



Newly Licensed Family Child Care Providers' Challenges Navigating the Licensing Process: A Research-to-Policy Brief

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Key Findings

This brief focuses on the barriers and challenges that newly licensed family child care (FCC) providers across four states reported facing prior to the COVID-19 pandemic. Findings are based on a secondary analysis of data collected from 27 licensed FCC providers and 5 formerly licensed FCC providers during 2020-2021.

- Newly licensed providers identified licensing inspections, completing licensing applications, and preparing their homes for offering child care as their most common challenges. Fewer providers reported challenges related to completing training requirements.
 - Providers reported that preparing their home to offer child care included costly, time-consuming repairs and renovations. They sometimes felt these requirements were not related to the health and safety of children.
 - Licensing application challenges included paperwork, time delays, and redundancies in requirements.
 - Providers reported that interactions with licensing staff were sometimes difficult, especially around the licensing inspection visit. They reported receiving confusing and sometimes conflicting information about the inspection, and some felt unprepared for the visit.
- Research findings have implications for licensing systems and programs that support providers. These include streamlining licensing processes to reduce unnecessary and duplicative requirements, offering strengths-based training and support for licensing staff to improve their interactions with providers, and implementing logistical supports for providers around navigating the stages of getting licensed.



Introduction

Family child care (FCC) includes home-based child care (HBCC) settings that are licensed, certified, or registered by a state entity. FCC settings make up a vital sector of child care and early education (CCEE) in the United States, yet the number of licensed FCC providers in operation has declined dramatically over the last two decades (Datta et al., 2021; National Center on Early Childhood Quality Assurance, 2020). Reasons for this decline include challenges related to working conditions, economic factors, and navigation of regulatory systems (Bromer et al., 2021; Melvin, 2022). Recent analyses suggest that this downward trend may be starting to reverse in some areas (Child Care Aware of America, 2025).

State child care licensing systems are intended to regulate and monitor legally operating child care settings to ensure that settings are safe and healthy for children (Miranda et al., 2024). Understanding the experiences of newly licensed FCC providers with child care licensing may help states design and refine licensing systems that are responsive to the needs of the HBCC sector. Prior qualitative research suggested specific challenges providers experience when opening an FCC business, including unclear information about licensing regulations, system delays in getting licensed, high start-up costs, and interactions with licensors who providers report as not understanding or appreciating the FCC context (Bromer et al., 2021). In contrast, recent survey research on providers' views of licensing examined challenges related to the number of regulations, reasonableness of regulations, and ease of understanding regulations and found that FCC providers, on average, reported that licensing regulations were reasonable, easy to understand, not in conflict with other standards, and not too numerous (Miranda et al., 2024). This brief aims to build on prior findings by seeking to understand the specific licensing challenges reported by new providers who recently had completed the licensing process.





Study Background and Methods

This brief reports findings from a secondary data analysis of a subsample from the Multi-State Study of Family Child Care Decline and Supply (Bromer et al., 2021). The study explored challenges and opportunities that licensed FCC providers face. Focus groups with FCC providers who had been licensed for five years or less asked providers about the specific challenges they faced navigating state child care licensing. The study also conducted interviews with participants who had closed their FCC businesses after operating for five years or less. These providers were asked about their initial experiences becoming licensed.

Study data were collected in 2020–2021 during the COVID-19 pandemic with licensed FCC providers in California (Los Angeles County), Massachusetts, Florida, and Wisconsin. These states were selected because they had documented decreases or concerns about potential decreases in the supply of licensed FCC. Trusted community agencies and partners helped recruit current and former FCC providers for the study.¹

SAMPLE CHARACTERISTICS

The full study included 149 licensed FCC providers and 30 formerly licensed FCC providers. The analytic sample used for this brief included 27 newly licensed FCC providers (focus-group participants) and five former FCC providers who had left licensing after five years or less (interview participants). The 27 newly licensed providers and 5 former providers represent 18% of the total focus group sample and 17% of the total interview sample. See Appendix for sample characteristics.

