

Modification of *Delacare Rules* during a Disaster or Emergency Event

- Early Care and Education (ECE) and School-Age (SA) Centers -

Licensed child care facilities are required to follow *Delacare Rules* to ensure the protection of children and the promotion of their health, safety, well-being and positive development. In the event of a natural or man-made disaster or emergency event, the Office of Child Care Licensing (OCCL) may determine that conditions are such that a modification of certain rules under which licensed child care facilities operate is appropriate. During such extraordinary situations, OCCL will adopt a common sense approach to decisions made regarding modifying rules. The decision process will include taking into consideration how a particular event could or has affected the facility's operation, the advice of State and local emergency management agencies, the Division of Public Health, and any other appropriate authorities who can provide guidance regarding the impact of the event on child care. The guidance received will be used to determine which *Delacare Rules* are affected and the acceptable standard by which compliance will be determined. The ultimate goal will be to continue to protect children and eliminate or minimize risks of serious or imminent danger.

Licensed child care facilities will remain responsible for complying with any *Delacare Rule* as adopted and approved by the Secretary of the Department of Services for Children, Youth and Their Families unless a modification has been approved by OCCL. Licensed child care facilities which seek relief from adhering to a Rule(s) shall be required to follow *Delacare Rules* – ECE and SA Centers (Center(s)), see Rules #117, 119 and 120 - as indicated by the particular circumstance and notify OCCL of the emergency event impacting their facility as soon as they are able to do so. Each situation will be assessed on an individual basis and approval for any modification will be noted in the facility's licensing file. A modification of *Delacare Rules* under such conditions is not the same as a "rule variance" – Centers, see Rules # 113-116". Please note that licensed child care facilities always have the option to exceed the baseline or minimum standard set by any Rule or modification thereof. During a disaster or emergency event, using best practice recommendations that enhance the level of protection and accountability for children is strongly encouraged.

For safety sake, when there is advance notice of an impending emergency event, it may be best for the facility to close and advise parents/guardians to arrange for their children to be picked up. The conditions at that time and the directions of State and/or local emergency management agencies or appropriate authorities concerning travel and evacuation shall be the determining factor as to when a facility should close or maintain the children at the site. Licensed child care facilities will remain responsible for children in their care regardless of the location until parents/guardians can be reunited with their children or others with legal authority assume responsibility.

This document contains examples of rules and how they could potentially be adjusted depending on the particular circumstances of the event. This is not a complete alternative listing as other rules and arrangements may be considered dependent upon the impact of the event, guidance received from appropriate authorities, and approval from OCCL. Also listed are some best practice recommendations that facilities are encouraged to utilize for an even higher level of protection and accountability during a disaster or emergency event.

Rules	Alternatives and/or Suggested Procedures
<p>Rules 34 & 64: Definition of Terms (regarding Staff Supervision)</p> <p>Early Childhood (EC) and School-Age (SA) Interns - required to be under the supervision and direct observation of at least EC Assistant Teacher, EC Caregiver, or SA Site Assistant.</p> <p>“Direct observation” means that supervising staff members are physically present in the same room or area with the staff members that are being supervised and are visually monitoring the interactions of these staff members.</p>	<p>If short staffed, EC and SA Interns over the age of 18, who have been determined suitable by OCCL’s Criminal History Unit (CHU) – have a clear background check, may care for children alone – not under the direct observation of another staff member.</p>
<p>Rules 119 & 120: Notification to OCCL</p> <p>Notify within one (1) business day by direct voice contact during OCCL’s business hours if there is:</p> <ul style="list-style-type: none"> • Any fire; flood; or any other serious damage due to any natural or man-made disaster that affect the ability to operate safely. • Injury of a child while in care at the Center requiring in-patient or out-patient treatment. Written report on appropriate form is also required. • Immediately notify OCCL by direct voice contact during OCCL’s business hours of the death of a child; call 24 hour Child Abuse/Neglect Hotline (currently listed as 1-800-292-9582) if occurring after OCCL’s business hour. 	<p>All available efforts must be made to notify emergency services and request assistance when a child is injured or dies.</p> <p>Reporting damage to the Center or injury of a child must occur within one (1) business day after phone service has been reestablished.</p> <p>Reporting the death of a child must be made immediately after phone service reestablished.</p> <p>Other methods of communication – emailing or texting - should be utilized if such a method provides an opportunity to reach OCCL sooner. Whenever a communication method does not involve direct voice contact, follow-up with direct voice contact must also be made within the appropriate time frame.</p> <p>OCCL will assess effects of any damage to the Center and disrupted utility service – electricity, gas, water, etc., to determine if continued operation is acceptable. When applicable, this assessment will include reports/inspections from other appropriate authorities.</p> <p>Approval from OCCL will be required prior to reopening.</p>
<p>Rules 166-170: Staffing – ECE Center</p> <p>One staff member meets the qualification of EC Administrator.</p> <p>One staff member meets the qualification of EC Curriculum Coordinator.</p> <p>EC Administrator can serve as EC Curriculum Coordinator under specific circumstances.</p>	<p>If specifically qualified staff members are no longer in attendance, ensure that at least one staff member who is above the qualification of EC Intern shall take charge of the facility and divide responsibilities upon staff members that are present.</p> <p>Supervision of children and providing provisions to ensure their basic needs are met will be considered the most important tasks.</p>

