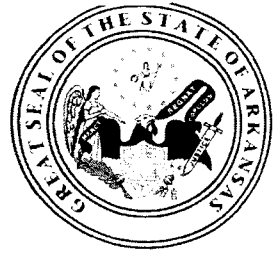


# EXHIBIT C-2



## Division of Childcare and Early Childhood Education

P.O. Box 1437, Slot S150 · Little Rock, AR 72203  
501-682-8950 · Fax: 501-682-2317 · TDD: 501-682-1550



Ms. Donna Davis  
Committee on Administrative Rules and Regulations  
Arkansas Legislative Council  
Room 315 State Capitol Building  
Little Rock, AR 72201

RE: Regular Promulgation – Additional 30 Day Comment Period

Dear Ms. Davis:

Attached you will find the revised proposed for the following: Minimum Licensing Requirement for Centers, Minimum Licensing Requirements for Licensed Homes, Minimum Licensing Requirements for Registered Homes, Minimum Licensing Requirements for Out-of School Time Facilities and FBI Record Check Form. Also, attached is the revised Questionnaire for Filing Proposed Rules and Regulations with the Arkansas Legislative Council and Joint Interim Committee, revised Financial Impact Statement and revised Summary of Changes.

Although the Division of Child Care and Early Childhood Education (DCCECE) is satisfied that the alterations that resulted from the first public comment period do not require re-starting the APA process, DCCECE would like to hold another 30 day comment period to allow the public a chance to comment on the revised proposed changes. The second comment period is from September 16, 2014 to October 16, 2014.

If you have any questions or comments, please contact David Griffin, Associate Director, Division of Child Care and Early Childhood Education, P.O. Box 1430, (Slot S150), Little Rock, AR 72203; phone (501) 320-8904; email [david.griffin@dhs.arkansas.gov](mailto:david.griffin@dhs.arkansas.gov) or fax (501) 682-2317.

Sincerely,

Tonya Williams  
Director, Division of Child Care and Early Childhood Education

RECEIVED

SEP 16 2014

BUREAU OF  
LEGISLATIVE RESEARCH

## Notice of Rule Making

Pursuant to Arkansas Code 20-78-201-220, the Director of the Division of Child Care and Early Childhood Education, issues revised Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes and Registered Child Care Family Homes and FBI Record Check Forms. The Division of Child Care and Early Childhood Education is also intending to promulgate a new regulation book for Out-of-School Time Facilities. If you are interested in obtaining information or presenting your views regarding the revisions, you are welcome to attend the following public meeting:

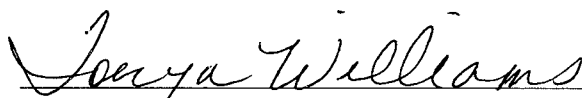
**Wednesday, October 8, 2014: 10:00 a.m. - 12:00 p.m.**

Main Street Mall - Basement  
101 East Capitol Avenue  
Little Rock, AR 72201

The proposed policies and forms are available for review on the Division of Child Care and Early Childhood Education's website <http://hs.arkansas.gov/dccece/Pages/ChildCareLicensing.aspx>. There will also be a Frequently Asked Questions (FAQ's) section on the website as well. Limited copies will be available at each meeting. If you are unable to view and/or print the documents electronically, you may also view or obtain them at the Division of Child Care and Early Childhood Education, located at 700 Main Street, Little Rock, AR 72201, or by calling 1-800-445-3316.

If you cannot attend the public hearing you can also send your comments to:  
DCCECE Licensing and Accreditation Unit,  
Attn: David Griffin, Associate Director: Licensing and Accreditation  
PO Box 1437 Slot S-150  
Little Rock, AR 72203  
(501) 320-8904  
[david.griffin@dhs.arkansas.gov](mailto:david.griffin@dhs.arkansas.gov)

**All comments (both written and verbal) must be received no later than 4:00 pm on October 16, 2014.**



\_\_\_\_\_  
Tonya Williams,  
Director, Division of Child Care and Early Childhood Education

**QUESTIONNAIRE FOR FILING PROPOSED RULES AND REGULATIONS  
WITH THE ARKANSAS LEGISLATIVE COUNCIL AND JOINT INTERIM COMMITTEE**

**DEPARTMENT/AGENCY** Department of Human Services  
**DIVISION** Division of Child Care and Early Childhood Education  
**DIVISION DIRECTOR** Tonya Williams  
**CONTACT PERSON** David Griffin  
**ADDRESS** PO Box 1437, Slot S150, Little Rock, AR 72203  
**PHONE NO.** 501-320-8904 **FAX NO.** 501-682-2317 **E-MAIL** david.griffin@dhs.arkansas.gov  
**NAME OF PRESENTER AT COMMITTEE MEETING** David Griffin  
**PRESENTER E-MAIL** david.griffin@dhs.arkansas.gov

**INSTRUCTIONS**

- A. Please make copies of this form for future use.**
- B. Please answer each question completely using layman terms. You may use additional sheets, if necessary.**
- C. If you have a method of indexing your rules, please give the proposed citation after "Short Title of this Rule" below.**
- D. Submit two (2) copies of this questionnaire and financial impact statement attached to the front of two (2) copies of the proposed rule and required documents. Mail or deliver to:**

**Donna K. Davis  
Administrative Rules Review Section  
Arkansas Legislative Council  
Bureau of Legislative Research  
One Capitol Mall, 5<sup>th</sup> Floor  
Little Rock, AR 72201**

\*\*\*\*\*

1. What is the short title of this rule? Minimum Licensing Requirements for Centers, Child Care Family Homes, Registered Child Care Family Homes, Out of School Time and FBI Record Check Form
2. What is the subject of the proposed rule? Minimum Licensing Requirements for child care providers.
3. Is this rule required to comply with a federal statute, rule, or regulation? Yes  No   
If yes, please provide the federal rule, regulation, and/or statute citation. N/A
4. Was this rule filed under the emergency provisions of the Administrative Procedure Act? Yes  No   
If yes, what is the effective date of the emergency rule? N/A
- When does the emergency rule expire? N/A

Will this emergency rule be promulgated under the permanent provisions of the Administrative Procedure Act?

