

DELACARE

REQUIREMENTS FOR LARGE FAMILY CHILD CARE HOMES

STATE OF DELAWARE

DEPARTMENT OF SERVICES FOR CHILDREN, YOUTH AND THEIR FAMILIES

NOTICE OF RESCISSION AND PROMULGATION

The Division of Program Support, Department of Services for Children, Youth and Their Families, adopts and promulgates the following licensing requirements for large 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

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 Large 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, now under the title of "Delacare: Requirements for Large 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 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 more accurately and consistently.

The Department appreciates the contributions of all the individuals in the development of "Delacare: Requirements for Large 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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Document 37-06-10-98-08-33

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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 large family child care services.

GENERAL PROVISIONS

DEFINITION OF REGULATED SERVICE

3. Large Family Child Care Homes provide care, education, protection, supervision and guidance for seven (7) to twelve (12) children, including preschool children who are related to the owner and/or caregivers excluding care provided by 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. "Associate Caregiver" means a person, working under the observation and supervision of a Caregiver, who performs direct child care functions and related duties and meets the qualifications specified in Requirements.
6. "Caregiver" means the person who is responsible for the direct care, education, protection, supervision and guidance of the children in a Large Family Child Care Home.
7. "Child" means any person who has not reached the age of eighteen (18) years and in the care of the Large 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 Services.
11. "Helper" means a youth, at least ten (10) years of age and three years older than oldest child in care, who assists the Large Family Child Care Home with child care. A Caregiver or substitute caregiver must be present when a helper is used.
12. "Infant" means any child who is under the age of twelve (12) months.
13. "Infant/Toddler Home" means a Large Family Child Care Home licensed to care for twelve infants and/or toddlers. An Infant/Toddler Home may provide care for children other than infants and toddlers in accordance with the Requirements for Large Family Child Care Homes.
14. "Institutional Abuse" occurs when persons responsible for a child's care in an out-of-home setting jeopardizes the well-being of a child which does or can result in physical or emotional injury.
15. "Large Family Child Care Home" means a private home or non-residential setting in which child care is provided for seven (7) to twelve (12) children at any one time who are not relatives of the Caregiver is provided.
16. "LFCCH" means a Large Family Child Care Home.

17. "Owner" means the person(s), firm, partnership, association, organization, corporation or governmental entity with legal responsibility for and authority over the operation of the Large Family Child Care Home.
18. "Office of Child Care Licensing" means the organization authorized by the Department to assume specified licensing responsibilities pursuant to **31 Del. C.** Ch.3, **29 Del.C.** § 9003.
19. "Parent" means the child's natural or adoptive mother or father, guardian, or other legally responsible person.
20. "Preschool Child" means a child two (2) through four (4) years of age.
21. "Regular Basis" means child care services which are available and provided at a Large 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 LFCCH to provide direct care, education, protection, supervision and guidance of the child in the LFCCH when the Caregiver or Associate Caregiver is not present.
27. "Toddler" means a child between the ages of twelve (12) and twenty-four (24) months of age.
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 LFCCH.

GENERAL REQUIREMENTS

29. No person shall operate, establish, manage, conduct, assist in or maintain a LFCCH, or hold out, advertise or represent by any means to do so, without first obtaining a license from the Department pursuant to **31 Del. C.**, Chapter. Any person so involved shall be subject to criminal or civil penalties in accordance with State Law.
30. Any Group Day Care Homelicense issued prior to the effective date these requirements is considered valid until the date the license expires. Upon expiration of the current Group Day Care Home license, a LFCCH license must be obtained.
31. A license shall be issued only to the LFCCH for which application is made and for the address shown on the application and shall not be transferable, assignable or subject to sale.
32. When a LFCCH is sold, leased or discontinued or the operation has moved to a new location or the license has been revoked, the current license immediately becomes null and void and shall be returned to the Department.
33. The LFCCH shall comply with any restrictions on the maximum number of children in care which may be placed upon the LFCCH by other applicable regulatory codes such as those related to fire safety and zoning.
34. The license shall be posted in a place conspicuous to the public. The license shall state the number of children the LFCCH is authorized to have in care at any one time.

