



**VIRGINIA DEPARTMENT OF  
EDUCATION**

Office of Child Care Health and Safety

# **Protocol for Inspections at Child Day Programs**

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## FOREWORD

This document was originally created by the Division of Licensing Programs (DOLP), Virginia Department of Social Services (VDSS). It was originally amended to adopt needed changes after the transition of regulatory oversight of child day programs from VDSS to the Virginia Department of Education in 2021, and has been updated as needed to reflect current practices.

The inspection protocol is at the heart of a sustained effort by home and field office staff to increase consistency across the state. It also looks to the future by paving the way for greater participant involvement in the evaluation of care and services rendered to those in care in the various children's programs in the Commonwealth regulated or monitored by the Office of Child Care Health and Safety (OCCHS).

This "inspection protocol" provides a statewide approach to inspections to increase consistency in the processes applied by each of the inspectors in their work with providers. The focus here is on the provider's ability to meet children's needs through the actual delivery of care and services and not just "paper" compliance. The inspection tasks are designed with this in mind and are inter-connected in order to both identify potential problem areas and verify from multiple sources any non-compliance discovered during the inspection.

The components of observation and interview are emphasized and integrated into the inspection process.

The inspection protocol:

- describes OCCHS's philosophy on inspections, including the basic components and inspection strategies;
- gives forms and tools (in the appendices) for inspectors to use in gathering information and making investigative decisions during an inspection; **and**  

NOTE: Inspectors are given flexibility in terms of which tools to use and how to apply them (see appendices for required forms).
- should be applied during all mandated monitoring and renewal inspections for licensed programs, during Code compliance inspections for unlicensed programs, and for subsidy health and safety inspections.

It is hoped that by continuing to conduct child-centered inspections, OCCHS will promote an even greater emphasis among providers on the delivery of care and services to children. The degree to which it is able to achieve this will likely depend on the licensing inspectors' ability to implement this protocol accurately, consistently, and efficiently.

*The inspection is at the center of our work as licensing professionals. Its purpose is to evaluate and monitor provider compliance with applicable standards for licensure. It also gives the provider the chance to demonstrate the systems in place at the program to provide care and services to its participants. In order to achieve these goals, however, the inspector must effectively complete all the components of an inspection and employ thorough investigative techniques. This inspection protocol was created to be a guide for inspectors to assist them in the challenging task of performing an inspection.*



## 1 The Six Components

There are six basic components of an inspection:

- **Entrance Conference** – Inspectors introduce themselves briefly, hand out a brochure that outlines the basic components of the inspection process, and ask for items they will need to conduct the inspection;
- **Tour** – Inspectors walk through the building(s) directly after the entrance conference and *as soon as possible* after arrival in order to observe activities and personal interactions, talk to children and staff, examine the physical plant, and check on general health and hygiene issues;
- **Interactions and Interviews** – Inspectors speak casually to children, may have discussions with parents (either during or after an inspection), converse with staff members, and interview the program director or person in charge to gather information on compliance with standards, especially those relating to care and services to children;
- **Observations** – Inspectors observe – from the moment they drive up to the building until the conclusion of the inspection – what is happening in the program in order to assess compliance with standards. Inspectors pay special attention to the interaction between staff and children, the execution of the program’s internal policies and procedures, and the learning and recreational activities;
- **Documentation Review** – Inspectors conduct a focused examination of child and staff records, targeted on key standards and information gathered during interviews and observations; and
- **Exit Meeting** – Inspectors review the results of the inspection with the provider, listen to and discuss with the provider any disputed findings and/or comments about the inspection process, provide consultation, and request from the provider a plan of correction for any violations and ensuring future compliance.

**Note:** When inspection reports are not completed on site, an Acknowledgement of Inspection form should be provided at the exit meeting, identifying the preliminary findings. Providers are given the opportunity to provide plans of correction for any areas of noncompliance.

This section is borrowed substantially from Minnesota Department of Health's, "10 Commitments for MDH Nurses Who Survey Assisted Living Home Care"

Though the entrance conference and tour should take place at the beginning of the inspection and the exit conference at the end, the other components (or tasks) of the inspection need not occur in any particular order. This allows inspector(s) the greatest degree of flexibility in order to be responsive to the unique circumstances presented during an inspection at a given program. There is also no minimum or maximum amount of time required to complete any protocol component or an inspection generally.

The inspector(s) should be evaluating at all times whether the children in the program are receiving safe and appropriate care and services from the provider. The emphasis throughout the inspection should be on observing children as they go about daily activities and noting the way staff members interact with them.