Yes

No

5. Is this a new rule? Yes  No

If yes, please provide a brief summary explaining the regulation. The Minimum License Requirements for Out of School Time facilities is a newly established regulation book. Many of the requirements in this document can also be found in the current Minimum Licensing Requirements for Child Care Centers. The Minimum Licensing Requirements for Child Care Centers, Licensed Child Care Family Homes, and Registered Child Care Family Homes and FBI Record Check Form is not new rules, but there are proposed amendments to the current rules.

Does this repeal an existing rule? Yes  No

If yes, a copy of the repealed rule is to be included with your completed questionnaire. If it is being replaced with a new rule, please provide a summary of the rule giving an explanation of what the rule does. N/A

Is this an amendment to an existing rule? Yes  No

If yes, please attach a mark-up showing the changes in the existing rule and a summary of the substantive changes. **Note: The summary should explain what the amendment does, and the mark-up copy should be clearly labeled "mark-up."**

6. Cite the state law that grants the authority for this proposed rule? If codified, please give the Arkansas Code citation. Child Care Licensing Act - Ark Ann Code 20-78-201-220

7. What is the purpose of this proposed rule? Why is it necessary? The purpose of this rule is to improve the quality of child care in Arkansas. The rule changes also improve health and safety guidelines for licensed facilities in Arkansas. There are also changes that bring the Minimum Licensing Requirements into compliance with Arkansas State Laws that were passed in 2013. This is necessary for the health and safety of the children in licensed child care in Arkansas.

8. Please provide the address where this rule is publicly accessible in electronic form via the Internet as required by Arkansas Code § 25-19-108(b). <http://hs.arkansas.gov/dccece/Pages/ChildCareLicensing.aspx>

9. Will a public hearing be held on this proposed rule? Yes  No

If yes, please complete the following:

Date: Wednesday, October 8, 2014

Time: 10:00 a.m. - 12:00 p.m.

Main Street Mall - Basement  
101 East Capitol Avenue

Place: Little Rock, AR 72201

10. When does the public comment period expire for permanent promulgation? (Must provide a date.)

October 16, 2014

11. What is the proposed effective date of this proposed rule? (Must provide a date.)

March 1, 2015

12. Do you expect this rule to be controversial? Yes  No

If yes, please explain.

There are some requirement changes that we expect to be controversial. Some providers have expressed concern about the economic impact of lowering the staff/child ratio. There have been providers express concern about the use of helmets in child care due to the possible spread of head lice. We anticipate some concerns about educational requirements for directors and changes in curriculum requirements. There are some new playground requirements that may also be controversial.

13. Please give the names of persons, groups, or organizations that you expect to comment on these rules? Please provide their position (for or against) if known.

We anticipate some provider groups to comment against the rule changes.

We anticipate some providers, consultants, external partners, the Department of Health, Children's Hospital, UAMS, and Higher Education partners to comment for the rule changes.

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**FINANCIAL IMPACT STATEMENT**

**PLEASE ANSWER ALL QUESTIONS COMPLETELY**

**DEPARTMENT**     Department of Human Services  
**DIVISION**        Division of Child Care and Early Childhood Education  
**PERSON COMPLETING THIS STATEMENT** David Griffin  
**TELEPHONE NO.** 501-320-8904 **FAX NO.** 501-628-2317 **EMAIL:** david.griffin@dhs.arkansas.gov

To comply with Ark. Code Ann. § 25-15-204(e), please complete the following Financial Impact Statement and file two copies with the questionnaire and proposed rules.

**SHORT TITLE OF THIS RULE**                             Minimum Licensing Requirements for Centers, Child Care Family Homes, Registered Child Care Family Homes, Out of School Time and FBI Record Check Form

- 1. Does this proposed, amended, or repealed rule have a financial impact?     Yes              No
- 2. Is the rule based on the best reasonably obtainable scientific, technical, economic, or other evidence and information available concerning the need for, consequences of, and alternatives to the rule?                             Yes              No
- 3. In consideration of the alternatives to this rule, was this rule determined by the agency to be the least costly rule considered?                             Yes              No

If an agency is proposing a more costly rule, please state the following:

- (a) How the additional benefits of the more costly rule justify its additional cost;  
N/A
- (b) The reason for adoption of the more costly rule;  
N/A
- (c) Whether the more costly rule is based on the interests of public health, safety, or welfare, and if so, please explain; and;  
N/A
- (d) Whether the reason is within the scope of the agency’s statutory authority; and if so, please explain.  
N/A

4. If the purpose of this rule is to implement a federal rule or regulation, please state the following:

(a) What is the cost to implement the federal rule or regulation?

<u>Current Fiscal Year</u>		<u>Next Fiscal Year</u>	
General Revenue	<u>0</u>	General Revenue	<u>0</u>
Federal Funds	<u>0</u>	Federal Funds	<u>0</u>
Cash Funds	<u>0</u>	Cash Funds	<u>0</u>
Special Revenue	<u>0</u>	Special Revenue	<u>0</u>
Other (Identify)	<u>0</u>	Other (Identify)	<u>0</u>

Total 0

Total 0

(b) What is the additional cost of the state rule?

**Current Fiscal Year**

**Next Fiscal Year**

General Revenue 0  
Federal Funds 0  
Cash Funds 0  
Special Revenue 0  
Other (Identify) 0  
  
Total 0

General Revenue 0  
Federal Funds 0  
Cash Funds 0  
Special Revenue 0  
Other (Identify) 0  
  
Total 0

5. What is the total estimated cost by fiscal year to any private individual, entity and business subject to the proposed, amended, or repealed rule? Identify the entity(ies) subject to the proposed rule and explain how they are affected.

**Current Fiscal Year**

**Next Fiscal Year**

\$                     

\$                     

There is no cost to state or federal government to implement these changes. There is some possible cost to licensed child care providers.

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6. What is the total estimated cost by fiscal year to state, county, and municipal government to implement this rule? Is this the cost of the program or grant? Please explain how the government is affected.

