah, and Wisconsin.
- ↑ Seven states have added requirements for centers about **emergency preparedness procedures**—Arizona, Louisiana, New Mexico, New York, North Carolina, Rhode Island, and Wyoming.
- ↑ Five states added requirements for centers about having an **emergency and evacuation plan**—Georgia, Louisiana, North Carolina, Texas, and Wyoming.
- ↑ Seven states added requirements for centers to **report injuries** that happen to children to the licensing agency—the District of Columbia, Florida, Iowa, Kansas, Louisiana, New Hampshire, and Tennessee.
- ↑ Five states added requirements for centers to **report deaths** of children to the licensing agency—the District of Columbia, Florida, Louisiana, Tennessee, and Vermont.

Table 15. Number of States with Requirements about Health and Safety for Child Care Centers, 2014 and 2017

State Health and Safety Requirements	2014 (N = 53)	2017 (N = 51)
Environmental tests and inspections		
Environmental tests (for example, lead paint, lead in water, asbestos, radon)	13	13
Environmental health inspections ^a	42	36 ^b
Building code inspections ^a	40	38
Indoor and outdoor space		
Amount of indoor space per child is 35 square feet	41	41
Amount of outdoor space per child is 75 square feet	31	31
Surfaces under outdoor play equipment	41	39
Fence or other enclosure around outdoor space	41	42
Protection from bodies of water (for example, ponds, rivers, lakes)	27	26
Swimming pool requirements	45	44
Fire safety and emergency preparedness		
Fire inspections ^a	52	51
Fire and emergency drills	49	48
Smoke detectors required in centers	14	17
Fire extinguishers required in centers	14	20
Emergency preparedness procedures	40	46

State Health and Safety Requirements	2014 (N = 53)	2017 (N = 51)
Emergency and evacuation plans	16	21
Security		
Daily attendance records	41	40
Procedures for accepting and releasing children	28	27
Insurance		
Liability insurance	25	26
Automobile insurance	31	30
Reporting injuries, deaths, and child abuse and neglect		
All serious injuries that happen to children reported to licensing agency	39	45
All deaths of children reported to licensing agency	39	43
Suspected child abuse and neglect reported; role as mandated reporter	n.d.	48
Handwashing		
Handwashing for staff	48	48
Handwashing for children	49	49
Diapering		
Requirements for diapering	50	50
Sanitation of diapering area	43	42
Specification of when diapers are changed	32	33
Smoking policies		
Smoking not allowed in the facility, on the grounds, in areas used to care for children, or in the presence of children	49	50
Firearms and other hazards		
Firearms not allowed in facility	25	24
Restricted access to hazardous supplies and materials	48	48

Notes: N = 53 states (including the District of Columbia and 2 territories) in 2014. N = 51 states (including the District of Columbia) in 2017.

n.d. = Data are not available from 2014.

^a Data about environmental health, building code, and fire inspections were collected in the NARA Child Care Licensing Programs and Policies Survey.

^b The difference in the number of states reporting on environmental health inspections includes a decrease of 7 states from 2014 to 2017 and an increase of 3 states that added the requirement since 2014: the District of Columbia, Florida, and Washington.

Trends in State Licensing Agency Policies

The information in this section was compiled and analyzed from the 2014 and 2017 NARA Child Care Licensing Programs and Policies Survey. Some of these findings are about policies for child care centers and some are about policies for all types of licensed facilities.

Licensing Staff Assignments and Caseloads for All Facility Types

- ◆ Most state licensing agencies (80 percent) assign licensing line staff to inspect both child care centers and homes.⁵
- ◆ Based on information reported from state licensing agencies, licensing line staff carry an estimated average caseload of 81 centers and homes.
 - ↓ The average caseload for licensing line staff decreased from 97 facilities in 2014.
- ◆ Across the board, states' reported caseloads that ranged from 26 facilities in Tennessee to 182 in Rhode Island.
 - NARA recommends that licensing agencies calculate workload standards to account for local variables, but the average workload for inspectors should not exceed 50–60 facilities (Lapp-Payne, 2011).