35. A LFCCH shall allow Department representatives to inspect all aspects of the operation which impact on children in care. A LFCCH 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.
36. The Department is authorized to request the appropriate State and local fire, health and building officials to conduct inspections and examinations of a LFCCH to determine compliance with State and local ordinances, codes and regulations with reports submitted to the Department.
37. An investigation shall be made if a complaint is received by the Department. The Department shall notify the LFCCH that a complaint is being investigated. The results of the Department's investigation shall be reported in writing to the LFCCH investigated. If the complaint is substantiated or if other violations are found as a result of the investigation the LFCCH shall be required to correct the violations and come into full compliance with the State Law and licensing requirements promulgated by the Department.

TYPES OF LICENSES

38. No fee shall be charged for the license.

Annual

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

Provisional

40. A provisional license may be issued for a period not to exceed six (6) months, whenever a LFCCH is temporarily unable to comply with all of the requirements in the Requirements for Large Family Child Care Homes.
41. A provisional license may be issued when the Department determines that:
 - A. A LFCCH is temporarily unable to comply with all of the requirements in the Requirements for Large 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 LFCCH.
 - C. The LFCCH has a plan of correction that has been approved by the Department.
42. A provisional license may be replaced with an annual license when all of the following conditions exist:
 - A. In accordance with a corrective action plan agreed to by the Department and the LFCCH, the LFCCH 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 LFCCH.
 - C. The LFCCH 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 license remain the same.
43. A request to replace a provisional license and to issue an annual license must be made in writing by the LFCCH to the Administrator.

PROCEDURES FOR INITIAL LICENSURE

44. Upon inquiry, an individual shall be mailed or given application materials.
45. The individual must apply for a license on a form provided by the Department and shall complete the application materials as stipulated.

46. Within ninety (90) days after receipt of a completed application, a Department representative will make a reasonable effort to:
 - A. Provide consultation to aid the applicant in complying with the requirements for Large Family Child Care Homes;
 - B. Review the application, confer with the applicant, and inspect the premises for which the application is made;
 - C. Request appropriate authorities to verify compliance with applicable fire safety regulations, environmental health regulations, nutritional standards, building codes, zoning ordinances and other State and local laws;
 - D. Make a recommendation to the Administrator regarding licensure. An annual license shall be issued if the LFCCH meets all the requirements set forth in the Requirements for Large Family Child Care Homes. If a license is denied, the LFCCH 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 LICENSURE

47. A LFCCH shall request from the Department a license application form at least ninety (90) days before the expiration of the LFCCH's current license.
48. A LFCCH shall submit the completed application to the Department at least sixty (60) days prior to license expiration.
49. The Department may conduct a review, including an on-site visit of the LFCCH, no later than thirty (30) days before expiration of the current license.
50. The Department representative shall make a recommendation to the Administrator regarding licensure. An annual license shall be issued if the LFCCH meets all the requirements set forth in the Requirements for Large Family Child Care Homes. If a 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. If the Department cannot complete its review within the period set out in 46, the Administrator may extend the license for, a period not to exceed thirty (30) days.

SUSPENSION, REVOCATION OR DENIAL OF A LICENSE

51. The Department may suspend, revoke or deny a 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 LFCCH; 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 LFCCH 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 LFCCH; or
 - G. Any conduct or practice which is in violation of State Law and regulations related to child abuse and neglect.
52. 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

- 53. If a license is revoked, the LFCCH shall be notified by a letter stating the reason(s) for revocation and setting forth the LFCCH's rights to an appeal of the decision.
- 54. Any person aggrieved by a final decision of the Department made with regard to the granting of a 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.
- 55. 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. Revocation or denial shall not occur until a written decision is rendered.