**Current Fiscal Year**

**Next Fiscal Year**

\$ 0

\$ 0

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7. With respect to the agency's answers to Questions #5 and #6 above, is there a new or increased cost or obligation of at least one hundred thousand dollars (\$100,000) per year to a private individual, private entity, private business, state government, county government, municipal government, or to two (2) or more of those entities combined?

Yes  No

If YES, the agency is required by Ark. Code Ann. § 25-15-204(e)(4) to file written findings at the time of filing the financial impact statement. The written findings shall be filed simultaneously with the financial impact statement and shall include, without limitation, the following:

- (1) a statement of the rule's basis and purpose;
- (2) the problem the agency seeks to address with the proposed rule, including a statement of whether a rule is required by statute;
- (3) a description of the factual evidence that:
  - (a) justifies the agency's need for the proposed rule; and

- (b) describes how the benefits of the rule meet the relevant statutory objectives and justify the rule's costs;
- (4) a list of less costly alternatives to the proposed rule and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (5) a list of alternatives to the proposed rule that were suggested as a result of public comment and the reasons why the alternatives do not adequately address the problem to be solved by the proposed rule;
- (6) a statement of whether existing rules have created or contributed to the problem the agency seeks to address with the proposed rule and, if existing rules have created or contributed to the problem, an explanation of why amendment or repeal of the rule creating or contributing to the problem is not a sufficient response; and
- (7) an agency plan for review of the rule no less than every ten (10) years to determine whether, based upon the evidence, there remains a need for the rule including, without limitation, whether:
  - (a) the rule is achieving the statutory objectives;
  - (b) the benefits of the rule continue to justify its costs; and
  - (c) the rule can be amended or repealed to reduce costs while continuing to achieve the statutory objectives.



## SUMMARY

### Proposed revisions to the Minimum Licensing Requirements for Out-of-School Time Licensing Requirements

**Please Note: This is a new proposed regulation book. Some of the regulations for this book are derived from other existing books.**

- **Changes to Related Laws and Requirements - Section 100**
  - Child Care Licensing Unit will notify the applicable federal agency at any time they become aware of or are advised of violations of any of the following or similar laws. The owner should be aware of applicable federal laws which may affect the operation of the facility. -
  - A reasonable plan with a proposed budget for the financial support of the center covering costs of staffing, building (including rent or mortgage and repairs), utilities, equipment, safety, and nutrition.
  - Building/facility diagram will note proposed space used for consideration by program. -
  - Any video recordings made by the facility on a routine basis shall be made available to licensing staff
  - A copy of the license fee notice shall be submitted, at the time of licensure recommendation. -
  - Fingerprints submitted will be used to check the criminal history records of the FBI. Individuals with results showing a prohibited offense shall be advised to contact the Licensing Unit for procedures to obtain the results and for procedures to update or make corrections to the record of their individual history.
  - Waivers for employment for certain circumstances.
  - Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed as prohibited above (Section 110.5, 0-62) may not work in child care unless:
    - The date of the conviction, plea of guilty or nolo contendere for a misdemeanor offense is at least five (5) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type of nature during the five (5) year period preceding the background check request. -
    - The date of the conviction, plea of guilty or nolo contendere for a felony offense is at least more than ten (10) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the ten (10) year period preceding the background check request. -
  - Anyone employed in a licensed center, COE center, licensed child care family home or a registered child care family home prior to 9/1/2009 with a clear background check

history may remain eligible for employment unless the employee had a conviction, plead guilty, or plead nolo contendere to an offense listed in the above section (Section 110.6) since 9/1/2009. -

- **Changes to Organization and Administration – Section 200**
  - Requiring facilities to include inadequate supervision as part of the serious licensing violation they must report. -
  
- **Changes to Personnel – Section 300**
  - Staff/Participant Ratio's chart has been updated to only include the ratio for Kindergarten and above. Providers who were licensed to serve School Age Participants prior to the effective date of this rule will have 4 years from the implementation of this rule to comply with the new ratio requirement.-
  - Regulations for adequate supervision, how participants should be accompanied, systems of monitoring and how often staff shall make contact with participants have been defined and explained. -
  - OST Programs with evening/night care variations should ensure that all staff are awake and have participants in view at all times. Participants shall have privacy when bathing or caring for personal needs. -
  - Maximum Group Size has been changed to the following...
    - An OST Program shall organize its environment so that participants may participate in activities individually and in small groups, so that the development of each participant is supported. -
    - Maximum group size at any one time during the day may not exceed twice the maximum number of participants allowed per staff member as outlined by the staff/participant ratio in Section 301. -
    - Maximum group size limitations do not apply during meal times, rest times, transitions, outdoor time periods, field trips, or the length of a special occasion, including but not limited to a holiday party or a visit from a guest speaker. -
  - Regulations to ensure that a Director or Site Supervisor is present at all times.
  - 300.303.2 Director regulations have been changed from person in charge to Site Supervisor. -
  - Directors/Site Supervisors qualifications have been clearly defined as to what Degree's/Credentials are needed to qualify directors. Additional topics appropriate for continuing early childhood education have been added. -
  - Staff members who work directly with participants shall obtain at least 15 hours of in-service training or outside workshop training each year in continuing Early Childhood Education or child/youth development. This training shall be approved by the Division. -
  - Additional CPR Requirements Volunteers must have an orientation making them aware of program policies and practices that are related to the scope of the services they will be providing at the facility. -

- **Changes to Program – Section 400**
  - The OST program shall develop a written weekly routine listing well-rounded developmentally appropriate activities for participants and provide a copy of the routine of weekly activities to parents when they enroll the participants. -
  - Guidelines for promoting physical, social, cognitive and emotional development have been included. -
  - Guidelines for life skill development have been added. -
  - Rules have been included for programs to develop personal responsibility, self-direction, leadership, activities to provide recognition of achievement and participation. -
  - Program requirements for outdoor time, screen time and field trips have been specified in the proposed regulations. -
  - Requirements for parental involvement have been added
  