Frequency of Licensing for Child Care Centers

- ◆ Child care center licenses are valid in two-thirds (67 percent) of the states for either 1 or 2 years (39 percent and 27 percent, respectively). Nonexpiring licenses are issued for child care centers in 8 states (16 percent)—Arkansas, California, Colorado, Nebraska, Ohio, Oklahoma, Washington, and Wisconsin.
 - ↓ Eleven states reported having nonexpiring licenses in 2014. The states that no longer had nonexpiring licenses in 2017 are Maryland, South Dakota, and Texas.
- ◆ Forty-three states (84 percent) allow all exempt child care facilities to voluntarily apply for a license.

Types of Inspections for Child Care Centers

- ◆ As shown in table 16, all states conduct an inspection **before issuing a license** to a center. Seventy-eight percent of states conduct only an **announced** inspection before issuing a license.
 - ↑ In 2014, among states that conducted an inspection before issuing a license, 64 percent conducted **only announced** inspections. In 2014, more states (11) reported conducting both announced and unannounced inspections before issuing a license to a center than in 2017 (3 states).
- ◆ Forty-nine states (96 percent) make **routine compliance** inspections, and 98 percent of those states always conduct these inspections **unannounced**. The two states that reported not conducting routine inspections reported that they conduct inspections for license renewal.
 - ↑ In 2014, 75 percent of states that conducted routine inspections in centers used **only unannounced** inspections for this purpose, compared to 98 percent in 2017. In 2014, more states (12) reported conducting both announced and unannounced inspections for routine compliance than in 2017 (1 state).

⁵ See the “Child Care Licensing Staff Requirements” section for findings about licensing staff qualifications and training.

- ◆ Most of the 38 states that conduct inspections for **license renewal** in centers use unannounced inspections for this purpose.

Table 16. Number of States Conducting Announced and Unannounced Inspections, by Type, in Child Care Centers, 2014 and 2017

Type of Inspection	2014 (N = 53)	2017 (N = 51)
Inspection conducted before issuing a license	53	51
Announced only	34	40
Unannounced only	8	7
Both announced and unannounced	11	3
No response	0	1
Inspection conducted for routine compliance	53	49
Announced only	1	0
Unannounced only	40	48
Both announced and unannounced	12	1
Inspection not conducted	0	2
Inspection conducted for license renewal	40	38
Announced only	13	11
Unannounced only	21	25
Both announced and unannounced	5	2
Inspection not conducted	0	4
License is nonexpiring (no renewal)	12	8
No response	1	1

Notes: N = 53 states (including the District of Columbia and 2 territories) in 2014. N = 51 states (including the District of Columbia) in 2017.

Frequency of Inspections for Child Care Centers

- ◆ As shown in table 17, most states inspect child care centers **at least once a year**.

↑ Forty-eight states (94 percent) reported conducting routine inspections at least once a year, compared with 47 states (89 percent) in 2014.

Table 17. Frequency of Licensing Inspections in Child Care Centers, Number of States in 2014 and 2017

Frequency of Inspections	2014 (N = 53)	2017 (N = 51)
More than three times a year	2	3
Three times a year	6	3
Twice a year	14	15
Once a year	25	27
Once every 2 years	5	2
Once every 3 years	0	1
Less than once every 3 years	1	0

Notes: N = 53 states (including the District of Columbia and 2 territories) in 2014. N = 51 states (including the District of Columbia) in 2017.

Monitoring Tools Used with All Facility Types

States report using various tools and strategies to monitor child care facilities' compliance with licensing requirements. These include conducting abbreviated inspections based on a selected set of requirements, determining frequency of inspections based on facilities' compliance records, and providing technical assistance (TA) to child care providers to support compliance with requirements. Most states have also identified requirements that pose the greatest risk of harm to children if a center or home is not in compliance with them.