VARIANCES

- 56. Upon written request of an applicant or LFCCH, 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.
- 57. 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 LFCCH. A variance may remain in effect for as long as a LFCCH continues to comply with the intent of the requirement or may be time-limited.
- 58. When a LFCCH fails to comply with a variance agreement in any particular, the agreement shall be subject to immediate cancellation.

PROVISIONS FOR OPERATION OF A LFCCH

ORGANIZATION

- 59. The Owner of a LFCCH shall ensure the LFCCH complies with the Requirements for Large Family Child Care Homes and all applicable Federal and State laws, ordinances and regulations.
- 60. The Owner shall appoint a person to serve as Caregiver of the LFCCH.

QUALIFICATIONS OF CAREGIVER

- 61. The Caregiver shall:
 - A. Be at least twenty-one (21) years of age and able to understand and carry out the Requirements for Large Family Child Care Homes.
 - B. Be physically and emotionally capable of performing activities normally related to providing child care, such activities include meeting a children's physical needs including 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.
- 62. The LFCCH shall ensure the Caregiver meets one of the following requirements:
 - A. Licensed as Level II Family Child Care provider for at least one year, or
 - B. Employed in a licensed day care center for one (1) year working directly with children and met the Caregiver qualifications, as defined in Delacare: Requirements for Day Care Centers, for that entire period, or
 - C. Nine (9) credit hours in Early Childhood Education and one (1) year of experience working with children in group setting, or

- D. Hold a Child Development Associate Credential (CDA).
- E. Have eighteen (18) 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.

Infant and Toddler Care

- 63. The LFCCH shall ensure that prior to accepting and caring for one (1) or more infant(s) and toddler(s), as described in Requirement 90, the Caregiver has completed a minimum of six (6) hours of Department approved training in infant/toddler caregiving.

First Aid Training

- 64. A Caregiver shall, prior to employment, 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.

LFCCH Licensed Prior to Effective Date

- 65. A Caregiver who is in that position at a particular LFCCH before the effective date of these requirements shall have two (2) calendar years from the effective date to meet the Caregiver qualifications as specified in Requirements 62 and 63. A person appointed Caregiver after these requirements become effective shall meet the qualifications of these requirements.
 - A. A Caregiver who is in that position at a particular LFCCH before the effective date of these requirements shall have 180 calendar days from the effective date to comply with Requirement 64. A person appointed Caregiver after these requirements become effective shall comply with Requirement 64.

Annual Training

- 66. A Caregiver shall participate in at least fifteen (15) hours of Department approved training annually. Training shall include topics such as: child development, appropriate caregiving and guidance of children's behavior, health, safety and infection control and business practices.

CHILD ABUSE AND NEGLECT

- 67. Reported and/or substantiated allegations of child abuse and/or neglect committed by an Owner, Caregiver, other household member or person working directly with children shall be considered in determining the suitability.
- 68. A LFCCH shall ensure no employee or volunteer, in any capacity, or household member, if applicable, 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.
- 69. A LFCCH shall not employ or retain in any capacity any person whose children are removed from his/her custody because of abuse or neglect.
- 70. A LFCCH shall ensure no employee or volunteer, in any capacity or household member, if applicable, has been diagnosed or under treatment for a serious mental illness which might create a risk to children. The determination as to whether a mental illness might create a risk to children shall be made on the basis of written documentation by a licensed psychologist or psychiatrist.
- 71. A LFCCH shall ensure no employee or volunteer, in any capacity, or household member, if applicable, is under the influence of illegal drugs or alcohol while children are in care. A Caregiver or Associate Caregiver under the influence of illegal drugs or alcohol while providing child

care shall be considered absent in the capacity of Caregiver or Associate Caregiver and therefore per se evidence of child neglect exists.

- A. No person working directly with children in a LFCCH shall take any substance or medication which would impair his/her ability to care for children.

PROVISION OF OTHER REGULATED SERVICES

- 72. The LFCCH shall not be licensed or approved to care for convalescent, aged or patients requiring nursing care.
- 73. The LFCCH 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 finder 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 LFCCH.