## 2 Inspector Professionalism

As they conduct their inspections, inspectors will:

- Treat everyone they meet with dignity and respect, using "people skills" to make others feel as comfortable as possible;
- Maintain an open dialogue with directors and staff members, while gathering the information needed to complete a fair evaluation of the facility's performance;
- Enforce the regulations and their official interpretations as written;
- Look for patterns of non-compliance or risk to children, without being prescriptive in their enforcement of the standards;
- Remain objective during their information gathering, recognizing that things are not always as they appear at first glance;
- Protect confidential information gathered prior to and during the inspection, sharing it only with those who have the authority or permission to receive it; and
- Be aware of their own reactions to interpersonal conflict and strive to keep the inspection process on a professional footing.

## 3 Investigative Techniques

The focus of the inspection process should be to assess the actual delivery of care and services to children. Though the inspector must evaluate provider compliance with standards about documentation, his or her foremost concern should be with the well-being of the children. In order to do this adequately, the inspector must employ key investigative techniques for every inspection. To inspect means to check or test an individual or entity against established standards. Investigation, however, means to observe or study by close examination and systematic inquiry for the purposes of making a determination (of compliance) based on an in-depth analysis of facts. Good investigative techniques should be a component of every inspection.

### 3.1 Planning and Flexibility

Planning is essential in order to conduct a successful inspection. It assists in determining the pervasiveness and validity of violations, if there are any, and is an aid in the decision-making process. It should include both pre-planning before the start of the inspection and planning during the course of the inspection, since circumstances are unpredictable.



#### PROVIDER FILE REVIEW

**Prior to the inspection, the inspector should do a thorough review of the program file, paying special attention to the following:**

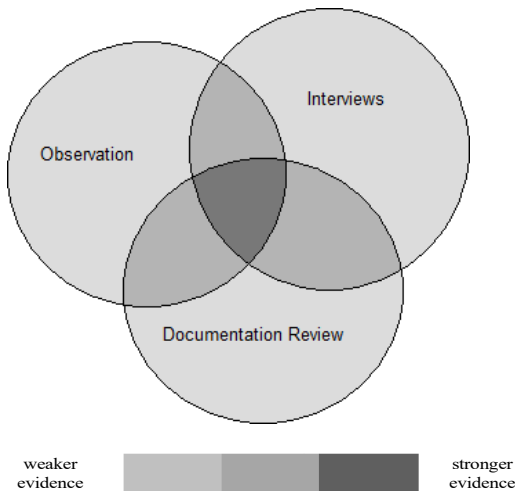
- **The most recent application or filing;**
- **The most recent staff list (bring a copy to the inspection);**
- **Whether facility fees and/or fines have been paid;**
- **Any allowable variances and/or stipulations on the license (photocopy or make a notation of relevant information for reference during the inspection)**
- **Floor plan (copy for inspection if necessary)**
- **Background check waivers (if applicable)**
- **The inspection summary and violation notice (if applicable) from the last inspection; and**
- **Any complaints since the last inspection (review outcomes and identify any patterns).**

A thorough review and analysis of the provider file will help the inspector determine who may need to be interviewed, which records and documents will need to be reviewed, and what to carefully observe. It also helps the inspector gather any evidence that may be useful during the inspection. The inspector will also need these tools for the inspection: 1) laptop computer, 2) tape measure, 3) thermometer, 4) phone, 5) relevant technical assistance materials (which inspectors often copy onto their laptops), 6) directions and any other travel items, and 7) program contact information.

Though pre-planning and preparation are essential to the inspection process, flexibility during the inspection itself is equally important. Although the inspector may have pre-conceived ideas and a pre-planned strategy for performing any given inspection, he or she must be able to adapt as situations change and evidence emerges. The assumption is that when presented with unanticipated issues (or “red flags”), the inspector will fully investigate and follow-up, addressing all potential areas of non-compliance.

### 3.2 Evidence Verification

Inspectors must be thorough to ensure that compliance (or non-compliance) is accurately determined. It is important to verify information and to avoid making assumptions about what “appears” to be the case. For this reason, the inspector should not share information with children, their parents, or program staff and administration until he or she has made necessary observations and gathered adequate evidence. While it is important not to jeopardize collecting important evidence by discussing concerns with providers prematurely, it is also essential to inform them of potential violations at some point prior to the exit conference. This affords the provider an opportunity to produce information (including documents) that shows a citation is not warranted and helps inspectors avoid making conclusions without having all the facts. There may well be a reasonable explanation for what may appear to be a violation during an initial encounter.



Evidence is always strengthened when it is verified from a variety of sources. One observation or one document may be sufficient to support a violation, but serial observations of non-compliance made over an extended period of time are stronger than a single one. Along the same lines, an observation that is corroborated with an interview is strengthened by that interview. An observation, an interview, and a document combined present stronger evidence than a single observation, a single interview, or a single document. If the inspector observes a situation that potentially indicates non-compliance, it is essential to do the necessary follow-through to actually make that determination. As much as possible the inspector should document discussions with children, their parents/guardians, staff members, and the director. This would include, again as much as possible, the names of the individuals, as well as the date, time, and details of the information shared with the inspector.