Rules	Alternatives and/or Suggested Procedures
<p>Rules 166-170: Staffing – ECE Center (continued)</p> <p>Staff member who meets the qualifications of EC Administrator or EC Curriculum Coordinator is at the ECE Center at least 75% of the hours of operation.</p> <p>4:1 ratio of EC Teachers to EC Assistant Teachers, EC Caregivers, and EC Interns.</p>	<p>A brief written plan may be required to document an organized approach to providing care to children. Documentation of such issues as who has been assigned to various groups of children, who is answering phone calls, who is documenting the release of children, who is in charge of food service, etc. may be required.</p>
<p>Rules 445-451: Staffing- SA Center</p> <p>One staff member meets the qualification of SA Administrator.</p> <p>One staff member meets the qualification of SA Site Coordinator when SA Administrator is responsible for more than one SA Center.</p> <p>When SA Administrator is responsible for more than one SA Center, that person is required to make continuous 30 minute visit per week at each SA Center.</p> <p>Staff member who meets the qualification of SA Administrator or SA Site Coordinator is present at the SA Center at least 50% of the hours of operation.</p> <p>SA Site Coordinator is responsible for no more than 2 SA Centers.</p> <p>One staff member meets the qualification of SA Site Assistant.</p> <p>When SA Administrator or SA Site Coordinator is not present, SA Site Assistant with specific qualifications is present – documented training on day-to-day operations of SA Center.</p>	<p>If specifically qualified staff members are no longer in attendance, ensure that at least one staff member who is above the qualification of SA Intern shall take charge of the facility and divide responsibilities upon staff members that are present.</p> <p>Supervision of children and providing provisions to ensure their basic needs are met will be considered the most important tasks.</p> <p>A brief written plan may be required to document an organized approach to providing care to children. Documentation of such issues as who has been assigned to various groups of children, who is answering phone calls, who is documenting the release of children, who is in charge of food service, etc. may be required.</p>