DISCRIMINATION

- 74. The LFCCH shall not discriminate on the basis of sex, race, religion, cultural heritage, disability, marital status, or economic status.

INFORMATION PROVIDED TO PARENTS AND ACCESS TO THE LFCCH

- 75. The LFCCH shall give the parent of each child enrolled in the LFCCH a copy of these requirements as furnished by the Department. The LFCCH shall have written verification that each parent has received a copy of each.
- 76. The LFCCH 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.
 - C. Policy on health and prevention of communicable diseases, injuries and child abuse.
 - D. Policy on pets, if pets will be present in the LFCCH.
- 77. The LFCCH 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.
 - C. Injuries, illnesses, and other critical incidents.
- 78. Parents shall have free access to areas of the LFCCH used for child care while their children are in care.

RELEASE OF CHILDREN

- 79. The LFCCH shall release children only to persons authorized by the parent(s) who has placed the child(ren) in care.
- 80. The LFCCH 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.
 - 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.

REPORTING REQUIREMENTS

81. The LFCCH 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.
82. The LFCCH 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-patient or out-patient hospitalization or death. The verbal report shall be followed by a written report on a form provided by the Department.
 - B. A fire which requires the services of the fire department.
83. The LFCCH shall notify to the Department in writing at least ninety (90) days before any of the following:
 - A. A planned change of ownership and/or sponsorship;
 - B. A planned change in location, name and/or telephone number of the LFCCH;
 - C. A planned change in composition of household, if applicable;
 - D. A planned reduction, addition or substantial change in the indoor or outdoor spaces of the LFCCH;
 - E. A planned change in the Caregiver;
 - F. A substantial planned change in services provided and/or population served;
 - G. A planned change in the hours of operation;
 - H. The LFCCH will give notice as soon as possible if any of the above changes occur without prior planning.

PERSONNEL

Qualifications of Associate Caregiver

84. The Associate Caregiver shall:
 - A. Be at least eighteen (18) years of age and able to read and carry out the Requirements for Large Family Child Care Homes.
 - B. Be physically and emotionally capable of performing activities normally related to providing child care, such normal activities include lifting or picking up a child, preparing and/or serving meals, 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.

Training of Associate Caregiver

85. The Associate Caregiver shall receive an orientation on the following:
 - A. Emergency and evacuation procedures;
 - B. LFCCH policies including discipline, health care, child care, sanitation procedures and release of children;
 - C. Child abuse and neglect law and reporting requirements;
 - D. Recognition of the symptoms of childhood illnesses, child abuse, sexual abuse and neglect;
 - E. Title VI Requirements;
 - F. Licensing Requirements.
86. During the first year of employment, the Associate caregiver shall obtain certification in pediatric first aid including rescue breathing and first aid for choking. The Associate Caregiver shall also complete six (6) hours of training in topics such as child development, appropriate caregiving and guidance of children's behavior.

87. During each subsequent year of employment, an Associate Caregiver shall maintain current first aid certification and shall complete twelve (12) hours of Department approved training. Training shall include topics such as child development, appropriate caregiving and guidance of children's behavior, health and safety, and infection control.

Substitute Caregiver

88. In addition to the Associate Caregiver, the LFCCH shall have an arrangement with a substitute caregiver, at least eighteen (18) years of age, available to assist in emergency situations when the licensee or second caregiver is unavailable. 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 LFCCH.
89. The LFCCH shall ensure the substitute caregiver receives orientation training in the following:
- A. Responsibilities of their particular functions;
 - B. Emergency and evacuation procedures, and;
 - C. LFCCH policies and procedures including discipline, child care, sanitation procedures and release of children.

