





BEST PRACTICES SELF ASSESSMENT TOOL

To be successful in assessing, establishing, or maintaining a high-functioning regulatory system, organizations should assess their systems and associated functions over a period of time and document the levels of achievement for each best practice. Then they should put in place strategies to acknowledge successes and build upon gaps. Documentation should be clear, complete, and consistent so that it may be used as a tool throughout the process.

This assessment will give agencies an initial indication of improvement opportunities in their agency staff development programs. It is anticipated that organizations may not fully meet all criteria of *Best Practices for Human Care Regulation* initially. Using this structured assessment and planning process can give interested organizations a clearer sense of direction. The results of the self-assessment should be used to guide a strategic planning process of self-improvement. Strategies should be prioritized and combined with internal resources to help minimize any impacts on performance or mandates until the underlying problems can be overcome.

National Association for Regulatory Administration
400 South 4th Street, Suite 754E, Minneapolis, MN 55415 | Phone: 888-674-7052 | Email: admin@naralicensing.org

National Center on Child Care Quality Improvement, A Service of the Office of Child Care 9300 Lee Highway, Fairfax VA, 22031 | Phone: 877-296-2250 | Email: OCCQualityCenter@icfi.com

Instructions for Assessment Tool

The assessment tool is designed to identify if the organization's practices are aligned with the recommended best practices. An organization should evaluate its current practices, rather than future plans. There are three levels to the scale:

Exceeds	The organization is showing evidence that exceeds the minimum requirements for the best practice.
Meets	The organization is showing evidence of meeting the minimum requirements for the best practice.
Needs Attention	The organization is not demonstrating the minimum requirement for the best practice.

The tool is designed as a tiered scale and therefore an organization <u>must clearly show evidence for the "Meets" criteria</u> having been met before selecting "Exceeds."

1. Organizational Management

1.1. Leadership

	Needs Attention	Meets Standard	Exceeds Standard	Notes
1.1.1. Engages in a decision-making process that is inclusive of and guided by multiple sources of information.	Only organization staff are involved in the decision-making process.	The decision-making process involves integrating information from one resource in each of the following categories when applicable: national, state, territory, tribal, local, and providers.	The decision-making process involves integrating information from multiple resources in each of the "Meets" categories, or includes resources from the following additional categories: other state agencies, advocates, accreditation bodies, and early learning advisory councils.	
1.1.2. Manages risk to support decisions, policy, regulation, and enforcement through periodically conducting risk analysis for the organization.	Does not conduct risk analysis.	Conducts risk analysis every 5 years and uses results to guide decisions.	Conducts risk analysis every 3 years and uses results on an ongoing basis to guide decisions.	
1.1.3. Establishes effective partnerships for coordination of regulation and services.	The organization does not seek or utilize partnership input.	Partnerships are engaged to address focused topics with targeted groups throughout the year with time-limited, specific engagement.	Partnerships are collaborative, providing ongoing advisory recommendations and guidance through continuous engagement.	

	Needs Attention	Meets Standard	Exceeds Standard	Notes
1.1.4. Ensures transparency of performance and program activities and supports consumer education	The organization has Web site but does not include inspection or sanction information.	The Web site includes a description of state processes and inspection information and will be maintained for a period of 3 years.	The Web site includes information about sanctions, administrative actions, substantiated complaints, and validated critical incident reports for a period of 3 years.	
1.1.5. Remains current on trends and research-based practices.	The organization relies on program staff to share information.	The organization relies on its central office to collect and distribute information internally to staff.	Individual leaders within the organization seek trend- and research-based information through various professional development opportunities and professional research from multiple sources.	

