

DEPARTMENT OF WORKFORCE DEVELOPMENT

Division of Workforce Solutions Bureau of Partner Services

TO: Economic Support Supervisors

Economic Support Lead Workers

Training Staff

Child Care Coordinators

W-2 Agencies

FROM: Amy Mendel-Clemens

CARES Call Center

Policy and Communications Section

BPS OPERATIONS MEMO

No.: 02-13

File: 7300.1

Date: 02/12/2002

Non W-2 [] W-2 [] CC [X]

PRIORITY: Medium

SUBJECT: **IMPLEMENTING MONITORING**

PROVISIONS IN THE CHILD CARE CONTRACT

CROSS REFERENCE: Admin Memo 01-23

EFFECTIVE DATE: May 1, 2002

PURPOSE: The purpose of this memo is to describe Monitoring and Reporting tools that can be used by agencies when monitoring the Wisconsin Shares Child Care Subsidy program as set forth as a requirement in the new Child Care Contract.

As described in the Administrators Memo 01-23, agencies administering the Wisconsin Shares Subsidy program are to compose and submit Monitoring plans to their regional offices by March 31, 2002, outlining how they plan to monitor the program. While agencies may include additional oversight as a standard for their local operation, the following areas have been identified and highlighted for monitoring:

- I. Authorizations
- II. Attendance
- III. Provider monitoring
- IV. Child Care Certification.

MONITORING TOOLS

The Admin Memo 01-23 allows for use of county specific methods or OCC identified reports in monitoring the Subsidy program. If your agency has chosen to use methods other than the below mentioned EOS reports, include a detailed description of the monitoring method and result indicator in the Monitoring plan and submit that to your regional office. The Office of Child Care has developed a number of EOS reports that can be used by counties/tribes in their monitoring efforts. These reports continue to be fine-tuned to bring forth the most accurate, useable data possible. You will be notified should changes be made or other reports added.

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I. AUTHORIZATIONS

The following reports are designed to highlight case situations in which authorizations may be at an inappropriate level.

CC63 - 0 to 40% Utilization Report balance of state, CC64 - 0 to 40%

Utilization/Milwaukee: This report is produced every two weeks during the CBS cycle. Any authorization with attendance recorded for four consecutive weeks of less than 40% utilization will be included in this report. Cases that appear on this report should have the authorization reviewed for accuracy. Questionable authorizations should be ended and/or recalculated to reflect the reduced hours of care needed. Cases should be referred for overpayment calculation and collection when appropriate. Case comments should be made noting why the authorization was changed.

CC34 Excessive Authorization: This report is generated every two weeks in the CBS cycle and shows children with more than two authorizations or authorizations for more than 59 hours per week. Cases that appear on this report should be reviewed for accuracy and questionable authorizations should be ended and/or recalculated to reflect the correct number of hours of care needed. Cases should be referred for overpayment calculation and collection when appropriate. Detailed case comments should be made noting why the authorization is for more than 59 hours, i.e.: parent works a rotating shift, additional hours authorized for sleep time, etc.

II. ATTENDANCE

Providers are required to report the actual number of hours a child is in their care. On occasion, Attendance Report Forms (ARF) are submitted that show perfect or near perfect attendance. Attendance can be monitored before it is entered into CCPS by careful scrutiny of the ARF and follow up on ARF's that appear unusual. After attendance has been entered, the following report can be used by counties/tribes in monitoring provider-reported attendance.

CC32 - 95 to 100% Attendance at provider: This report is produced every 8 weeks and includes four attendance periods. This report will show providers who report high to perfect attendance for children in their care as well as the total number of hours authorized and entered for the report period. Any overrides and extra hours paid get counted in the total and percentage calculated. Providers appearing on this report may indeed be experiencing high attendance; however it is possible that the provider is reporting authorized hours and not actually attended hours. Agencies can determine their best course of investigative action for these specific situations but may want to prioritize the list and target the most obvious providers first.

Example: An initial follow-up procedure in these circumstances would be for the agency to send a letter to all providers appearing on this report, reminding them of the requirement to report actual hours of attendance. For providers who appear again, a second letter should be sent advising them that they may be subject to a review of their attendance records, should the high or perfect attendance continue to be reported. For providers who continue to appear on the report, the agency should contact the individual providers, review their appropriate attendance records (required to be kept by licensing and certification rules), compare their attendance records to the Attendance Report Forms submitted and note any discrepancies.