NUMBER OF STAFF

90. The number of children in care in a LFCCH shall not exceed twelve (12), including preschool age or younger children who are living in the home, as provided on the license. The age distributions and the addition of part-time school-aged children shall be determined as follows:
- A. Type 1 LFCCH: Licensed to care for twelve (12) children, of whom no more than four (4) shall be under the age of two (2), and no more than two (2) under the age of one (1). A Type 1 LFCCH may provide before/after school care for no more than two (2) additional children of school-age, for no more than a total of four (4) hours per day.
 - i. If more than one (1) shift of care is provided, overlapping care between shifts may occur for no more than two additional (2) children for no more than two (2) hours per day.
 - ii. A Type 1 LFCCH shall not provide both before/after school care and overlapping care.
 - B. Type 2 LFCCH (Infant/Toddler Home): Licensed to care for twelve (12) children. School-age care and overlapping care shall not be permitted in an Type 2 LFCCH (Infant/Toddler Home.) If more than five (5) of the children are under the age of two (2), a second associate caregiver must be present.
 - i. If the Caregiver intends to seek approval as a Type 2 (Infant/Toddler Home), at least 20 hours of training must be completed in the areas of infant/toddler development and curriculum, and health, safety, and nutrition issues specifically related to infant/toddler caregiving.
91. 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 license as described in Requirement 90.
 - B. During these vacation periods, the LFCCH is permitted to use a helper to assist with child care under the direct supervision of the Caregiver or Associate caregiver. If the Caregiver's own children under the age of twelve (12), plus the licensed capacity, bring the total number of children to more than fourteen (14), a person, at least as qualified as a helper, must assist with child care during these vacation periods.

92. In non-emergency situations, the LFCCH may arrange for the Associate Caregiver to be in charge of the LFCCH with a substitute caregiver present for the following purposes:
 - A. Vacations which last for no more than two (2) weeks, with care provided within the LFCCH;
 - B. Weekly, for things such as doctor's appointments, shopping, banking, school appointments, and classes;
 - C. Maternity leave, if the LFCCH is in the Caregiver's home; and
 - D. The LFCCH must inform the parents in advance the Associate Caregiver will be caring for their children at these times with a substitute caregiver present.
93. The Caregiver, Associate Caregiver, or substitute caregiver, shall be responsible for the direct supervision of children in care at all times.
94. A Caregiver or Associate Caregiver shall be physically present at the LFCCH during the hours of operation.
95. An Associate Caregiver is required on the premises of the LFCCH when more than six (6) children are in attendance, or more than four (4) children under the age of one (1).
96. Every infant shall have an identified person who will assume the primary, but not the only responsibility for feeding, comforting, and otherwise caring for the infant's needs.

PHYSICAL ENVIRONMENT

General

97. The LFCCH shall ensure every building, or part thereof used as a LFCCH, is constructed, used, furnished, maintained and equipped in compliance with all applicable requirements established by Federal, State, local and municipal regulatory bodies,
 - A. The LFCCH shall have written certification of compliance from appropriate regulatory bodies governing zoning, building construction and safety, sanitation and fire safety.
98. The physical facilities of the LFCCH and grounds shall present no hazard to the health and safety of the children.
99. The LFCCH shall prohibit smoking in areas used by the children and in food preparation areas.
100. The LFCCH 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.
101. The LFCCH shall be kept free from rodent and insect infestation.
102. The LFCCH shall provide insect screening for all outer doors and openable windows when such doors and windows are used for ventilation, provided that all requirements for fire safety have been met. This screening shall be in good repair.
103. The LFCCH shall be kept heated at a temperature of at least 65 degrees Fahrenheit.
104. 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.
 - E. All floor and window fans in a LFCCH that are accessible to children shall have a grille, mesh or other protective covering that prevents a child from tampering with the blade of the fan.
105. Protective receptacle covers shall be placed in all electrical outlets not in use and accessible to the children.