.2. Strategic Planning				
	Needs Attention	Meets Standard	Exceeds Standard	Notes
1.2.1. Defines clear vision, mission, and values for the organization.	The vision, mission, and values are not clearly identified	The vision, mission, and values are defined and are clearly identified and internally accessible.	The vision, mission, and values are transparent and externally accessible and reviewed on a periodic basis.	
1.2.2. Generates measurable and observable strategic and operating plans.	The organization does not have a plan or the outcomes are not measurable or observable.	Plan includes one measurable and observable outcome that align with strategic plan.	The plan is comprehensive and addresses multiple outcomes that align with strategic plan.	
1.2.3. Collects data and monitors plans for assessment purposes.	The organization does not collect data or monitor achievement of outcomes.	The organization conducts comprehensive assessment at the conclusion of the plan period to develop a new strategic plan.	The organization uses organizational monitoring data to guide decisions for continuous improvement.	
1.2. Strategic Planning Overa	II Notes:			

1.3. Financial and Resource Controls **Needs Attention** Meets Standard **Exceeds Standard Notes** 1.3.1. Establishes and Fiscal policies are The licensing Administrative monitors fiscal business administrator has no support provides strong reviewed and updated as practices to comply with fiscal business practices involvement in or needed. all internal and external understanding of the accountability and is requirements. organization's fiscal reviewed annually. business practices. 1.3.2. Creates prioritized, ☐ The organization The itemized budget ☐ The itemized budget itemized budgets that does not link the itemized globally supports the links specifically to a goal align with the strategic budget to the strategic overall strategic plan. within the strategic plan. plan. plan. 1.3.3. Monitors itemized The organization The organization ☐ The organization budget for appropriate monitors annually. regularly monitors does not monitor. and timely spending throughout the fiscal throughout the fiscal vear. vear. 1.3.4. Establishes and The organization The organization has ☐ The inventory system maintains inventory does not have an is proactively monitored an inventory system and systems for equipment, inventory system. records are kept up-toto prevent lack of supplies, vehicles and equipment or date. services. consumables. 1.3.5. Creates a The organization has ☐ The organization Work environments supportive work no protocols to monitor are reviewed annually by collects feedback from environment and gathers workplace environment. management and staff annually regarding feedback from staff. revisions are made as work environments, uses needed. feedback to ensure work environments are supportive, and continuously monitors the

environment.

1.3. Financial and Resource Controls (continued)					
	Needs Attention	Meets Standard	Exceeds Standard	Notes	
1.3.6. Requires staff to be knowledgeable about the organization's fiscal and work environment business practices as well as safety and security procedures.	The staff are not trained or made aware of procedures.	The policies and procedures are accessible and new staff are trained upon hire.	The organization reviews policies and procedures periodically and as changes occur.		
1.3. Financial and Resource (Controls Overall Notes:				

1.4. Staffing

	Needs Attention	Meets Standard	Exceeds Standard	Notes
1.4.1. Establishes job qualifications and job expectations that are clear, complete, and upto-date.	The organization does not have an in-field degree requirement.	The organization requires a bachelor's degree in an appropriate fields or has a minimum number of required credit hours in the field with experience.	The organization requires staff to obtain regulatory certification, such as the National Regulatory Professional Credential.	
1.4.2. Establishes internal protocols to implement Human Resources policies and procedures and monitors for compliance.	The organization has no written protocols or does not monitor.	The organization has written protocols and monitors annually.	Protocols are reviewed annually, revised as needed, and include continuous monitoring.	
1.4.3. Establishes policies for staff regarding off-duty communication and conduct.	The organization has no policy.	The written policy is shared with staff.	The management staff monitors policy implementation.	
1.4.4. Conducts licensing workload assessment.	The organization does not conduct a licensing workload assessment.	The organization conducts a licensing workload assessment every 5 years and includes at least two of the four areas: rebalance, temporary overloads, deployment of positions, and team inspections.	The organization conducts a licensing workload assessment every 3 years or sooner to address needs and includes all four areas: rebalance, temporary overloads, deployment of positions, and team inspections.	

1.4. Staffing (continued)				
	Needs Attention	Meets Standard	Exceeds Standard	Notes
1.4.5. Develops and maintains a staffing plan based on licensing workload assessment.	The organization does not have a staffing plan.	The organization utilizes a licensing workload assessment to develop its staffing plan every 5 years.	The organization utilizes a licensing workload assessment to develop its staffing plan every 3 years.	
1.4.6. Develops and implements a telecommuting policy.	The organization has no policy.	The organization ensures all staff follow written policy.	The organization's policy is reviewed annually and revised as needed.	
1.4.7. Conducts organizational orientation and initial training program.	The organization has no formalized training program for new staff.	An orientation is conducted within 6 months of employment.	An orientation is conducted before staff work independently and training includes a mentoring program.	
1.4.8. Monitors staff performance systematically for correct implementation and response.	The organization holds meetings with individual staff less than quarterly or with the unit less than biannually.	The organization has a staff performance review system that includes quarterly individual meetings and biannual unit meetings.	The organization has a staff performance review system that includes monthly individual meetings and quarterly unit meetings.	
1.4. Staffing Overall Notes:				