- **Changes to Behavior Guidance – Section 500**
  - Proposed regulations for offering nurturing, respectful, supportive and responsive environment that supports frequent interactions between the participants and staff. -
  - Proposed guidelines for behavior guidance practices. -
  - OST Program regulations for the behavior guidance based on participant’s individual needs and stages of development have been proposed. -
  - Unacceptable behavior guidance practices have been outlined and defined. -
  
- **Changes to Records – Section 600**
  - Requirements for daily attendance records
  - Written permission from parent regarding video taping children
  
- **Changes to Nutrition – Section 700**
  - Snack and mealtime regulations have been proposed. -
  - Requirements regarding how food should be served.
  - Parents are to provide written allergy substitutions to OST Facilities. -
  - Regulations for beverage glasses/cups have been proposed to state that each participant shall have their own. -
  - Vending machines are acceptable provided they are not the only source of snacks/or beverages. -
  
- **Changes to Buildings – Section 800**
  - Twenty-five square feet per participant of usable floor space shall be required for indoor activities. -
  - Recommendations for heating and ventilation unit inspections
  - Requirements for carbon monoxide detectors

- **Changes to Playgrounds/Outdoor Learning Environments – Section 900**
  - Requirements to document in writing layout and design of a play area/playground, and also to document in writing any changes.
  - Recommendations for shade
  - Enclosed play areas must be properly maintained.
  - Requirements for approved equipment Equipment must be free from hazards
  - Clarifications on what can and cannot be used and specifications on the various types of playground equipment
  
- **Changes to Furniture & Equipment – Section 1000**  
Clarifications for Furniture/ Equipment and Sleeping Equipment
  
- **Changes to Health – Section 1100**
  - Guidelines for the administration of prescription and non-prescription medicine have been established for OST Facilities. -
  - The types of non-prescription medicine to be administered with proper permissions have been defined. -
  - Types of permission for administering non-prescription medicine have been included in this section. -
  - Proper handling of medicine and first aid procedures has been established. -
  - Pets with which participants have contact shall have all vaccinations as required by law with all vaccinations being administered by a licensed veterinarian. The verification of vaccinations shall be kept in the facility records. -
  - Guidelines for when hands should be washed have been outlined. -
  - Staff shall assist participants in toilet routines and hygiene practices as needed. -
  - Toileting equipment shall be safe and sanitary. -
  - Guidelines for notifying parents when children are ill.
  - Medical care plan shall be used when for children who need medication on an daily or emergency basis.
  - Universal precautions have been proposed when handling bloodborne pathogens.  
Recommendations regarding adult immunizations
  
- **Changes to Safety – Section 1200**
  - Written procedures and evacuation diagrams for emergency drills shall be posted in each program space. -
  - Within 30 days of licensure and within 30 days of any change or modification of the floor plan the facility shall file a copy of their floor plan with the local Office of Emergency
  - In reference to swimming pool safety training the proposed regulation has been changed to add, “...or other industry recognized certification entity.” -
  - Requirements for rescue medications have been proposed

- Chemicals and toxins shall not be stored in the food storage areas
- **Changes to Transportation – Section 1300**
  - Ratios have been defined for routine transportation of participants. Providers who were licensed to serve School Age Participants prior to the effective date of this rule will have 4 years from the implementation of this rule to comply with the new ratio requirement.-
- **Changes to Special Needs – Section 1400**
  - Participants with disabilities should be included in the same general activities as their same-age peers. Certain accommodations for their disability and some modifications to activities may be necessary and these should be determined on an individual basis and be related to the specific needs of the individual. Out of School Time providers are encouraged to make available additional staff training in the area of disability awareness. Such training would/might encompass the use of people-first language, general communication strategies, and disability etiquette. In general, it is desirable to treat an individual with a disability in the same way one would treat an individual of the same age but without a disability. -
  - Additional information from the parent/caregiver of a child with a disability may be necessary. Questions that cover usual routines, special instructions for care and interaction, the child’s interests, and things or situations to avoid are important; as is determining what kinds of things will motivate the child. If there are individualized requirements for rest, nutrition, hydration, etc. these should be noted. Emergency contact information—with back up contacts—may be essential -
  - Consideration should be given to special needs related to medical as well as developmental, social/emotional, and mental health/behavioral concerns. -
  - While IDEA is specific to educational needs, consideration should also include cooperation with 504 and Medical Plans to best meet the needs of the individual child. -
- **Changes to Day Camp – Section 1500**
  - Regulations for hazardous items and specialized activities have been added. -
  - Rules for outdoor day camps have been included. -

**Other Proposed Changes**

- References to Child Care Centers/Center has been changed to reflect OST Facilities/Facility
- References to children(s) has been changed to participant(s)
- Any Infant/Toddler requirements have been deleted.
- Regulations specific to preschoolers have been removed.

## SUMMARY OF DCCECE RULE REVISION/PROMULGATION

The Division is proposing changes to The Minimum Licensing Requirements for Child Care Centers, Child Care Family Homes, Registered Child Care Family Homes and Out-of-School Time facilities, to reflect recent legislation and to increase the overall quality of care for the children of Arkansas.

The following recommended changes are the result of recent legislation:

- AR Code §20-38-103 (e) (3) (A) and changes resulting from Act 990 of 2013 regarding criminal background checks
  - Licensees may employ individuals with specifically designated criminal convictions, provided the individual has completed the terms of the conviction. (The changes made to section 110 of the Child Care Center Pub-002)
- AR Code § 20-9-1301 and changes resulting from Act 1208 of 2013 (Carter's Law)
  - Specific training regarding Shaken Baby Syndrome. (Section 306 of the Child Care Center Pub-002)
- AR Code § 20-78-228 and changes resulting from Act 1159 of 2013 regarding emergency management requirements.
  - Licensees must file current floor plans with local Offices of Emergency Management. (Section 1201 of the Child Care Center Pub-002)

The following proposed changes are the result of a consent agreement approved by the Joint Budget Committee of the Arkansas Legislature:

- Playground boundaries shall be identified using aerial photos from internet sites such as Google Maps. The aerial photos shall be accompanied by measurements of the identified playground area(s). Each piece of equipment used by the children enrolled in the licensed facility shall be listed. Any changes in the playground boundaries or equipment shall be approved by the Division prior to use.