**NOTE: Since discussions with children will often be informal, with a group, and in a way that minimizes disruptions to their daily routine at the program, the inspector may not be able to record all the specific details mentioned here. It is helpful, however, to obtain as much information as possible, as this can be very useful at a later point.**

It is essential that the inspector retain any notes in the provider record and include the details in any description of the violation (*SOP-701: Provider Records*).

## 4 Entrance Conference and the Tour

First impressions are very important during an inspection. Through the entrance conference, the inspector can set a professional tone for interactions with the program director. Likewise, the initial tour provides a unique opportunity to begin key observations about a given program. Through careful observation (paying close attention to what one sees, hears, smells, and touches) and the information offered by those he or she may talk to along the way, the inspector is able to form initial impressions about the program and identify any potential areas of non-compliance. This information helps the

inspector devise a strategy for implementing the remaining tasks of the inspection.

In a sense, the tour begins with the first visual sighting of the program facility. The inspector should note any concerns with the exterior appearance and maintenance of the building and any potential safety issues. He or she should also note whether any children are outside the building and in what type of activity they may be engaged. Once inside the building, the inspector should present photo identification, briefly explain the purpose of the visit, present the inspection brochure ([Appendix A](#) - at least the first time the inspection protocol method is used at the program, to all new providers, and if there has been a change in directors), and hand the director the form *What Your Inspector Needs from You Today* ([Appendix B](#)). This entrance conference should be very limited in duration, however, in order that the inspector may begin the tour as soon as possible. Any delay in starting this key task (even during complaint investigations), may greatly diminish the inspector's ability to obtain valuable information and insight into what it is really like at the program on a daily basis. (Reminder: It is OCCHS policy that inspections should be unannounced. [See SOP-301: Conducting an Inspection.])

Introducing oneself during the tour to children, parents, and staff is key for the inspector, as this shows he or she is approachable. It provides an opening for these individuals to convey important information about the program, which may also inform the inspector's strategy for the inspection. This would include which areas to investigate in greater detail. These interactions, along with observations during the tour, will also help the inspector choose whose files to review during the inspection.



All potentially significant observations from the tour (as well as throughout the inspection) should be recorded legibly with the date and time and in sufficient detail to adequately and objectively describe them at any later point. Inspectors have the option of using the *Facility Review Form for Child Centered Care* for this purpose. The health, safety, and general welfare of the children in care must be the inspector's primary concern. While the physical environment should be noted and addressed, this is largely to be assessed in terms of its impact on the children. Inspectors should also count staff on duty and note their physical location, number of children in care, and whether the personnel on duty correspond accurately to the required ratios. (NOTE: *What Your Inspector Needs from You Today*, mentioned above, is also an excellent tool for obtaining this information.)

At the end of the tour, the inspectors should reflect on the interactions with children and staff (covered in the next section) and observations, as well as the information gathered during pre-planning efforts, to formulate a plan for the remaining tasks of the inspection. This will include a formal classroom observation(s) or general child-caregiver observation (at a family day home [FDH]), which will be described in section six, selecting an appropriate sample for record review and interviewing tasks (see [sample selection table](#) in section nine) in order to determine if a potential violation is isolated in nature or potentially systemic, posing greater risk to the children in care.



## 5 Interactions and Interviews



It has been stated already that the most important element of an inspection is the inspector's assessment of the care that children receive at a program in relation to the program standards. Though the inspector can gather information about this through observation and documentation review, interviews and interactions are also essential for an accurate assessment.

During an inspection at a child day program inspectors:

- Interact with children in care;
- Provide an opportunity to have discussions with parents/guardians;
- Converse with staff members;
- Interview the director or person in charge; and
- Conduct any other interviews or follow-up discussions if indicated.

### 5.1 Care and Program Assessment

The interview process is crucial to the inspector's ability to make an assessment of the provider's compliance with standards related to the following areas: physical plant, food, services, activities, staff, supervision, medication, behavioral guidance, forbidden actions, parental involvement, transportation, and emergencies. Inspectors may also receive information through their interactions and interviews that would cause them to look further into other areas of the standards to uncover possible non-compliance.

### 5.2 Guidelines for Interactions and Interviews

Inspectors should follow certain principles in their interactions or interviews with children, parents, staff, and program administration. As a general rule, an inspector should:

- Introduce himself/herself and identify the purpose of the inspection;
- Develop a rapport with the individual(s), focus questions on the care and services that the program provides to children, and thank the person for sharing his or her views;

**NOTE: When children approach the inspector during the tour and he or she talks to them in casual conversation (see section below), it is OK to listen and take notes on any topics the children bring up on their own initiative. This reflects more of the interactive nature of conversations inspectors should have with children, as opposed to the more formal interview format.**

- Document information that would be relevant to a determination decision such name, date, time, etc.