106. The LFCCH shall have a working telephone.
- A. The LFCCH shall immediately notify the Department if telephone service to the LFCCH is to be discontinued or is no longer available.
 - B. If a telephone is forbidden by religious beliefs, a telephone must be available within a short walking distance.
 - C. Telephone numbers of the nearest hospital, ambulance, police department, fire department and poison control center shall be posted on or by each telephone.
107. An operable flashlight shall be accessible at all times.
108. Clear glass doors shall be clearly marked at a child's eye level.
109. 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 LFCCH does not permit the installation of a safety gate(s) in accordance with the manufacturer's instructions, then the LFCCH shall implement a plan which will safely prevent the access of infants and toddlers to stairways.
110. 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

111. First aid kits shall be readily available in the LFCCH and in vehicles used for transporting children in care.
- A. The first aid kit in the LFCCH 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
 - ix. Syrup of ipecac -- Not 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 111A 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
 - viii. Water
 - ix. Soap

Space

112. The LFCCH shall provide each child with adequate space for free movement and active play with a minimum of 35 square feet of usable floor space per child exclusive of hallways, bathrooms, lockers, cribs, laundry and furnace rooms, and kitchen areas.

113. An outdoor play area of 50 square feet of play space per child enclosed by fencing and 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, animal feces or other materials that may present hazards to children in care.
 - A. Fencing shall be sturdy, safe and reinforced at intervals so as to give adequate support.
 - B. 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

114. 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.
 - A. The LFCCH shall have a handwashing sink in the food preparation area, separate from the sink used for food preparation and dishwashing.
115. The plumbing shall be kept in good working condition.
116. The LFCCH shall have at least one indoor flushing toilet and one sink with hot and cold running water on the same level on which care is provided.
117. 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, from a dispenser, and warm running water.
118. 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.
 - E. After handling pets or other animals.
119. 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.

Diapering and Toileting

120. The LFCCH 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.
 - D. Disinfected between use for different children or protected by a disposable covering discarded after each use.
121. The LFCCH 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 separate, cleanable, covered container with a leakproof liner.
 - D. Remove all soiled diapers from the home daily or more often unless the LFCCH uses a commercial diaper service.
 - E. Use disposable towels or clean, reusable towels laundered between use for different children for cleaning the child.
 - F. Immediately wash their hands and the hands of the child after diapering the child or helping the child with toileting.
122. The LFCCH shall:
- A. Use toilet learning chairs only in an area separate from food preparation areas.
 - B. Locate toilet learning chairs in an area which ensures children's privacy and adequate supervision.
 - C. Consult with the child's parent regarding initiating toilet learning.
 - D. Locate toilet learning equipment on washable, non-absorbent surfaces when in use.
 - E. Disinfect toilet learning equipment after each use.
123. The LFCCH shall take reasonable measures to reduce the spread of communicable disease among children in the LFCCH 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 LFCCH.
 - D. Washing and disinfecting toys mouthed by one child before they are used by another child.
 - E. Washing and disinfecting pacifiers and other items placed in the mouth if dropped to the floor or ground.
124. 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.
 - B. Garbage and rubbish shall be removed from the premises on a regular basis but not less than once a week.

Universal Precautions

125. The LFCCH shall employ universal precautions. 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 the floors, walls, bathrooms, table tops, toys, kitchen counter-tops, and diaper-changing tables 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

126. The disinfecting solution to be used by the LFCCH shall be a self-made solution consisting of one-fourth cup 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 in one(1) teaspoon of bleach to one (1) gallon of water.

Fire and General Safety

127. Stairways, hallways and exits from rooms and from the LFCCH shall be unobstructed. Approved, easily opened protective gates and other safety devices for the protection of infants and toddlers are permitted.
128. Porches, elevated walkways and elevated play areas in a LFCCH, of more than two (2) feet in height shall have barriers to prevent falls.
129. 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.
130. Children shall be cared for in ground level space in the LFCCH.
 - A. Basement level space may be used by children in care only if there is at a minimum one door that exits directly to the outside at ground level and at least one window which is easily openable, 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.
131. Each door used as an exit shall not be less than 32 inches wide.
132. Every closet door latch shall be designed so that children can open the door from inside the closet.
133. 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.
134. 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 used by children 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.
135. 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 to manufacturer's instruction.
136. 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.
137. 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 in their original containers or properly labeled.
 - A. Firearms and ammunition, if present in the LFCCH, shall be kept in a locked container or locked closet. Ammunition shall be kept separate from firearms.

