

DELACARE

REQUIREMENTS FOR FAMILY CHILD CARE HOMES

STATE OF DELAWARE
DEPARTMENT OF SERVICES FOR CHILDREN, YOUTH AND THEIR FAMILIES

NOTICE OF RESCISSION AND PROMULGATION

The Division of Family Services, Department of Services for Children, Youth and Their Families, adopts and promulgates the following licensing requirements for family child care homes as authorized in The Delaware Code, Title 31, Subchapter II, Subsections 341 - 344. All previous rules, regulations and standards pertaining to such facilities are null and void. These requirements take effect on June 1, 1994.

Thomas P. Eichler, Secretary
Department of Services for Children
Youth and Their Families

Date

Gail B. Womble, Director
Division of Family Services

Date

FOREWORD

Child Day Care is the most commonly used term to refer to the range of services available for children who are away from their own homes for a part of the day. Generally parents seek substitute care for reasons of employment, although a variety of situations prompt the need for child care. The primary characteristic of child day care is the delegation by the parents of the responsibility for the care and protection of the child to the provider.

The need for protecting children receiving care outside their own homes was recognized by the Delaware General Assembly as early as 1915. Since 1950, Delaware has required child care facilities to be licensed as authorized in the Delaware Code, Title 31, Subchapter II, Subsections 341 - 344. The licensing law defines the type of facilities that are to be regulated by the State, and gives the authority to "prescribe reasonable standards" and "license such facilities" to the Department of Services for Children, Youth and Their Families. The purpose of the law is to protect the health, safety and well-being of the children who receive care in child care facilities. Licensing of these facilities is a preventive function which has as its purpose setting requirements which must be met in order for a facility to be able to operate.

In developing the current revision of Family Child Care Licensing Requirements, the Department sought the advice and assistance of knowledgeable persons representative of the field of child care. These new requirements, entitled "Delacare: Requirements for Family Child Care Homes" were primarily drawn from the licensing requirements of other states and a thorough review of the research in the field of Early Care and Education, then thoughtfully reviewed and revised by Delaware family child care providers.

The requirements are divided into sections relating to physical environment, Caregiver qualifications and responsibilities, programs for children, equipment, nutrition, health and safety. With this format, the Department has attempted to define specific requirements rather than broad standards so that compliance can be measured accurately and consistently.

The Department appreciates the contributions of all the individuals in the development of "Delacare: Requirements for Family Child Care Homes" and asks for their continued support in working together to provide better care and services to children in family child care.

The following individuals participated in the work group which developed Delacare: Requirements for Large Family Child Care Homes:

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INTRODUCTION

LEGAL BASE

1. The legal base for these licensing requirements is in the Delaware Code, Title 31, Chapter 3, Subchapter II, Subsections 341 - 344 and Title 29, Chapter 90, Subsection 9003 (7).

PURPOSE

2. The overall purpose of these requirements is the protection of the health, safety and well-being of children who receive family child care services.

GENERAL PROVISIONS

DEFINITION OF REGULATED SERVICE

3. Family Child Care Homes provide care, education, protection, supervision and guidance in private homes on a regular basis for one (1) to (6) six children, not including the exclusive care of relatives. Service is provided for part of the 24-hour day, unattended by parent or guardian, and for compensation.

DEFINITION OF TERMS

4. "Administrator" means the individual responsible for the supervision and administration of the Office of Child Care Licensing.
5. "Caregiver" means the person who is issued the Family Child Care License by the Department and is responsible for the direct care, education, protection, supervision and guidance of the child in a family child care home.
6. "Change of Shift" means the simultaneous care of children from two shifts in which the ending time of the first shift overlaps the beginning time of the second shift. Change of shift care may be provided to no more than two (2) children for not more than two (2) hours in any child care day.
7. "Child" means any person who has not reached the age of eighteen (18) years and is in the care of the Family Child Care Home.
8. "Child Abuse and Neglect" means the physical injury by other than accidental means, injury resulting in a mental or emotional condition which is a result of abuse or neglect, negligent treatment, sexual abuse, maltreatment, mistreatment, nontreatment, exploitation or abandonment, of a child under the age of eighteen (18) years.
9. "Department" means the Department of Services for Children, Youth and Their Families.
10. "Division Director" means the Director of the Division of Family Service.
11. "Family Child Care Home" means a private home in which child care for one to six children at any one time who are not relatives of the Caregiver is provided.
12. "Family Child Care License" means a written certification, whether provisional or annual, issued by the Department to the applicant to publicly document that he/she has self-certified compliance with the Requirements for Family Child Care Homes and the law.
13. "Family Child Care Licensure" means the process by which the Caregiver self-certifies that he/she has complied with the Requirements for Family Child Care Homes and the law.
14. "Helper" means a youth, at least ten (10) years of age and three years older than the oldest child in care, who assists the Caregiver with child care. A Caregiver or substitute caregiver must be present when a helper is used.
15. "Infant" means any child who is under the age of twelve (12) months.
16. "Institutional Abuse" occurs when a person responsible for a child's care in an out-of-home setting jeopardizes the well being of a child that results or may result in physical or emotional injury.

17. "Office of Child Care Licensing" means the organization authorized by the Department to assume specified licensing responsibilities pursuant to **31 Del. C.** Ch. 3, and 29 **Del. C.** § 9003.
18. "Parent" means the child's natural or adoptive mother or father, guardian, or other legally responsible person.
19. "Preschool Child" means a child two (2) through four (4) years of age.
20. "Private Home" means a non-public residence such as a house, duplex, townhouse, apartment or mobile home where the Caregiver lives and has control over the furnishings and use of space. An individual unit in public housing and university housing complexes is considered a private home.
21. "Regular Basis" means child care services which are available and provided at a Family Child Care Home on more than one (1) day in any one (1) week or for periods longer than three (3) weeks in any calendar year.
22. "Relative" means a person having any of the following relationships by blood, marriage, or adoption between the Caregiver and the child in care: parent, grandparent, great-grandparent, brother, sister, aunt, uncle, stepparent, stepbrother, stepsister. A cousin, for the purpose of this definition, shall not be considered a relative.
23. "Secretary" means the Secretary of the Department of Services for Children, Youth and Their Families
24. "School-age Child" means any child age five (5) years or older who is in a public or private school. A child attending kindergarten, for the purpose of this definition, shall be considered a School-age Child.
25. "Specialist" means the individual licensing specialist representing the Office of Child Care Licensing who is responsible for performing regulatory and enforcement activities in the licensure of child care facilities.
26. "Substitute Caregiver" means the person(s) designated by the Caregiver to provide direct care, education, protection, supervision and guidance of the child in the Caregiver's home when the Caregiver is not present.
27. "Toddler" means a child between the ages of twelve (12) and twenty-four (24) months.
28. "Variance" means the nontransferable written authorization issued by the Department to use alternative means which meet the intent of the specific licensing requirement(s) and is based on the need(s) or circumstance(s) of the Family Child Care Home.

GENERAL REQUIREMENTS

29. Any individual operating a Family Child Care Home is required to have a Family Child Care License issued by the Department. No individual is allowed to operate a family child care home without a Family Child Care License.
30. Any Family Child Care Home License issued prior to the effective date is considered valid until the date the license expires. Upon expiration of the current family child care home license, a Family Child Care License must be obtained.
31. A Family Child Care License shall be issued only to the individual who is the applicant and for the address shown on the application and shall not be transferable, assignable or subject to sale.
32. The Caregiver shall comply with any restrictions on the maximum number of children in care which may be placed upon the Family Child Care Home by other applicable regulatory codes such as those related to fire safety and zoning.
33. The Family Child Care License shall be posted in a place conspicuous to the public. The certificate shall state the number of children the Family Child Care Home is authorized to have in care at any one time.
34. A Family Child Care Home shall allow Department representatives to inspect all aspects of the operation which impact on children in care. A Family Child Care Home shall allow Department representatives access to any information or records reasonably related to compliance with applicable licensing requirements. Department representatives may make unannounced and announced visits during the effective dates of the license.

35. An investigation shall be made if a complaint is received by the Department. The Department shall notify the Family Child Care Home that a complaint is being investigated. The results of the Department's investigation shall be reported in writing to the Family Child Care Home investigated. If the complaint is substantiated or if other violations are found as a result of the investigation, the Family Child Care Home shall be required to correct the violations and come into full compliance with the State Law and licensing requirements.