**NOTE: Though not always apparent during an interview or casual conversation, this information can be very important if used later on as evidence in support of a violation. The intent here is not to create extra work during the inspection, but to make the inspector's job much easier when it comes to making decisions about whether to cite and, if so, how to construct the description of violation.**

- Consider what is going on at the time of the interaction/interview in order to obtain routine information in the least intrusive way possible;
- Discontinue a conversation/interview if to continue would place a child in an unsafe position at the program;
- Make every effort to protect the identity of the person(s) who provides information unless he or she gives permission to share this with the program director or person in charge; and
- Report immediately to CPS any allegations of abuse or neglect disclosed during the interviews.

There are also specific considerations for interactions with children, discussions with parents, and director and staff interviews. These are outlined below, with some additional information in the appendices of this protocol.



### **INTERACTIONS WITH CHILDREN:**

During the tour, and/or at any other opportune time during the inspection, the inspector should engage a few children in casual conversation about the program. These interactions are essential as the children in care are the consumers of the care and services at the program and talking with them will give important insight into their experience and general level of satisfaction with the program. The conversations should be casual, brief, and friendly.

***Examples of the type of questions that may be used with children include:***

Tell me what you're doing today.

What do you like about school?

What was your snack today?

What happens when someone does something wrong?

*(This would be an appropriate question to ask a child, if the facility has a past history of complaints regarding child abuse/neglect.)*

### **DISCUSSIONS WITH PARENTS:**

Inspectors should make themselves available and accessible to any parent (or guardian) who wishes to speak with them during or after the inspection. Parents may also wish to speak to the inspector at another point by phone. Information gathered from these discussions can give the inspector important insight about the care and services provided to children in a particular program and can influence the inspector's decisions about the inspection and its outcome. Information received after the inspector has finished documenting and synching the inspection to the licensing system, should be evaluated and may be considered as possible material for a complaint based on the criteria in *SOP-401: Complaints*.

## CONVERSATIONS WITH STAFF:

Conversations with staff are also a part of the licensing inspector's interaction during a tour of a facility or as part of a separate interview, if warranted. As with interactions with children, questions for staff will normally be part of general conversation during the facility tour. The licensing inspector should determine the extent and focus of questions for staff based on the history of the facility and what is discovered during the course of the inspection. If concerns are noted, more in-depth interviews are indicated.



### ***Examples of the type of questions that could be used with staff and the areas that could be addressed include:***

- What are your responsibilities here? What is your job title?
- How many children do you have directly under your care?
- How were you informed of your job duties and/or shown what to do when you started?
- What is the procedure when a staff person is absent?
- If there is an emergency that requires evacuation, what are you personally required to do?
- When was your last emergency drill? Shelter-in-place drill?
- When the director is absent, who is in charge?
- How do you deal with a difficult child?
- What training have you had about reporting child abuse?
- How is suspected child abuse reported at your program?
- What is the school's procedure for changing diapers, potty training, restroom time for children, etc.?
- What are you expected to do if a child in your care is injured?

## DIRECTOR INTERVIEWS:

In addition to conversations with staff members, the inspector will also interview the director or person in charge of the program to obtain important information about operations and the care and services provided to children. The scope and number of questions will depend on the compliance history, what is observed during the inspection, and items discussed with children, staff, and/or parents.

## 6 Classroom Observation

At all non-residential programs the inspector will complete a formal classroom observation in addition to observations made throughout the tour. (NOTE: This would be general child-caregiver observation, *not* a “classroom” observation, at a family day home.) The inspector must first find a comfortable, inconspicuous spot within a classroom and simply observe what is happening there for a period of 10 minutes, at minimum. The inspector will observe interactions between the (lead) caregiver and the children, as well as any other activities that may be taking place in the classroom. The inspector should simply observe, though it is acceptable for him or her to make notes of these observations, particularly if they may trigger further investigation and/or may be an indication of provider non-compliance with standards. The inspector will want to pay careful attention to areas of potential concern based on any history of noncompliance at the program and what is discovered throughout the inspection.

Once the observation is completed, the inspector should review the results to follow up on any items that may need further investigation. Follow-up activities might include further discussion(s) with some of the children in care, staff members, and/or the director; a review of a particular child or staff member’s record; an analysis of any written policies and procedures; and/or going through information on staff training.



## 7 Medication Administration Review

If the inspector discovers – either through interactions/interviews or through information obtained by using the form *What Your Inspector Needs from You Today* – that the provider administers medication to children in care, he or she should complete a review of medication administration. At some point during the tour, the inspector can use the *Medication Checklist* as a guide and to document all of the medications for each child in the sample.