ANALYTIC APPROACH

Providers who reported operating an FCC business for five years or less prior to March, 2020 were included in this analysis. Focus group speakers and interview participants were identified in transcripts and assigned characteristics that they reported in a demographic and program survey. Coding from the original study (Bromer et al., 2021) identified themes related to licensing challenges. The authors of this brief reanalyzed the coded data and identified additional themes. A full code book of existing and new codes was then used to recode all the transcripts of new providers using NVivo 15. Codes were summarized. A framework for the stages of licensing (Ragonese-Barnes et al., 2022) was then used to analyze coded data. For example, themes about paperwork were conceptualized as part of the application stage of getting licensed while themes about purchasing equipment were conceptualized as part of preparing the child care home.

¹ For more detail about methods, sample, and analysis of the full data set, see https://www.erikson.edu/wp-content/uploads/2021/11/FCD_DeclineStudy_2021.pdf



Findings

This analysis examined narratives of newly licensed providers using the stages of licensing as an analytic framework (see Ragonese-Barnes et al., 2022). Provider narratives fell into four broad categories representing distinct stages of the licensing process (see Box 1). **Preparing the child care home** included purchasing equipment, materials, toys, and books for children and setting up the home child care environment to be safe and healthy. **Meeting training requirements** included CPR courses and other state-mandated trainings to open a licensed family child care program. **Completing the licensing application** included completing background checks, filing required paperwork, and documenting other requirements. **Passing the licensing inspection** included scheduling and getting ready for an inspection, interactions with licensing staff during inspections, and follow-up after an inspection, such as getting the results.

Box 1. Licensing Stages



● **Preparing the Child Care Home**

Purchasing equipment and materials; setting up a healthy and safe environment.



● **Meeting Training Requirements**

Taking CPR courses and state-mandated trainings for opening a child care program.



● **Completing the Licensing Application**

Completing background checks, paperwork, and documentation.



● **Passing the Licensing Inspection**

Scheduling the inspection; communicating and interacting with licensing staff; following up after the inspection.



For focus-group participants, the most frequently mentioned challenges were about the inspection phase of the licensing process, followed by completing the application process and preparing their homes for offering child care. Fewer FCC providers reported that completing required licensing training was a challenge (See Table 2).

Table 2. Licensing challenges for focus-group participants



1. Preparing the child care home: 37% (10)

9

Home repairs
and renovations

5

Lack of information
about requirements for
the child care home

3

Acquiring child care
equipment needed
for licensing



2. Meeting training requirements: 11% (3)

3

Lack of access
to trainings

1

Too many trainings



3. Completing the application process: 48% (13)

9

Licensing
application is
time consuming

3

Licensing applications
are duplicative
with other system
applications

3

Whole family is
required to be part
of the process



4. Passing the licensing inspection: 67% (18)

12

Difficult
interactions with
licensing staff

5

Long wait times to
get an inspection
appointment

5

Uncertainty about
what to expect in
the licensing visit

3

Lack of guidance
about what
to expect in
an inspection

Note: Percentages and numbers in the blue boxes represent the total respondents who mentioned at least one challenge during each licensing stage; however, participants frequently noted multiple challenges and may be represented more than once in the counts shown below each blue box. These numbers are the raw counts of providers who reported each specific challenge.



PREPARING THE CHILD CARE HOME

Ten focus-group participants noted at least one challenge while preparing their child care home for licensing. All but one of these 10 providers mentioned costly, time-consuming home repairs and renovations as particularly burdensome. Home repairs were expensive, and sometimes long-term projects, like building a fence, were reported as excessive, given the potential financial return from their nascent child care businesses. Two providers specifically mentioned being required to make renovations, such as cutting down a tree on their property, that they felt were not critical to the provision of high-quality, safe care for children.

Five of the 10 participants who talked about challenges getting ready for licensing reported feeling left on their own to “figure things out” because of a lack of initial information about what licensing requires. These providers reported that licensing staff members were unable to answer their questions about the start-up process, as the following narratives indicate:

“Nobody was able to tell me anything. And I was calling constantly every day from the time they open till the time they closed, and I couldn’t get anywhere.”

—Focus-group participant, California

“The hard part is each individual requirement. How do you do it, getting training on the specifics of how to meet the requirements.”

—Focus-group participant, Wisconsin

One provider who closed a child care business shared similar thoughts in an interview:

“A lot of the stress was licensing. ... It felt like, during the time that I was a provider, even from the beginning, not getting a clear answer of guidelines to meet.”