Abbreviated Compliance Inspection Forms

- ◆ Thirty-five states (69 percent) report using abbreviated compliance forms that shorten the list of requirements checked during inspections.
 - Twenty-three (66 percent) of these states report that abbreviated compliance forms are used during routine compliance inspections.
 - Twenty-three (66 percent) of these states have specific policies for determining when to switch from an abbreviated compliance form during an inspection to a full compliance review of all regulations.
 - Most states report that they often chose the rules for inclusion in abbreviated compliance forms based on a consensus about rules considered most critical to protecting children's health and safety and an assessment of risk of harm to children.
- ▲ In 2017, 10 states (29 percent) reported developing a set of key indicators that could predict overall compliance as a method for determining the rules to include on an abbreviated compliance form. Eight states reported using key indicators in 2014.

Differential Monitoring Based on Compliance

“Differential monitoring” is a method for determining the frequency of monitoring based on an assessment of a facility’s compliance with regulations.

- ◆ Eighteen states (35 percent) report using differential monitoring to determine the frequency of inspections.

Risk Assessment of Requirements

- ▲ In 2017, 33 states (65 percent) reported having conducted a risk assessment to identify the requirements in their licensing regulations that pose the greatest risk of harm to children. Twenty-eight states (53 percent) reported conducting a risk assessment in 2014.
 - Most of the 33 states that conducted a risk assessment in 2017 identified categories of requirements as high-risk (13; 39 percent) or identified the highest-risk requirements (6 states; 18 percent). Thirteen states (39 percent) assigned a risk level or weight to all requirements.
- ◆ Table 18 shows the common uses for a risk assessment of licensing requirements as it relates to monitoring and enforcement efforts.

Table 18. States’ Use of Risk Assessment of Licensing Requirements, 2017

Use of Risk Assessment	Number of States
Determining frequency of inspections based on risk level of violations	17
Determining enforcement actions based on risk level of violations	15
Categorizing violations	15
Monitoring high-risk rules during abbreviated inspections	14

Note: *N* = 33 states that report conducting a risk assessment of their licensing requirements in 2017.

Technical Assistance

- ◆ Nearly all states (49; 96 percent) report providing technical assistance and consultation during monitoring activities to help programs achieve compliance with regulations.
- ◆ Forty-five states (88 percent) report providing TA to programs to help with specific noncompliance issues.
- ◆ Thirty-four states (67 percent) report that they provide TA to help programs improve quality and exceed minimum licensing requirements.
- ◆ The types of TA that licensing agencies provide to individual child care centers include consultation and resources to help with specific compliance issues. Licensing agencies also offer training and resources to groups of child care providers about topics on which all providers need information.

Use of Technology for Licensing Child Care Facilities

- ◆ Thirty-four states (67 percent) report using portable devices with specific software—such as laptops, portable digital assistants, and tablets—for capturing information during licensing inspections to help staff efficiently inspect and monitor licensed facilities.
- ◆ Twenty-one states (41 percent) have an online license application.
- ◆ Forty-seven states (92 percent) have an automated licensing data system. Three states report that their data system is in development; one state reported having no data system.
 - Fifty states (94 percent) reported that they had a licensing data system in 2014. The three states reporting that their data system is in development in 2017 reported that they had a system in 2014.
- ◆ Table 19 shows the common uses of these databases.

Table 19. States' Uses for Licensing Data Systems, 2017

Licensing Data System Uses	Number of States
Provide supervisory oversight	31
Manage caseloads	30
Analyze compliance data	29
Comply with federal reporting requirements	28
Determine staff performance	26
Evaluate workload needs	27
Assess potential enforcement actions	25
Coordinate with other agencies or programs, such as Head Start, subsidy program, Child and Adult Care Food Program, quality rating and improvement system, and prekindergarten	23
Identify technical assistance and training needs	19
Guide revisions	18
Evaluate the licensing program and measure effectiveness	20
Track serious injuries	19
Track fatalities	18
Determine differential monitoring levels	9

Note: *N* = 51 states (including the District of Columbia).