Sample size varies based on the number of children in the program and the inspector can determine this by the sample selection table in section nine. The inspector should first review the medication log and record the name and type of medication(s), dosage, and the scheduled date/time of administration that is listed for each child in the sample. Next, the inspector should review the actual bottles/containers for the medications to see if what is listed on the label matches what is recorded on the medication log. Finally, the inspector should review the authorization form to ensure that all of the permissions are in place. The inspector should include in the medication administration review, if applicable, any emergency medications, over the counter products, and/or topical skin products. Any errors or inconsistencies should be noted on the *Medication Checklist* and considered as possible evidence in support of a citation. Wherever possible, the inspector should use the children whose medications have been reviewed in the sample as part of the

sample for interactions and record reviews. If the inspector suspects a pattern of problems with medication administration, he or she should increase the sample to determine the extent of the noncompliance.



## 8 Documentation Review

This section and the sample selection table in section nine outline the minimum requirements for children and employee record reviews and general documentation review. Though these must be met for all inspections (outside of focused, revisit inspections and complaint investigations), the inspector must ensure as well that the sample size for record reviews (as with interactions/interview and classroom/caregiver interaction observations) is sufficient to determine whether there is noncompliance and, if so, its pervasiveness. This is critical in determining how many children may be affected or potentially affected by the provider's noncompliance. If the inspector identifies an issue in one area or for one child, he or she must also determine if it is a problem for others for the simple reason that as the pervasiveness of a problem increases, so does the risk of harm to any child in care. There is a balance inspectors must find, however, between being thorough and using their and the provider's time efficiently. It is important that inspectors work strategically and efficiently in the time spent on-site with documentation review. If one is not careful, too much of the limited amount of time at the program can be spent on this task with little result, instead of focusing primarily on interacting with and observing those in care at the program. Inspectors must collect sufficient evidence to make a compliance determination, but must also know when they have been reasonably thorough and should stop. The best way to ensure this is to determine before starting documentation review exactly which items need to be verified and/or investigated in the sample files and general documents, based on potential problem areas or noncompliance identified through observations and interactions/interviews. Inspectors may use either the *Facility Review Form for Child Centered Care* or *Record Review Form* to assist them in documenting items discovered through documentation review.



### CHILDREN'S RECORDS:

Inspectors should at minimum examine the following standards in their strategic review of children's records in the sample they have selected depending on the standards/requirements for the program:

- Parent agreements/authorizations
- Emergency contacts

- Physical / Immunization
- Proof of ID
- Notice of liability insurance (FDHs)

Based on the program's history and/or items of potential concern identified through observations and interactions/interviews during the inspection, the inspector may also want to examine other aspects of the children's records. This is useful to help corroborate any evidence gathered from other sources, determine the pervasiveness of any deficiency, and/or assess the risk that may be associated with the noncompliance.

#### **EMPLOYEE RECORDS:**

Inspectors should at minimum examine the following standards in their strategic review of employee records in the sample they have selected depending on the standards/requirements for the program:

- Background checks
- Staff qualifications
- TB screening
- First aid/CPR, daily health observation training, and MAT certification (if required)
- Staff training

Note: Background checks for all new staff or household members since the last inspection must be reviewed.

As with children's records, the inspector may want to examine other aspects of the employee records if this is indicated from the program's history and/or items identified through the inspection.

#### **OTHER DOCUMENTATION TO REVIEW AT EACH PROTOCOL INSPECTION:**

In addition to children and employee records, the inspector should also review specific documentation of a general nature at the program. This would include the annual health and fire inspections, emergency and shelter-in-place drill documentation (requested from the provider through the *What Your Inspector Needs from You Today* form), and items relating to any allowable variances (if applicable), which must be reviewed annually.

## 9 Sample Selection Table<sup>1</sup>

Minimum sample selection for children and staff record reviews, interactions/interviews, the classroom/child-caregiver interaction observation, and review of medication administration during protocol inspections at non-residential programs are as follows:

### SAMPLE SELECTION TABLE #1 – Children and Staff Records

Minimum sample selection for Children and Staff record reviews are as follows:

Number of Children in Census	Number of Children Record Reviews	Number of Staff Record Reviews  <i>Also look at background checks for all new employees (since the last inspection)</i>
1 – 49	5	5
50-100	10% of the census	5 or 10% of the total number of staff (whichever is greater)
100 and above	10	10

#### Children’s Records

The inspector must include in the sample:

- Records from new children since the last inspection, *and*
- Records from children enrolled prior to the last inspection

#### Staff Records

The inspector must include in the sample:

- Records of staff members in a leadership capacity at the program (other than the director), *and*
- Records of other current staff members
- To the extent possible, a variety of staff records should be reviewed to include more senior staff members as well as more recently hired staff members

#### Notes (Table 1):

- The inspector must ensure that the operation has complied with background check requirements for *all* household members and/or staff hired since the previous inspection.