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<p>Rule 185: Number of Staff</p> <table border="1" data-bbox="94 284 1031 540"> <thead> <tr> <th>Age Group</th> <th>Minimum Ratio Staff to Child</th> <th>Maximum Group Size</th> </tr> </thead> <tbody> <tr> <td>Infant – Under 1 year</td> <td>1:4</td> <td>8</td> </tr> <tr> <td>Young Toddlers – 1 to 2 years</td> <td>1:6</td> <td>12</td> </tr> <tr> <td>Older Toddlers – 2 to 3 years</td> <td>1:8</td> <td>16</td> </tr> <tr> <td>Young Preschoolers – 3 to 4 years</td> <td>1:10</td> <td>20</td> </tr> <tr> <td>Older Preschoolers – 4 to 5 years</td> <td>1:12</td> <td>24</td> </tr> <tr> <td>School-Agers – 5 years (in K) & up</td> <td>1:15</td> <td>30</td> </tr> </tbody> </table>	Age Group	Minimum Ratio Staff to Child	Maximum Group Size	Infant – Under 1 year	1:4	8	Young Toddlers – 1 to 2 years	1:6	12	Older Toddlers – 2 to 3 years	1:8	16	Young Preschoolers – 3 to 4 years	1:10	20	Older Preschoolers – 4 to 5 years	1:12	24	School-Agers – 5 years (in K) & up	1:15	30	<p>If short-staffed:</p> <ul style="list-style-type: none"> The number of children to be cared for by one staff member may be increased; Group size requirements will not be enforced; and Age-groups may be combined. <table border="1" data-bbox="1060 414 2003 602"> <thead> <tr> <th>Age Group</th> <th>Minimum Ratio Staff to Child</th> <th>Maximum Group Size</th> </tr> </thead> <tbody> <tr> <td>Infants – Under 1 year</td> <td>1:5</td> <td>Waive</td> </tr> <tr> <td>Toddlers – 1 to 3 years</td> <td>1:8</td> <td>Waive</td> </tr> <tr> <td>Preschoolers – 3 to 5 years</td> <td>1:12</td> <td>Waive</td> </tr> <tr> <td>School-Agers – 5 years (in K) & up</td> <td>1:25</td> <td>Waive</td> </tr> </tbody> </table>	Age Group	Minimum Ratio Staff to Child	Maximum Group Size	Infants – Under 1 year	1:5	Waive	Toddlers – 1 to 3 years	1:8	Waive	Preschoolers – 3 to 5 years	1:12	Waive	School-Agers – 5 years (in K) & up	1:25	Waive
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<p>Rules 187, 191, 193, & 194: Number of Staff (Infant Ratio)</p> <p>Maintain full (1:4) staff/child ratios for infants at all times including nap time. Infants always cared for separate from other children even when attendance is low and at beginning and end of the day.</p>	<p>If short-staffed, staff to child ratios for infants and separation of infants from other age groups may be modified as follows:</p> <ul style="list-style-type: none"> Nap time – 1 staff member may care for up to 10 sleeping infants in a particular room or area. Other staff members must be in the building and readily available to provide immediate assistance as needed. When 5 or more infants are no longer sleeping, another staff member is required. Low attendance - 1 staff member may provide care for up to 6 children of any age; 2 staff members may provide care for up to 12 children of any age. During morning arrival and afternoon/evening departure – all age groups, including infants, may be combined. 																																				
<p>Rules 224-229 – Sleeping Accommodations</p> <p>Each child has clean, age-appropriate, individual rest equipment such as a crib, playpen, cot, mat and bedding.</p> <p>Napping/sleeping equipment is 18 inches apart.</p>	<p>Children older than one year may sleep directly on the floor if that is the only alternative. Whenever possible, safely cushion the sleep surface such as at least using a blanket or sheet for the child to lie on and another as a cover.</p> <p>Safe sleep practices for infants must continue to be implemented especially concerning placing infants on their backs to sleep. If an infant can not be placed in a crib, port-a-crib or playpen to nap/sleep, the sleeping surface must be safely cushioned in a firm and smooth manner.</p> <p>Children may sleep less than 18 inches from each other if space is limited due to sheltering in an area that is considered the safest space available.</p>																																				

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<p>Rules 231-235: – Toilet Facilities</p> <p>Toilet room on same floor as inside play area.</p> <p>At least one sink in each toilet room.</p> <p>When serving only children under 24 months - one toilet and sink if fewer than 20 children served; or 2 toilets and sinks when serving more than 20 children.</p> <p>One child sized toilet for every 10 children over 24 months through preschool-age.</p> <p>One standard toilet for every 15 school-age children and staff.</p>	<p>Toilet ratios shall not be enforced particularly if evacuation to an emergency shelter has occurred.</p> <p>When sheltering in a specific area, using the most accessible toilet(s) and sink(s) is an acceptable.</p> <p>The substitution of potty chairs instead of toilets for young children who are potty training will also be acceptable.</p>
<p>Rule 454- Toilet Facilities – School-Age Center</p> <p>One standard toilet and sink for every 25 school-age children.</p>	<p>Toilet ratios shall not be enforced particularly if evacuation to an emergency shelter has occurred.</p> <p>When sheltering in a specific area, using the most accessible toilet(s) and sink(s) is acceptable.</p>
<p>Rules 240-248: Sanitation, Handwashing, Standard Precautions and Diapering</p> <p>Wash and disinfect specific equipment or surfaces after each use and/or at least daily (see Rules 240-242).</p> <p>Wash hands regardless of glove usage with soap and running water and use single service towels for drying hands before and/or after specific activities or tasks (see Rule 243).</p> <p>Use standard precautions for protection from disease and infection. Spill of body fluids (i.e. urine, feces, blood, saliva, nasal discharge, and injury or tissue discharge) should be cleaned up immediately (see Rule 244).</p> <p>Diapers and other clothing should be changed when wet or soiled.</p> <p>There should be an established procedure for checking, changing and disposing of diapers in a sanitary manner (see Rules 245-248).</p>	<p>Strive to continue the highest possible level of sanitary practices to help prevent or reduce the risk of spreading disease and infection.</p> <p>Consider having hand sanitizers available in preparation for emergency situations when running water is not available. Have extra containers of household bleach ready for an emergency.</p> <p>Recycle any available safe water as much as possible and use it for cleaning – add bleach to the water to create a disinfectant solution – one-fourth (1/4) cup of household bleach to each gallon of water or one (1) tablespoon of bleach per quart of water.</p>

