



Audit of Child Care Licensing and Enforcement

Office of the County Auditor

Audit Report

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OFFICE OF THE COUNTY AUDITOR

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May 22, 2019

Honorable Mayor and Board of County Commissioners:

We have conducted an audit of the Child Care Licensing and Enforcement Section of Environmental and Consumer Protection Division.

The objectives of our review were to determine whether the child care licensing process is performed effectively according to laws and regulations and to determine whether all fees are assessed and handled appropriately.

Except as noted within this report, we conclude that the child care licensing process is performed effectively, according to laws and regulations. We conclude that all fees are assessed and handled appropriately. Opportunities for Improvement are included in the report.

We conducted this audit in accordance with Generally Accepted Government Auditing Standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We appreciate the cooperation and assistance provided by the Environmental and Consumer Protection Division throughout the course of our audit.

Respectfully Submitted,

A handwritten signature in blue ink that reads "Bob Melton".

Bob Melton
County Auditor

cc: Bertha Henry, County Administrator
Andrew Meyers, County Attorney
Monica Cepero, Deputy County Administrator
Henry Sniezek, Director, Environmental Protection and Growth Management
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Broward County Board of County Commissioners

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INTRODUCTION

Scope and Methodology

The Office of the County Auditor conducts audits of Broward County's entities, programs, activities, and contractors to provide the Board of County Commissioners, Broward County's residents, County management, and other stakeholders unbiased, timely, and relevant information for use in promoting government accountability and stewardship and improving government operations.

We conducted an audit of the Child Care Licensing and Enforcement Section. Our objectives were to determine whether:

1. The child care licensing process is performed effectively according to laws and regulations
2. All fees are assessed and handled appropriately
3. Any Opportunities for Improvement exist.

To determine whether the child care licensing process is performed effectively according to laws and regulations, we reviewed applicable sections of Florida Statutes, Florida Administrative Code, Broward County Ordinances, standard operating procedures, provider files, inspection reports, licensing and complaint logs, and staff caseload assignments. We inspected Department of Children and Families' caseload recommendations, contracts, and website; County staff job descriptions and personnel files; staff calendars; and Kronos system data. We interviewed management and staff and conducted field observations of licensing inspection visits conducted by staff.

To determine whether all fees are assessed and handled appropriately, we reviewed fee schedules and applicable sections of Florida Statutes, Florida Administrative Code, Broward County Ordinances, fees collected for licensing and food inspection services, notices of violations, administrative complaints, fines collected, and tracking logs. We analyzed budgetary information, interviewed County management and Department of Children and Families personnel, and benchmarked other Florida counties' fee schedules.

We conducted this audit in accordance with Generally Accepted Government Auditing Standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit

objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Our audit included such tests of records and other auditing procedures, as we considered necessary in the circumstances. The audit period was October 1, 2016 through October 31, 2018. However, transactions, processes, and situations reviewed were not limited by the audit period.

Overall Conclusion

Except as noted within this report, we conclude that the child care licensing process is performed effectively, according to laws and regulations. We conclude that all fees are assessed and handled appropriately. Opportunities for Improvement are included in the report.

Background

[Child Care Licensing and Enforcement Section](#)

Child Care Licensing and Enforcement Section (CCLE) provides licensing and enforcement activities for all child care providers within Broward County. Effective October 2017, CCLE was transferred from the Human Services Department to the Environmental and Consumer Protection Division (ECPD) within the Department of Environmental Protection and Growth Management (EPGMD).

In the State of Florida, the Department of Children and Families (DCF) provides child care licensing services to 62 of 67 Florida counties. The remaining five counties, including Broward County, perform these services locally.

Broward County has contracted with DCF to act as the local licensing authority, through CCLE. Accordingly, Broward County must ensure child care entities meet the minimum requirements established by the state, but the County has also established and enforces additional standards for licensing and compliance. As such, the activities of CCLE are governed by Broward County Childcare Ordinance, Chapters 7 and 20, Section 402 of Florida Statutes, and Chapter 65C-20 of the Florida Administrative Code.

CCLE's mission is to regulate, enforce, and improve the quality of child care in Broward County. The agency is responsible for the implementation of the state-mandated licensing of all child care facilities and family child care homes in Broward County and monitors child care providers for compliance with health and safety standards. CCLE also registers religious and non-public schools offering child care services.

CCLE Staffing

In Fiscal Year (FY) 2018, CCLE had 22 employees. Staff consist of an Administrator, an Administrative Officer, two Child Care Licensing Supervisors, two Quality Assurance Specialists (QAS), thirteen Child Care Specialists (CCS), and three support personnel. Professional staff are required to hold degrees in related fields of study and have experience in child care and/or child education. Employees are also required to pass state mandated background screening requirements and hold a valid Florida driver's license, as travel to various child care facilities across the county is expected.

CCLE staff have also obtained additional certifications. Four staff are certified by National Association of Regulatory Agencies; six staff have received National Certification in Investigative Training (Basic); one staff has received National Certification in Investigative Training (Advanced); and three staff are certified as Early Childhood Outdoor Play Inspectors.

Regulated Entities

CCLE regulates over 800 child care providers each year in Broward County. Regulated child care providers include:

- Licensed child care facilities which provide services to more than five children, unrelated to the operator, in a non-residential building. Providers receive a fee for services and may be operating under for profit or nonprofit status.
- Licensed family child care homes are residences occupied by an operator who regularly cares for and receives a fee for services provided to children from two or more families unrelated to the operator. Depending on the number of children to whom services are provided, the residence may be licensed as a 'large child care home'.
- Licensed before and after school child care refers to facilities which provide care to school aged children, either before or after the school day, or on school holidays.
- Registered child care arrangements are those that are not required to be licensed due to their status as a religious entity, or private, non-public school. However, these facilities are required to register with CCLE and meet the majority of child care standards for licensing.

In the aggregate, CCLE inspection activities provide services to approximately 90,000 children in Broward County.

Child Care Facility Inspection Services

Each year, CCLE staff perform approximately 3,000 inspections, including new provider pre-licensing site visits, re-license or renewal inspections, routine inspections, and re-visits to review areas previously observed to be out of compliance. All licensed or registered facilities are inspected once annually, to renew their license/registration status. Licensed facilities are inspected two additional times per year, while registered facilities are inspected one additional time per year.

CCLE staff also conduct investigations if complaints are received. Complaint investigations may be performed for currently licensed facilities that are reported to be out of compliance with expected standards, generally by concerned parents or neighbors. Additionally, complaints may be received regarding suspected unlicensed child care operations.

Inspections are generally performed on an unannounced, 'surprise' basis by CCS or QAS staff who review compliance with approximately 250 standards, including;

- ❖ Child care staff requirements, such as background screenings and education.
- ❖ Child safety standards, including the examination of indoor and outdoor play areas, rest room facilities, sleep areas, and staff to child ratios.
- ❖ Record keeping, such as the preparation and maintenance of required policies, parental releases, and health records.