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<sup>1</sup> Sample Selection section revised September 2017.



- If the inspector reviews the entire new staff record in addition to checking background checks, the review of the new staff record may be counted in the number of staff records reviewed.
- The inspector may review more records to evaluate compliance as needed, based on what is indicated from the history of compliance and/or information gathered during the inspection.
- Staff records for multiple facilities owned by the same entity and kept at a central location should be reviewed annually.
- The inspector shall select which records to review based on the sampling table numbers and any information he or she has gathered during the inspection.

**SAMPLE SELECTION TABLE #2 –  
Interactions/Interviews, Classroom Observations,  
Medication Review**

Minimum sample selection for Interactions/Interviews, Classroom Observations and Review of Medication Administration are as follows:

<b>Number of Children in Care Today</b>	<b>Number of Interactions/Interviews</b>  (children / staff / director or person in charge)  <u>Also</u> speak with any parent who wants to talk to you during or after the inspection	<b>Number of Classroom Observations</b>	<b>Review of Medication Administration</b>
1 – 12	2 / 1 / 1	10 minutes minimum per observation; if more than one is required, each must be in a different classroom	If medications are administered to the children in care, check all the medications for the following # of children
13-49	3 / 1 / 1	1	2
50-99	4 / 2 / 1	2	3
100 and above	5 / 2 / 1	3	4
		4	5

**Notes (Table 2):**

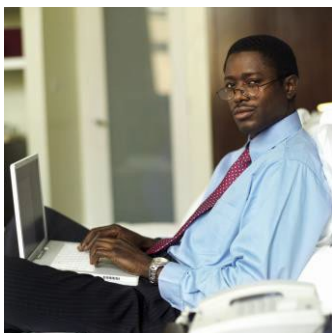
**CLASSROOM OBSERVATIONS:** If only one classroom is available, then the inspector should spend the total amount of time observing that one classroom. (Example: In an afterschool program with 55 children, but just one classroom, the inspector could meet the



requirement of three 10-minute observations by conducting just one 30-minute observation

## RECORD SELECTION

It is essential that the *inspector* select which records to review based on the information he or she has gathered during the inspection. The inspector should *not* ask the provider to choose which record to include in the sample. Even if the inspector would like the sample to contain a randomly selected record, he or she should ask the provider to deliver record X (child/employee's name). The inspector can usually determine the person's name from what the provider has already provided with the form *What Your Inspector Needs from You Today* or from his or her interactions with children and employees during the tour.



## 10 Citation of Violations

Inherent in the philosophy of the regulatory environment is the concept of culpability. The inspector must always ask, “Did the provider have knowledge of this, or should the provider have known about it?” Observations that are incidental, statements from interactions/interviews that are not corroborated from other sources, and/or missing or incomplete items discovered during documentation review do not necessarily constitute a violation. The inspector must ensure that he or she has all possible evidence in order to avoid any subjective generalizations when making decisions about citations. It is useful to ask the provider questions, throughout the course of the inspection and/or prior to making citation decisions, to clarify various matters and to avoid making pre-judgments without having all the facts. OCCHS has a particular structure and method for the construction of the “description of violation.” By carefully following the procedures in section 4.5.4 of *SOP-304: Violation Notices and Inspection Summaries*, the inspector will sometimes discover upon drafting his or her portion of the violation notice (the “description of violation”) that there is not strong enough evidence to support a citation.

### 10.1 Using Evidence Gathered from Children

Because evidence is always strengthened when it is verified from a variety of sources (see section 3.2), inspectors are encouraged to include information obtained from interactions with children whenever relevant. The inspector should consider statements from a child since children are in a great position to give an account of the care and services they receive in a program. When assessing statements from children as evidence to support a “description of noncompliance” (section 4.5.4 of *SOP-304*), the inspector must

consider the child's level of understanding and ability to express his or her views.

## 10.2 Words to Avoid in a Description of Violation

SOP-304, section 4.1.1.e, states that inspectors should avoid “subjective generalizations and words that imply a conclusion that is not supported by the evidence.” This is particularly important when recording and documenting observations of and interactions with children. Certain words should be avoided, especially in the “description of violation.” Here are some common red flag words to avoid:

**Feelings** cannot be objectively observed. Avoid these red flag words: happy, sad, mean, kind, angry, mellow, apathetic, bored, interested, proud, sympathetic, understanding, nasty, mischievous, lazy, crabby, laid-back.

**Intelligence** cannot be objectively observed. Avoid these red flag words: smart, bright, dumb, mediocre, above-average, overwhelmed, overachiever, underachiever.