Rules	Alternatives and/or Suggested Procedures
<p>Rule 251: Food Safety (Food Preparation)</p> <p>Kitchen or food preparation area provided with necessary operable equipment to prepare, store, serve and clean-up meals and snacks.</p> <p>Hand washing sink required in food preparation area, separate from the sink used for food preparation and dishwashing.</p>	<p>When sheltering in a specific area, food preparation can be performed in an area without a hand washing sink or operable equipment. Hand sanitizers should be used if available.</p> <p>If possible, use surfaces that can be sanitized. Use bleach and water solution – see information above,</p> <p>Move all foods and food service/food preparation equipment and utensils to level that protects it from water or other damage.</p>
<p>Rule 253 – Food Safety (Refrigeration)</p> <p>Refrigeration is necessary for perishable foods.</p> <p>Refrigerator must be capable of keeping food at 40 degrees F. or colder and a working thermometer must be kept inside the unit.</p>	<p>If utility service is disrupted, perishable foods that can be safely prepared should be used first. Utilize alternative safe methods to keep foods from spoiling – i.e. keeping foods on ice, using dry ice, etc.</p> <p>Best practice calls for keeping refrigerators closed at all times unless removing or storing foods. Reducing the number of times the refrigeration equipment is opened will help to maintain a low temperature for the longest time.</p> <p>Have a supply of non-perishable foods ready when fresh foods are no longer available or have become unsafe to eat.</p>
<p>Rules 265 & 266 – Doors, Windows and Climate Control</p> <p>Temperatures at floor level in rooms used by children are to be maintained at a minimum of 65 degrees and maximum of 85 degrees unless there is a conflict with Federal or State energy laws.</p> <p>Centers are required to temporarily close if minimum or maximum temperatures can not be maintained.</p> <p>Centers licensed after 12/31/06 are required to have air conditioning to maintain a temperature at or below 85 degree during hot weather.</p>	<p>If utility service is disrupted, Center staff members will be required to do all that is possible to keep children’s body temperatures within a normal healthy range such as putting on additional clothing or placing children under blankets to keep them warm; or taking safe measures to keep children cool such as dressing children as lightly as possible and providing water or suitable liquids to prevent dehydration.</p> <p>Children will be allowed to stay at the Center until it is safe to release them to their parents/guardians or directed to evacuate by appropriate authorities.</p>
<p>Rules 268-269 – Lighting</p> <p>Sufficient natural and artificial lighting to allow for the supervision of the children and provide illumination of at least 30 foot candles at floor levels in areas where children’s activities occur.</p>	<p>If there is no electricity (blackout), an alternate lighting sources such as battery or crank operated lighting must provide enough illumination to enable staff members the ability to supervise the activities and provide for the care of all children at all times. Burning candles is not recommended. In the case of a total blackout, intense supervision within the constraints of the available staff is urged.</p>

Rules	Alternatives and/or Suggested Procedures
<p>Rules 276-278: Emergency Planning</p> <p>Have a written emergency plan describing how safety will be maintained during natural and man-made disasters such as fire, flood, earthquake, extreme weather conditions, power failure or utility disruption, chemical or toxic spills, bomb threat or terrorist attack.</p> <p>Train staff members about their specific duties during a disaster or emergency event.</p> <p>Account for all children at all times.</p> <p>Relocate the children if there is a need to evacuate.</p> <p>Contact appropriate emergency response agencies.</p> <p>Contact procedure for the parents/guardians of the children.</p> <p>Post evacuation plan and practice evacuating Center (fire drill).</p> <p>Have food, water and supplies available to shelter at the Center for children and staff for at least 72 hours.</p>	<p>Consider enhancing emergency preparedness plans.</p> <p>Have more than one copy of the emergency plan in different locations throughout the Center. Keep one in a location outside (play area) the Center. Easy access to the plan may help staff members stay calm and more focused on keeping the situation as under control as possible.</p> <p>Create a ready to go file with copies of the children’s emergency contact information and any other important paperwork – administration of medication sheet, attendance (roll-check) list, and incident/injury forms.</p> <p>Consider creating an evacuation notebook that includes pictures of each child and their family members to use for identification purposes. Put copies of contact information in the notebook. Maintain this notebook in an easily accessible spot so it may be quickly gathered to take away during an evacuation.</p> <p>Have identification information concealed on each child in case they become separated from the group. Do not place child’s full name or information that directly identifies child in plain view.</p> <p>Have several predetermined evacuation sites available – one close by in the neighborhood; another just outside the community – several miles away; and one more that is located further away – 10 to 20 miles or more. If at all possible to avoid relocating to a public shelter. Extreme caution must be taken if there is no other alternative. Remember that people from all walks of life are also evacuating to public shelters and the situation could present a very high risk of danger to children. Constant supervision must be provided.</p> <p>Create a written memorandum of understanding regarding the use of predetermined evacuation sites. Make sure all parties involved are in agreement with the arrangements.</p> <p>Create emergency go-packs (usually a back-pack type carrier) for children. Prepare a list of supplies for each child and ask parents/guardians to help obtain them. For instance, the go-pack may have a change of clothes, diapers, wipes, extra formula & bottles, small bottles of water or juice, favorite snacks (more on the nutritious side), books and/or small toys, blanket, raincoat, picture of the child and his or her family, etc.</p>

