REMOTE INSPECTIONS IN CHILD CARE SETTINGS: A VIABLE ALTERNATIVE DURING EMERGENCY SITUATIONS

Abstract
This paper discusses, shares, and demonstrates the use of Remote Inspections as a means to validate and verify compliance with licensing regulations when it is unsafe or impractical to complete onsite inspections.
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Introduction

The purpose of this paper is to discuss, share, and demonstrate the use of *Remote Inspections* as a means to validate and verify compliance with licensing regulations when it is unsafe or impractical to complete onsite inspections.

Onsite inspections, where the licensing staff measure compliance with licensing regulations while physically present at the licensed location, are the primary means to identify, remediate, and prevent recurrence of noncompliant conditions that could result in harm to children in care. However, conducting onsite inspections may not always be possible due to severely inclement weather, natural disasters, communicable disease pandemics, or similar unforeseeable circumstances that impede travel or in-person contact. Conducting onsite inspections during such conditions puts children, licensees, and licensing staff at risk of injury, illness, or death. Licensing oversight agencies must therefore identify and adopt alternatives to onsite inspections in child care programs\(^1\) to ensure that the regulatory agency can meet its obligations to protect children’s health and safety when onsite inspections cannot be safely conducted.

In response to the COVID-19 pandemic, several states have determined that it is in the best interest of the people supported in licensed settings to measure regulatory compliance via Remote Inspections\(^2\) in lieu of or in addition to onsite inspections.

Remote Inspections – The Basics

Many licensing oversight agencies currently apply “offsite” techniques to supplement in-person compliance determination. These include activities such as conducting telephone interviews with witnesses or requesting abuse or medical records from a hospital which are subsequently reviewed at the agency’s office. It is extremely rare that compliance or noncompliance would be determined solely through these activities; there is almost always an onsite component to the inspection process.

A true Remote Inspection, or RI, is different from the above in that:

- There is no in-person component to the inspection;
- The techniques that would normally be applied in-person at the licensed setting are applied at an offsite location such as the regulator’s home or office;
- The regulator uses one or more technological mediums to complete the inspection, and

\(^1\) “Child care programs” includes, but is not limited to, family child care homes, group child care homes, and child care centers.

\(^2\) Some states use the term “Virtual Inspection,” or VI; the terms “Remote Inspection” and “Virtual Inspection” are synonymous for purposes of this discussion.
• There is greater active participation in the inspection process by the child care program.

In order for an RI to be completed, the following conditions must exist:

• The agency’s governing statutes, regulations, and/or policies must permit “announced” inspections, or be waived on a temporary basis to allow them. In most states, some or all inspections of child care programs must be unannounced\(^3\), that is, the program may not be informed of the inspection in advance of the inspection. Since the program acts as an intermediary for the regulator (more on this below), the program must be informed of the RI before the inspection.

• The regulator must have the hardware and software necessary to engage in real-time videotelephony or video chats.

• The child care program must have the hardware and software necessary to engage in real-time videotelephony or video chats.

The primary benefit to RIs is that essential health and safety oversight can continue in crisis situations, especially when the alternative is no oversight of any kind. The primary shortcoming of RIs is that the regulator’s sensory input is limited to sight and sound – smell, touch, and the overall “feel” of a child care program are powerful indicators of compliance or suspected noncompliance that are simply not accessible through video inspections.

Compliance Measurement Techniques

The three types of compliance measurement techniques are generally categorized as follows:

• **Material Examination**, which involves the review of materials of any kind produced by the provider or an unrelated party that relates directly or indirectly to regulatory compliance. Materials may be in any format, including but not limited to written documents, photographs, and video footage. Examples may include health records for children and staff, background screening verifications, fire drill records, etc.

• **Direct Observation**, which involves viewing the premises or events in real-time to determine if regulatory compliance is achieved. This may include observing staff-

\(^3\) NARA 2017 Child Care Licensing Study
to-child ratios, staff/child interaction, posted documents such as menus and classroom activities, play equipment maintenance, and so forth.

- **Interaction**, which means engaging in expressive or receptive communication with a person or persons responsible for complying with or impacted by the regulatory requirements, i.e. director, teachers and other staff, as well as the children themselves.

Each of the above techniques can be applied remotely when necessary.

**Remote Material Examination**

Any materials that would normally be requested and reviewed during an onsite inspection can be provided electronically as long as both programs and regulators have the necessary technology.

In general, there are four methods that can be used to access materials as part of the RI process:

1. The materials can be accessed through an information management system maintained by the licensing oversight agency or its parent agency.
2. The program uploads the materials to a cloud storage platform maintained by the licensing oversight agency.
3. The program uploads the materials to a program-maintained cloud storage location and grants the licensing oversight agency access to the location.
4. The program emails the materials to the licensing oversight agency.

Any combination of the above methods may be used to conduct RIs; which method(s), how they are used, and when in the inspection process they are requested and reviewed should be considered when developing RI policy and operational procedures (see “Developing a Remote Inspection Process” below).

**Remote Direct Observation**

The basic steps of the direct observation process during Remote Inspections are:
1. The regulator and a child care program representative engage in real-time video chats using applications such as Skype, Teams, Google Duo, FaceTime, Zoom, GoToMeeting, etc.