Enforcement Actions Used with Child Care Centers

- ◆ The most common enforcement actions used with facilities that are not in compliance with the regulations are revocation, denial, or nonrenewal of a license, emergency or immediate closure of a facility, and issuance of a conditional license. Table 20 shows the number of states that used these actions.

Table 20. Enforcement Actions Used in Child Care Centers, 2017

Enforcement Actions	Number of States
Revocation of license	51
Denial of license	50
Emergency or immediate closure of facility	50
Nonrenewal of license	38
Issuance of a conditional license	37
Civil fine	31
Probation	24
Consent agreement	21

Note: *N* = 51 states (including the District of Columbia).

Illegally Operating Child Care Providers

- ◆ All states respond to complaints from the public or other information received about providers operating illegally. In addition, states work with local law enforcement agencies, monitor outlets where providers advertise, and seek to educate the public with campaigns about the importance of licensing.
- ◆ Nearly all states (46; 90 percent) encourage providers operating illegally to become licensed.
- ◆ As shown in table 21, states take various actions against providers found to be operating illegally.

Table 21. Actions Taken against Providers Found to Be Operating Illegally, 2017

Actions Taken against Providers	Number of States
An injunction or cease-and-desist order may be issued.	44
Law enforcement may be contacted in certain circumstances.	39
Civil penalties or monetary fines may be assessed.	30
Misdemeanor charges may be filed.	29
Felony charges may be filed.	2

Note: *N* = 51 states (including the District of Columbia).

Complaint Investigations in Child Care Facilities

- ◆ Most states, as shown in table 22, will accept complaints about child care providers from calls to the general licensing agency telephone number. States also have forms for submitting complaints on their websites and dedicated phone numbers for taking licensing complaints. Most states will investigate complaints filed anonymously.
 - No changes were reported from states between 2014 and 2017.

Table 22. Mechanisms for the Public to Submit Complaints about Licensed Child Care Providers, 2017

Mechanisms for Submitting Complaints	Number of States
Telephone call to general licensing agency (no dedicated phone number)	43
Form to submit on licensing website	23
Telephone complaint hotline just for licensing (dedicated phone number)	17
Telephone complaint hotline shared with another program, such as child protective services	15

Notes: $N = 51$ states (including the District of Columbia).
States often report multiple mechanisms for submitting complaints.

- ◆ Nearly all states (50; 98 percent) report that the licensing agency will investigate complaints about child care providers. Thirty-seven of these states (74 percent) report using the same staff that conduct inspections to investigate complaints, and two (4 percent) report using only staff dedicated to complaint investigations. The remaining states report using various types of staff.
- ◆ Nearly two-thirds of states (32; 63 percent) report that an unannounced inspection is conducted for every complaint received. The remaining states (18; 35 percent) conduct unannounced inspections only when an onsite visit is needed for the investigation.
- ◆ States report that child abuse and neglect complaints filed against child care facilities are often investigated by the child protective services agency (37; 73 percent), the licensing agency (26; 51 percent), and law enforcement (16; 31 percent). Half of states (26; 51 percent) have a specialized unit to investigate these complaints.
- ◆ Thirteen states (25 percent) report that the licensing agency investigates all complaints made against providers who are legally exempt from licensing. More often, states (25; 49 percent) investigate only to determine or verify that the facility is legally exempt. However, more than half of states (29; 57 percent) report that allegations of abuse and neglect are referred to their child protective services agency.

Licensing Information on the Internet About Child Care Facilities

- ◆ Table 23 shows the number of states that post licensing inspection reports, complaints, and enforcement actions on a public website for consumers and providers.
 - ↑ Since these data were first collected in 2005, the percentage of states posting licensing inspection reports on the Internet has increased significantly, from 18 percent to 84 percent (National Association for Regulatory Administration & National Child Care Information and Technical Assistance Center, 2005).

↑ From 2014 to 2017, the percentage of states posting inspection reports increased from 64 percent to 84 percent. The percentage of states posting licensing complaints (mostly substantiated complaints) increased from 55 percent to 80 percent.