**Reasons for doing things** cannot be objectively observed. Avoid these red flag words: provoked, tricked, determined, undirected, out-of-control, motivated, spiritual, conscientious.

This section is borrowed from Patricia Marickovich's "Observation and Recording: It's Not Always Obvious," (Virginia Department of Social Services Division of Child Care and

**Self-concept** cannot be objectively observed. Avoid these red flag words: weak, competent, pretty, athletic, strong, secure, insecure. The inspector should instead use factual descriptions of what he or she observed and/or direct statements (short quotations whenever possible) from the child(ren). He or she should observe all confidentiality requirements described in SOP-304, section 4.1.2, which include utilizing a numbering system on inspection summaries and violation notices (such as, "Child #1, Staff #2"), with corresponding identities listed on the supplemental page.

## 11 Exit Meeting

The exit meeting takes place between the inspector and licensee (or designee) at the completion of an inspection. The purpose is for the licensing representative to deliver and review the inspection summary (or acknowledgement form [see SOP-304, 4.2 and Appendix A]), answer any questions from the licensee, see if there is anything he or she may have missed that the licensee can supply to demonstrate compliance, provide technical assistance, and indicate preliminary findings when there will likely be citations. The inspector may also use the exit meeting to discuss recent changes or new interpretations of licensing regulations, refer the provider to additional resources that might enhance understanding and compliance with standards, and give feedback on the provider's ideas for plans of correction for any anticipated citations.

## 12 Acknowledgements

The Office of Child Care Health and Safety would like to acknowledge that some of the materials in this document were inspired by and adapted from the following sources:

- *Protocol for Inspections at Licensed Child Day Programs* (November 2011), Division of Licensing Programs, Virginia Department of Social Services.
- *A Guide to the Survey Process for Assisted Living Home Care Providers* (November 2004) and *ALHCP 2620 Informational Memorandum: Licensing Survey Form* (July 2006), Minnesota Department of Health.
- *State Operations Manual, Appendix P: Survey Protocol for Long Term Care Facilities* (Revision 22: December 2006) and *Principles of Documentation for the Statement of Deficiencies* (2000), Centers for Medicare and Medicaid Services, United States Department of Health and Human Services.
- Alan Jefferson (Director, Northwest Region, Commission for Social Care Inspection, United Kingdom), "Putting People Who Use Care Services at the Center of Our Work," a presentation by at the 16<sup>th</sup> Annual Licensing Seminar of the National Association for Regulatory Administration (Richmond, Virginia: October 8-10, 2007).
- Patricia Marickovich, "Observation and Recording: It's Not Always Obvious," a four- hour class sponsored by the Division of Child Care and Development (fall 2006), Virginia Department of Social Services.

**Appendix A: Entrance Conference Brochure  
Required form**

*The inspection is at the center of the work of the Office of Child Care Health and Safety. Its purpose is to evaluate and monitor the compliance at this facility with applicable standards for licensure. It also gives you the chance to demonstrate the systems in place to provide care and services to children. In order to achieve these goals effectively, the inspector will complete the six components of an inspection while using thorough investigative techniques.*

*The Office of Child Care Health and Safety considers the benchmark of compliance to be your ability to deliver essential care and services to children. Therefore, the inspection will include informal gathering of information from children themselves, along with conversations with staff and maybe even parents. Additionally, the inspector will use observation techniques and documentation review to assess your compliance in key areas and to evaluate your overall performance.*

**INSPECTOR PROFESSIONALISM**

**WHAT YOU CAN EXPECT FROM YOUR INSPECTOR**

*As they conduct their inspection, inspectors:*

- Treat everyone they meet with dignity and respect, using "people skills" to make others feel as comfortable as possible;
- Maintain an open dialogue with directors and staff members, while gathering the information needed to complete a fair evaluation of the facility's performance;
- Enforce the regulations and their official interpretations as written;
- Look for time patterns of noncompliance and risk to consumers, without being preoccupied in their enforcement of the standards;
- Remain objective during their information gathering, recognizing that things are not always as they appear at first glance;
- Protect confidential information gathered prior to and during the inspection, sharing it only with those who have the authority or permission to receive it; and
- Are aware of their own reactions to interpersonal conflict and strive to keep the inspection process on a professional footing.