EQUIPMENT

138. A variety and sufficient supply of play equipment and materials shall be provided that are appropriate to the ages, developmental needs and individual interests of the children.
 - A. There shall be a sufficient amount of play equipment and materials so that there is not excessive competition and long waits.
139. 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.
140. Each child shall have clean, age-appropriate, individual 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.
141. 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, mattress, covered with sheets, pillow, pillowcase and blankets.
142. Cribs, porta-cribs, cots, sleeping bags, mats, or pads shall be placed at least 3 feet apart, unless separated by screens.
 143. Crib and playpen slats shall be no more than 2-3/8 inches apart.
 144. High chairs, when used, shall have a wide base and a T-shaped safety strap.
 145. 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.
 146. All children shall be directly supervised at all times while children are wading or swimming. There shall be a minimum of two adults present during any swimming activity involving two or more infants and/or toddlers.
 - 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 properly treated, cleaned and maintained. The pool structure and associated equipment shall be maintained in a safe manner and be free of hazards.
 - B. Small portable or non-fixed wading pools shall be thoroughly cleaned and sanitized after each use.

PROGRAM FOR CHILDREN

147. The LFCCH shall provide a written description of typical activities provided regularly in the LFCCH. It shall include 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.
148. 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. outdoor time each day; and
 - iv. opportunities for children to choose materials freely.
 - v. Activities that can be done independently and activities that require adult involvement and supervision.
 - B. Rest or sleep.
 - C. Meals and snacks.
149. Children shall have periods of outdoor play each day.
150. In the case of prolonged periods of inclement weather, the LFCCH shall provide opportunities active physical play.
151. The LFCCH shall ensure that each child receives individual attention and physical comfort during routine caregiving and planned activities.
152. Children, including infants and toddlers, shall be talked with individually throughout the day. The staff of a LFCCH shall initiate conversations with children and shall respond positively to children's communications.
153. Children shall be offered choices of activities and shall be encouraged to be independent in self-care and in assisting with routine tasks in a manner consistent with their age and developmental level.
154. 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.
155. All infants shall spend some portion of their waking hours out of the crib or playpen. Cribs, playpens, infant seats, swings, high chairs and jumpers may be used as long as the infant is content but not for more than one (1) hour at a time. Infants who are not yet crawling shall also spend some portion of each waking period in a protected area where they can move freely. Crawling infants shall be allowed to explore in protected areas for substantial portions of their waking hours.

156. 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
 - D. Creative and problem-solving activities
157. Children are not permitted off the premises without the Caregiver or Associate Caregiver or substitute caregiver. An exception is made for children having written parental permission to be off the premises with person other than the Caregiver or substitute.

DISCIPLINE

158. The LFCCH 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 all LFCCH staff and volunteers.
159. A LFCCH shall use positive age-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 age-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 physical or 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

160. 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. The LFCCH shall have supplemental foods from all four basic food groups to serve children if meals provided by parents fail to meet nutritional requirements specified in Requirements 161 and 162.
161. 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.
 - D. Grain group: whole grain and enriched breads, cereals, pasta, crackers, rice.
162. All snacks served to children shall include one item from two (2) of the four (4) food groups.
163. 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 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.
164. The LFCCH shall ensure food is clean, wholesome, free from spoilage, free from adulteration, correctly labeled and safe for human consumption.
165. 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 to children of preschool age or younger, except with the written direction of a parent and the child's health care provider.
166. 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.
- A. There shall be a working thermometer in all refrigerators.