TYPES OF LICENSES

36. No fee shall be charged for the Family Child Care License.

Annual

37. An annual Family Child Care License shall be issued when the Family Child Care Home meets all the requirements set forth in the Requirements for Family Child Care Homes. An annual license shall be effective for one year from the date of issue, unless it is suspended, revoked or surrendered sooner.

Provisional

38. A provisional Family Child Care License may be issued for a period not to exceed six (6) months, whenever a Caregiver is temporarily unable to comply with all of the requirements in the Requirements for Family Child Care Homes.
39. A provisional license may be issued when the Department determines that:
- A. A Family Child Care Home is temporarily unable to comply with all of the requirements in the Requirements for Family Child Care Homes.
 - B. The effect of the noncompliance to any requirement does not present or will not present an unreasonable risk to the health, safety or well-being of the children in care of the Family Child Care Home.
 - C. The Family Child Care Home has a plan of correction that has been approved by the Department.
40. A provisional Family Child Care License may be replaced with an annual Family Child Care License when all of the following conditions exist:
- A. In accordance with a corrective action plan agreed to by the Department and Caregiver, the Caregiver corrects the deficiencies related to the requirements in advance of the expiration date of the provisional license and no additional areas of noncompliance exist.
 - B. Compliance with the requirements has been verified by an on-site observation by a Department representative or by written evidence provided by the Caregiver.
 - C. The Caregiver presents documentation of having attended training sessions, as required by the Department, relative to the noncompliance identified by the Department.
 - D. All other terms of the Family Child Care License remain the same.
41. A request to replace a provisional Family Child Care License prior to its expiration with an annual Family Child Care License must be made by the Family Child Care Home.

PROCEDURES FOR INITIAL FAMILY CHILD CARE LICENSURE

42. Upon inquiry, an individual shall be mailed or given application materials.
43. The individual shall complete the application materials in their entirety.
44. The individual shall return the completed application materials to the Department at a required orientation/training session. At the completion of the orientation/training session, he/she shall sign a statement which certifies compliance with the law and requirements.
45. Upon review of the application for compliance with Family Child Care Requirements, an annual Family Child Care License may be issued by the Department. If a Family Child Care License is denied, the applicant shall be notified by a letter stating the reason(s) for denial and setting forth the applicant's rights to an appeal of the decision.

PROCEDURES FOR ANNUAL FAMILY CHILD CARE LICENSURE

46. The Caregiver shall request an application for Family Child Care Licensure at least ninety (90) days before the expiration of the current Family Child Care License.
47. The Caregiver shall complete the application materials including a Statement of Licensure and return them to the Department thirty (30) days prior to license expiration.
48. The Department shall review the application for compliance with Requirements for Family Child Care Homes and issue an annual Family Child Care License if the requirements are met. If a Family Child Care License is denied, the applicant shall be notified by a letter stating the reason(s) for denial and setting forth the applicant's rights to an appeal of the decision.

SUSPENSION, REVOCATION OR DENIAL OF A LICENSE

49. The Department may suspend, revoke or deny a Family Child Care Home license for reasons which include but are not limited to:
 - A. Failure to comply with the provisions of 31 Del. C., Chapter 3, or the Department's rules and regulations pertaining to the law; or
 - B. Violation of the terms and conditions of the license, administrative action or corrective action plan; or
 - C. Use of fraud or misrepresentation in obtaining a license or in the subsequent operation of the Family Child Care Home; or
 - D. Refusal to furnish the Department with files, reports or records as required; or
 - E. Refusal to permit an authorized representative of the Department to gain admission to the Family Child Care Home during operating hours; or
 - F. Any conduct or practice, engaged in or permitted, which adversely affects or presents a serious or imminent danger to the health, safety and well-being of any child attending the Family Child Care home; or
 - G. Any conduct or practice which is in violation of State Law and regulations related to child abuse and neglect.
50. If the health, safety or well-being of children in care is in serious or imminent danger, the Department may immediately suspend the license upon issuance of a written suspension order. The order will state the reason(s) for the suspension. Within ten (10) days of the issuance of the suspension of the license, a conference with the Division Director will be held.

APPEAL

51. If a Family Child Care License is revoked, the Family Child Care Home shall be notified by a letter stating the reason(s) for revocation and setting forth the Family Child Care Home's rights to an appeal of the decision.
52. Any person aggrieved by a final decision of the Department made with regard to the granting of a Family Child Care License, license revocation, or license denial shall be entitled to a hearing and review by a hearing officer, designated by the Secretary, who has had no previous involvement in the matter.
53. Ten (10) days' notice, specifying reasons for proposed revocation or denial, shall be given before a revocation or denial occurs. If a request for hearing, either written or verbal, is received within the ten (10) day period, a hearing shall be held within thirty (30) days. The Hearing Officer makes a recommendation to the Secretary, who may accept, reject or modify. Revocation or denial shall not become effective until a written decision is rendered by the Secretary.

VARIANCES

54. Upon written request of an applicant or Caregiver, the Department may grant a variance from a specific requirement(s) if there is clear and convincing evidence that the alternative to the requirement(s) complies with the intent of the requirement(s) for which variance is sought.

55. The decision of the Department, including any qualification under which the variance is granted, shall be documented through a written agreement with the Department and a signed copy shall be sent to the applicant or Caregiver. A variance may remain in effect for as long as a Caregiver continues to comply with the intent of the requirement or may be time-limited.
56. When a Family Child Care Home fails to comply with a variance agreement in any particular, the agreement shall be subject to immediate cancellation.

PROVISIONS FOR OPERATION OF A FAMILY CHILD CARE HOME

QUALIFICATIONS OF CAREGIVER AND FAMILY

57. The Caregiver shall:
 - A. Be at least eighteen (18) years of age and able to understand and carry out the Requirements for Family Child Care Homes.
 - B. Be physically and emotionally capable of performing activities related to providing child care, which include meeting children's physical needs such as feeding and diapering, supervising children's activities, supporting children's physical, intellectual, social and emotional growth, dealing with emergencies in a calm manner and carrying out methods of child guidance and discipline as stipulated in these requirements.
 - C. Have an understanding of children and their needs together with an ability to relate to children with courtesy, respect, patience and affection, and an understanding and respect for the child's family and culture.
58. Reported and/or substantiated allegations of child abuse and/or neglect committed by a Caregiver or other household member shall be considered in determining the suitability of the Caregiver and home for family child care.
59. No Caregiver or other household members shall have any conviction, current indictment or substantial evidence of involvement in any criminal activity involving violence against a person; child abuse or neglect; possession, sale or distribution of illegal drugs; sexual misconduct; gross irresponsibility or disregard for the safety of others; or serious violations of accepted standards of honesty or ethical behavior.
 - A. The Department may, at its own discretion, make exceptions to the above requirement when it is documented that the health and safety of children would not be endangered.
60. Any person whose children are removed from his/her custody because of abuse or neglect shall not be issued a license.
 - A. A person who has relinquished or otherwise lost custody of his/her children shall present documentation to the Department regarding the circumstances of this relinquishment, for consideration in determining the suitability of the Family Child Care Home.
61. No Caregiver, or other household member, shall be diagnosed or under treatment for a serious mental illness which might create a significant risk of harm to children. The determination as to whether a mental illness might create a significant risk to children shall be made on the basis of written documentation by a licensed psychologist or psychiatrist.
62. No Caregiver or other household member present in the home while children are in care shall be under the influence of illegal drugs or alcohol. A Caregiver under the influence of illegal drugs or alcohol while providing child care shall be considered absent in the capacity of Caregiver and therefore is evidence of child neglect.
 - A. The Caregiver shall not take any substance or medication which would impair his/her ability to care for children.
63. The Caregiver shall have no other employment during the hours that children are in care.
64. The Caregiver shall not be licensed or approved to care for convalescent, aged or patients requiring nursing care.

65. The Caregiver shall not provide foster care for children or adults without the prior written approval of the Department.
 - A. The decision for dual service shall be made by the Administrator based upon the recommendation of the Specialist and Foster Home Coordinator of the placing agency. The recommendation shall consider the specific needs of potential child care children and foster care placements.
 - B. The written approval shall include the number and ages of children/adults to be cared for in each program in accordance with requirements.
 - C. The decision for dual service shall be reviewed periodically.
 - D. Foster children of preschool age and younger shall be counted in the capacity of the Family Child Care Home.
66. The Caregiver shall not discriminate on the basis of sex, race, religion, cultural heritage, disability, marital status, or economic status.