CCLE staff also perform food safety inspections required for food service permits. Previously, this function was the responsibility of ECPD, separate from CCLE, but as an efficiency resulting from the recent reorganization, CCLE staff have completed food safety instructional training, and now conduct food service inspections while conducting regular licensure and routine site visits.

Each inspection visit is tailored by the assigned CCS based upon the type of facility, and applicability of additional licensed services, such as transportation, nighttime services, or the center's participation in School Readiness programs.

Inspection Reports

Inspection reports are completed in the field by CCS or QAS staff at the end of each site visit utilizing a standardized, web-based inspection form. This form was jointly developed by CCLE and DCF, and it includes all required review standards from Statute, Ordinance, and the School Readiness program. As CCLE staff complete the report, they denote if the facility is in 'compliance' or 'non-compliance' with each applicable standard. Once reviewed and approved

by supervisors, completed inspection reports are posted on DCF's website (DCF CARES), allowing the public to view the performance of all facilities and homes.

Notices of Violation and Administrative Fines

During inspections, minor concerns may be remedied by the facility during the inspection and considered 'compliant'. Issues that are not readily addressed, or those of a more significant nature will be noted as 'non-compliant' in the inspection report. Each violation of the standards is classified as Class I, II, III or IV, with Class I being the most serious violation, and considered as an immediate danger to the children in care. A Notice of Violation (NOV), for any area of non-compliance, may be issued to the child care provider by the CCS at the conclusion of the site visit. In accordance with Statute and Ordinance requirements, all Class I areas of non-compliance are to be issued a NOV. Following issuance of a NOV, CCLE may later choose to issue an Administrative Complaint to the provider, which is a more formal disciplinary action, sent via registered mail. Administrative Complaints impose a fine based on the area(s) of non-compliance noted on the NOV, typically ranging from \$100 to \$500 per violation.

Community Outreach

Community outreach is also a priority for CCLE. Monthly orientation sessions are held for individuals to learn how to open a child care arrangement and periodic training sessions are available for providers. CCLE also partners with other agencies in the community to help further the safety of children in care, including law enforcement, Child Protective Services, public schools, the Department of Health, the School Board, and the Children Service Council. CCLE is a board member of the Early Learning Coalition.

Revenues and Expenses

Figure 1 shows a three-year revenue and expense history for CCLE. CCLE expenses are primarily for personnel, which are supported by both General Fund dollars (15 positions), and contract revenue received from DCF for licensing and inspection services (7 positions). Other revenue sources are fees for services related to licensing activities, such as fees for new licenses, annual renewals, and license changes. A decrease in day care license fees was experienced in FY 2017 when CCLE ceased performing background screening services, and responsibility for this function was assumed by DCF. Food inspection fees are only shown for FY 2018 when CCLE became a part of ECPD; however, a separate food inspection fee will no longer be assessed as this activity is now included in regular licensing fees. The transfer of \$110,000 from the General Trust Fund was a one-time occurrence, for the purchase of vehicles for fieldwork activities by staff.

Figure 1: Three Year Revenue and Expense History for CCLE

CCLE Revenue and Expenses, FY 2016 - FY 2018			
	FY 2016	FY 2017	FY 2018
Revenue by Type			
Day Care License Fees	\$300,920	\$154,145	\$124,843
Background Investigations	\$41,138	-	-
Food Inspections	-	-	\$87,826
Other Sources	-	\$2,654	\$27,972
Transfer General Trust Fund	-	-	\$110,000
Grant Revenue	\$359,558	\$359,558	\$453,308
Total Revenue	\$701,616	\$516,357	\$803,949
Expense by Type			
General Fund Expense	\$1,256,567	\$1,385,862	\$1,455,960
Grant Expense	\$359,558	\$359,558	\$453,308
Total Expense	\$1,616,125	\$1,745,420	\$1,909,268
Total Net Revenue	(\$914,509)	(\$1,229,064)	(\$1,105,319)

Source: Prepared by Office of the County Auditor based upon OMB documents and information from CCLE.

OPPORTUNITIES FOR IMPROVEMENT

Our audit disclosed certain policies, procedures and practices that could be improved. Our audit was neither designed nor intended to be a detailed study of every relevant system, procedure, or transaction. Accordingly, the Opportunities for Improvement presented in this report may not be all-inclusive of areas where improvement may be needed.

Note: Throughout this report, the terms child care ‘centers’, ‘facilities’, ‘providers’ or ‘arrangements,’ may refer collectively to stand-alone child care centers, child care centers located within private or public schools or community centers, or private homes. The term ‘licensed’ is used to collectively refer to either licensed or ‘registered’ facilities or homes. If a distinction in terminology is necessary to explain an aspect of CCLE operations, it is specified within the narrative.

1. Proactive Enforcement Activities Regarding Unlicensed Facilities Should be Enhanced.

CCLE’s current program to ensure only licensed child care facilities are operating is limited and could be enhanced to include a more proactive approach. Presently, CCLE’s identification of unlicensed child care focuses on the investigation of complaints received from the public and responses to circumstances observed by, or reported to, staff in the field. Although Management believes they conduct some proactive activities, they have not fully implemented proactive measures to identify, license, and take appropriate action on unlicensed or unregistered child care facilities or homes, where necessary. We consider this to be an additional important element of a comprehensive approach to enforcement of licensure.

We conducted a search of local advertising websites and identified five potentially unlicensed child care providers, which we referred to CCLE for investigation. Of the five providers identified, CCLE conducted investigations and issued citations and \$250 civil penalties to the operators of three homes. Addresses could not be obtained for the remaining two providers referred, and investigations were not able to be completed.

As the local licensing and enforcement authority, CCLE should use proactive measures to identify, license, and take appropriate action on unlicensed child care providers when necessary. Failure to proactively identify unlicensed providers may allow unsafe child care operations to remain undetected, affecting the health and safety of children.

As evidenced by our searches of online advertisements, there is a high risk of such operations continuing throughout Broward County. Figure 2 shows photographs of children in potentially unsafe care, as obtained by our Office, from a webpage published by an unlicensed operator.

Figure 2: Photographs Taken from Website of Unlicensed Care Provider.

Photograph A



Image shows infants in unsafe sleeping conditions, sharing a crib containing loose blankets, pillows, crib 'bumpers', toys.

Photograph B



Image shows three infants seated in carriers which do not appear to be properly secured to the chairs.

Photograph C



Image shows infant in unsafe sleeping conditions, on a bed without railings, face down, on pillow and loose bedding. Additionally, other children are playing on the floor below the sleeping infant.

Photograph D



Image shows children playing in yard near exposed air conditioner and electrical units and warped fencing.

We recommend management implement procedures to proactively identify unlicensed or unregistered child care facilities or homes.