—Interview participant, Florida

Only three providers who talked about the challenges of preparing their homes for licensure talked about the challenges of having required child care equipment, such as sleeping pads or cribs, diaper changing stations, and playground equipment. These providers said they understood the importance of these materials for preparing a safe child care home, but they noted that the high upfront costs required before enrolling children were prohibitive.



MEETING TRAINING REQUIREMENTS

Only three new providers who participated in focus groups and one former provider who participated in an interview mentioned that training requirements became a significant barrier to licensing. These providers emphasized the challenging logistics of finding and completing required training, not the content of the trainings. One participant noted that she is a Spanish speaker and classes are frequently presented only in English, making it difficult to complete requirements.

Another provider talked about infrequent and inconveniently located classes that were required for licensing:

“You have to get certified for CPR, which is another whole issue here in our town because you can’t just go to a place and do it. If they don’t have enough people joining a class where you can get CPR certified, you have to wait until they get enough people to join the class to take it.”

—Interview participant, Florida

COMPLETING THE LICENSING APPLICATION

Thirteen focus-group participants cited challenges with the licensing application. Nine of these 13 providers noted that the application process was time consuming. For example, providers referred to the time it took to gather documentation and fill out forms, as well as long wait times for processing paperwork and scheduling inspections. In response to being asked what she struggled with as a new provider, one participant recalled:

“The time it took to get results of tuberculosis tests and, especially, getting together all the required paperwork, getting the fingerprints done, and wait[ing] for the first inspection.”

—Focus-group participant, California

Three providers shared examples of regulations that were a burden for their entire household, creating unique challenges for FCC providers who offer child care within an extended-family home. Background checks that apply to the whole family, not just the provider, posed a challenge for some, as this provider explained:

“Anyone who lives in the house has to be fingerprinted. And even if they’re away at college half the year, they still have to be fingerprinted.”

—Focus-group participant, Massachusetts



Three providers were frustrated by the need to repeat processes such as background checks and fingerprinting, despite having these results from prior employment. For example, one provider described the hassle of six family members needing to attend fingerprinting appointments, although four of them had fingerprints on record from other jobs.

“We have a family of six, and even though I was fingerprinted through the school, my husband was fingerprinted because he works for the Department of Corrections, and my two older children was [sic] still fingerprinted through schools because there was student teaching, we still have to do the whole thing all over again.”

—Focus-group participant, Massachusetts

PASSING THE LICENSING INSPECTION

Although stress around passing licensing inspections may be a common experience that is inherently part of evaluative systems, 18 providers cited specific challenges related to the licensing-inspection process that may have exacerbated stress and anxiety. Interactions with licensing staff were mentioned by 12 providers who reported that they experienced these interactions as distressing. One focus-group participant from Wisconsin shared her experience: ***“She [the licensing inspector] had me in tears on several occasions. ... She was very disrespectful on several occasions.”***

Five providers talked about their anxiety that the licensor would only focus on violations, rather than taking a strengths-based approach. One provider explained her anticipation of criticism by the inspector and her feelings that she may not have “done things right”:

“At first that did scare me, so I was trying to make everything perfect for when my licensor came out. And I did have that mentality that, you know, they’re going to come in here looking for everything that’s wrong, and I’m not going to lie. It does feel that way.”

—Focus-group participant, Wisconsin

Some of the anxiety expressed by providers may have been related to their feelings of uncertainty about what to expect from the inspection process. For example, three participants reported a perceived lack of clarity about what to expect during inspections and follow-up. These providers specifically noted feeling they were not given clear guidance about what qualified as “passing” inspection items and had not received adequate support to follow up on findings cited during inspections. As one focus-group participant from California explained, her licensor: ***“came and told me I needed something, but she didn’t know what I needed.”***



Five providers noted difficulty scheduling an inspection appointment. In some cases, long wait times were related to the provider's location or lack of staff availability. When describing her challenges, one provider said, "nobody wanted to come to my house" because of her location. She explained:

"I live in Santa Clarita Valley. The [licensing agency] is located in San Fernando Valley, and then there's one in Palmdale, and nobody wanted to come to my house to give me a pre-inspection. They point the fingers. No, that's Chatsworth; no, it's Palmdale."