The following proposed changes are reflective of nationally recommended guidelines by The Office of Child Care, The National Association of Regulatory Administration, Child Care Aware, The American Academy of Pediatrics, The Consumer Product Safety Commission, The Arkansas Department of Health and The Arkansas Fire Marshall's Office.

- Any Video recordings made by the facility on a routine basis shall be made available to Licensing staff upon request.
- Staff to child ratio for newly licensed providers will change to 1:5 for infants and 1:8 for toddlers. Facilities licensed prior to the effective date of this change shall have four years to comply.
- Director qualifications will require a Bachelor's Degree in Early Childhood Education. A Bachelor's Degree in a non-related field will be accepted with four years of experience in early childhood education, a CDA credential, a Birth-Pre K Credential, or associates degree in early childhood, child development or related field, plus six years of experience in early childhood education, or eight years of experience in early childhood education and the completion of one of the following within two years of employment: Child Development Associate Credential, Birth to Pre K Credential, Director's Credential or equivalent, or Technical Certificate in Early Childhood Education. (Individuals employed as Directors prior to the effective date of this regulation are not required to meet the new standard.)
- The Director shall be on site 50% of the operational day.

- The facility shall have a designated Site Supervisor who shall complete New Director's Orientation.
- All training hours shall be registered through Division of Child Care and Early Childhood Educations Professional Development Registry or the Department of Education.
- Licensing Procedure Changes
  - A reasonable plan with a proposed budget for the financial support of Child Care Centers covering costs of staffing, building (including rent or mortgage and repairs), utilities, equipment, safety, and nutrition. (This requirement is not applicable to Licensed or Registered Homes.)
- Criminal Records Check
- Request for a waiver prior to employment for specified non-violent offences. Professional Development changes:
  - Pre-service training shall be completed prior to working with Children
  - Additional training shall be completed within 10 business days of hire
  - Job specific training shall be completed within 30 days of hire
  - A probationary period shall include at least 30 days from hire
- Program Section changes:
  - Thirty minutes per day of moderate to vigorous physical activity shall be provided
  - An approved curriculum including the developmental areas found in Frameworks shall be followed
  - Additional language will be added to describe meaningful interactions between staff and children
  - Additional requirements will be added to address communication between facility staff and parents, as well as overall parental involvement
  - Photographing or video recording of children shall be prohibited without parental consent
- Infant & Toddler Section changes:
  - Enhanced requirements for safe and sanitary toys
  - The definition and requirement for a relationship based program for infants and toddlers
  - An approved curriculum including the developmental areas listed in the Infant & Toddler Frameworks to include lesson plans.
- Behavior Guidance Changes
  - Added trainings
  - Posted group behavior charts shall not be used. (Individual behavior charts that are not viewable by children and individual charts used by therapists are allowable.
  - Children shall not be forced or bribed to eat
- Records Section Changes:
  - Parents shall sign children in and out
  - Staff records to include a copy of GED or high school diploma
  - Documentation of new employee evaluations
  - Child records to include significant changes in child's physical or emotional state, infant feeding documentation and distribution of Shaken Baby Syndrome information.
- Nutrition Section
  - Language to clarify feeding schedules.

- Requirements for food brought in from outside food sources
- Temperature requirements for refrigerators and freezers
- Enhanced infant and toddler feeding requirements
- Building Section changes:
  - An operational Air conditioning system shall be required
  - Carbon monoxide detectors shall be required
- Playgrounds Section changes:
  - Fencing of outdoor playgrounds shall be required for all programs, including school age programs
  - Provisions shall be made for shaded areas on the playground or the daily schedule shall be altered so that outdoor time is in the cooler part of the day
  - Play equipment that has been deemed unsafe shall be removed or fenced off
  - Newly purchased playground equipment shall be commercially manufactured and shall be certified to meet ASTM and CPSC standards for public playgrounds
  - Ball pits, trampolines, and wading pools shall be prohibited except for therapeutic uses under direct supervision
  - Clothing and accessories that may cause entanglement or strangulation shall be prohibited
  - CPSC approved helmets shall be provided and used by children who are using bicycles, roller skates, skateboards, and scooters.
  - Slides shall have transition platforms
  - Flexible grid climbing devices shall be prohibited for preschoolers unless they are anchored at both ends and have a means of transitioning from one piece of equipment to the next
  - CPSC guidelines shall be adopted for play surfacing depths
  - Guidelines for balance beams have been changed
- Additional requirements for balance beams, slides, swings, seesaws and climbing equipment. Furniture and Equipment

Requirements for child size furniture to be used. Sleeping requirements changes:

- Swaddling is not recommended and shall require a note from a physician if continued past the age of three months.
- Bibs, necklaces, and garments with ties or hoods shall be removed prior to rest/naptime
- Health Section changes:
  - Clarifications and additions to exclusions due to contagious or infectious disease
  - Universal precautions shall be used when handling bloodborne pathogens
  - Recommendations for adult immunizations against flu, whooping cough, chicken pox, and MMR
  - Requirements for handling medication
  - Requirements for vaccinating animals
- Safety Requirements
  - Clarification for fire drills
  - Requirements for rescue medications
  - Requirements for pacifiers
  - Additional clarification for swimming pools
- Hand Washing Section changes:
  - Hand washing sinks shall be required in infant/toddler areas
  - Specific requirements for diaper changing tables



- Transportation section changes:
  - At least one adult in the vehicle shall have current certification in CPR and First Aid
  - Heating and air conditioning systems in vehicles used to transport children must be in working order
  - New ratio requirements for transportation

**Revision of Rule:**

- Minimum Licensing Requirements for Child Care Centers
- Minimum Licensing Requirements for Child Care Family Homes
- Minimum Registration Requirements for Registered Child Care Family Homes
- Criminal Records Check Form
- FBI Records Check Form

**ARKANSAS DEPARTMENT OF HUMAN SERVICES  
DIVISION OF CHILD CARE & EARLY CHILDHOOD EDUCATION**

REQUEST FOR:

**FBI RECORDS CHECK**

**A completed state criminal records check form, a completed fingerprint card FD-258 and a check or money order (made payable to ASP or Arkansas State Police) MUST be attached for EACH fingerprint check needed. Checks/money orders cannot be combined for multiple fingerprint checks.**

If you have any questions, or wish to dispute the results, please contact your Licensing Specialist immediately.