2. The regulator will instruct the child care program representative to perform compliance measurement activities dictated by the reason for the inspection – in other words, the program representative acts as the regulator’s intermediary through use of video chats on a mobile device. For example, a program may be asked to live-stream things such as:
   - Demonstration of handwashing techniques;
   - Validating the temperature of refrigeration;
   - Determining the availability of running water and of paper products in the bathrooms or kitchen, as applicable;
   - Verifying appropriate room temperatures;
   - Providing the location of fire extinguisher and first aid kits;
   - Scanning rooms for placement of furniture;
   - Counting numbers of children in care, by room with staff;
   - Opening cupboards, closets, and other storage areas potentially accessible to children;
   - Testing smoke detectors; and
   - Verifying safety and availability of other features such as playground equipment (closed s hooks, resilient surfacing…) and possibly transportation features – safety belts, working horn, etc., if a program offers transportation and the like.

3. The regulator will watch the stream to determine if any noncompliances exist.

4. Identified noncompliances will be documented and addressed in the same manner as if the noncompliances had been identified during an onsite inspection.

Tips for Successful Remote Direct Observation

While RI processes are still in their infancy, testing has shown that the following techniques significantly improve remote direct observation:

- Disable the regulator’s webcam (i.e. the camera that allows the program to see the regulator) to improve video speed and quality.
- Recommend that the program connect the mobile device to the program’s wireless internet connection to improve video speed and quality.
• Request that the program slowly pan the camera across each room upon entry to identify any conspicuous noncompliances.

Remote Interaction

Interaction is possibly the most difficult technique to conduct remotely but is a critical component of any inspection.

Do not hesitate to engage the contact person and ask questions of others encountered throughout the RI. Asking and answering questions is important and should be considered an opportunity for technical assistance, within the confines of compliance vs. noncompliance.

Part of the RI may simply be asking the contact person to stay in a room for a period of time to observe the staff and the children to determine staff-child interactions, which is an important part of child care and child development.

Additionally, some states are encouraging program staff to contact them directly if they wish to share any additional information after the RI by providing an email contact. This may result in additional RI activities, but should be offered as an opportunity for staff to be engaged and part of the inspection process; and should be treated similarly to any follow up that might be required as if the inspection had been conducted onsite.

The Pre-Inspection Conference

It is strongly recommended that a pre-inspection conference be conducted with the provider prior to conducting an RI. Pre-inspection conferences are conducted via the chosen software to be used for the RI; or simply by telephone where the regulator:

• Explains the RI process and why it is being used;

• Assures programs they are working together on the implementation of this new process;

• Identifies a point of contact and person(s) responsible for the RI at the child care program;

• Ensures the program is able to download the approved software and is comfortable using it (some training may be necessary although many applications are user-friendly and intuitive);
Developing a Remote Inspection Process

There are six key process steps in developing a Remote Inspection process:

1. **Policy decisions**, in which the agency examines and resolves items such as:
   - The types of inspections (e.g. annual inspections, complaint investigation inspections, semiannual monitoring inspections, etc.) that can be completed remotely.
   - The types of programs eligible for remote inspections based on both practical restrictions (the program must have access to the necessary technology) and ideological restrictions (the agency may not be willing to allow a program with current or historical instances of severe noncompliance to have such an active role in the inspection process).
   - Statutes, regulations, and policies that may impact the implementation of a RI program, with particular emphasis on information technology restrictions on software use and actions that may be in conflict with the Health Insurance Portability and Accountability Act (HIPAA).

2. **Software identification**, in which the agency determines the best applications to use for sharing documents (such as Microsoft OneDrive, Google Docs, etc.) and live video interface (such as Skype, Teams, Facetime, Google Duo, Zoom, etc.). It is recommended that, whenever possible, multiple applications be available for use to account for:
   - Cost
   - Differences in mobile device platforms used by child care programs
   - Accessibility and ease of use

3. **Development of Operational Procedures**, which involves establishing how RIs will be completed in accordance with the agency’s policy and application selections.

4. **Testing**, where the agency conducts RIs on a limited-scope basis to ensure that its policies, selected applications, and operational procedures are appropriate, and modifying same as appropriate.
5. **Training** licensing staff on the technology and operational procedures used in completing RIs.

6. **Communicating** the RI purpose and process to child care programs, including providing training and technical assistance in using the agency’s selected software.

**Conclusion**

While the RI process was developed in direct response to the COVID-19 pandemic, and with the understanding that RI does have disadvantages, it has provided licensing oversight agencies with the opportunity to explore other options with regard to conducting future inspections. RIs should be viewed as a new tool in the regulator’s toolbox as opposed to either a roadblock or replacement for all onsite inspections. This new tool can be useful moving forward as staff face other emergency situations that may preclude onsite inspection.

Once the COVID-19 pandemic has been contained, Remote Inspections should be reviewed, dissected, and determined as to their effectiveness. While NARA supports the intrinsic value of in-person, onsite inspections, there is a recognition of utilizing RI to verify or validate noncompliance items as a time-saving opportunity for staff potentially increasing the amount of time available to assist those providers that may be struggling or demonstrate borderline compliance.

After the states de-briefs on the issue of remote inspections, determines lessons learned, and identifies modifications or improvements to their process for future emergencies, NARA encourages RI information be included in the state’s Continuity of Operation Plan (COOP) so states are better prepared for critical situations in the future. Finally, even though we are currently making quick decisions in a rapidly shifting environment, our goal as regulators continues to be ensuring the health and safety of vulnerable children in care. We are used to mitigating risk and balancing resources, and as such, can learn much from this experience.