CHILD HEALTH

167. The LFCCH shall have a documented arrangement with a physician or other licensed health care provider who provides consultation on health policies and other issues related to the LFCCH.
168. The LFCCH 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. The immunization schedule to be followed is located in the Appendix of these Requirements.
- 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 relevant).
 - 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.
 - 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.
169. The LFCCH may administer medication only upon completion of approved training in accordance with State law.
 170. The LFCCH shall report promptly to a parent any accidents, suspected illness, or other change observed in the health of a child.
 171. When a communicable disease occurs, the LFCCH shall immediately notify the parent of an exposed child so that the child may be observed for symptoms of the disease.
 172. The LFCCH 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.
 173. A Caregiver shall not deny admission to or send home a child because of illness unless one or more of the conditions listed below exists. 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 LFCCH. 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.
 - xix. Herpetic gingivostomatitis (cold sores), if the child is too young to have control of oral secretions.
174. The LFCCH 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	

175. 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.
176. If a child who has already been admitted to the Family Child Care Home manifests any of the illnesses or symptoms specified in Requirements 173-174, 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.
177. The Caregiver shall provide parents with a written health policy including guidelines for the prevention and control of communicable diseases, injuries, and child abuse.
- A. The policy shall state parents must inform the LFCCH, within 24 hours, if the child has developed a known or suspected communicable disease, or if a member of the immediate household has developed such a disease.

CAREGIVER HEALTH

178. Upon initial application, the Caregiver shall provide written evidence of a medical examination attesting to the health of the Caregiver and Associate Caregiver(s), including his/her physical ability to care for children, 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, substitute caregivers and helpers as described in Requirements 88 and 91. Copies of these health appraisals shall be kept on file in the LFCCH and shall be updated to be consistent with household composition and whenever new substitutes or assistants are added. For children under six (6) years living in the home, Requirement 168 shall be met.
- A. The health appraisal shall include, at a minimum
- i. Health history.
 - ii. Physical exam.
 - iii. Vision and hearing screening.
 - iv. Written evidence of freedom from communicable tuberculosis verified within one year prior to initial application, with further testing required at intervals recommended by the Division of Public Health.
 - v. A review of immunization status (measles, mumps, rubella, diphtheria, tetanus, and polio).
 - vi. 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.
 - vii. Assessment of health related limitations or communicable diseases that may impair the Caregiver's ability to perform the job and care for children.
- B. After initial licensure, adults shall be required to provide written evidence of follow-up for known medical problems.

TRANSPORTATION

- 179. 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.
- 180. 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.
- 181. During field trips, the staff/child ratio shall be according to the chart below:

Age of Youngest Child In Group	Maximum Number of Children to be Supervised by One Adult
0-23 Months	2
2 years	6
3 years	8
4 years	9
5 years	11
6 years and older	15

- A. Staff shall have a list of the children present and shall check the roll frequently.
 - B. Children shall have tags or other means of providing a contact telephone number.
 - C. Staff shall have a plan for transportation of children in the event of an emergency.
- 182. Children shall never be left unattended by an adult in a vehicle.

INSURANCE COVERAGE

- 183. A LFCCH shall carry insurance covering fire and liability as protection for children in care.
- 184. A LFCCH shall ensure that any vehicle, authorized for use in transporting children in care by any of the LFCCH staff, shall have insurance which covers liability.

CHILD RECORDS

- 185. The LFCCH shall maintain an individual record for each child enrolled with the following information:
 - A. The child's full name, address, telephone number, birthdate, 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 LFCCH.
 - F. Copies of reports of accidents, injuries or illnesses involving a child.
- 186. The LFCCH 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.
 - G. Emergency contact information must accompany the child to all off-site excursions.
187. The LFCCH 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.
188. The LFCCH shall have a personnel file for each employee and volunteer. The personnel file shall include:
- A. Name, date of birth, home address and telephone number;
 - B. Date of employment;
 - C. Application materials, including letters of reference;
 - D. Record of attendance at training sessions;
 - E. Documents attesting to qualifications and education;
 - F. Written records of required medical examinations and tuberculosis screening;
 - G. Date of termination.
189. A LFCCH shall keep daily attendance records for children, staff, and volunteers identifying the hours of children's attendance and exact hours worked by staff and volunteers each day.

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 Tool-free: 1-800-292-9582