ORIENTATION

67. A Caregiver shall:
 - A. Have completed six (6) hours of orientation/training provided by the Department which will include but is not limited to such topics as Licensing Requirements for Family Child Care Homes, child development, child guidance and discipline, health and safety, child abuse awareness and reporting, nutrition and business practices.
 - B. Prior to licensure, present documentation of current certification in pediatric first aid including rescue breathing and first aid for choking. Certification shall be renewed at intervals required by the certifying agency.

CAREGIVER RESPONSIBILITIES

General

68. The Caregiver shall give the parent of each child enrolled in the Family Child Care Home a copy of "Licensing Information for Parents" as furnished by the Department. The Caregiver shall have written verification that each parent has received a copy.
69. The Caregiver shall have written verification that each parent of an enrolled child has received a copy of:
 - A. Procedures related to the release of children;
 - B. Policy and procedures on discipline and guidance of children; and
 - C. Policy on health and prevention of communicable diseases, injuries and child abuse/ neglect.
70. The Caregiver shall release children only to persons authorized by the parent(s) who has placed the child(ren) in care.
71. The Caregiver shall have and use written policy and procedures for the release of children including:
 - A. Procedures for emergency release of children;
 - B. Procedures regarding the release of the child to any person not known to the Caregiver;
 - C. Procedures for handling situations in which a noncustodial parent attempts to claim the child without the consent of the custodial parent; and
 - D. Procedures to be followed when a person not authorized to receive a child, or a person who is intoxicated or otherwise incapable of bringing the child home safely, requests release of a child.
72. Parents shall have free access to areas of the home used for child care while their children are in care.
73. The Caregiver shall have a regular system of communication with parents concerning:
 - A. The child's daily activities and routines;

- B. The child's developmental progress and concerns about the child's development and behavior; and
 - C. Accidents, injuries, illnesses, and other critical incidents.
74. The Caregiver shall report any suspected or alleged incident of child abuse and neglect to the Child Abuse/Neglect Reporting Number and shall cooperate fully in the investigation of any incident. The Toll-free number is 1-800-292-9582.
75. The Caregiver shall report by telephone to the Department within one (1) working day:
- A. Any accident, injury or illness occurring while a child is in care and resulting in in-patient or out-patient hospital treatment or death; or
 - B. A fire which requires the services of the fire department.
 - C. The verbal report shall be followed by a written report on a form provided by the Department.
76. The Caregiver shall report to the Department within five (5) days:
- A. Any change in telephone number; or
 - B. Change in composition of household.
77. The Caregiver shall report to the Department any change in address thirty (30) days in advance of the move.

Training

78. During the Caregiver's initial year of licensure, a Caregiver shall participate in at least fifteen (15) hours of Department approved training which will assist the caregiver in beginning the Family Child Care Home operation. The training shall include nine (9) hours of child development, appropriate caregiving and guidance of children's behavior and six (6) hours of infection control, business practices, nutrition, health and safety.
79. During each subsequent year of licensure, a Caregiver shall participate in at least twelve (12) hours of Department approved training. Training shall include topics that will increase the provider's skill in working with children and their families and successfully operating the family child care home such as child development, curriculum development, serving children with special needs, working with children and their families, health and safety, nutrition, infection control and business practices.

Substitute Caregiver

80. The Caregiver shall have an arrangement with a substitute caregiver, at least eighteen (18) years of age, available to assist in emergency situations. The name, address and telephone number of the substitute person/persons shall be provided to the Department and shall be posted with other emergency numbers in the Family Child Care Home.
81. The Caregiver shall ensure the substitute is oriented to the licensing requirements and the policies and procedures of the Family Child Care Home.
82. In non-emergency situations, the Caregiver's arrangement with a substitute caregiver may be used for the following purposes:
- A. Vacations which last for no more than two (2) weeks, with care provided within the Caregiver's home;
 - B. Weekly, for things such as doctor's appointments, shopping, banking, school appointments, and classes;
 - C. Maternity leave, if the Caregiver is in the home; or
 - D. Medical leave, for situations such as surgery, and recovery from an injury.
83. Caregiver must inform the parents in advance that a substitute will be caring for their children at these times.
84. In situations when the substitute shall be providing care for more than two (2) weeks the Office of Child Care Licensing shall be notified.

85. The Caregiver or substitute caregiver shall be responsible for the direct supervision of children in care at all times.

CAREGIVER TO CHILD RATIO

86. The number of children in care in a Family Child Care Home shall not exceed six (6), including preschool age or younger children who are living in the home, as provided on the Family Child Care License. The age distributions and the addition of part-time school-aged children shall be determined by the extent of the Caregiver's training and experience in child care.

Level I Family Child Care Home

87. To qualify as a Level I Family Child Care Home, the Caregiver shall have met all of the conditions for initial licensure. A Level I Family Child Care Home may be licensed for one of the following:
- A. Licensed to care for four (4) children, of whom no more than three (3) shall be under the age of two (2) years, with no more than two (2) children under twelve (12) months. Before/after school care for no more than two (2) additional children of school age may be provided for no more than a total of six (6) hours per day; or
 - B. Licensed to care for five (5) children, of whom no more than three (3) shall be under the age of two (2), with no more than two (2) children under twelve (12) months. Before/after school care of school-aged children is not permitted.
 - C. Appendix, Level I Ratios, provides a list of the possible variations of children by age groups permitted in each option of this requirement.

Level II Family Child Care Home

88. A Caregiver who is licensed before the effective date of these requirements shall have two (2) calendar years from the effective date to meet the qualifications for a Level II Child Care Home. A caregiver licensed after these requirements become effective shall meet the qualifications of these requirements for a Level II Child Care Home.
89. To qualify as a Level II Family Child Care Home a Caregiver shall have met one of the following criteria:
- A. Licensed at Level I for twenty-four (24) months with no substantiated complaints or substantial noncompliance and completion of forty (40) clock hours of Department approved training; or
 - B. Have twenty-four (24) months of experience providing care for children preschool age or younger in a group setting and completed forty (40) clock hours of Department approved training; or
 - C. Have twenty-four (24) months of experience providing care for children preschool age or younger in a group setting and hold a Certificate of Completion from a vocational or technical high school child care program.
 - D. Hold NAFDC (National Association of Family Day Care) accreditation with no substantiated complaints or substantial noncompliance and completed twenty (20) clock hours of Department approved training or equivalent course work; or
 - E. Hold a CDA (Child Development Associate) credential with no substantiated complaints or substantial noncompliance; or
 - F. Hold a certificate, associate's or bachelor's degree in early childhood development and education.
 - G. Credentials awarded more than seven (7) years prior to the date of application shall be reviewed carefully unless the current and primary occupation of the applicant is in a field related to early care and education.
 - H. Documentation of one of the above must be submitted to and approved by the Office of Child Care Licensing, and a Level II license issued prior increasing the number of children in the Family Child Care Home.

90. A Level II Family Child Care Home may be licensed for one of the following:
 - A. Licensed to care for six (6) children, of whom no more than four (4) shall be under the age of two (2) years, with no more than two (2) children under the age of twelve (12) months. Before/after school care for no more than two (2) additional children of school age may be provided for no more than a total of six (6) hours per day.
 - B. Licensed to care for six (6) children, of whom no more than three (3) shall be under the age of two (2) years, with no more than two (2) children under the age of twelve (12) months. Before/after school care for no more than three (3) additional children of school age may be provided for no more than a total of six (6) hours per day.
 - C. Licensed to care for five (5) children, of whom no more than four (4) shall be under the age of two (2), with no more than three (3) children under the age of twelve (12) months with no before/after school care; or licensed to care for four (4) children under the age of two (2), with no more than three (3) children under the age of twelve (12) months, and care to be provided for no more than two (2) school-aged children for no more than a total of six (6) hours per day.
 - D. Appendix, Level II Ratios, provides a list of the possible variations of children by age groups permitted in each option of this requirement.
91. A caregiver who is licensed before the effective date of these requirements shall have two (2) calendar years from the effective date to meet these infant and toddler ratios.
92. Full-day care may be provided to school-aged children on school closing days and school vacations.
 - A. During winter vacation, spring vacation and summer vacation, the number of school-aged children must be no more than the number permitted under the current child care home license as described in Requirements 86, 87 and 90.
 - B. During these vacation periods, the Caregiver is permitted to use a helper to assist with child care under the direct supervision of the Caregiver or substitute caregiver.
93. If a Family Child Care Home is not licensed to provide before and after school care, the Family Child Care Home may provide care for two additional children for a maximum of two hours per day. At no time may the number of children younger than two years of age exceed the infant/toddler capacity. The Caregiver shall notify the Department in writing of the specific children and times involved in the change of shift situation.