2. Complaints Should be Accurately Tracked and Investigated Adequately and Timely.

During our review of complaints against child care facilities, we noted the following:

- A. Complaint logs are not consistently completed with all required information to facilitate adequate tracking and investigation. We reviewed a sample of 30 complaints, and noted that information in the complaint logs was not accurate and/or complete. We noted 12 of 30 (40%) logged complaints contained errors/omissions. Specifically:
 - i. Eight of 29 (28%) complaints did not list the date the complaint was received. Florida Statutes and BC Ordinance require all complaints to be investigated within

72 hours of receipt. Without this information, management cannot confirm whether these investigations were conducted in a timely manner.

- ii. One complaint identified during our audit procedures was not included in the log, indicating that the log is incomplete.
- iii. One entry on the log was not the result of a complaint investigation, but a regular inspection which resulted in the issuance of an NOV, and was inadvertently entered in the log as a complaint.
- iv. One entry listed the incorrect name for the facility.
- v. One entry did not include the type/nature of the complaint.

Appropriate tracking of all complaints and their resolution is important to ensuring the ongoing safety of children. Tracking logs should be complete, accurate, easy to use and sufficient to accomplish goals. Ensuring all complaints are investigated within 72 hours is also a requirement of CCLE's contract with DCF. It is noted that management updated the format of its tracking log during our review period.

- B. Of the 30 complaints sampled, 26 reports were completed. We reviewed these reports, and found:
 - i. One report (4%) could not be located.
 - ii. Of the remaining 25 complaint inspection reports, one (4%) was not signed by the CCLE staff person.
 - iii. Two of 14 complaint investigation reports (14%) completed after October 1, 2017, were not uploaded by CCLE staff to the DCF CARES website as of November 30, 2018.
- C. CCLE does not complete investigation reports, maintain adequate documentation, or perform adequate follow-up procedures for complaints regarding unlicensed facilities. Of the 30 complaints reviewed, three were for unlicensed facilities, and in each of these instances, no formal inspection report was completed.
 - i. DCF Cares system only includes provider profiles for licensed facilities; as a result, no report template is available within DCF Cares system for investigations of facilities that do not have a license, and CCLE has not developed an alternative report template.
 - ii. We noted inadequate follow-up in all three of the unlicensed activity complaints reviewed. One complaint had no follow-up activity after the initial citation was

issued; the second did not have any follow-up activity after a second citation was issued; and, the third entity was provided a questionnaire to determine if a license was required; however, CCLE was unable to produce a copy of the returned questionnaire or demonstrate if any other follow-up activity was performed.

Timely investigation of complaints is a critical part of CCLE operations. While not all complaints will be valid, it is important that all complaints are adequately tracked, quickly investigated and that follow-up procedures are timely and appropriate to protect the safety of children.

We recommend management ensure appropriate procedures are in place to log, conduct and document investigations of complaints against child care facilities within 72 hours, as required by DCF contract.

3. Notices of Violation and Administrative Complaints Should be Issued and Logged Consistently and Timely

We determined that CCLE does not consistently issue Notices of Violation (NOV) to non-compliant child care providers as required, and does not adequately track the NOV's or Administrative Complaints that are issued. Specifically, we noted;

- A. CCLE does not consistently issue NOV's for all Class I violations as required by Broward County Ordinance (7-11.11,c), which requires a NOV to be issued for all Class I violations. We reviewed a sample of 31 inspection reports with violations. From these, we identified three reports with Class I violations that were identified by the CCS, and later approved by the supervisors; however, no NOV's were issued to the provider. Each of the observed Class I violations were for non-compliance with background screening requirements. Specifically, one facility was found to be non-compliant with screening requirements as the owner was pending approved eligibility at the time of the inspection. The other two instances were for one facility, on two separate visits. In one case, the site visit included the Class I violation for one staff not properly screened through the DCF 'clearinghouse'. This inspection report also included four Class II violations and one Class III violation. In the next inspection, another Class I violation was cited for non-compliance with background screening requirements to have a child abuse history check available in the files for two employees. This inspection report also included six Class II violations and seven Class III violations.

Failure to issue NOV's for Class I violations results in CCLE's non-compliance with County Ordinances, and may result in perceptions of disparate treatment across providers, failure of a provider to correct non-compliance areas, and ultimately affect the health and safety of children.

- B. Logs used by CCLE to track issued NOV's are incomplete and inaccurate. We identified five of 15 (33%) NOV's from our file reviews that were issued to providers but were not included in the log. For each NOV missing from the log, Figure 3 shows the license number of the facility, the date the NOV was issued, and the violation class type, and Administrative Complaint fine amount, if any.

**Figure 3:
NOV's Missing from CCLE Tracking Log**

License # of Facility	NOV Date	Class of Violation(s) Cited	Administrative Complaint Amount	Description of Violation in NOV
45830	2/27/18	1-Class I	None	Personnel/Child Ratios
45830	4/18/18	1-Class I	\$100	Personnel/Child Ratios
45245	7/13/17	2-Class I 2-Class 2	None	Background Screening, Falsified Information Provided, Inappropriate Discipline Method, Discipline was Cruel, Harsh or Unusual
45374	8/7/17	1-Class I	None	Background Screening
50123	4/9/18	1-Class I	\$100	Personnel/Child Ratios

Source: Office of the County Auditor presentation of information obtained from CCLE and DCF CARES

Additionally, we noted instances where specific log entries were incomplete or inaccurate, such as;

- i. Blank Fields – No information entered for identifying the violation class type, whether a fine was imposed, the date a fine was paid, and the amount paid.
- ii. Inconsistent Information – For example, indications that a fine was issued, but the fine amount is listed in the log as \$0.
- iii. Failure to Track Key Information - The log did not track the dates administrative complaints are issued, or the number of days since a fine was imposed.

Logs should be accurate, complete, and sufficient to adequately support and inform business processes. Failure to adequately track NOV's and administrative complaints may hinder follow-up procedures, inspections, and collection practices.

We recommend management:

- A. Ensure NOV's are issued for all Class I violations in accordance with BC Ordinance.

- B. Ensure tracking logs for issued NOVs are accurate, complete, and sufficient to adequately support and inform business processes.

4. Investigator Oversight Procedures Should be Enhanced.

Procedures to provide oversight of child care investigators in the field need improvement. Specifically, we noted the following:

- A. CCLE Supervisors do not adequately monitor field staff to ensure compliance with established work schedules. We reviewed Kronos mobile application time and location data for a sample of seven staff over a two week period against scheduled work locations and completed investigation reports. In total, we considered 88 data points and noted the following concerns:
 - i. Twenty-seven (31%) clock-in/out entries were completed from locations inconsistent with staff schedules, with eight (9%) that occurred from staff members' home locations.
 - ii. Sixteen (18%) clock-in/out entries appeared to have been made from roadway locations while in transit, indicating use of cell phones while driving.
 - iii. Ten (11%) inspection reports posted to DCF CARES website, had beginning or ending times of the site visit that were inconsistent with the actual location of the staff members.