1.5. Professional Development System for Organization Staff **Needs Attention** Meets Standard **Exceeds Standard Notes** 1.5.1. Identifies an The organization has The organization ☐ The organization has individual within the no job description includes this position a position dedicated to program responsible for including these duties. along with other job this function and training oversight and duties and training is includes external learning management of the staff mostly developed inopportunities. professional development house. system. 1.5.2. Performs needs A needs and The organization A needs and and effectiveness does not perform a needs effectiveness effectiveness assessment to guide or effectiveness assessment is performed assessment is performed professional development assessment. every 3 years. annually. activities so that staff remain current on programmatic and industry practices. 1.5.3. Creates and Only staff with All staff have Professional monitors staff performance issues have professional development development plans professional development professional development plans. monitored annually. plans. plans, or no staff have professional development plans. 1.5.4. Plans the staff No staff development ☐ The organization has Services are development services to services plan exists. scheduled within 6 options for staff training assure that training is months of need. to be accessible when timely and accessible. and as soon as needed. 1.5.5. Ensures qualified **Professional** Professional Professional individuals conduct development activities development activities development activities professional development are conducted by are conducted by are conducted by activities. individuals with content qualified individuals who qualified individuals who background but no have an instructional have degrees or instructional design or design and content certifications in instructional design or adult learning training. background. adult learning and content area background.

1.5. Professional Development System for Organization Staff (continued)							
	Needs Attention	Meets Standard	Exceeds Standard	Notes			
1.5.6. Follows instructional design and adult learning best practices.	The organization does not conduct a review to ensure instructional design or adult learning best practices are being used.	The organization conducts an internal review to ensure courses are designed utilizing instructional design and adult learning best practices.	The organization conducts an external review to ensure courses are designed utilizing instructional design and adult learning best practices.				
1.5.7. Confirms professional development activities include assessment and evaluation to ensure the learner has achieved intended outcomes.	The organization does not use assessment or evaluation methods.	A single comprehensive assessment and two levels of evaluation are used.	Multiple methods of assessment and at least three levels of evaluation are used.				
1.5.8. Ensures appropriate follow-up during and after professional development activities. 1.5. Professional Development	The organization does not provide follow-up.	Follow-up identified during professional development activity is completed.	Post activity follow- up is conducted to guide future opportunities.				
	1.5. Professional Development System for Organization Staff Overall Notes:						

1.6. Communication

	Needs Attention	Meets Standard	Exceeds Standard	Notes
1.6.1. Establishes and mai	ntains a clear communication	n plan, which includes the fo	llowing:	
1.6.1.1. Protocols for external sharing of required or best practices affecting the industry with leadership, legislative offices, and government officials.	The organization has no written protocols.	Protocols exist for information sharing with the organization's executive leadership.	Procedures exist for information sharing with legislative offices and government officials, including other agencies.	
1.6.1.2. Procedures for gathering and sharing information internally with staff.	The organization has no written procedures.	Procedures exist to exchange information with the regulatory management staff on a quarterly basis.	Procedures exist to exchange information with the regulatory management staff on a monthly basis.	
1.6.1.3. Processes for gathering input and feedback as well as being responsive to providers, advocates, communities, families, and the media.	The organization has no written procedures.	Procedures exist to exchange information with external parties on an annual basis.	Procedures exist to exchange information with external parties on a regular basis.	
1.6.1.4. Providing outreach to the public.	The organization does not conduct public outreach.	Public outreach is reactive to situations.	Public outreach is proactive in nature and for educational purposes.	
1.6.2. Uses a structured process to coordinate with legal staff.	The organization has no written processes.	A written process exists to coordinate with legal staff for legal-risk decisions, enforcement, and litigation.	The written process includes legal consultation to support agency decision making in statutory guidance and policy development	