PHYSICAL ENVIRONMENT

General

94. The physical facilities of the home and grounds shall present no hazard to the health and safety of the children.
 - A. Parents shall be informed about the presence of smokers in the home. Smoking shall not be permitted when the Caregiver is in direct physical contact with children.
 - B. Parents shall be informed of the presence of pets in the household.
95. The Family Child Care Home and its furnishings shall be kept in a clean and safe condition. All walls, floors, ceilings and other surfaces shall be clean and in good repair.
96. The Family Child Care Home shall be kept free from rodent and insect infestation.
97. Screens in good repair shall be used on all windows, doors or other openings to the outside used for ventilation.
98. The Family Child Care Home shall be kept heated at a temperature of at least 65 degrees Fahrenheit.
99. Furnaces, water heaters, heating appliances, pipes, fans and other similar devices shall be kept in a safe condition and inaccessible to children.
 - A. Use of portable, open-flame, and kerosene space heaters is prohibited.
 - B. Hot water pipes, steam radiators, electric space heaters, and wood-burning stoves shall be equipped with protective guards or

- insulated to protect children against burns.
 - C. Electric space heaters shall be UL-approved, inaccessible to children, and stable.
 - D. Fireplaces shall be securely screened or equipped with protective guards while in use.
100. Protective receptacle covers shall be placed in all electrical outlets not in use and accessible to the children.
 101. The Family Child Care Home shall have a working telephone. If a telephone is forbidden by religious beliefs, a telephone must be available within a short walking distance. Telephone numbers of the nearest hospital, ambulance, police department, fire department and poison control center shall be posted on or by each telephone.
 102. An operable flashlight shall be accessible at all times.
 103. Clear glass doors shall be clearly marked at a child's eye level.
 104. Stairways, inside and outside, over four steps shall have railings. Safety gates approved by the American Society for Testing and Materials (ASTM) at stairways shall be used at all times when infants and toddlers are in care.
 - A. If the physical characteristics of the Caregiver's home do not permit the installation of a safety gate(s) in accordance with the manufacturer's instructions, then the Caregiver shall implement a plan which will safely prevent the access of infants and toddlers to stairways.
 105. Animals or household pets shall be permitted provided that there is proof of rabies and other current required vaccinations for each animal. Animals shall be free from disease and shall be cared for in a safe and sanitary manner.

First Aid

106. First aid kits shall be readily available in the Family Child Care Home and in vehicles used for transporting children in care:
 - A. The first aid kit in the Family Child Care Home shall contain the following:
 - i. Disposable nonporous gloves;
 - ii. Scissors;
 - iii. Tweezers;
 - iv. Safety pins;
 - v. Thermometer;
 - vi. Current American Academy of Pediatrics or American Red Cross standard first aid text or equivalent first aid guide;
 - vii. Poison Control Center telephone number;
 - viii. Self-adhesive bandages; and
 - ix. Syrup of ipecac, not to be used without consulting the Poison Control Center or physician and not to be used after the expiration date on the bottle.
 - B. In vehicles used for transporting children the following materials in addition to those cited in Requirement 106A must be included in the first aid kit:
 - i. Bandage tape;
 - ii. Sterile gauze pads;
 - iii. Flexible roller gauze;
 - iv. Triangular bandages;
 - v. Pen/pencil and note pad;
 - vi. Cold pack;
 - vii. Coins for use in a pay phone; and
 - viii. Water and soap, or antiseptic wipe.

Space

107. The Family Child Care Home shall provide each child with adequate space for free movement and active play.

108. An outdoor play area, protected from hazards, shall be available on the premises or within walking distance of the home. Outdoor play areas shall be free of animal feces, toxic plants, debris, or other materials that may present hazards to children in care.
- A. Tool sheds, garages, and other outdoor facilities that are off-limits to children shall be securely latched and inaccessible while children are in care.

Sanitation

109. The kitchen and all food preparation, storage and serving areas and utensils shall be kept clean. The kitchen shall have hot and cold running water.
110. The plumbing shall be kept in good working condition.
111. The Family Child Care Home shall have at least one indoor flushing toilet and one sink with hot and cold running water.
112. Handwashing procedures shall follow recommendations of the Center for Disease Control, to prevent the spread of illness. Hands shall be scrubbed for a minimum of ten (10) seconds using soap and warm running water.
113. Adults and children shall wash their hands at least at the following times, and whenever hands are contaminated with body fluids:
- A. Before any food service activity including preparation, table setting, handling, or serving;
- B. After toileting or changing diapers;
- C. After assisting a child with toilet use or nose wiping, and after a child has vomited;
- D. Before and after eating meals or snacks; or
- E. After handling pets or other animals.
114. Soap and toilet paper shall be available at all times. Paper towels or individual clean cloth towels for each child shall be available.
- A. If cloth towels are used, they shall be washed or replaced daily.
115. Garbage shall be kept in containers in an area inaccessible to children or securely covered.
- A. Garbage and rubbish shall be removed daily from rooms occupied by children and Caregiver.
- B. Garbage and rubbish shall be removed from the premises on a regular basis but not less than once a week.

Diapering and Toileting

116. The Caregiver shall ensure the diaper-changing area is:
- A. Separate from food preparation and serving areas;
- B. Easily accessible to a handwashing sink;
- C. Non-absorbent and washable; and
- D. Disinfected between use for different children or protected by a disposable covering discarded after each use.
117. The Caregiver shall:
- A. Use cloth diapers or disposable diapers;
- B. Place non-disposable soiled diapers and training pants without rinsing into a separate leakproof plastic bag, labeled with the child's name, before transporting to a laundry or returning to the child's parent;
- C. Place soiled disposable diapers into a cleanable, covered container with a leakproof liner;
- D. Remove all soiled diapers from the home daily or more often unless the Caregiver uses a commercial diaper service;
- E. Use disposable towels, disposable wipes or clean, reusable towels laundered between use for different children for cleaning the child; and

- F. Immediately wash her/his hands and the hands of the child after diapering or helping the child with toileting.
118. The Caregiver shall:
- A. Use toilet training chairs only in an area separate from food preparation areas;
 - B. Locate toilet training chairs in an area which ensures children's privacy and adequate supervision;
 - C. Consult with the child's parent regarding initiating toilet training;
 - D. Locate toilet training equipment on washable, non-absorbent surfaces when in use; and
 - E. Disinfect toilet learning equipment after each use.
119. The Caregiver shall take reasonable measures to reduce the spread of communicable disease among children in the Family Child Care Home by:
- A. Using only washable toys with diapered child(ren);
 - B. Washing washable toys on a regular basis;
 - C. Cleaning stuffed toys that are provided by the Family Child Care Home;
 - D. Washing toys mouthed by one child before they are used by another child; and
 - E. Washing pacifiers and other items placed in the mouth if dropped to the floor or ground.

Universal Precautions

120. The Caregiver shall employ universal precautions for protection from disease and infection. Spills of body fluids (i.e., urine, feces, blood, saliva, nasal discharge, eye discharge, and injury or tissue discharges) shall be cleaned up immediately, as follows:
- A. For spills of vomit, urine, and feces on any surface including the floors, walls, bathrooms, table tops, toys, kitchen counter-tops, and diaper-changing tables, the area shall be cleaned and disinfected.
 - B. For spills of blood or blood-containing body fluids and injury and tissue discharges, the area shall be cleaned and disinfected. Gloves shall be used in these situations unless the amount of blood or body fluid is so small that it can easily be contained by the material used for cleaning.
 - C. Persons involved in cleaning contaminated surfaces shall avoid exposure of open skin sores or mucous membranes to blood or blood-containing body fluids and injury or tissue discharges by using gloves to protect hands when cleaning contaminated surfaces.
 - D. Blood-contaminated material and diapers shall be disposed of in a plastic bag with a secure tie.
 - E. Mops shall be cleaned, rinsed, disinfected, wrung dry and hung to dry.