Rules	Alternatives and/or Suggested Procedures
<p>Rules 276-278: Emergency Planning (continued)</p>	<p>If needing to evacuate, bring a “traveling” first aid kit. Use the first aid kit normally taken on field trips if the Center offers such an opportunity – see Rule #282. If field trips are not offered, create a traveling first aid kit that will at least be used if needing to relocate due to an emergency or disaster event.</p> <p>Leave a note at the Center informing parents/guardians of the relocation site and a cell phone number or contact information. Bring a cell phone(s) and be prepared to try to contact parents/guardians.</p> <p>Have an out of state contact person that can be called when local calling is not possible or not working well. Share this out of state contact information with parents/guardians. Explain that this out of state person will become the point of contact and will be told pertinent information that can help keep everyone informed.</p> <p>Keep written documentation of when a child is released to a parent/guardian.</p> <p>Practice both fire and disaster or emergency event drills. Have children practice going to predetermined safe area of the Center such as an interior hallway or the basement for a “pretend tornado warning”. Practice evacuating to another location – walk the children to a predetermined site nearby or practice transportation arrangements.</p> <p>If there is no electricity (blackout), alternate lighting sources such as battery or crank operated lighting must provide enough illumination to enable staff members the ability to supervise the activities and provide for the care of all children at all times. Burning candles is not recommended. In the case of a total blackout, intense supervision within the constraints of the available staff is urged.</p>
<p>Rule 283 – Telephones</p> <p>A working and listed telephone is required.</p>	<p>If phone service is disrupted, try other methods of communication such as emailing, texting, or using another type of phone - land-line if cell phones are out or vice versa.</p>
<p>Rules 297-298: Transportation</p> <p>Vehicles and operators of vehicles are in compliance with all applicable Federal, State, and local laws.</p> <p>No transporting more persons than the capacity of the vehicle.</p>	<p>Licensed child care facilities are required to ensure children are transported according to State Law, and <i>Delacare Rules</i>; however if a situation is truly deemed “life or death”, immediate actions should be taken to evacuate or get children out of harms way as quickly as possible.</p>