According to CCLE managers, in consideration of their regular off-site work assignments, staff were authorized to use a mobile application for Kronos, allowing them to 'clock-in' or 'clock-out' from their County cell phones on days when they were conducting fieldwork. When conducting site visits, staff using their personal vehicles were expected to clock-in at their assigned start time from their first scheduled location, and to clock-out at their scheduled end time from their final site visit location. Staff using County vehicles were allowed to clock in/out when picking up or dropping off the vehicle at the garage. If site visits were completed prior to the end of their scheduled work hours, staff were expected to return to the office for the remainder of the day. Managers acknowledge that an 'honor' system was in place, and GPS tracking location data was not used, either from cell phones, or County owned vehicles.

During our audit, as of October 29, 2018, management implemented new procedures to require all field staff to use a County car for travel, which are assigned to them daily, based on availability. There are currently nine cars for fifteen field staff. This new practice requires field staff to report to the office at GC West at their regularly assigned start time

to clock-in for the day using a standard time clock. At the end of the day, field staff return to GC West, where they clock-out using a standard time clock. If it is not yet the end of their regularly assigned work day, staff are expected to conduct in-office activities. Accordingly, CCLE has ceased use of the Kronos mobile app for all staff.

- B. Field staff do not consistently take lunch breaks. When asked, CCLE Managers confirmed that some staff choose not to break for lunch. According to Managers, staff make their own choices regarding when to take lunch breaks; however, such practices are not encouraged, and staff are not allowed to shorten ('flex') their assigned work day schedule if they chose to skip lunch. The Fair Labor Standards Act (FLSA) requires employers to pay non-exempt employees for all hours worked. This may include requiring an employer to pay an employee for time worked while on a meal or lunch break, even if the break is supposed to be unpaid. (See 29 CFR 785.11). If an employee works during a lunch break that is supposed to be unpaid, an employer may be obligated to pay additional wages, including unintended overtime, to that employee increasing the County's legal risk.

Additionally, conducting a site visit without breaks may be unfair to child care center staff, who often assist CCLE inspectors throughout the site visit. Child care center staff may inadvertently feel pressured to continue the visit without requesting a needed break for themselves.

We recommend management act to ensure all staff work assigned hours as appropriate, including, but not limited to:

- A. Continuing to implement policies and procedures to provide adequate supervision and monitoring of field staff, including;
- i. Ensuring all staff work assigned hours, and maintain up-to-date calendars.
 - ii. Periodic monitoring of staff locations via GPS tracking capabilities.
 - ii. Personnel actions, as appropriate, to address any staff improprieties regarding inappropriate reporting of work hours.
 - iv. Ensuring that all site visit times entered on monitoring reports by field staff are accurate and reflective of actual time spent at the provider location.
 - v. Prohibiting unsafe practices such as use of cell phones while driving on County business.
- B. Ensuring staff take lunch breaks as appropriate, and that staff do not work overtime hours without advance approval and compensation.

5. Fines Should be Progressive and Promptly Collected

During our review we noted that CCLE does not consistently issue fines in a timely or progressive manner, and does not take adequate measures to ensure unpaid fines are collected. We noted the following:

- A. CCLE does not issue progressive fines up to the maximum allowable amount for Class I violations, nor are allowable ‘per day’ fines imposed. For Class I violations, the Ordinance allows CCLE to issue fines up to a maximum amount of \$500 per day, for each violation; therefore, if a facility was in violation of a Class I safety standard for five days, CCLE has the authority to issue a fine in the amount of \$2,500. Based on our analysis of available information, in the majority of instances, CCLE issues one-time \$100 fines for Class I violations. The option of applying the fines for each day the violation occurred is not typically exercised according to staff.

Figure 4 shows the amounts of fines imposed for all identified Class I violations for which fines were issued. We noted 172 of 229 (75%) fines imposed for Class I violations, were for \$100, as a one-time fine. The remaining 57 fines were issued for amounts ranging from \$200-\$500, with only nine (4%) fines for Class I violations issued in the amount of \$500, the maximum one-time fine permitted by Ordinance. In total, \$35,150 in fines for 229 Class I violations were issued during our review period at an average of \$153 per Class I violation.

**Figure 4:
Dollar Value of Fines imposed for Class I Violations**

Fines Issued for Class I Violations		
Fine Amount	# of Fines Issued	Total
\$100	172	\$17,200
\$200	2	\$400
\$250	37	\$9,500
\$350	1	\$350
\$400	8	\$3,200
\$500	9	\$4,500
	229	\$35,150

Source: Office of the County Auditor analysis of CCLE data

As an example of when fines were established below maximum allowable amounts, we refer to a complaint investigation completed for facility license #50132 on June 27, 2018

when the facility was cited as noncompliant with standards for employee background screenings for two employees, and personnel to child ratios for three groups of children. On October 5, 2018, 100 days later, an Administrative Complaint was sent to the facility, which noted that the facility was previously issued a Notice of Violation for background screening violations and was presently being issued a fine of \$250 for the current Class I violations. In this instance, a \$500 fine could have been issued for each employee found in violation of the standards, for as many days as they had been in the facility caring for children-- a minimum of \$1,000. Secondly, the facility was found to be in violation of Class I personnel ratio standards in three separate classrooms. CCLE imposed a single \$100 fine for all three violations, rather than \$500 per instance, or \$1,500. As this facility has experienced repeated violations of a serious nature, imposition of increased punitive actions, both on the previous and current Administrative Complaints would have been appropriate to encourage future compliance with all standards. Additionally, the minimal fine imposed for violations of child to staff ratio requirements is a disincentive for compliance, as paying the \$100 fine can be more economically advantageous to the facility than hiring additional staff.

Additionally, it is noted that of 106 NOVs issued for Class II and Class III violations, only 17, or 16% were subsequently issued fines.

- B. Fines are not issued timely following the issuance of a NOV. We noted ten Administrative Complaints which were issued 46 to 194 days, or an average of 114 days, after the date of the site visit, as shown in Figure 5. Timely issuance of Administrative Complaints following the date the violation is observed is a prudent practice, demonstrates the seriousness of non-compliance, and encourages quick resolution of issues.