Disinfectant Solution

121. The disinfectant solution to be used by the Caregiver shall be a self-made solution consisting of one-fourth cup of household bleach to each gallon of water, which shall be prepared daily, labeled, placed in a bottle that is sealed with a cap and stored out of the reach of children.
- A. The sanitizing solution for dishwashing is one (1) teaspoon of bleach to one (1) gallon of water, should the caregiver choose to sanitize dishes.

Fire and General Safety

122. Stairways, hallways and exits from rooms and from the home shall be unobstructed. Approved, easily opened protective gates and other safety devices for the protection of infants and toddlers are permitted.
123. Every room used for child care shall have at least two exits, at least one of which shall be a door or stairway providing unblocked travel to the outside of the home at street or ground level. No room or space shall be used for child care which is accessible only by ladder, folding stairs, or through a trap door.

124. Children shall be cared for in ground level space in the Family Child Care Home.
 - A. Basement level space may be used by children in care only if there is at a door that exits directly to the outside at ground level and at least one window which is easily openable, is no more than 44" inches above the floor, and has an opening 20" wide and 24" high, or there are two (2) doors, one of which exits directly to the outside at ground level.
125. Each door used as an exit shall not be less than **32** inches wide.
126. Every closet door latch shall be designed so that children can open the door from inside the closet.
127. Every bathroom door lock shall be designed to permit the opening of the locked door from the outside in an emergency and the opening device shall be readily available to the Caregiver.
128. An operable smoke detector which is approved by a nationally recognized testing laboratory shall be installed on or 6 to 12 inches below the ceiling of each level of the home and the basement.
 - A. All enclosed sleeping areas, such as a bedroom, must have a properly installed smoke detector.
 - B. Smoke detectors shall be tested monthly, and the batteries replaced at least yearly.
129. Prior to licensure, an applicant must have an electrical inspection, conducted by an approved inspection agency, of the dwelling. Thereafter, an electrical inspection of the Family Child Care Home shall be conducted every five (5) years.
130. At a minimum, a portable dry chemical fire extinguisher rated 1A 10 BC, shall be provided in the kitchen. The extinguisher shall be used and maintained in accordance with the manufacturer's instructions.
131. Written fire evacuation procedures shall be established and practiced at least monthly from all exit locations at varied times of the day and during varied activities including nap time.
132. All flammable and hazardous materials, including matches and lighters, medicines, drugs, cleaning materials, detergents, aerosol cans, plastic bags, firearms, ammunition, and other similar materials and objects shall be stored safely in areas inaccessible to children.
 - A. Firearms and ammunition, if present in the home, shall be kept in a locked container or locked closet. Ammunition shall be kept separate from firearms.

EQUIPMENT

133. A variety and sufficient supply of play equipment and materials shall be provided that is appropriate to the ages, developmental needs and individual interests of the children.
134. All equipment shall be sturdy, safe, clean and free from rough edges, sharp corners, pinch and crush points, splinters and exposed bolts. Large outdoor equipment shall be anchored firmly and shall not be located on concrete or asphalt surfaces.
135. Each child shall have clean, age-appropriate and comfortable equipment for sleep or rest. Children shall not share bedding. Each child under twelve months of age and/or not walking, shall sleep in a crib, playpen or bed with side rails and firm mattress of washable, non-absorbent material. Mattresses shall fit tightly to prevent children's body parts from becoming wedged between mattress and crib or bed slats.
136. Each child in care between the hours of 8:00 P. M. and 6:00 A. M. shall have an individual bed equipped with comfortable springs, and mattress, covered with sheets, pillow, pillowcase and blankets.
137. Cribs, porta-cribs, cots, sleeping bags, mats, or pads shall be placed at least three (3) feet apart, unless separated by screens.
138. Crib and playpen slats shall be no more than 2-3/8 inches apart.
139. High chairs, when used, shall have a wide base and a T-shaped safety strap.
140. Infant walkers shall be used only under the Caregiver's direct visual supervision. Infants shall not be placed in walkers for extended periods of time.

141. All children shall be directly supervised at all times while children are wading or swimming. During any swimming activity involving infants and/or toddlers, the children shall be within arm's length of the caregiver.
 - A. Permanent or built-in type swimming pools and wading pools that are left filled when not in use, shall be inaccessible to children when not being used by the children. The water in swimming pools used by children in care shall be treated, cleaned and maintained in accordance with health practices and regulations as determined by the Division of Public Health.
 - B. Small portable or non-fixed wading pools shall be thoroughly cleaned and disinfected after each use.

PROGRAM FOR CHILDREN

142. The Caregiver shall provide varied activities designed to promote the development of language and thinking skills, large and small muscles, social skills, self-esteem and positive self-image, as appropriate to the ages and functioning levels of children in care.
143. The daily routine shall include regular times for all of the following:
 - A. Indoor and outdoor time periods with:
 - i. alternating active and quiet activities,
 - ii. opportunity for individual and group activities,
 - iii. opportunities for children to choose materials freely,
 - iv. activities that can be done independently and activities that require adult supervision,
 - v. outdoor time each day;
 - B. Rest or sleep; and
 - C. Meals and snacks.
144. Children shall have periods of outside play each day.
 - A. In the case of prolonged periods of inclement weather, the Caregiver shall provide alternative indoor space for active physical play.
145. The Caregiver shall ensure that each child receives individual attention and physical comfort during routine caregiving and planned activities.
146. Children, including infants and toddlers, shall be talked with individually throughout the day. The Caregiver shall initiate conversations with children and shall respond positively to children's communications.
147. The majority of every infant's waking hours shall be spent out of cribs and playpens in a safe place where he/she may move and explore freely. An infant, when awake, may remain in a crib or playpen as long as the child is content but never for periods longer than one (1) hour.
148. Children shall be offered choices of activities and shall be encouraged to be independent in self-care and in assisting with household tasks in a manner consistent with their age and developmental level.
149. Television and videotape viewing shall be limited to no more than two (2) hours of age-appropriate programs during the hours children are in care.
 - A. Adult programming shall not be viewed by children.
150. School-age children shall be provided with supervised activities appropriate to their age and interests, including opportunities for:
 - A. Vigorous outdoor play;
 - B. Time to read or do homework;
 - C. Free play alone or with others; and
 - D. Creative and problem-solving activities.
151. Children are not permitted off the premises without the caregiver. An exception is made for children having written parental permission to be off the premises with a person other than the caregiver.

DISCIPLINE

152. The Caregiver shall have a written statement in plain language regarding the discipline and guidance of children. The statement on discipline shall be routinely provided to parents and substitute caregivers.
153. A Caregiver shall use positive developmentally appropriate methods of discipline and guidance of children which encourage self-control, self-direction, positive self-esteem and cooperation.
- A. Praise, rewards and encouragement shall be emphasized along with redirection of inappropriate behavior, rather than punishment.
 - B. Responses to a child's behavior shall be appropriate to the child's level of development and understanding.
 - C. "Time-outs " if used, shall be employed as a supplement to, not a substitute for, other developmentally appropriate, positive methods of discipline and guidance.
 - i. "Time-out" shall be limited to brief periods: approximately one minute for each year of a child's age.
 - ii. The Caregiver shall discuss the reasons for "time-out" in language appropriate to the child's level of development and understanding.
 - D. Corporal punishments inflicted in any way on a child's body including shaking, hair pulling, biting, pinching, slapping, or spanking shall be prohibited.
 - E. Children shall not be humiliated, frightened, or verbally, physically or sexually abused.
 - F. Children shall not be deprived of food or toilet use as punishments.
 - G. Children shall not be tied or placed in mechanical restraints as punishment.
 - H. If a child is removed from the group as a discipline measure, the child must remain under visual supervision. Children shall never be left unattended behind closed doors.
 - I. Children shall not be punished for not going to sleep, toileting accidents, failure to eat all or part of food or failure to complete a prescribed activity.