Certification Rules DWD55.04 (7)(b) 3.a and 55.08(5)(I) along with Licensing Rules HFS45.03 (5)(b) allow for the review of Providers attendance records. It is recommended that the agencies remind providers of the requirement to submit Attendance Report Forms showing actual attendance. As always, agencies are required to pursue overpayment calculation and

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collection for those situations where the attendance hours reported are not substantiated by the providers' own attendance records.

III. PROVIDER MONITORING

Monitoring enrollment at provider locations can be done by using the following reports:

CC49 - Certified providers with >6 children enrolled and CC65 - Licensed providers with >12 children enrolled: These EOS reports can be used to help determine if a provider is in compliance with regulation requirements addressing limits on the number of children allowed in the provider's care. *Special Note:* The EOS report will only show those children for whom an authorization or subsidy payment is made. These reports are run monthly, on the second business day of the month for the previous month and include all authorizations (full, part time or zero hour) that span, start or end within the report period. Providers with the most children authorized are listed first. The number shown just preceding the Provider number is the total number of unduplicated children authorized to the provider. For optimal effectiveness, this report should be reviewed monthly. County/tribal Child Care agencies will want to first review authorizations made to providers that appear on this report, taking into account part time authorizations or other extenuating circumstances. Providers still in question should be referred to the certifying/licensing agency for investigation of possible violation. The local agency should build a working relationship with the regulatory agencies to assure two-way communication of possible violations and investigation results.

Certifying agencies: Certifying agencies (including subcontractors) are required to follow up on any indication of rule violation within 10 days. The certifying agency should investigate and determine if the provider is caring for more children than allowed by regulation (DWD55.08(6)). Contact should be made with the provider or with the individual caseworker to gather additional information on the parent's work schedule; hours worked (start and end times), days of the week worked, etc. This information is to be compared to the times the child is with the provider to determine if there may be an overlap of hours and if the provider is caring for more children than allowed by certification rules. If a violation is found, and depending upon the action taken by the regulator, communication to the Child Care agency should be made so action can be taken to end the inappropriate authorizations. The Child Care agency should calculate and pursue overpayment collection when appropriate.

Licensing agencies: Licensing agencies are also required to follow up on any possible rule violation and will communicate investigation findings back to the Child Care agency when requested. The Child Care agency should end inappropriate authorizations and calculate and pursue overpayment collection when appropriate.

IV. CHILD CARE MONITORING

The county/tribal agency Monitoring plan includes a section addressing how the agency will monitor provider certification. The counties/tribes are encouraged to complete desk reviews of certified providers' files to make certain that the certifying agency/department is following the guidelines given in the Child Care Manual, Chapter 4 and DWD 55 (certification rules). The plan should indicate the frequency of the desk reviews and the percentage of provider files checked. Enclosed is a checklist that may be used as a tool for the certification monitoring. Certifying agencies can choose to review a percentage of providers in their area and use the checklist when reissuing the certificate every two years.

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REPORTING

Agencies will be responsible for quarterly reporting to the Regional offices by using the Monitoring Findings Report form attached to this memo. The function of this form is to report the agency findings and resolution on cases identified on various reports or from other monitoring methods. This form is in an electronic format so it can be completed on line and submitted electronically as an attachment to an email sent to the regional office. It can be found at: http://dwdworkweb/des/partner forms.htm.

NOTE: OCC will provide additional training on overpayment determination, calculation

and collection. Announcement of training dates will be sent in early 2002.

ATTACHMENTS

Monitoring Findings Report and instructions Certification Checklist

CONTACTS

Regional Area Administrator's Office

STATE OF WISCONSIN Department of Workforce Development Division of Workforce Solutions

MONITORING FINDINGS REPORT

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Personal Information you provide may be used for secondary purposes (Privacy Law, s. 15.04(1)(m)).