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<p>Rules 297-298: Transportation</p> <p>Vehicles with capacities of 10 passengers in addition to driver, purchased or leased after 7/1/98 need to meet State and Federal specifications and safety standards applicable to school buses.</p> <p>Each child is secured in an individual safety restraint system appropriate to age, weight and height of child.</p> <p>Safety restraints are federally approved and so labeled, installed and used in accordance with manufacturer's and vehicle's instruction and maintained in a safe working condition and free of any recall.</p>	<p>OCCL will consult with local or State governmental authorities who have the ability to evaluate or determine the severity of an emergency situation if there is ever any question(s)/problem(s) resulting in any actions taken or decisions made by a child care facility while transporting children during a disaster or emergency event.</p> <p>Nevertheless, even under dire circumstances, there is no guarantee that the child care facility will not be held responsible in some way for any harm to a child even if OCCL finds the facility to have made an acceptable decision or taken appropriate actions under the circumstances. Please keep in mind that there is always the chance that others involved or affected by the action/decision may see the situation differently and take legal action against the facility.</p>						
<p>Rules 310-313: Field Trips</p> <p>Staff or adult supervision of children during trips off the Center's premises.</p> <p>Maintain specific staff/child ratios when using a vehicle for field trip off Center's premises; staff member must be qualified as above EC Intern:</p> <p>Youngest child in group - Maximum # of Children supervised by 1 staff member</p> <table data-bbox="92 898 420 987"> <tr> <td>Less than 2 years</td> <td>2</td> </tr> <tr> <td>2 years to 4 years</td> <td>4</td> </tr> <tr> <td>5 years & older</td> <td>8</td> </tr> </table> <p>List of children present and frequent roll check to ensure children are accounted for at all time.</p> <p>Access to medical consent forms and storage container for medications</p> <p>Traveling first aid kit is available.</p> <p>Tags for children or other means of providing Center's phone number.</p> <p>Emergency transportation plan is developed.</p> <p>Documentation of roll check was conducted both before departing from field trip site and again when returning to Center.</p>	Less than 2 years	2	2 years to 4 years	4	5 years & older	8	<p>If needing to relocate/evacuate, plan to use and consider taking steps to enhance the field trip rules to ensure children are constantly supervised and accounted for at all times.</p> <p>If short staffed and relocation/evacuation is necessary:</p> <ul data-bbox="1108 808 1955 898" style="list-style-type: none"> • The number of children to be cared for by one staff member may be increased; and • Age-groups may be combined. <p>See Emergency Planning Rules #276-278 above to enhance evacuation procedures</p>
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<p>Rules 319-326: Health Observation on Arrival & Health Exclusion</p> <p>Each child is observed on arrival by staff member trained in recognizing signs of communicable disease, physical injury or other evidence of ill health.</p> <p>Children with certain symptoms of illness or reportable communicable disease are not permitted to be admitted to the Center or remain at the Center unless written documentation from a health care provider, or verbal with written follow-up, states child no longer poses health risk to other children.</p> <p>If a child who was admitted to Center manifests any illness or symptoms that require exclusion from the group of well children, keep that child in a separate area – continuing supervision – until a parent/guardian can pick a child up.</p>	<p>Continuously observe and assess children’s health status, especially for signs of physical injury due to the disaster or emergency event. Be especially sensitive to how a traumatic situation may affect a child. Reassurance, listening and being readily available to respond to a child’s needs are particularly important in such a time.</p> <p>Regardless of certain symptoms or manifestation of illness or communicable disease, children will be allowed to stay at the Center until it is safe to release them to their parents/guardians unless the situation becomes life-threatening at which time emergency assistance should be sought – call 911 if possible.</p> <p>If at all possible, continue to separate sick children from well children. If the situation does not allow for separation, use all precautions available to decrease the spread of illness such as frequent and proper hand washing or hand sanitization (if there is no running water) especially after diaper changing, toileting, or while preparing foods.</p> <p>Discourage children from sneezing or coughing directly into another child’s face. Sanitize toys, surfaces or any thing that children may mouth or could contain germs that spread illness.</p> <p>Keep children hydrated, adequately fed (based upon supplies available) and as well rested as possible.</p>
<p>Rules 342, 344-346, 356-358: Food and Nutrition</p> <p>Menus are planned in advance, dated and posted.</p> <p>Nutritious and appropriately timed meals (breakfast, lunch, dinner) and snacks meeting nutritional requirements are served in accordance with a schedule based on the number of hours a child is in attendance.</p> <p>Meals and snacks provided in accordance to USDA/Child and Adult Care Food Program meal pattern requirements adjusted by age of child.</p> <p>Supplemental foods from all basic food groups are available if meals or snacks provided by parents/guardians fail to meet nutritional requirements.</p> <p>Meals and snacks contain specific items based on basic food groups – milk, proteins, fruits and vegetables, and grains.</p>	<p>Meals will not have to meet USDA/CADFP standards if it is not possible to replenish food supplies due to the disaster or emergency event.</p> <p>When food supplies are being conserved or down to emergency provisions only, the specific timing of meals and snacks and following required nutritional guidelines will not be expected. At this point, food can be very basic. The goal will be to provide enough food and water/liquids to keep children from being hungry and thirsty. If at all possible, continue documentation of foods and liquids served to children especially for those with known food allergies or dietary special needs.</p>