Figure 5: Number of Days from Site Visit to Issuance of Administrative Complaint

Date of Site Visit	Date of Administrative Complaint	# of Days After Site Visit	Description of Violation
7/18/16	1/28/17	194	Background Screening
3/2/17	7/20/17	140	Background Screening
3/30/17	7/20/17	112	Background Screening
6/20/17	11/21/17	154	Background Screening
2/12/18	5/16/18	93	Personnel/Child Ratios
3/22/18	5/25/18	64	Personnel/Child Ratios
3/19/18	5/25/18	67	Background Screening
4/9/18	5/25/18	46	Personnel/Child Ratios
4/18/18	10/12/18	177	Personnel/Child Ratios
6/27/18	10/5/18	100	Background Screening
Average		115	

Source: Office of the County Auditor presentation of CCLE data

- C. CCLE does not take adequate action to collect unpaid fines. We observed the following concerns:
 - i. Of the 248 violations for which Administrative Complaints were issued, we found 65 (26%) of the fines imposed were not collected, totaling \$9,300. Of these, 46 were for Class I violations, with fines totaling \$7,100. Minimal collection activities for unpaid fines are conducted. In addition, past due notices, which state licenses may be revoked for non-payment are not consistently sent to providers and are not tracked. Further, CCLE does not employ the use of other collection practices such as late fees, liens or other penalties.
 - ii. CCLE chose not to collect, and effectively ‘waived’ 14 fines imposed against one facility, of which four were for Class I violations. According to the County Attorney, CCLE is not authorized to waive fines for Class I violations. The total amount of fines imposed against this facility was \$1,550, of which \$850 was for Class I violations. Three Class 1 violations were related to background screenings, and one was for misrepresentation of information. The Class II and III violations where fines were issued were related to non-compliance with requirements regarding fire drills, outdoor equipment, attendance records and staff training. The facility’s license was not renewed, and the center was closed.

- iii. Administrative Complaints do not clearly identify the due date of the fine. Without providing a specific due date, providers may not understand when the payment is expected. As a result, payment for fines may be received late, or fines may remain unpaid. Failure to take action to collect unpaid fines may result in continued non-compliance by provider agencies, and may ultimately affect the safety of children in care.

In totality, these findings indicate that CCLE does not have an effective system to ensure the consistent issuance of NOVs, timely issuance Administrative Complaints and fines, or the payment of fines imposed. Failure to have effective enforcement practices diminishes CCLE's ability to accomplish its mission. To be effective, disciplinary action should be consistent and timely. Further, a lack of meaningful and progressive enforcement program may de-incentivize providers to take actions to ensure compliance, which may be more costly than the minimal fines currently imposed. Unpaid fines result in a loss of revenue to the County, which could offset the costs of staff expenses related to enforcement activities.

We recommend management:

- A. Effectively impose fines for non-compliance, in a progressive manner, up to the maximum allowed by ordinance.
- B. Ensure Administrative Complaints are issued in a timely manner following the issuance of NOVs and site visits.
- C. Enhance collection practices to ensure:
 - i. Fines imposed are collected completely and timely, and late fees are established for past due fines.
 - ii. Revocation of licenses due to non-payment of fines is pursued, when appropriate.
 - iii. Fines imposed are not 'waived' without appropriate authority.
 - iv. Due dates for fine payment are included on Administrative Complaints.

6. Standard Operating Procedures Should be Updated for all Major Functions

Standard Operating Procedures (SOPs) for some major functions are either incomplete or outdated. SOPs serve as reference guides to staff and help ensure consistency of operations. Without complete and up-to-date SOPs, staff may lack tools and resources for use in guiding fieldwork activities. Specifically:

- A. SOPs for monitoring facilities and homes are dated 2007 and 1993, and do not adequately reflect current procedures and technology used.

- B. SOPs for investigations of complaints against unlicensed facilities have not been updated since 2007 and do not contain adequate guidance to document and retain investigations of unlicensed facilities. As a result, we noted inconsistent documentation of unlicensed facility investigations and the lack of master files which could assist CCLE in ensuring the completion of follow-up activities, such as documentation of efforts to promote licensing; site visits to ensure unlicensed facilities or homes do not resume operations; or, identification of repeated operator/location offenses.

It is a best practice for all agencies to have SOPs for all major activities to guide staff through necessary steps in completing essential job functions, and that such documents are updated, on a periodic basis, or when significant operational changes occur.

We recommend management develop or update SOPs, to address all major areas of operation within CCLE.

7. A Formal Quality Assurance Program Should be Implemented

CCLE has not implemented a comprehensive quality assurance program. This was evidenced throughout our fieldwork, as we observed discrepancies in the consistent application of processes as well as omissions in the completeness of tracking logs, documentation in provider master files, or inspection reports. Such concerns affect several areas of operations including master file records, new license inspections, license renewal processes, routine inspections, and complaint investigations. We noted the following:

- A. CCLE has two Quality Assurance Specialist (QAS) staff persons. However, their assigned job responsibilities primarily include licensing of new facilities, investigations of complaints, as well as carrying a small caseload of child care centers for regular monitoring activities. Accordingly, they are unable to focus their time on quality assurance activities.
- B. New license applications and licensing inspection reports are not consistently reviewed and approved, according to CCLE stated procedures.
 - i. Two of 28 (7%) pre-licensing inspection reports sampled were not signed by CCLE staff,
 - ii. One of 28 (4%) pre-licensing inspection reports was not posted on the DCF website,
 - iii. One of 15 (7%) licensing applications was not signed by the CCLE Supervisor.

- C. Discrepancies were noted regarding the completeness of file documentation during the license renewal process and inspection process which may negatively impact the quality of inspection services, result in noncompliance with DCF contract, or impact the County's reputation should an unfortunate event occur. Of 30 facility files reviewed, we noted the following:
- i. Three of 30 (10%) applications for renewal were not signed/approved by a supervisor. Supervisory signatures are important evidence of the approval process, ensuring that all renewal applications have been appropriately reviewed prior to issuance of licenses.
 - ii. Two of five (40%) files for registered facilities did not have documentation of the qualifying reason for their status as a 'registered' facility. Registration status is granted to certain facilities, for specific reasons (such as religious facility), and provides exemption from certain standards as well as reduced inspection requirements. Accordingly, it is important that provider files document proof of continued eligibility.
 - iii. One of five (20%) registered facilities had conflicting information between the file information, DCF CARES Website and CCLE's reports regarding the name and address of the facility.
 - iv. Facility capacity is not consistently reviewed as part of renewal process. For example, one facility with a capacity of 242 children did not have its capacity or floorplan re-evaluated since 2000. Periodic re-assessment of capacity, which is based on the size of both indoor and outdoor care areas, would help ensure children are not overcrowded in play areas, or may allow a center to expand its enrollment.
 - v. One (3%) facility added transportation services to its current license after the renewal process was complete; however, the new license including transportation services, was issued effective for the original renewal date, not the actual date the service was added.
 - vi. Two facilities (7%) were not properly inspected for all licensed activity; specifically reviews of transportation services and night/weekend services were not considered, even though such services were included in the license.

- iv. In totality, 95 renewal and routine inspection reports were reviewed; of these, three (3%) were not signed by CCLE staff, and nine (9%) were not posted online on DCF Cares website.

License renewal applications should be reviewed and approved by supervisory staff prior to issuance of a license. Further, it is a best practice that facilities requesting renewal as a registered facility provide proof of eligibility. Licenses should accurately reflect important identifying information, services provided and capacity of the facility. Routine inspection reports should address and, as appropriate, comment on all areas of licensing. All reports should be posted to the DCF CARES website, and available for viewing by the public.