FOOD AND NUTRITION

154. Nutritional, appropriately scheduled meals and snacks shall be served to children in care for four (4) hours or more per day. No child is permitted to be without a meal or snack for excessively long periods of time.
- A. Exceptions to these meal and snack requirements shall only be made by written documentation by the child's health care provider.
155. All meals served to children, whether provided by the Caregiver or parents, shall have at least one (1) item from each of the following food groups, except where noted, so that the daily nutritional needs of children can be met (serving sizes to be used for each age group can be found in the Appendix of these Requirements):
- A. Dairy products: milk, milk products, cheese;
 - B. Protein group: meat, fish, poultry, eggs, peanut butter, dried beans, peas, cheese;
 - C. Two fruits or vegetables or one of each: including a wide variety of green, white, yellow and red vegetables and fruits; and
 - D. Grain group: whole grain and enriched breads, cereals, pasta, crackers, rice.
156. All snacks served to children shall include one item from two (2) of the four (4) food groups.
157. Meals for infants shall be provided according to the following guidelines:
- A. Formula and feeding schedules for each infant shall be designated by the parent(s).
 - B. Baby food, breast milk or formula, after it has been prepared from concentrate or after the container has been opened, shall be refrigerated. Any contents remaining in the bottle after a feeding shall be discarded.
 - C. Introduction of all new food shall be made in consultation with the

- D. parent(s).
 - D. Baby food for each child shall be served from a dish unless the whole contents of the jar will be served.
 - E. Bottles shall be labeled with the individual child's name when there is more than one infant in care.
 - F. Infants under six (6) months of age shall be held by the Caregiver while being bottle fed. No infant shall be placed in his/her crib with a bottle for feeding.
 - G. Bottle propping and carrying of bottles by young children throughout the day and night shall be prohibited.
158. All milk and milk products shall be pasteurized. Powdered milk may be used only for cooking.
- A. Only whole, pasteurized milk shall be served to children younger than 24 months of age who are not on formula or breast milk, except with the written direction of a parent and the child's health care provider.
 - B. Skim milk shall not be served, except with the written direction of a parent and the child's health care provider.
159. Refrigeration shall be used for perishable foods and shall maintain temperatures of 40 degrees Fahrenheit or below. Freezers shall maintain temperatures of 0 degrees Fahrenheit or below.

CHILD HEALTH

160. The Caregiver shall have on file an age-appropriate health appraisal for each child enrolled not more than 30 days following admission. Health appraisals shall be certified by a licensed physician or nurse practitioner and shall be updated yearly up to age 5 and then in accordance with the recommended schedule for routine health supervision of the American Academy of Pediatrics. For children below school age, the health appraisal shall include:
- A. Documentation of the immunization status, with a listing of day, month and year for each immunization, according to the recommendations of the Division of Public Health, as specified in Appendix, Immunization Schedules.
 - i. The Caregiver shall not permit a child to be admitted without written documentation from a licensed physician or nurse practitioner that the child has received at least one (1) dose of DPT or DT, one (1) dose of TOPV or IPV, the MMR vaccine and Hib conjugate vaccine, if required by the age of the child.
 - ii. If a child has not received adequate immunizations as required for his age, a written plan for updating the immunizations within a reasonable time frame is to be submitted to the Caregiver.
 - iii. Written documentation that all needed immunizations for that child have been completed shall be submitted to the Caregiver within four (4) months from the date of admission.
 - B. A description of any disability, sensory impairment, developmental variation, seizure disorder, or emotional or behavioral disturbance that may affect adaptation to child care (include previous surgery, serious illness, history of prematurity, etc. only if necessary for appropriate care);
 - C. An assessment of the child's growth based on developmental norms;
 - D. A description of health problems or findings from an examination or screening that need follow-up;
 - E. Results of screenings - vision, hearing, dental, nutrition, developmental, tuberculosis, hemoglobin, urine, lead, and so forth;
 - F. Dates of significant communicable diseases (e.g., chicken pox);
 - G. Prescribed medication(s) including information on recognizing, documenting, and reporting potential side effects;
 - H. A description of current acute or chronic health problems under or needing treatment;
 - I. A description of serious injuries sustained by the child in the past that required medical attention or hospitalization; and

- J. Special instructions for the Caregiver.
 - K. For school-age children, the health record may consist of a copy of the child's school health record.
161. A Caregiver may administer medication only upon completion of approved training in accordance with State law.
 162. The Caregiver shall report promptly to a parent any accidents, suspected illness, or other change observed in the health of a child.
 163. When a communicable disease occurs, the Caregiver shall immediately notify the parent of an exposed child so that the child may be observed for symptoms of the disease.
 164. The Caregiver shall require information from parents within 24 hours if the child has developed a known or suspected communicable disease, or if an immediate household member has developed such a disease.
 165. A Caregiver shall not permit a child who has symptoms of illness specified below to be admitted or remain in the Caregiver's home unless written documentation from a licensed physician, or verbal approval with written follow-up, states the child has been diagnosed and poses no serious health risk to the child or to other children. The parent, legal guardian, or other person authorized by the parent shall be notified immediately when a child has a sign or symptom requiring exclusion from the Family Child Care Home. The symptoms of illness for possible exclusion shall include, but not be limited to any of the following:
 - A. The illness prevents the child from participating comfortably in activities;
 - B. The illness results in a greater care need than the Caregiver can provide without compromising the health and safety of the other children; or
 - C. The child has any of the following conditions:
 - i. Temperature: Oral temperature 101 degrees or greater; axillary (armpit) temperature 100 degrees or greater; accompanied by behavior changes or other signs or symptoms of illness- until medical evaluation indicates inclusion in the facility. Oral temperature shall not be taken on children younger than 4 years (or younger than 3 years if a digital thermometer is used). Rectal temperature shall be taken only by persons with specific health training.
 - ii. Symptoms and signs of possible severe illness (such as unusual lethargy, uncontrolled coughing, irritability, persistent crying, difficult breathing, wheezing, or other unusual signs)- until medical evaluation allows inclusion;
 - iii. Uncontrolled diarrhea, that is, increased number of stools, increased stool water, and/or decreased form that is not contained by the diaper- until diarrhea stops;
 - iv. Vomiting illness (two or more episodes of vomiting in the previous 24 hours) until vomiting resolves or until a health care provider determines the illness to be non-communicable, and the child is not in danger of dehydration;
 - v. Mouth sores with drooling, unless a health care provider or health official determines the condition is noninfectious;
 - vi. Rash with fever or behavior change, until a health care provider determines that these symptoms do not indicate a communicable disease;
 - vii. Purulent conjunctivitis (defined as pink or red conjunctiva with white or yellow eye discharge), until 24 hours after treatment has been initiated;
 - viii. Scabies, head lice, or other infestation, until 24 hours after treatment has been initiated;
 - ix. Tuberculosis, until a health care provider or health official states that the child can attend child care;
 - x. Impetigo, until 24 hours after treatment has been initiated;
 - xi. Strep throat or other streptococcal infection, until 24 hours after initial antibiotic treatment and cessation of fever;
 - xii. Chicken pox, until at least 6 days after onset of rash or until all sores have dried and crusted;

- xiii. Pertussis, until 5 days of appropriate antibiotic treatment (currently; erythromycin) to prevent an infection have been completed and a licensed physician states in writing the child may return;
 - xiv. Mumps, until 9 days after onset of parotid gland swelling and a licensed physician states in writing the child may return;
 - xv. Hepatitis A virus, until 1 week after onset of illness or as directed by the health department when passive immunoprophylaxis (currently, immune serum globulin) has been administered to appropriate children and staff and a licensed physician states in writing the child may return;
 - xvi. Measles, until 6 days after onset of rash and a licensed physician states in writing the child may return;
 - xvii. Rubella, until 6 days after onset of rash and a licensed physician states in writing the child may return;
 - xviii. Unspecified respiratory illness if it limits the child's comfortable participation in activities or if it results in a need for greater care than can be provided without compromising the health and safety of other children.; or
 - xix. Herpetic gingivostomatitis (cold sores), if the child is too young to have control of oral secretions.
166. The Caregiver shall report any reportable communicable disease, listed in the table below, to the Division of Public Health in accordance with Division of Public Health procedures and follow instructions of the Division of Public Health in the handling of the illness.

TABLE OF REPORTABLE COMMUNICABLE DISEASES	
RESPIRATORY	GASTRO-INTESTINAL
Diphtheria	Giardiasis
German Measles	Hepatitis A
Hemophilus Influenza Disease	Salmonellosis
Measles (rubeola)	Shigellosis
Bacterial (spinal) Meningitis	
Mumps	
Pertussis (whooping cough)	
Rubella	
Tuberculosis	

- 167. The child may return to the Family Child Care Home when the symptoms are no longer present or a licensed physician/Division of Public Health indicates the child poses no serious health risk to the child or other children.
- 168. If a child who has already been admitted to the Family Child Care Home manifests any of the illnesses or symptoms specified in Requirements 159-160, the Caregiver shall ensure that the child's individual needs for rest, comfort, food, drink and appropriate activity are met until the child can be picked up by the parent(s) or suitably cared for elsewhere.
- 169. The Caregiver shall provide parents with a written health policy including guidelines for the prevention and control of communicable diseases, injuries, and child abuse.