Rules	Alternatives and/or Suggested Procedures
<p>Rule 360, Subsections U through Y: Infant Feeding</p> <p>Infants too young to use a feeding chair or other age-appropriate seating apparatus will be held when fed.</p> <p>Same staff person will feed a specific infant for most of that infant's feedings.</p> <p>Infants will be held when bottle-feeding.</p> <p>Staff person will not bottle feed more than one infant at a time.</p> <p>Infants can not be placed in crib with bottle for feeding or with a propped bottle.</p>	<p>If short staffed and no other options are available, staff members may feed infants without holding them, feed more than one infant at a time, and are not required to have a primary staff person in charge of each infant's feeding.</p> <p>Nevertheless, to the extent possible, the maintenance of "normal" care giving practices should be a goal. Try to maintain as much normalcy as possible to provide a comfort zone that shields infants from the effects of the event. Keeping the same or similar routine can help children of all ages cope more positively and reduce or eliminate traumatic effects.</p>
<p>Rules 374 & 375 – Written plan of goals and activities, and the number and timing of activities</p> <p>Develop written goals for children's development and education.</p> <p>Goals need to include physical, social, emotional, language/literacy and cognitive development, appropriate to ages and developmental levels of children.</p> <p>Have a written plan of developmentally appropriate activities designed to reach goals.</p> <p>Activity plan include at least one daily activity for each goal with children having the choice to participate in at least 4 activities daily.</p> <p>Time allotted for such planned activities constitutes 1/3 of the time children are in attendance.</p> <p>Activities are varied, developmentally appropriate, may be related to themes, culturally meaningful, educationally valuable, promote all levels of development, adapted for children with disabilities, based on best practice and accepted research, and in alignment with principals of foundations of learning and development as set forth by Delaware (<i>Early Learning Foundations</i>) and/or US Dept of Education.</p>	<p>When sheltering in a specific area, children may use whatever existing materials and equipment that is available. Equipment and materials should be inspected to ensure that they are safe and free of damage. Play and activities should be structured based on the needs of the children, especially taking into consideration helping them cope with the event and any particular safety factors.</p>

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<p>Rules 380-381 – Activity areas</p> <p>Indoor physical space is organized into activity areas where related equipment and materials are kept in orderly fashion. Activities in areas are available from daily to weekly basis.</p> <p style="text-align: center;">Activity Areas</p> <table border="1" data-bbox="94 435 1031 657"> <thead> <tr> <th data-bbox="94 435 562 467">Available on Daily Basis</th> <th data-bbox="562 435 1031 467">Available on Weekly Basis</th> </tr> </thead> <tbody> <tr> <td data-bbox="94 467 562 500">Language and literacy area</td> <td data-bbox="562 467 1031 500">Cooking or food exploration</td> </tr> <tr> <td data-bbox="94 500 562 532">Dramatic play area</td> <td data-bbox="562 500 1031 532">Science and nature investigation</td> </tr> <tr> <td data-bbox="94 532 562 565">Creative arts area</td> <td data-bbox="562 532 1031 565">Music and rhythm</td> </tr> <tr> <td data-bbox="94 565 562 657">Manipulative/mathematics/problem solving area</td> <td data-bbox="562 565 1031 657">Multi-sensory play tables using materials such as water, sand, rice or beans</td> </tr> </tbody> </table>	Available on Daily Basis	Available on Weekly Basis	Language and literacy area	Cooking or food exploration	Dramatic play area	Science and nature investigation	Creative arts area	Music and rhythm	Manipulative/mathematics/problem solving area	Multi-sensory play tables using materials such as water, sand, rice or beans	<p>When sheltering in a specific area, children may use whatever existing materials and equipment that is available. Equipment and materials should be inspected to ensure that they are safe and free of damage. Play and activities should be structured based on the needs of the children, especially taking into consideration helping them cope with the event and any particular safety factors.</p>
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<p>Rule 382 – Moderate to vigorous physical activity</p> <p>Provide opportunity for a minimum of 20 minutes of moderate to vigorous physical activity indoors or outdoors for every 3 hours a child is in attendance between the hours of 7AM to 7PM.</p>	<p>The benefits of physical activity for children should not be dismissed in a disaster or emergency event. The event can be stressful and participating in physical activity can be a way to relieve stress. Health benefits also attest to continuation of physical activity.</p> <p>Invention and good judgment should be used in designing and scheduling activities within the constraints caused by the disaster or emergency event. Whenever possible, provide opportunities for moderate to vigorous physical activity even if it is just for a few minutes.</p>										
<p>Rules 383A & D & 384A & F – Television, DVD, VCR, and Computer Use</p> <p>Viewing or use prohibited for children younger than 2 years old.</p> <p>Use or viewing limited to one hour daily per child or group of children.</p>	<p>When sheltering in a specific area and/or children are not segregated by age group, children under 2 years may be within the area where television, DVD, or VCR programming is being shown. However, instead of allowing them to watch the programming, attempts should be made to take this time to interact with infants and young toddlers and involve them in other positive activities.</p> <p>Television, DVD, VCR and computer use may be extended beyond one hour daily if such an activity/interaction is helpful in keeping children appropriately occupied or provides a safe distraction to the disaster or emergency event at hand. Staff members are responsible to ensure that programming is age appropriate. Caution should also be given to the topics of the programming so that they do not contribute to greater anxiety or negative behaviors.</p>										