1.6. Communication (continued)					
	Needs Attention	Meets Standard	Exceeds Standard	Notes	
1.6.3. Develops and monitors process for reporting critical incidents.	The organization has no written processes.	The organization has a written monitoring process to ensure critical incidents are reported.	The organization uses information from monitoring to guide quality assurance and technical assistance initiatives.		
1.6.4. Creates protocols for staff communication that address timeliness and content control.	The organization has no written protocols.	The organization responds within 5 workdays and critical issue communications are reviewed by a second person.	The organization responds within 48 hours with a second-person content review as applicable.		
1.6.5. Monitors compliance with public records request requirements.	The organization does not monitor public records requests.	The organization monitors compliance of public records requests regularly.	The organization uses the information from monitoring to guide program improvement.		
1.6.6. Establishes time boundaries for response to applicants.	Less than 95 percent of licenses are issued by the legal deadline.	Ninety-five percent of licenses are issued by the legal deadline.	One-hundred percent of licenses are issued by the legal deadline or within 90 days.		
1.6. Communication Overall Notes:					

2. Regulatory Management

2.1. Statutory Provisions

	Needs Attention	Meets Standard	Exceeds Standard	Notes
2.1.1. Identifies authority, responsibility, and protective intent.	At least one of the three components (authority, responsibility, and protective intent) are missing in statute.	All three components (authority, responsibility, and protective intent) are addressed in statute.		
2.1.2. Defines distinctions in types of licenses.	The organization does not define distinctions.	Broad distinctions are defined.	Within broad distinctions, subsets are defined.	
2.1.3. Affords similar protections to populations in similar risk categories or settings.	Exemptions are allowed.	No exemptions are allowed.		
2.1.4. Provides flexibility to enable the organization to deal effectively with changes in the industry.	The statutes allow some flexibility and limited prescriptive language.	The statutes allow some flexibility and limited prescriptive language.	The statutes provide framework and parameters but are not prescriptive.	
2.1.5. Delineates the licensure fee and fine parameters.	The organization has no fee and fine parameters.	Fee and fine parameters are prescriptive by providing the specific licensure fee and noncompliance fines.	Fee and fine parameters provide guidelines for establishing licensing fees and noncompliance fines.	
2.1.6. Requires a minimum inspection frequency including unannounced inspections.	The organization conducts one or no inspections per year OR all inspections are announced.	The organization conducts two inspections per year with at least one unannounced inspection.	The organization conducts more than two inspections per year with at least one unannounced inspection.	

2.1. Statutory Provisions (continued)					
	Needs Attention	Meets Standard	Exceeds Standard	Notes	
2.1.7. Establishes sanction guidelines that serve as a basis for consistent enforcement and discretionary waivers.	The statutes are prescriptive.	The statutes allow some flexibility and limited prescriptive language.	The statutes provide a framework and parameters but are not prescriptive.		
2.1.8. Outlines due process rights and court engagement.	The statutes do not outline due process rights.	The statutes outline due process rights.			
2.1. Statutory Provisions Ove	rall Notes:				

2.2. Standards Development				
	Needs Attention	Meets Standard	Exceeds Standard	Notes
2.2.1. Uses processes and methods to develop and revise effective regulations.	The organization does not use processes or methods to develop regulations.	The standards development process is limited to internal staff and a limited number of key stakeholders.	Internal staff and external partners are engaged in guiding standards development as well as the use of monitoring data.	
2.2.2. Develops standards that are clearly written and measurable, addressing at a minimum: applications, background screening, behavior and guidance, environment, family engagement, food preparation and service, health, personnel training, ratio and group size, safety requirements, supervision, and transportation.	Standards include less than 9 categories.	Standards include 9 of the 12 categories and are clearly written and measurable.	Standards include all 12 categories and are clearly written and measurable.	
2.2.3. Develops and maintains an up-to-date interpretive guide for use in applying regulations consistently:	The organization does not have an interpretive guide.	An interpretive guide is developed and used with internal staff.	An interpretive guide is developed for internal and external use.	
2.2. Standards Development (Overall Notes:			

	Needs Attention	Meets Standard	Exceeds Standard	Notes
2.3.1. Uses structured cycles to comprehensively review and develop effective regulations.	The organization does not maintain a structured review cycle.	A comprehensive review is conducted every 5 years.	A comprehensive review is conducted every 3 years and targeted revisions are made as needed.	
2.3.2. Develops procedures and protocols to achieve consistent enforcement.	The organization has no procedures and protocols for consistent enforcement.	Procedures are prescriptive at the broad category level.	Enforcement is prescriptive for each standard and substandard with limited flexibility based on severity of noncompliance.	