CAREGIVER HEALTH

- 170. Upon initial application, the Caregiver shall provide written evidence of a health appraisals attesting to the health of the Caregiver(s), and the health of other adults who are regularly present in the home when children are in care. This includes other adults living in the home and substitute caregivers as described in Requirements 79. Copies of these health appraisals shall be kept on file in the Family Child Care Home and shall be updated to be consistent with household composition and whenever new substitutes are added. For children under six (6) years living in the home and helpers Requirement 154 shall be met.

- A. The health appraisal shall include, at a minimum:
 - i. Health history;
 - ii. Physical exam;
 - iii. Vision and hearing screening;
 - iv. Tuberculosis (Tb) screening;
 - v. A review of immunization status (measles, mumps, rubella, diphtheria, tetanus, and polio);
 - vi. A review of occupational health concerns;
 - vii. Assessment of need for vaccines against influenza, pneumococcus, and hepatitis B, and of risk from exposure to common childhood infections, such as parvovirus, CMV, and chicken pox; and
 - viii. Assessment of health related limitations or communicable diseases that may impair the Caregiver's ability to perform the job.
 - B. After initial Family Child Care Licensure, adults shall be required to provide written evidence of follow-up for known medical problems or as required by the Office of Child Care Licensing.
171. For each adult as noted in Requirement 164, there shall be written evidence of freedom from active infections of tuberculosis verified within one year prior to initial application, with further testing required at intervals recommended by the Division of Public Health.

TRANSPORTATION

172. The vehicle used to transport children in care shall be in good, safe working condition and licensed in accordance with State Law.
- A. A first aid kit and emergency contact information for all children shall be in the vehicle when children are transported.
173. Each child shall be secured in an individual safety restraint appropriate to the weight of the child at all times while the vehicle is in motion. All safety restraints shall be federally approved and so labeled. Safety restraints shall be installed and used in accordance with the manufacturer's specifications and shall be maintained in a safe working condition.
174. Children shall never be left unattended by an adult in a vehicle.

CHILD RECORDS

175. The Caregiver shall maintain an individual record for each child enrolled with the following information:
- A. The child's full name, address, telephone number, birth date, and date of enrollment;
 - B. Health appraisal reports;
 - C. Written consent signed by parent(s) regarding medications, or special dietary needs;
 - D. Written authorization signed by parent for emergency medical treatment;
 - E. Written permission signed by parent(s) for all transportation, trips and swimming activities provided by the Caregiver; and
 - F. Copies of reports of accidents, injuries or illnesses involving a child.
176. The Caregiver shall keep accessible at all times emergency contact information for each child in care. This information shall be provided upon enrollment and updated at least annually or upon changes in the information. This information shall include:
- A. Home and work addresses and telephone numbers of parents;
 - B. Name, address and telephone number of emergency contact person;
 - C. Name, address and telephone number of the child's physician or other health care provider;

- D. Health insurance coverage and policy number for child;
 - E. A statement of any special problems or needs of the child including allergies, existing illnesses or injuries, previous serious illnesses or injuries and any medication prescribed for long-term, continuous use;
 - F. Name of person(s) designated by parent(s) to whom the child may be released; and
 - G. Emergency contact information must accompany the child to all off-site excursions.
177. The Caregiver shall not disclose or permit the use of any information pertaining to an individual child or family unless the parent(s) of the child has granted written permission to do so, except in the course of performance of official duties and to employees or representatives of the Department.

APPENDIX

DELAWARE LICENSING LAW

Title 31, Chapter 3, Paragraphs 341 through 344, Delaware Code

§341. Definition of "boarding home."

For the purpose of interpreting the meaning of the words "boarding home," any person, association, agency, or organization is the keeper of a boarding home for children if, for hire, he or it:

- (1) Advertises or holds himself or itself out as conducting such a boarding home;
- (2) Has in custody or control one child or more under the age of 18, unattended by parents or guardian, for the purpose of providing such child or children with care, food or clothing for compensation.

Homes in which children have been placed by any child placement agency, properly licensed to place children in this State, shall not be regarded as "boarding homes."

§342. Powers of Division with respect to boarding homes for children.

Any person or association conducting a boarding home for children and all institutions, agencies, associations or organizations, receiving and placing or caring for the dependent, neglected or delinquent minors, including organizations providing care of children whether dependent or otherwise, in lieu of the care and supervision ordinarily provided by parents in their own homes for periods of less than 24 hours a day, must accord the Division or its authorized agents, right of entrance, privilege of inspection and access to its accounts and reports.

A person or association conducting a boarding home for children and all institutions, agencies, associations, or organizations, caring for dependent, neglected and delinquent children shall make reports at such time as is required by the Division, as to conditions of such boarding home, institution, agency, association, or organization, the manner and way in which children are taken care of, former addresses and such other information as will show the social status of the child, how and to whom dismissed, the extent and source of its income, the cost of maintenance, and such other reasonable information as will enable the Division to promote the general welfare of the children and to work out a general program for their care and protection.

The Division may prescribe reasonable standards for the conduct of such boarding home, institutions, agencies, associations or organizations and may license such of these as conform to such standards.

§343. Boarding home licenses; investigation; requirements

- (a) Any person conducting a boarding home for children and all such institutions, agencies, associations or organizations must obtain licenses annually from the Division; except, however, those institutions, agencies, associations, or organizations under state ownership and control and maternity wards of general hospitals. In the case of a person conducting a boarding home for children, such licenses shall not be issued to such person until the Division has made a thorough investigation and has determined in accordance with reasonable standards:
 - (1) the good character and intention of the applicant or applicants;
 - (2) that the individual home meets the physical, social, moral, mental, educational and religious needs of the average child.
- (b) In the case of institutions, agencies, associations or organizations, before such license is issued, the Division shall make a thorough investigation and favorably pass upon:
 - (1) the good character and intention of the applicant or applicants;
 - (2) the present and prospective need of the service rendered;
 - (3) the employment of capable, trained, and experienced workers;
 - (4) sufficient financial backing to ensure effective work;

- (5) the probability of the service being continued for a reasonable period of time;
- (6) whether the methods used and the disposition made of the children served will be to their best interests and that of society.

§344. Penalties for violations of subchapter.

Whoever violates a provision of this subchapter shall be fined not more than \$100 or imprisoned not more than 3 months, or both.

APPENDIX

CHILD ABUSE REPORTING LAW

An Act to amend Title 16, Delaware Code, chapter 9 Relating to Reporting of Cases of Abuse of Children
Section 1. Chapter 9, Title 16, Delaware Code, is amended by a new Chapter 9 to read as follows:

CHAPTER 9. ABUSE OF CHILDREN

901. Purpose

It is the purpose of this Chapter to provide for comprehensive protective services for abused and neglected children found in the State by requiring that reports of such abused and neglected children be made to the appropriate authorities in an effort to prevent further abuse or neglect and to assist those children and their parents or those persons legally responsible for them, in their own home to aid in overcoming the problems leading to abuse and neglect, thereby strengthening parental care and supervision and enhancing such children's welfare and preserving the family life whenever feasible.

902. Definition of Child Abuse and Neglect

For purposes of this chapter the term "child abuse and neglect" means the physical injury by other than accidental means, injury resulting in a mental or emotional condition which is a result of abuse or neglect, negligent treatment, sexual abuse, maltreatment, mistreatment, nontreatment, exploitation or abandonment, of a child under the age of 18 or of an individual who appears to be mentally retarded.

903. Reports Required

Any physician, and any other person in the healing arts including any person licensed to render services in medicine, osteopathy, dentistry, any intern, resident, nurse, school employee, social worker, psychologist, medical examiner or any other person who knows or reasonably suspects child abuse or neglect shall make a report in accordance with 904 of this Chapter.

904. Nature and Content of Report: To Whom Made

Any report required to be made under this Chapter shall be made to the Division of Child Protective Services, Department of Services for Children, Youth and Their Families. An immediate oral report shall be made by telephone or otherwise. Reports and the contents thereof including a written report, if requested, shall be made in accordance with the rules and regulations of the Division of Child Protective Services, or in accordance with the rules and regulations adopted by the Division.