Rules	Alternatives and/or Suggested Procedures
<p>Rules 383A & D & 384A & F – Television, DVD, VCR, and Computer Use (continued)</p>	<p>Children should be shielded from viewing or listening to news or information about the event. Seeing or hearing the media coverage of an event, especially repeated scenes of disaster and mayhem, is extremely stressful and scary to children. It is very difficult for them to understand that such scenes are events that have already happened. They may believe that the situation is happening right then or over and over again.</p>
<p>Rule 387 – Infant and Toddler Care – Separate Care and Play Areas</p> <p>Infants and toddlers are to be cared for in rooms separate from older children unless 12 or fewer children are present.</p>	<p>If the Center is short-staffed and/or sheltering in a specific area, infants and toddlers may be in the same room or outdoor play area as older children.</p> <p>Nevertheless, precautions must be taken to prevent any harm (including accidental incidents) to the younger children by the older children. For example, taking precaution to prevent older children from stepping on, trampling, falling on, tripping over, or carrying younger children. Also younger children should not have access to choking hazards such as small toys or items used by older children that are not recommended for play or use by younger children.</p>
<p>Rules 388-389 – Infant and Toddler Care – Presence of EC Assistant Teacher or EC Caregiver and “Back to Sleep” for infants</p> <p>A staff member who is qualified as an EC Assistant Teacher or EC Caregiver must always be in the room with infants and toddlers.</p> <p>Infants must always be placed on their backs to sleep. If an exception is necessary due to a child's physical or medical condition, there must be documentation for the infant's health care provider stipulating the appropriate sleeping position for that infant.</p>	<p>If short staffed, EC Interns over the age of 18 years, who have been determined suitable by CHU, may care for infants and toddlers without being under the direct observation of an EC Assistant Teacher or EC Caregiver.</p> <p>Safe sleep practices for infants must continue to be implemented especially concerning placing infants on their backs to sleep. If an infant can not be placed in a crib, port-a-crib or playpen to nap/sleep, the sleeping surface must be safely cushioned in a firm and smooth manner.</p>
<p>Rules 398 & 399: Care of School-Age Children</p> <p>When 10 or more school-age children are in attendance, these children are cared for in an area physically separated from younger children.</p> <p>The outdoor play area for school-age children is separate or used at separate times from that provided for younger children.</p>	<p>If short staffed and/or sheltering in a specific area, school-age children may be in the same room or outdoor play area as younger children.</p> <p>Nevertheless, precautions must be taken to prevent any harm (including accidental incidents) to the younger children by the older children. See above Rule 387.</p>
<p>Rule 412: Release of Children</p> <p>Have written procedures for release of children.</p> <p>Release child only to person authorized by parent/guardian.</p>	<p>Consider taking steps to enhance procedures for the release of children to ensure they are safely reunited with their parents/guardians or appropriate person during a disaster or emergency event.</p> <p>The sudden onset of an event may cause staff to leave early and families to all arrive at once wanting to pick up children and depart as quickly as possible.</p>

Rules	Alternatives and/or Suggested Procedures
<p>Rule 412: Release of Children (continued)</p> <p>Document when child is released to any authorized person; keep documentation for at least 24 hours.</p> <p>Have a process for dealing with:</p> <ul style="list-style-type: none"> • Request by parent/guardian for emergency release of child; call parent/guardian to verify request. • Identifying unknown (unfamiliar) person with authorization from parent/guardian to pick up a child. • Unauthorized, intoxicated (incapable of driving or caring for child) person, or non-custodial parent not authorized to pick up a child. 	<p>Keeping the situation under control will be extremely important to ensure children are only released to the appropriate person and the child's whereabouts are known at all times.</p> <p>Also keep in mind that there is a possibility that some parents/guardians may not be readily available if the event happens suddenly. This may result in a parent/guardian sending someone else who may not be familiar to the Center to pick up the child. Have a process ready to quickly and efficiently identify an unknown person and ensure the release is authorized.</p> <p>Also be prepared to deal with children that can not be picked up. Have a plan for any remaining children. Decide if care will be provided at the Center or another location, and how parents/guardians will be located, contacted and/or kept informed.</p> <p>Also if not remaining at the Center – relocation is necessary - it is especially important to document how and when a child was released to an authorized person. It is recommended that detailed information be included as part of the documentation that clearly indicates how the child was properly released such as date and time of release, identity of the person, type of identification used, and signature of the person the child was released to.</p> <p>Consider taking a picture of the person whom the child has been released to as an additional identification method.</p>