(FACILITY USE ONLY)  <hr/> FACILITY REQUESTING REPORT  <hr/> MAILING ADDRESS  CITY STATE ZIP  <hr/> FACILITY DIRECTOR & TELEPHONE NUMBER	(DHS USE ONLY)  <hr/> NAME OF LICENSING SPECIALIST REQUESTING THE CHECK  <hr/> TITLE COUNTY  <hr/> TELEPHONE NUMBER  <hr/> DATE OF REQUEST
--	--

**TO BE COMPLETED BY THE PERSON TO BE CHECKED**

NAME OF PERSON TO BE CHECKED: \_\_\_\_\_  
(LAST NAME) (FIRST NAME) (MIDDLE NAME)

MAIDEN NAME: \_\_\_\_\_ ALIASES: \_\_\_\_\_

DOB: (\_\_\_\_/\_\_\_\_/\_\_\_\_) SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
MONTH DATE YEAR

DRIVER'S LICENSE or GOV'T ID #: \_\_\_\_\_ / \_\_\_\_\_ RACE: \_\_\_\_\_ SEX: ( MALE / FEMALE)

COMPLETE ADDRESS: \_\_\_\_\_  
(Physical residential address) STREET CITY STATE ZIP

PLACE OF EMPLOYMENT: \_\_\_\_\_

"I hereby authorize the Department of Human Services to conduct a criminal background check on myself through the Federal Bureau of Investigations, and for the FBI and Arkansas State Police to release any criminal history information to the Division of Child Care and Early Childhood Education. I also understand that the Identification Bureau of the Arkansas State Police may maintain the fingerprints submitted in an automated fingerprint identification system."

\_\_\_\_\_  
SIGNATURE OF PERSON TO BE CHECKED DATE

PLEASE CHECK THE APPROPRIATE BOX:

Division of Child Care & Early Childhood Education Applicant:

- Owner/Operator (licensee/Board Member/Director)
- Child Care Facility Employee
- Volunteer who is left alone with children, considered in the staff/child ratio or given supervisory/disciplinary control over children

STATE POLICE USE ONLY - DO NOT WRITE IN OR BELOW THIS BOX

# Application Record Notification

## Notification

Fingerprints submitted will be used to check the criminal history records of the FBI.

## \*Obtaining Copy

Procedures for obtaining a copy of FBI criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.30 through 16.33 or go to the FBI website at <http://www.fbi.gov/about-us/cjis/background-checks>.

## \*Change, Correction, or Updating

Procedures for obtaining a change, correction, or updating of an FBI criminal history record are set for the at Title 28, Code of Federal Regulations (CFR), Section 16.34.

---

Print Name

---

Date

---

Signature

**ARKANSAS DEPARTMENT OF HUMAN SERVICES  
DIVISION OF CHILD CARE & EARLY CHILDHOOD EDUCATION**  
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**FBI RECORDS CHECK**

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If you have any questions, or wish to dispute the results, please contact your Licensing Specialist immediately.

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FACILITY REQUESTING REPORT	NAME OF LICENSING SPECIALIST REQUESTING THE CHECK
MAILING ADDRESS	TITLE COUNTY
CITY STATE ZIP	TELEPHONE NUMBER
FACILITY DIRECTOR & TELEPHONE NUMBER	DATE OF REQUEST

**TO BE COMPLETED BY THE PERSON TO BE CHECKED**

NAME OF PERSON TO BE CHECKED: \_\_\_\_\_  
(LAST NAME) (FIRST NAME) (MIDDLE NAME)

MAIDEN NAME: \_\_\_\_\_ ALIASES: \_\_\_\_\_

DOB: (\_\_\_\_/\_\_\_\_/\_\_\_\_) SSN: \_\_\_\_-\_\_\_\_-\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_-\_\_\_\_  
MONTH DATE YEAR

DRIVER'S LICENSE or GOV'T ID #: \_\_\_\_/\_\_\_\_ RACE: \_\_\_\_\_ SEX: ( MALE / FEMALE )

COMPLETE ADDRESS: \_\_\_\_\_  
(Physical residential address) STREET CITY STATE ZIP

PLACE OF EMPLOYMENT: \_\_\_\_\_

"I hereby authorize **the** Department of Human Services to conduct a criminal background check on myself through the Federal Bureau of Investigations, and for **the** FBI and Arkansas State Police to release any criminal history information to the Division of Child Care and Early Childhood Education. I also understand that the Identification Bureau of the Arkansas State Police may maintain the fingerprints submitted in an automated fingerprint identification system."

\_\_\_\_\_  
SIGNATURE OF PERSON TO BE CHECKED DATE

**PLEASE CHECK THE APPROPRIATE BOX:**

Division of Child Care & Early Childhood Education Applicant:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Owner/Operator<br><small>(Licensee/Board Member/Director)</small> | <input type="checkbox"/> Child Care Facility Employee | <input type="checkbox"/> Volunteer who is left alone with children, considered in the staff/child ratio or given supervisory/disciplinary control over children |
|--|---|---|

**STATE POLICE USE ONLY - DO NOT WRITE IN OR BELOW THIS BOX**

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Print Name

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Date

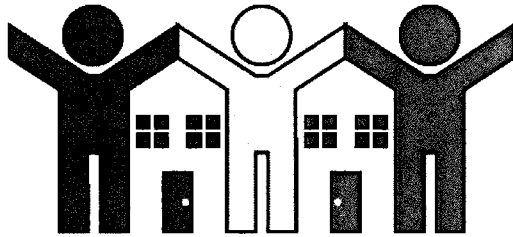
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Signature