- D. CCLE maintains a master file for each licensed provider. Overall, we found that some master files were lacking organization and/or valuable information. For example:

- i. CCLE does not maintain copies of important communications in the master files. Specifically, the files do not contain copies of any correspondences with the centers, such as reminder notices, requests for additional or updated information, facility closure letters and/or cancellation of licenses, copies of any emails that may be exchanged, or an activity log to record any important communications, or documentation of oversight decisions. It is noted that during our fieldwork, CCLE responded to our concerns by creating file closure letters.
- ii. Master files are maintained in CCLE file room; however, CCS staff also maintain separate 'desk files'. It appears information contained in one source is not always available in both.
- iii. During our initial review of provider files, several were either missing one or more reports or contained copies of reports that were misfiled. As these discrepancies were identified and shared with CCLE staff, missing documents were found and/or refiled.

It is a best practice that a master file should be properly maintained, containing copies of all relevant communications between entities, all reports, and documentation of important licensure related activities, or decisions by CCLE. This helps to ensure that any staff member reviewing the file has all important and relevant information available for review.

As demonstrated by the totality of these deficiencies, implementation of a comprehensive quality assurance program could help ensure CCLE's ongoing provision of quality services.

We recommend management:

- A. Consider a realignment of Quality Assurance Specialist staff responsibilities to allow a focus on quality assurance activities rather than serving as a supplement to regular staff.
- B. Implement a comprehensive Quality Assurance program to improve the quality and consistency of file documentation, and all licensure, renewal and inspection related activities, including ensuring all investigative reports are properly posted in the DCF CARES system.

8. Staff Caseloads Should Comply with DCF Workload Standards

CCLC staff caseload exceeds DCF recommended workload standards. In a memorandum issued on January 14, 2016, DCF noted the utilization of workload standards for its regional offices to be 100:1 for licensed family child care homes, and 50:1 for child care facilities. We applied these ratios proportionately to CCS caseloads, which are generally a mix of facilities and homes. We noted the following:

- A. Nine of 13 (69%) CCS positions exceed the DCF caseload standards of 50 child care facilities.
- B. Thirteen of 13 (100%) CCS positions exceed DCF caseload standards in combined total (facilities and homes).
- C. All CCS staff exceed recommended caseload levels by an average of 13% (excluding small caseloads maintained by two Quality Assurance Specialists).

Caseload standards are designed to achieve a balance between staff productivity and quality of work products. Excessive caseloads may result in overwhelmed staff, reduced performance and/or increased errors.

We recommend management analyze staffing levels against workload requirements and make appropriate adjustments in order to comply with DCF's workload standards.

9. New Hires Should Meet Minimum Job Requirements

During our review of six sampled employee files, we identified one employee who was hired as a CSS, even though the pre-employment screening document in the employee file clearly indicated that the employee's authority to drive was denied due to a suspended license. In spite of this denial, the employee was hired on November 17, 2017, and was allowed to drive on County business. Risk Management discovered the discrepancy when the employee submitted a request

for mileage reimbursement in April 2018. Following notification, the employee corrected the issue and was given authorization to drive on April 18, 2018.

Oversights of this nature during new hire processes expose the County to significant liability as well as posing a potential public safety risk.

We recommend management ensure staff are hired in accordance with the minimum job descriptions, including authorizations to drive vehicles, as appropriate.

10. Fees Charged Should Address Operating Deficits and be Consistent Across Service Types and Staff Resource Utilization.

- A. As shown in the Background Section of this report, CCLE operated at a net deficit for each of the past three fiscal years, with average, annual revenue loss of \$1.08 million. Many governmental services strive to operate at a revenue neutral position, collecting sufficient fees for services to cover operating expenses, ensuring that users of the services, in this case, child care entities seeking licensure, sufficiently contribute to the service so that it is not a burden on the local taxpayer (General Fund). It is noted that DCF currently provides funding for 25% of CCLE's costs. Attempts to request a higher level of funding support from the State via legislative actions have not been successful.
- B. Fees charged to providers are not consistent across services delivered and the staff effort involved in providing the services. We noted the following:
 - i. Changes in licensee name, capacity, or adding nighttime care, all require a 'change' fee; however, changes in licenses such as adding transportation services do not require a fee. This is an inconsistent practice, as all changes to licenses require a site visit inspection and application processing.
 - ii. Reinspection fees were previously required for failed food services inspections only but have been eliminated in the fee schedule approved by the Board on January 29, 2019. Presently, a single license fee has been established to cover combined childcare and food license inspections, and no fees have been established for re-inspection for failed inspections. However, all failed inspections require a follow-up site visit to ensure facilities have become compliant.

Government fees for services are generally based upon achieving a certain level of cost recovery for staff time/expenses consumed in performing the services. Therefore, it is a good practice that all similar services have similar fees. Failure to establish fees for all services requiring

additional inspections, may result in a loss of revenue, while having a fee for reinspection services could create an incentive for facilities to strive to pass all inspections the first time.

We recommend management evaluate CCLE's fee schedule to reduce the operating deficit and increase consistency in application of fee assessment practices across similar services.

11. Technology Should be Used to Increase Operational Efficiencies

Over the course of our review, we noted several opportunities where enhanced use of technology and automation practices could lead to increased consistency and efficiencies in CCLE Operations.

We noted the following:

- A. CCLE relies on several manual or spreadsheet based systems for tracking facilities, licensing status, performance measures and inspection activities reducing efficiency and increasing the risk of errors and omissions. Use of automated workflow systems, such as POSSE, could result in significant increased efficiencies and accuracy regarding the tracking and monitoring of such activities.
- B. Child care provider records are currently paper based. Increased use of electronic documents may reduce paper waste and improve consistency in file documentation maintained. Use of digital signatures in the field (by CCLE staff and facility directors) can reduce the need to rely on hard copies of reports and increase consistency in how such signatures are obtained.
- C. Several computers used by staff in the field are outdated and cumbersome to use. Mobile technology such as tablets could assist inspectors in documenting observations during site visits and completing checklists.

Current best practices include reducing reliance on paper based systems while maximizing use of available technology.

We recommend management:

- A. Explore implementation of automated workflows and tracking systems for increased efficiency.
- B. Explore means to reduce reliance on paper based systems while creating consistency in documentation practices.
- C. Evaluate current equipment used by staff for adequacy and explore the use of updated technology to facilitate inspection processes.

MANAGEMENT'S RESPONSE



BERTHA W. HENRY, County Administrator

115 S. Andrews Avenue, Room 409 • Fort Lauderdale, Florida 33301 • 954-357-7362 • FAX 954-357-7360

TO: Robert Melton, County Auditor

FROM: Bertha W. Henry, County Administrator 

DATE: May 20, 2019

SUBJECT: Response to County Auditor's Audit Report on the Child Care Licensing and Enforcement (CCLE) Section of the Environmental and Consumer Protection Division (ECPD)

The above referenced County Auditor's report has been received and reviewed. Management accepts the Auditor's findings and agrees to implement all the recommended improvements, with the exceptions of those identified below. Responses to all the audit recommendations follow.