905. Duties of the Receiving Agency

- (a) Upon receipt of a report submitted pursuant to this Chapter, the Division of Child Protective Services shall immediately investigate and take necessary action and shall offer protective social services toward preventing further child abuse or neglect as defined in 902 of this Chapter, safeguarding and enhancing the welfare of the abused or neglected person and preserving family life whenever possible. In performing any of these duties, the Division may utilize the facilities of any State or private agency and, whenever removal of the abused or neglected person appears necessary shall file an appropriate petition seeking removal of such person from the custody of his parent, guardian or other adult with whom he is living, an authorization to place such child in a suitable facility. If the injury or abuse is so serious that criminal prosecution is indicated, the Division shall, in addition to taking such action under this section as it deems necessary, report its findings to the Department of Justice and the Family Court, and/or to the police.
- (b) The Division shall establish in each county a registry of child protection for the purpose of maintaining a registry of information concerning each case of abuse or neglect required to be reported in said county by this

chapter. The files shall be confidential subject to the rules and regulations adopted by the Division.

(c) The Division shall keep in the manner prescribed and on forms furnished by it such information as shall be necessary in order to maintain a statewide central registry of all reports made in the State.

906. Immunity from Liability

Anyone participating in good faith in the making of a report pursuant to this chapter shall have immunity from any liability, civil or criminal, that otherwise exist and such immunity shall extend to participation in any judicial proceeding resulting from such report.

907. Child under Treatment by Spiritual Means not Neglected

No child who in good faith is under treatment solely by spiritual means through prayer in accordance with the tenets and practices of a recognized church or religious denomination by a duly accredited practitioner thereof shall for that reason alone be considered a neglected child for purposes of this chapter.

908. Evidence not Privileged

The physician-patient privilege, husband-wife privilege or any privilege except the attorney-client privilege, provided for by professions such as social work or nursing, covered by law or a code of ethics regarding practitioner-client confidences, both as they relate to the competency of the witness and to the exclusion of evidence, shall not pertain in any civil or criminal litigation in which a person's neglect, abuse, dependency, exploitation or abandonment is in issue nor in any judicial proceeding resulting from a report submitted pursuant to this chapter.

909. Penalty

Whoever knowingly and willfully violates this chapter shall be fined not more than \$100, shall be imprisoned not more than 15 days or both.

To Report Child Abuse/Neglect in Delaware, Call Toll-free: 1-800-292-9582

Recommended Childhood Immunization Schedule United States, January - December 2001

*Vaccines¹ are listed under routinely recommended ages. **Bars** indicate range of recommended ages for immunization. Any dose not given at the recommended age should be given as a "catch-up" immunization at any subsequent visit when indicated and feasible. **Ovals** indicate vaccines to be given if previously recommended doses were missed or given earlier than the recommended minimum age.*

Age ► Vaccine ▼	Birth	1 mo	2 mos	4 mos	6 mos	12 mos	15 mos	18 mos	24 mos	4-6 yrs	11-12 yrs	14-18 yrs
Hepatitis B ²	Hep B #1											
		Hep B #2			Hep B #3						Hep B ³	
Diphtheria, Tetanus, Pertussis ³		DTaP	DTaP	DTaP		DTaP ³				DTaP	Td	
<i>H. influenzae</i> type b ⁴		Hib	Hib	Hib	Hib							
Inactivated Polio ⁵		IPV	IPV	IPV ⁵						IPV ⁵		
Pneumococcal Conjugate ⁶		PCV	PCV	PCV	PCV							
Measles, Mumps, Rubella ⁷					MMR					MMR ⁷	MMR	
Varicella ⁸					Var						Var ³	
Hepatitis A ⁹									Hep A — in selected areas ⁹			

Approved by the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP),
and the American Academy of Family Physicians (AAFP).

APPENDIX

LEVEL I RATIOS

Requirement #87A Licensed for a maximum of 4 children and no more than 2 before and after school. No more than 3 children under 2 years old with no more than 2 children under 12 months old.

<u>Under 1 yr.</u>	<u>Under 2 yrs</u>	<u>Preschool</u>	<u>School Age Before & After School</u>	<u>Total</u>
2	1	1	2	4+2
1	2	1	2	4+2
0	3	1	2	4+2
0	0	4	2	4+2
0	2	2	2	4+2

Requirement #87B Licensed for a maximum of 5 children and no before and after school care. No more than 3 children under 2 years old with no more than 2 children under 12 months old.

<u>Under 1 yr.</u>	<u>Under 2 yrs</u>	<u>Preschool</u>	<u>School Age Before & After School</u>	<u>Total</u>
0	3	2	0	5
1	2	2	0	5
2	1	2	0	5
0	0	5	0	5
1	0	4	0	5
0	1	4	0	5

APPENDIX

Level II Ratios

Requirement #90A Licensed for a maximum of 6 children with no more than 4 children under the age of 2 years old with no more than 2 under 12 months old. No more than 2 before and after school.

<u>Under 1 yr.</u>	<u>Under 2 yrs</u>	<u>Preschool</u>	<u>School Age Before & After School</u>	<u>Total</u>
0	4	2	2	6+2
1	3	2	2	6+2
2	2	2	2	6+2
0	0	6	2	6+2

Requirement #90B Licensed for a maximum of 6 children with no more than 3 before and after school. No more than 3 children under 2 years old and no more than 2 children under 12 months old.

<u>Under 1 yr.</u>	<u>Under 2 yrs</u>	<u>Preschool</u>	<u>School Age Before & After School</u>	<u>Total</u>
0	0	6	3	6+3
0	3	3	3	6+3
1	2	3	3	6+3
2	1	3	3	6+3

Requirement #90C Infant/Toddler Home (Option 1)
Licensed for a maximum of 5 children with no more than 4 children under 2 years old and no more than 3 children under 12 months old. No before and after school care.

<u>Under 1 yr.</u>	<u>Under 2 yrs</u>	<u>Preschool</u>	<u>School Age Before & After School</u>	<u>Total</u>
3	1	1	0	5

Requirement #90C Infant/Toddler Home (Option 2)
Licensed for a maximum of 4 children with no more than 4 under 2 years old and no more than 3 children under 12 months old. No more than 2 before and after school.

<u>Under 1 yr.</u>	<u>Under 2 yrs</u>	<u>Preschool</u>	<u>School Age Before & After School</u>	<u>Total</u>
3	1	0	2	4+2

**APPENDIX
NUTRITION STANDARDS - SERVING SIZES**

MEAL COMPONENTS	AGES 1-2	AGES 3-5	AGES 6-12
<u>BREAKFAST</u>			
milk	½ cup	¾ cup	1 cup
Juice or Fruit or Vegetable	¼ cup	½ cup	½ cup
Bread or Bread Alternate	½ slice	½ slice	1 slice
including cereal, cold dry	¼ cup of 1-3 ounce	1/3 cup or ½ ounce	¾ cup or 1 ounce
or cereal, hot cooked	¼ cup	¼ cup	½ cup
<u>SNACK (SUPPLEMENT)</u> Select 2 out of 4 components			
Milk	½ cup	½ cup	1 cup
Juice or Fruit or Vegetable	½ cup	½ cup	¾ cup
Meat or Meat Alternate	½ ounce	½ ounce	1 ounce
Bread or Bread Alternate	½ slice	½ slice	1 slice
including cereal, cold dry	¼ cup or 1/3 ounce	1/3 cup or ½ ounce	¾ cup or 1 ounce
or cereal, hot cooked	¼ cup	¼ cup	½ cup
<u>LUNCH OR SUPPER</u>			
Milk	½ cup	¾ cup	1 cup
Meat or Poultry or Fish	1 ounce	1 ½ ounces	2 ounces
or egg	1	1	1
or cheese	1 ounce	1 ½ ounces	2 ounces
or cooked dry beans or peas	¼ cup	3/8 cup	½ cup
or peanut butter and other "butters"	2 Tbsp.	3 Tbsp.	4 Tbsp.
nuts and seeds	½ ounce*	¾ ounce*	1 ounce*
Vegetables and/or Fruit (2 or more total)	¼ cup	½ cup	¾ cup
Bread or Bread Alternate	½ slice	½ slice	1 slice

Milk includes whole milk, lowfat milk, skim milk, cultured buttermilk, or flavored milk made from these types of fluid milk which meet State or local standards.

Bread Alternate may also include an equivalent serving of items such as roll, biscuit, muffin, cooked enriched or whole-grain rice, macaroni, noodles, or other pasta products.

* Nuts and seeds may be credited towards meeting only 50% of the meat/meat alternate requirement.