# MINIMUM LICENSING REQUIREMENTS

FOR

# Child Care Centers



ARKANSAS DEPARTMENT OF HUMAN SERVICES

DIVISION OF CHILD CARE AND EARLY CHILDHOOD EDUCATION

CHILD CARE LICENSING UNIT

P. O. BOX 1437, SLOT S150

LITTLE ROCK, ARKANSAS 72203-1437

(501) 682-8590



PUB-002 (REV. 08/05/2014)

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MINIMUM LICENSING REQUIREMENTS FOR  
CHILD CARE CENTERS

**100 CHILD CARE LICENSING**

**101 Related Laws and Requirements**

1. The "Child Care Facility Licensing Act" Ark. Code Ann. 20-78-201-220, as amended, is the statutory authority for licensing child care facilities. This act created the Division of Child Care and Early Childhood Education and authorized the Division to establish rules and regulations governing the granting, revocation, denial and suspension of licenses for child care facilities and the operation of child care facilities in this state. The Minimum Licensing Requirements for Child Care Centers are the Division's rules and regulations for Child Care Centers.
2. The Child Care Facility Licensing Act designates the Arkansas Department of Human Services, Division of Child Care and Early Childhood Education as the administrative agency responsible for administering the Act in accordance with the Minimum Licensing Requirements for Child Care Centers. The Division is authorized to inspect and investigate any proposed or operating Child Care Centers and any personnel connected with the Center to determine if the facility will be or is being operated in accordance with the Child Care Facility Licensing Act and the Minimum Licensing Requirements for Child Care Centers.
3. The licensing requirements contained in this manual apply to group child care. (Refer to the Minimum Licensing Requirements for Day Care Family Homes for the requirements that apply to child care provided in a day care family home.)
4. The Child Care Licensing Unit will notify the applicable federal agency at any time they become aware of or are advised of violations of any of the following or similar laws. The owner should be aware of applicable federal laws which may affect the operation of the facility, such as, but not limited to:
  - a. Americans with Disabilities Act (ADA).
  - b. Environmental Protection Agency (EPA) regulations to ensure that any renovation or repair work on a home, child care facility, or school that was constructed prior to 1978 shall be completed by a contractor that is certified by the Environmental Protection Agency (EPA), when the repairs and/or renovations consist of any or all of the following: the repair or renovation disturbs six (6) or more square feet of the interior, the repair or renovation disturbs twenty (20) feet or more square feet of the exterior, and/or the repair or renovation involves removing a window.
  - c. Federal civil rights laws state that a facility may not discriminate on the basis of race, color, sex, religion, national origin, physical or mental handicap, or veteran status.
5. The Licensee shall maintain Child Care Liability Insurance (Act 778 of 2009), and comply with the following requirements:

- a. Prior to the approval of an application, the applicant shall provide verification of the required coverage to the Licensing Specialist and provide subsequent verification when requested. (Facilities licensed prior to the effective date of this revision shall have ninety (90) days to comply with this requirement.)
- b. The Licensee shall maintain the minimum amount of coverage as follows:

Licensed Capacity of Center	Minimum Child Care Liability Insurance Coverage Required
1-74	\$500,000 per occurrence
75 and up	\$1,000,000 per occurrence

- 6. Laws relevant to the operation of child care facilities are available upon request.
- 7. The following standards are the minimum licensing requirements which shall be met by persons or organizations which operate a child care facility. In recommending a license be issued, the Division of Child Care and Early Childhood Education works in coordination with the local and state Health Departments, Fire Departments, City Planning or Zoning Departments and the Boiler Division of the Department of Labor. Persons considering opening or expanding a child care facility shall immediately contact these individual departments for inspection and information on their separate regulations.

A prospective Licensee should request clarification regarding the codes or covenants enforced by these departments as some may prevent the operation of a child care facility at a particular location, may limit the number of children in care or may impose additional safety requirements.

- 8. The Licensing Unit shall share information on the location and status of new applicants applying for a license and on facilities holding a license when a city or county requests the information.

**102 General Requirements**

- 1. Child Care Centers shall maintain compliance with the licensing requirements at all times. To be in substantial compliance, the Child Care Center shall meet all essential standards necessary to protect the health, safety and welfare of the children attending the Child Care Center. Essential standards include but are not limited to those relating to issues involving fire, health, safety, nutrition, discipline, staff/child ratio and space. Failure to comply with any of the licensing requirements for Child Care Centers may result in any of the following adverse actions:
  - a. Denial of an application for a license or for church exempt status
  - b. Revocation or suspension of a license or church exempt status
  - c. Issuance of a provisional license or provisional church exempt status
- 2. The following factors may be considered when determining the appropriate adverse action:

- a. Severity of the deficiency cited
  - b. Number of violations cited
  - c. Frequency of violations cited
  - d. Past history of compliance
  - e. Willingness/ability to correct violations
3. Each Child Care Center shall be reviewed by the Child Care Licensing unit to determine whether the facility is in compliance with all the Minimum Licensing Requirements for Child Care Centers. Child Care Licensing staff shall have access to Child Care Centers for the purpose of conducting inspections, reviews and complaint investigations. (**Clarification:** In addition to rooms used for care, Child Care Licensing Staff must also be given access to all other rooms or spaces not used for child care. Any rooms or areas that are not accessible to children in care will only be viewed briefly for major health and safety issues and will not be routinely monitored for general licensing compliance. This is to help insure that there are no dangers such as fire hazards, which could impact the safety of the entire structure.)
  4. Denial of access to the facility or to interview children may result in any of the adverse action described above.
  5. Any facility that has not provided care to children for a period of one year shall be closed unless a written request is made by the licensee stating why closure should not take place. If the licensee requests that the license remain open, license fees and required annual inspections shall be kept current.
  6. Falsification of any document or the submission of false information to the Child Care Licensing Unit or any other unit of the Division may constitute grounds for revocation of the license. (Falsification means the submission of untrue information, whether by statement or omission.)