—Focus-group participant, California

Discussion

This brief discusses the experiences of a small sample of newly licensed FCC providers with state licensing systems across four states before the COVID-19 pandemic. A framework for the four stages of becoming licensed was used to identify FCC provider challenges. Unlike previous research on providers' experiences with licensing that found overall satisfaction with licensing processes (Miranda et al., 2024), providers in the current study commonly reported challenges with the logistics of navigating licensing systems, especially during the application and licensing-inspection stages. For example, providers reported challenges completing paperwork and administrative requirements, waiting for licensing processes and inspection decisions, and a lack of information that could help them with the licensing process.

Overall, participants did not describe challenges with the content of regulations that were related to child safety and well-being, such as child-to-staff ratios. For example, when providers in this study talked about safety measures such as fingerprinting and background checks as challenging, they referenced the long wait times and the need to repeat procedures but not the necessity or importance of these safety requirements for child care licensing. This aligns with previous research indicating that FCC providers report that child care licensing is "good for the children" and serves an important role in keeping children healthy and safe (Bromer, et al., 2021; Miranda et al., 2024).





STUDY LIMITATIONS

The current study used a small sample of 27 focus-group members and five interview participants. Therefore current findings are exploratory and should not be regarded as representing the views of FCC providers in general. These participants were recruited from four specific regions of the country in states with different licensing requirements and policies, which may have influenced their experiences in getting licensed. Providers were recruited for the study through community partner organizations, which may have biased the sample towards providers who are more connected to supports.

Moreover, data for this study were collected during the COVID-19 pandemic, and providers' experiences with licensing were based on pre-pandemic contexts. Future studies with larger, more representative samples are necessary to determine post-pandemic experiences of FCC providers with licensing.

Implications for licensing systems and programs that support HBCC

Findings presented in this brief have potential implications for licensing agencies and policies as well as for support around licensing that could help attract new providers into FCC licensing and retain those currently in the licensed FCC sector.

Licensing agencies may consider reevaluating burdensome administrative tasks and paperwork associated with the licensing process for FCC providers. Streamlining processes to reduce unnecessary and duplicative requirements may help providers complete the licensing process. Additionally, provider reports of miscommunication and difficult interactions with licensing staff suggest that licensing agencies may consider offering support for licensing staff focused on working with FCC providers. For example, professional development for licensing staff on giving strengths-based feedback might help improve the interactions that providers have with licensing staff.

Findings in this brief suggest that providers report challenges with the logistical aspects of going through the stages of getting licensed. Licensing agencies or support organizations that work with FCC providers might consider developing navigational or online application supports that help providers move through the stages of getting licensed. Such an offering might make the licensing process clearer and less burdensome for new providers and might increase participation by HBCC providers in state licensing.

State licensing systems are often the gateway for FCC providers to build stable businesses and participate in other public systems, such as subsidy and quality improvement systems. A stable and available FCC sector is essential for ensuring families have a choice of child care settings that meet their needs. By streamlining the processes and procedures within licensing systems and



offering logistical support for FCC providers on the stages of getting licensed, states may build the supply of licensed FCC that supports the health and safety of children in care and reduces burdens on providers.

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An earlier report (Bromer et al., 2021) described challenges faced by newly licensed providers. This brief seeks to amplify those findings as well as to present new analyses that offer a deeper understanding of the challenges faced, specifically, by new providers in the study. The authors of this brief wish to acknowledge the contributions of the Study Co-PI, Toni Porter of Early Care and Education, as well as co-authors of the study report Samantha Melvin and Marina Ragonese-Barnes.

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Appendix

Table A1.

STATE	FOCUS-GROUP PARTICIPANTS (N=27)
California	56% (15)
Florida	11% (3)
Massachusetts	7% (2)
Wisconsin	26% (7)
Mean age (SD)	40 years (8.02)
EDUCATION LEVEL	
Highschool or GED	7% (2)
Some college/trade school	37% (10)
Associate's degree	15% (4)
Bachelor's degree or higher	41% (11)
REGULATION TYPE	
Licensed	89% (24)
Registered/certified	11% (3)
Mean number of children in child care (SD)	6 (3.25)
AGES OF CHILDREN CARED FOR ⁱ	
Infants	48% (13)
Toddlers	81% (22)
Preschoolers	70% (19)
School-agers	56% (15)

ⁱ Participants who cared for mixed-age groups are represented more than once in the estimates for ages of children cared for.
Note: This table does not include the five interview participants due to small sample size.