2.4. Legal Enforcement

	Needs Attention	Meets Standard	Exceeds Standard	Notes
2.4.1. Establishes and maintains an automated regulatory data collection system and uses standard file-organization methods for case files and office records.	The organization does not have an automated system established for data collection.	The organization has an automated system for inspection reports, with reporting capabilities.	The organization has an automated system with additional data collection, such as administrative actions, illegal operations, closures, and fines.	
2.4.2. Conducts licensing inspections.	The organization does not conduct unannounced onsite inspections, or conducts one inspection a year without a reliable system to determine the need for additional inspections for compliance, or inspections are not conducted within program expectation timeframes.	The organization conducts onsite inspections twice a year within program expectation timeframes.	The organization conducts additional onsite inspections that exceed the minimum statutory requirement.	
2.4.3. Ensures that inspection documentation is clear, accurate, and objective.	The inspection system has poor documentation that may include use of slang, illegible comments, or shorthand.	Inspection documentation is written in plain language using complete sentences and is professional in nature and monitored for quality assurance.	The automated inspection system uses standardized language templates and includes tools such as spelling and grammar check to promote professionalism.	
2.4.4. Ensures that licensing decisions are appropriate and actions are timely, fair, objective, and consistent.	The organization has no processes.	Procedures clearly identify the decision-making process, timeframes, and circumstances for review.	A quality assurance review is conducted to ensure decisions are appropriate, timely, and consistent.	

2.4. Legal Enforcement (continued)					
	Needs Attention	Meets Standard	Exceeds Standard	Notes	
2.4.5. Investigates complaints and reports of illegal operations.	The organization has no established timeframes.	The organization has established timeframes based on severity and risk.	A quality assurance review is conducted to monitor that investigations are appropriate, timely, and consistent.		
2.4.6. Requires corrective actions be based on cause and monitored systematically for compliance.	The organization has no established corrective action guidelines.	The organization has established guidelines for appropriate, timely, and consistent corrective actions to be applied based on noncompliance situations.	A quality assurance review is conducted to monitor that corrective actions are completed and licensing staff have followed up.		
2.4.7. Maintains close monitoring and regular management review for high-risk cases.	The organization has no processes.	Procedures clearly identify the decision-making process, timeframes, and circumstances for review.	A quality assurance review is conducted to ensure that decisions are appropriate, timely, and consistent.		
2.4.8. Develops a process for handling interagency reports with regard to licensure.	The organization has no processes.	The process includes regularly scheduled communication with partners.	Communication is automated and electronic.		
2.4. Legal Enforcement Overall Notes:					

	Needs Attention			
		Meets Standard	Exceeds Standard	Notes
quanty accuration	The organization has quality assurance stem.	The quality assurance system monitors consistent implementation of standards and enforcement.	The system uses monitoring data to guide staff professional development, policy development, and program improvements.	
identification of trends	The organization nducts no data alysis.	The organization conducts data analysis every 3 years and uses the data for program improvement.	The organization conducts data analysis annually and uses the data for program improvement.	

2.6. Technical Assistance					
	Needs Attention	Meets Standard	Exceeds Standard	Notes	
2.6.1. Provides inquirers with access to timely information and orientation on compliance expectations to assist their decision-making on whether to apply for licensure.	The organization provides no technical assistance.	Orientations are held annually.	Orientations are held more than once a year and frequently enough to meet community need.		
2.6.2. Establishes plans and guidance to provide appropriate technical assistance and other support services to providers.	The organization provides no technical assistance.	Technical assistance includes providing resources and annual training opportunities.	Technical assistance is ongoing and available to providers on a regular schedule as well as on an as-needed basis.		
2.6.3. Ensures that all personnel make referrals to other agencies as appropriate.	The organization provides no information formally to staff.	Information about making referrals is provided formally to staff through orientation and resource documentation.	The organization conducts a quality assurance review and periodic training updates to ensure referrals are appropriate and timely.		
2.6. Technical Assistance Overall Notes:					