- ◆ Of the 43 states that post inspection reports, nearly three-quarters report that they post inspection reports either within 1 week (16 states; 37 percent) or within 1 month of the inspection (16 states; 37 percent).
- ◆ Twenty-seven states (63 percent) give child care providers the opportunity to review the report before it is posted to the Internet.
- ◆ Twenty-seven states (63 percent) provide guidance to help the public understand and interpret the posted inspection reports.

Table 23. Licensing Information Posted on the Internet, 2005, 2014, and 2017

Licensing Information Posted on the Internet	2005 (N = 51)	2014 (N = 53)	2017 (N = 51)
Licensing inspection reports	9	34	43
Full report	7	16	27
Inspection summary	2	18	16
Licensing complaints	8	29	41
All complaints	2	9	9
Substantiated complaints	6	20	32
Enforcement actions	n.d.	21	34
Corrective action plans	n.d.	n.d.	29

Notes: N = 51 states (including the District of Columbia) in 2005 and 2017. N = 53 states (including the District of Columbia and 2 territories) in 2014.

n.d. = Data are not available.

Licensing Fees for Child Care Centers

- ◆ Thirty-five states (69 percent) report that they charge child care centers a fee to obtain a license. Licensing fees for child care centers are most often based on the number of children in a facility.
- ◆ Half of these states (17; 49 percent) that charge a licensing fee use the revenue to support the licensing agency. In most of the remaining states, the revenue from licensing fees goes into states' general funds.
 - Two states (Kentucky and Virginia) report that licensing fees are used for child care provider professional development; one state (Arkansas) reports that fees are used to pay for background checks.

Child Care Licensing Staff Requirements

- ◆ Thirty-five states (69 percent) report that they require licensing line staff to have a bachelor's degree. In 26 states (51 percent), the content or major of the degree or coursework must be early childhood education, child development, or a related topic. Eighteen states (35 percent) also require experience working in a setting with children.

- ◆ Nearly all states (50; 98 percent) report that licensing line staff must complete training about the licensing system and provider requirements when they start employment. Table 24 shows the topics covered in that training.

Table 24. Training Topics Required for Licensing Staff at Start of Employment, 2017

Training Topics	Number of States
Health and safety issues	50
State's licensing policies and procedures	49
Regulatory issues	49
State's regulations	49
Provider and licensor relationships and communication	45
Identifying child abuse and neglect	43
Supervision	39
Disaster and emergency planning	38
Cultural competency and sensitivity	37
Fire safety	37
Early childhood education or child development	34
Business administration and management	23
Adult development	6

Note: *N* = 51 states (including the District of Columbia).

- ◆ Thirty-seven states (73 percent) require licensing line staff to complete additional training each year in various topics, as seen in table 25. Almost all states make training available to licensing staff through the licensing agency, local and state conferences, and community-based organizations. More than half of states receive training from outside consultants or national conferences.

↑ In 2014, 28 states (53 percent) reported that they require licensing line staff to complete additional training each year.

Table 25. Annual Training Topics Required for Licensing Staff, 2017

Training Topics	Number of States
State's licensing policies and procedures	24
Regulatory issues	22
State's regulations	22
Health and safety issues	20
Identifying child abuse and neglect	16
Cultural competency and sensitivity	14
Early childhood education or child development	14
Provider and licensor relationships and communication	13
Supervision	13
Disaster and emergency planning	13
Fire safety	11

Training Topics	Number of States
Business administration and management	7
Adult development	4

Note: $N = 51$ states (including the District of Columbia).

Child Care Licensing Staff Supports

- ◆ Most states use multiple funding sources to support licensing functions. Forty-eight states (94 percent) use the Child Care and Development Fund to hire and support child care licensing staff. Two-thirds of states (35; 69 percent) also use general state funds for this purpose.
- ◆ Six states (12 percent) use inter-rater reliability training or methods that determine how similar inspections are if conducted by different licensing staff members—Alabama, California, Georgia, Maine, Ohio, and Vermont. Two additional states—Rhode Island and South Carolina—are developing inter-rater reliability methods.
- ◆ Twenty-eight states (55 percent) have developed interpretive guidelines for state licensing regulations.
- ◆ More than three-quarters of states (78 percent) have disaster and emergency response policies that licensing staff must follow.