**Office of Child Care Health and Safety**  
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[www.childcareva.com](http://www.childcareva.com)



Inspector: \_\_\_\_\_  
Phone #: \_\_\_\_\_

**Virginia Department  
of Education**  
**Office of Child Care  
Health and Safety**

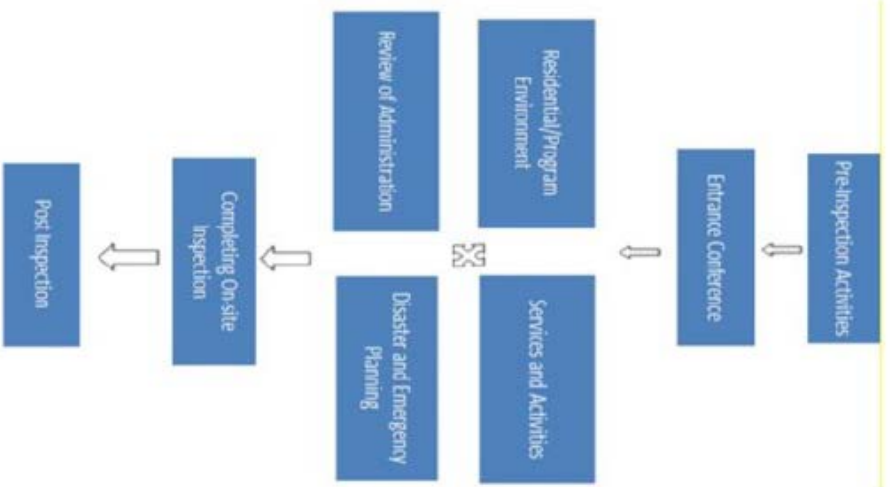
**Provider  
Guide to the  
Inspection  
Process for  
Child Day  
Programs**



# THE SIX COMPONENTS

*There are six basic components of an inspection:*

- 1. Entrance Conference** – Inspectors introduce themselves briefly, hand out a brochure that outlines the basic components of the inspection process, and ask for items they will need to conduct the inspection.
- 2. Tour** – Inspectors walk through the building(s) directly after the entrance conference and as soon as possible after arrival in order to observe activities and interpersonal interactions, talk to children and staff, examine the physical plant, and check on food preparation and delivery of snacks/meals;
- 3. Interactions and Interviews** – Inspectors speak casually to children, have discussions with parents (either during or after the inspection), and interview staff members and the facility/program director to gather information on compliance with standards, especially those relating to care and services to children;
- 4. Observations** – Inspectors observe – from the moment they drive up to the building to the conclusion of the inspection – what is happening in the program/facility in order to assess compliance with standards. Inspectors pay special attention to the interaction between staff and children, the execution of the program’s internal policies and procedures, and the learning and recreational activities;
- 5. Documentation Review** – Inspectors conduct a focused examination of children’s and staff records, targeted on key standards and information gathered during interviews and observations; and
- 6. Exit Meeting** – Inspectors review the results of the inspection with the provider, listen to and discuss with the provider any disputed findings and/or comments about the inspection process, provide consultation, and request from the provider a description of the actions that will be taken to correct any violations and ensure future compliance. If the inspection report is not completed on site, an Acknowledgement of Inspection form will be provided.



## WHAT YOUR INSPECTOR NEEDS FROM YOU TODAY

Your inspector will ask you to collect some information about this facility/program, which will be necessary for the completion of the inspection. Please supply your inspector with this information as soon as possible. It may include (but may not be limited to):

- Today’s census and total enrollment
- Names of the following:
  - ❖ New hires/household members
  - ❖ New/promoted program leaders
  - ❖ Training/certification (CPR, MAT, etc.)
  - ❖ Van/vehicle drivers
  - ❖ Children with special needs
- Any children with medications?
- Injury reports
- Changes to policies and procedures
- Copies of last fire and health inspections
- Documentation of recent evacuation, shelter-in-place, and if applicable, lockdown drills
- Names and birthdates of children (FDH only)

## Appendix B: Request for Information at Entrance Conference *Required form*



### WHAT YOUR INSPECTOR NEEDS FROM YOU TODAY

*Please fill in blank spaces and use the back of this page and/or attach additional pages for lists:*

Facility Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Inspector Name: \_\_\_\_\_ Last Inspection Date: \_\_\_\_\_

- Current email address of facility or program director: \_\_\_\_\_
- Total groups of children: \_\_\_\_\_ Today's census: \_\_\_\_\_
- Names of the following (if applicable):
  - New Hires since the last inspection
  - Van/Vehicle drivers
  - Children with allergy care plans
- Injury reports since the last inspection
- Updated or new policies and procedures since last inspection
- Documentation of evacuation, lock down (if applicable), and shelter-in-place drills
- Are there children in care today taking medication?     YES     NO

#### CHILD DAY CENTERS ONLY (if applicable):

- Current fire inspection report
- Current health inspection report
- Current liability insurance policy document
- Names of new /promoted program leaders
- Names of staff with medication administration training (MAT) and daily health obs. training

#### FAMILY DAY HOMES ONLY (if applicable):

- Names and birthdates of children present
- Names of new household members since last inspection