Finding 1: *Proactive Enforcement Activities Regarding Unlicensed Facilities Should be Enhanced*

Recommendation: *We recommend management implement procedures to proactively identify unlicensed or unregistered child care facilities or homes.*

Management's Response: Management partially concurs. As mentioned in the Audit, CCLE does invest resources in proactively pursuing unlicensed facilities. CCLE has confirmed these measures match or exceed what state programs perform for unlicensed providers. Proactive measures include: investigating programs observed to be advertising child care, but not licensed; following up on information regarding unlicensed facilities identified during field staff interviews of licensed providers and customers; maintenance of programs designed, in whole or in part, to deter unlicensed activity in Broward County (for example, a vigorous complaint response program); and, via a number of outreach and coordination efforts, establishing throughout the child care community industry knowledge of licensing requirements.

CCLE's paramount focus is on its licensed child care program. The chief reason for this prioritization is the reasonable assumption that members of the public conclude a CCLE license is a strong assurance of safety and quality child care; accordingly, CCLE dedicates most of its resources to the licensing program. CCLE will revisit the level of effort it commits to proactively seeking unlicensed facilities, working with the Auditor memorialize that level of effort in a Standard Operating Procedure (SOP), and, estimated by third quarter of fiscal year 2019, begin implementation of that effort.

Finding 2: *Complaints should be accurately tracked and investigated adequately and timely.*

Recommendation: *We recommend management ensure appropriate procedures are in place to log, conduct and document investigations of complaints against child care facilities within 72 hours, as required by DCF contract.*

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Management's Response: Management concurs. As part of CCLE's incorporation into ECPD, the CCLE complaint response program is scheduled to move to QAlert, Broward County's new Customer Relations Management software. QAlert will allow effective tracking of all complaints. ECPD estimates that CCLE will be using QAlert by FY 2019. Concurrent with this change, ECPD will codify an SOP.

Finding 3: *Notices of Violation and Administrative Complaints should be issued and logged consistently and timely.*

Recommendation A: *Ensure NOV's are issued for all Class I violations in accordance with BC Ordinance.*

Management's Response A: Management concurs. CCLE's practice is to issue NOV's for all Class I violations. Note that in some cases, the violation in question is better resolved through compliance assistance. For example, compliance assistance is more appropriate for background screening issues that are minor administrative oversights (which do not warrant an NOV) as opposed to failing to comply with the intent of the background screening requirements (which would require an NOV).

Recommendation B: *Ensure tracking logs for issued NOV's are accurate, complete, and sufficient to adequately support and inform business processes.*

Management's Response B: Management concurs. CCLE currently uses an excel spreadsheet to track violations and fines. Immediately, staff maintaining that spreadsheet will be retrained in its use and Quality Assurance/Quality Control (QA/QC) of that spreadsheet incorporated into ECPD's quarterly QA/QC report (see response to Finding 7). Further, tracking of enforcement will be transitioned to POSSE and an SOP completed on the new POSSE based process. This work is estimated to be completed by FY 2019.

Finding 4: *Investigator oversight procedures should be enhanced.*

Recommendation: *Management act to ensure all staff work assigned hours as appropriate, including, but not limited to:*

A. Continuing to implement policies and procedures to provide adequate supervision and monitoring of field staff, including, but not limited to:

- i. Ensuring all staff work assigned hours and maintain up to date calendars.*
- ii. Periodic monitoring of staff locations via GPS track capabilities.*
- iii. Personnel actions, as appropriate to address any staff improprieties regarding inappropriate reporting of work hours.*
- iv. Ensuring that all site visit times entered on monitoring reports by filed staff are accurate and reflective of actual time spent at the provider location.*
- v. Prohibiting unsafe practices such as use of cell phones while driving on County business.*

B. Ensuring staff take lunch breaks as appropriate, and that staff do not work overtime hours without advance approval and compensation.

Management's Response A and B: Management concurs. By way of immediate action, most concerns identified above were incorporated into EPGMD's annual mandatory training for all field staff, conducted in early 2019 and attended by all CCLE field staff. The importance of following County policies were addressed, including work schedules, the requirement for supervisor approval for overtime, review of Kronos policies, field safety, safe driving, the use of GPS units installed in

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County vehicles, appropriate use of cell phones /computers, the importance of accurate documentation, as well as other relevant topics.

Further, ECPD's practice is to require all field staff to work from County Vehicles equipped with GPS units and to clock in and out via Kronos Timeclocks (not the mobile app). Accordingly, no staff are using the Kronos mobile app and staff begin and end their work days at the office.

In an abundance of caution and in coordination with Human Resources, ECPD conducted a thorough review of all staff work for the same time period reviewed in the audit. ECPD's conclusion was that there was a lack of consistent understanding on use of the mobile app and lunch hours. ECPD will develop a clear set of inspector expectations (following ECPD's practice with all field staff) addressing these and other field issues. These expectations will be distributed by the third quarter of FY 2019.

Finally, as is current practice within ECPD, once CCLE inspection vehicles have been equipped with GPS units (units are currently being procured), a quarterly review of a sample set of GPS data will be completed.

Finding 5: *Fines should be progressive and promptly collected.*

Recommendation A: *Effectively impose fines for non-compliance, in a progressive manner, up to the maximum allowed by ordinance.*

Management's Response A: Management partially concurs. CCLE does impose fines, in a progressive manner, for noncompliance. However, CCLE's emphasis is first on compliance assistance (providing training and technical assistance). Where CCLE determines progressive fines are necessary because of recalcitrant providers, they are applied.

Recommendation B: *Ensure Administrative Complaints are issued in a timely manner following the issuance of NOV's and site visits.*

Management's Response B: Management concurs. Immediately, a CCLE supervisor has been retrained on use of the Administrative Complaint tracking sheet. Review of the tracking sheet is being incorporated into ECPD's QA/QC Quarterly Report (see Finding 7) and an Administrative Complaint Tracking SOP will be completed by third quarter of FY 2019. Longer term, ECPD will move Administrative Complaint tracking off the tracking log and onto POSSE, which has more robust tracking, workflow, and reporting tools. The move onto POSSE is estimated to occur by FY 2019.