Conclusion

The role of licensing in the early care and education system is to provide a mandatory baseline of program standards and monitoring that will protect children from physical harm and enhance their learning and development. Within the early care and education system, licensing covers the broadest content, the largest number of children from birth to school age, and the largest population of providers.

The findings presented in this brief provide evidence that states are making changes in their licensing requirements and policies to protect the health and safety of children in out-of-home care. We found that nearly all states' licensing requirements address children's health, nutrition, and medical care; supervision of children; and use of safe sleep practices with infants. States appear to recognize the key role that teaching staff play in the well-being of children in child care centers, with many adding requirements for educational qualifications, preservice training in health and safety topics, annual professional development, and criminal background checks for center staff.

Manageable group sizes and child-staff ratios are also ways to keep children safe, and we found that some states improved their requirements in those key areas. In addition, the prevention of harm to children is related to how child care centers plan for and respond to emergencies and fires; several states increased their requirements in these areas.

Licensing agencies have policies that address monitoring child care facilities for compliance with requirements, supporting child care providers to help them comply, and acting to enforce compliance when necessary. We found that more states are visiting child care facilities at least once a year, with nearly all states conducting unannounced inspections routinely. Also, more states are making licensing inspection reports available to the public by posting them on agency websites, giving families information they need to make choices about child care.

These data and findings can help states and territories assess their licensing requirements and policies against national trends to determine changes that they may need to make. A state could also use these national findings as research-based evidence to support changes to its own licensing system. We know that these findings do not answer many questions about the effectiveness of licensing policies and hope that this will inspire other

researchers to do further analysis. However, additional products will be coming from the National Center on Early Childhood Quality Assurance, including fact sheets that go more in-depth on health and safety requirements and a new feature in the [National Database of Child Care Licensing Regulations](#) that will allow users to search data from the 2017 Child Care Licensing Study by topic and child care facility type and download state-by-state tables and summaries of the data.

References

- American Academy of Pediatrics, American Public Health Association, & National Resource Center for Health and Safety in Child Care and Early Education. (2019). CFOC online standards database [Website]. Retrieved from <https://nrckids.org/CFOC>
- Lapp-Payne, A. (2011). *Strong licensing: The foundation for a quality early care and education system: Research-based preliminary principles and suggestions to strengthen requirements and enforcement for licensed child care*. Retrieved from http://www.naralicensing.drivhq.com/publications/Strong_CC_Licensing_2011.pdf
- National Association for Regulatory Administration, & National Child Care Information and Technical Assistance Center. (2005). *The 2005 child care licensing study: Final report*. Retrieved from https://www.naralicensing.org/assets/docs/2005ChildCareLicensingStudy/2005_licensing_study_final_report_web.pdf
- National Center on Early Childhood Quality Assurance. (2015). *Research Brief #1: Trends in Child Care Center Licensing Regulations and Policies for 2014*. Washington, DC: Office of Child Care. Retrieved from <https://childcareta.acf.hhs.gov/resource/research-brief-1-trends-child-care-center-licensing-regulations-and-policies-2014>

The National Center on Early Childhood Quality Assurance (ECQA Center) supports state and community leaders and their partners in the planning and implementation of rigorous approaches to quality in all early care and education settings for children from birth to school age. The ECQA Center is funded by the U.S. Department of Health and Human Services, Administration for Children and Families.

National Center on Early Childhood Quality Assurance

9300 Lee Highway
Fairfax, VA 22031

Phone: 877-296-2250
Email: QualityAssuranceCenter@ecetta.info

Subscribe to Updates
http://www.occ-cmc.org/occannouncements_sign-up/



ADMINISTRATION FOR
CHILDREN & FAMILIES