County/Tribe Name		Telephone Number		
		() -		
Person Submitting Report				
Job Title		E-mail address		
Use the MONITORING FINDINGS REPORT to report action taken on cases/providers identified through your specified monitoring methods or on various EOS reports. Findings and investigation details from more than one EOS report or monitoring method can be submitted on one form. This form can be completed electronically and sent as an attachment to your Regional Office CC representative.				
Complete and submit this form quarterly by the end of the month following the end of the quarter. For example: 2nd quarter (April, May, June) submitted by July 31 of that year.				
Monitoring Method or EOS Report used:		Time Period:		

Monitoring Method or EOS Report used:			Time Period:				
Total number of Cases/Providers on report or selected for review:		Number Investig	Number Investigated:		Number with action taken:		
Case/Provider Number	Issue	Resolution		Error?	Over Payment?	Provider Amount	Parent Amount
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
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				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$

County/Tribe Name						Page	2 of 2
Person Submitting Report							
Monitoring Method or EO	S Report used:				Time period:		
Total number of Cases/Providers on report or selected for review: Number Investigate			ated:	Number with action taken:			
Case/Provider Number	Issue	Resolution		Error?	Over Payment?	Provider Amount	Parent Amount
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
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				☐ Yes ☐ Client ☐ No ☐ Agency	☐ Yes ☐ No	\$	\$
Monitoring Method or EOS Report used:				Time period:			
Total number of Cases/Providers on report or selected for review: Number Investigated:		ated:	Number with action taken:				
Case/Provider Number	Issue	Resolution		Error?	Over Payment?	Provider Amount	Parent Amount

Yes Client
No Agency

☐ Yes ☐ Client ☐ No ☐ Agency

☐ Yes ☐ No

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Click button in lower/right corner for additional pages if needed to complete the report.

How to complete the **Monitoring Findings Report**:

Download this form to a Word document before completing

The function of this form is to report the agency findings and resolution on cases or providers identified on various reports or from other monitoring methods. The Monitoring Findings Report is to be completed quarterly and submitted to your regional office by the end of the month following the end of the quarter. For example: 2nd quarter (April, May, June) submit report by the end of July.

- 1. Monitoring Method or EOS Report used: enter the EOS report number or a short description of your monitoring method.
- 2. Time Period: enter the EOS report period dates or the time period you are monitoring.
- Total number of Cases/Providers on report or selected: this will be the total number of cases that appear on the specific EOS report you are reviewing. Or the total number of cases you selected under your specific method of monitoring.
- 4. Number investigated: This will be the number of cases/providers that you reviewed and/or investigated.
- Number with Action taken: This will be the number of cases/providers where action was taken based on the investigation outcome. This should also match the number of cases recorded on this report.
- 6. List here the cases/providers that you found in error.
- 7. Issue: provide a description of the specific monitoring issue. For example: Low utilization of authorization.
- 8. Resolution: describe here what transpired during your investigation and the out come. If more space is needed, tab to the next rows "resolution" space. Use as many spaces as necessary.
- 9. Error: check which apply, this can include both client and agency error. In some cases, "client" could refer to a Provider. (For example: provider over allowable numbers of children in care.)
- 10. Both Provider Amount and Parent amount could be completed depending on the outcome of the investigation.
- 11. Next page allows for inclusion of as many pages as needed.
- 12. Copy and save the completed form for your records.
- 13. Email completed form as an attachment to your regional office contact person.

Certification Monitoring Provider File Review Checklist

Item	Finding
Application Form: Application is complete and signed	
Background Information Disclosure form: A signed	
form must be on file for provider, non-client residents	
over 12 years, employees, volunteers, substitutes.	
over 12 years, employees, volunteers, substitutes.	
Background : Complete checks are conducted for	
person(s) above:	
• DOJ	
• DHFS	
Out-of-State (if needed)	
Military (if needed)	
Files for child abuse and neglect The control of the Control	
The agency accurately followed the Caregiver law when	
determining eligibility for certification. References: At least two references are on file	
Neierences. At least two references are on the	
TB-test : Documentation of TB-test is verified.	
Water test: Verification of well-water test is done every	
two years (if public water is not available).	
Certification Standards and Checklist:	
A completed and signed checklist is on file.	
On-Site Inspection: File documents that an on-site	
inspection was conducted within 30 days of certification.	
Documentation of provider compliance is on file.	
Compliance Record: notices of non-compliance issued	
are on file, and copies of any exceptions granted.	
are on the, and copies of any exceptions granted.	
Continuing Education (County/tribal discretion):	
Verification of 5 hours of agency approved continuing	
education is on file.	
Training information (regularly certified only):	
Verification of certification course (or equivalent) is in file.	
Certificate of Approval: a copy of the certificate is on	
file.	
Complaint Intake and Investigation Reports: Any	
complaints received about the provider are on file with	
the results of the investigation.	
Appeal and Rehabilitation Reviews: Documentation is	
on file	