Recommendation C: *Enhance collection practices to ensure:*

- i. *Fines imposed are collected completely and timely, and late fees are established for past due fines.*
- ii. *Revocation of licenses due to non-payment of fines, pursued, when appropriate.*
- iii. *Fines imposed are not 'waived' without appropriate authority.*
- iv. *Due dates for fine payment are included in Administrative Complaints.*

Management's Response C: Management partially concurs. CCLE does not waive fines, nor does it have the authority to waive fines. The waived fine issue identified in the report is a case of uncollected fines from a provider whose license was revoked by CCLE and is therefore no longer in business. In coordination with the County Attorney's Office, CCLE has determined it has no legal authority to charge late fees on fines. The Administrative Complaint has been revised to reflect the due date for fine payments. Otherwise, estimated by third quarter FY 2019, CCLE will have an SOP in place reinforcing actions to be taken to enhance collection practices. This SOP will include incorporating license nonrenewal in instances of unpaid fines.

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Finding 6: *Standard operating procedures should be updated for all major functions.*

Recommendation: *Management develop or update SOPs to address all major areas of operation within CCLE.*

Management's Response: Management concurs. CCLE has approximately 70 SOPs developed over the history of the program. Beginning immediately, all these SOPs will be reviewed and updated or eliminated as warranted. CCLE has already developed or updated the following SOPs: Complaint Investigation of Unlicensed Child Care Programs, Master Files and Record Retention, and Broward County Gold Seal Provider Settlement Agreements. This review process is estimated to be completed by third quarter of FY 2019.

Finding 7: *A formal quality assurance program should be implemented.*

Recommendation A: *Consider a realignment of Quality Assurance Specialist staff responsibilities to allow a focus on quality assurance activities rather than serving as a supplement to regular staff.*

Recommendation B: *Implement a comprehensive Quality Assurance program to improve the quality and consistency of file documentation, and all licensure, renewal and inspection related activities, including ensuring all investigate reports are properly posted in the DCF CARES system.*

Management's Response A and B: Management partially concurs. CCLE was reassigned to ECPD in large part to leverage ECPD's existing organizational infrastructure, including the Division's approach to QA/QC. This approach includes holding supervisors and managers responsible for QA/QC and capturing ECPD's field QA/QC into a quarterly report. This approach does not rely upon dedicated QA/QC personnel. ECPD's revised QA/QC quarterly report (to include CCLE) will be completed by the third quarter FY 2019 and will include the items listed in Recommendation B.

Finding 8: *Staff caseloads should comply with DCF workload standards.*

Recommendation: *Management should analyze staffing levels against workload requirements and make appropriate adjustments in order to comply with DCF's workload standards.*

Management's Response: Management partially concurs. Staff notes some issues with the memo referenced by the audit. Specifically:

1. The memo is directed to State Regional Managing Directors (the managers of the regions directly operated by the Florida Department of Children and Families) and not to managers of local programs.
2. The workload standards addressed in the memo are recommendations, not directives.

While welcoming the State's input (via the memo), CCLE Management is more confident in their own assessment of staff caseload. CCLE's assessment includes balancing caseloads on a regular basis to ensure that there is relative consistency in caseload scope and size. Every attempt is made to ensure that caseloads have geographic consistency to keep field staff from crossing each other's assigned sectors and maximize their time conducting inspections rather than travelling to inspections.

Finding 9: *New hires should meet minimum job requirements.*

Recommendation: *Management should ensure staff are hired in accordance with the minimum job descriptions, including authorizations to drive vehicles, as appropriate.*

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Management's Response: Management concurs. The single example identified in the audit report is based on one error overlooked during the onboarding of a person during the CCLE transition to ECPD (upon discovery, the issue was immediately corrected). Recent changes in Human Resource onboarding processes reduce the likelihood of such an oversight in the future.

Finding 10: *Fees charged should address operating deficits and be consistent across service types and staff resource utilization.*

Recommendation: *Management evaluate CCLE's fee schedule to reduce the operating deficit and increase consistency of fee assessment practices across similar services.*

Management's Response: Management partially concurs. Staff acknowledges the CCLE revenue deficit. However, staff is also acutely aware of Broward County's commitment to ensure quality child care without regulatory fees that are too costly for child care facilities to conduct business, either by driving them out of business or worse, into operating as an unlicensed facility. Staff has always understood the annual cost of living fee increases approved by the Board to be that level of increase deemed appropriate by the Board.

Staff will review the recommendations for transportation and reinspection fees and if determined to be appropriate, bring recommended new fees before the Commission for consideration.

Finding 11: *Technology should be used to increase operational efficiencies.*

Recommendation A: *Explore implementation of automated workflows and tracking systems for increased efficiency.*

Management's Response A: Management concurs. As part of CCLE's reassignment to ECPD, the following projects are already in the planning stages: moving CCLE enforcement onto POSSE, moving CCLE customer data onto POSSE, and moving CCLE complaints onto QAlert (Broward County's new customer relationship management software). Both POSSE and QAlert include automated workflows and tracking systems.

Recommendation B: *Explore means to reduce reliance on paper-based systems while creating consistency in documentation practices.*

Management's Response B: Management concurs. As part of CCLE's reassignment to ECPD, the following projects are already in the planning stages: including CCLE in ECPD's records scanning project (whereby all paper files are moved to an electronic format – a considerable project, estimated to be completed by FY 2023); and moving customer data, complaint response, and enforcement onto existing database systems (improving consistency in documentation via the software products and their workflow). Inclusion of CCLE in the ECPD QA/QC program (see Finding 7) will also assist in this area.

Recommendation C: *Evaluate current equipment used by staff for adequacy and explore the use of updated technology to facilitate inspection processes.*

Management's Response C: Management concurs. ECPD's managers routinely evaluate equipment needs. In the specific case of inspector laptops mentioned by the audit, ECPD is currently procuring new laptops for CCLE field staff.

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Summary of ECPD Commitments

Commitment	Estimated Completion Date
1. Implement quarterly review of GPS data.	3 months after GPS units have been procured and installed
2. Develop and implement an acceptable level of effort to identify unlicensed facilities.	3 rd Qtr, FY 2019
3. Create and distribute inspector expectations to staff.	3 rd Qtr, FY 2019
4. Create and implement SOP for Administrative Complaint Tracking.	3 rd Qtr, FY 2019
5. Complete SOP on penalty collection practices.	3 rd Qtr, FY 2019
6. Review and update CCLE’s 70 SOPs.	3 rd Qtr, FY 2019
7. Revise existing QA/QC report to include items identified in Finding 7.	3 rd Qtr, FY 2019
8. Move CCLE Complaint Tracking to QAlert; generate QAlert SOP.	FY 2019
9. Move enforcement tracking to POSSE.	FY 2019
10. Move penalty tracking to POSSE; develop SOP for outstanding penalty resolution.	FY 2019
11. Move Administrative Complaint Tracking to POSSE.	FY 2019
12. Move all CCLE’s paper files into an electronic format (to be completed with the current GCW File Room Scanning Project).	FY 2023

cc: Monica Cepero, Deputy County Administrator
 Henry Sniezek, Director, Environmental Protection and Growth Management Department
 Lenny Vialpando, Deputy Director, Environmental Protection and Growth Management Department
 Jeffery Halsey, Director, Environmental and Consumer Protection Division