### **103 Licensing Procedures**

1. Application- An application shall be obtained from the Child Care Licensing Unit. The completed application packet shall be submitted to the Child Care Licensing Unit for review and approval. A completed application packet shall consist of:
  - a. A signed application form with a designated person who assumes legal responsibility for operation of the child care facility
  - b. Name of proposed director and their qualifications
  - c. Names, addresses and telephone number of Board of Directors, if applicable
  - d. Clear written guidelines of responsibility for the Board of Directors, if applicable
  - e. Building/facility diagram
  - f. Description of the services that will be provided to the children
  - g. Verification that criminal record checks and child maltreatment central registry checks have been initiated on all owners, operators and staff members of the Child Care Center.
  - h. Boiler inspection, or verification that inspection has been scheduled
  - i. Fire Department approval
  - j. Health Department approval

- k. Zoning Approval
  - l. Verification of Child Care Liability Insurance (if Child Care Liability Insurance cannot be obtained before application, it must be obtained with proof provided to the Child Care Licensing Unit **before** care of children can be provided)
  - m. A reasonable plan with a proposed budget for the financial support of the center covering costs of staffing, building (including rent or mortgage and repairs), utilities, equipment, safety, and nutrition. (This is a one-time only requirement that applies to new applicants for a license.)
2. Time for processing: The Licensing Specialist has sixty (60) days to submit a recommendation to the Division.
  3. A pre-approval consultation meeting shall be required for all applicants for a license prior to the approval of the application. This meeting shall be offered to the applicant prior to application or within thirty (30) days of the receipt of the application.
  4. License- The Child Care Licensing Unit shall conduct a licensing study of each Child Care Center to determine eligibility for a license. The facility shall be approved by the Child Care Licensing Unit before a license may be issued by the Division. A license for a Child Care Center shall specify:
    - a. The name and address of the facility
    - b. The owner/operator of the Child Care Center
    - c. The number of children authorized for care at the Child Care Center
    - d. The expiration of any provisional licenses
    - e. The type of care the Child Care Center will be providing
  5. License—Non-transferable- A license for a Child Care Facility or approval for a church-operated exempt status shall apply only to the address and location stated on the license or approval issued. It shall not be transferable from one holder of the license or approval to another or from one place to another. If the location of a Child Care Facility is changed, or the operator of the Child Care Facility is changed, then the license or approval for that Child Care Facility shall be automatically closed on such a change. The Child Care Facility shall notify the Licensing Unit of a change of location or ownership.
  6. Compliance—On-site inspections of Child Care Centers are conducted by the Child Care Licensing Unit on a routine basis to determine a facility's continued compliance with the standards. The caregiver shall cooperate with licensing staff during licensing visits and investigations.

Violations of rules are documented in writing by use of the licensing compliance record. Documentation shall include:

- a. Reference to the specific rule violated
- b. A factual description of the nature of the violation and how the Child Care Center failed to comply
- c. A date of expected corrections

7. If video recordings are made by the facility and are maintained for viewing as a part of a continuous monitoring system, they shall be made available to licensing staff upon request. This does not include video recordings of special events, etc.
8. The Child Care Licensing Unit shall have the authority to make both scheduled and unscheduled visits to:
  - a. Conduct inspections and reviews to determine compliance with the licensing requirements.
  - b. Investigate complaints involving possible violations of licensing requirements.
  - c. Offer consultation and technical assistance.
9. The Child Care Licensing Specialist may increase unscheduled monitor visits where numerous or severe violations of standards are cited.
10. If a violation is of imminent threat to the health, safety and welfare of the children attending the Child Care Center, corrective action or compliance shall be obtained within 24 hours in order to insure the health, safety and welfare of the children in care. If a Child Care Center violates an administrative standard or standard that does not directly threaten the immediate health, safety or welfare of the children in care, these violations shall be corrected within a reasonable time as mutually agreed upon by the Child Care Licensing Unit and the Child Care Center.

Once a violation has been corrected, the correction will be documented on the Licensing Compliance Record and a copy provided to the Child Care Center.

11. New Provisional License- The Child Care Licensing Specialist shall recommend a new provisional license when the facility is newly opened or a facility has been acquired by new owners whose compliance history has not been determined. A new provisional license shall not exceed twelve (12) months in length.

At the end of the provisional license, the Division may in its discretion:

- a. Issue a regular license
  - b. Revoke the license
  - c. Suspend the license
  - d. Issue a successive provisional license
12. Regular License- The Child Care Licensing Specialist will recommend a regular license when the facility has demonstrated substantial compliance, or when an existing Licensee with a Regular license relocates their facility and their past demonstrates a substantial level of compliance.
  13. Provisional License- The Licensing Unit may issue a Probationary Provisional license when the center is not maintaining substantial compliance due to deficiencies which are so numerous, frequent or severe as to potentially jeopardize the health, safety and welfare of



children. The facility and Licensing Unit shall have a corrective action plan in place addressing the issues.

Based on the level of compliance during the period of the Probationary Provisional license, the Licensing Unit may:

- a. Issue a Regular license
- b. Suspend the license
- c. Revoke the license

14. Suspension of License- The Division may suspend a license when the Licensing Unit determines that the facility has serious areas of non-compliance, but the facility would be able to resume normal operation when the harmful conditions are eliminated.

If granted, the suspension order remains in effect until the order expires or until the Division determines that the problem necessitating the suspension order have been resolved. The suspension of a license may not exceed twelve (12) months. If the Division finds that the terms of the suspension order have been met prior to the expiration of the suspension period, the Division retains the discretion to reinstate the license. If the terms of the order have not been met, the Division may revoke the license.

15. Revocation of License-The Division may revoke a license when any of the following situations occur:

- a. The facility fails to maintain substantial compliance with licensing requirements.
- b. The facility fails or refuses to correct cited deficiencies in a timely manner.
- c. The facility fails to insure the health, safety and welfare of children in care.

16. The revocation of a license nullifies and cancels the license. At the time of a final determination of revocation of the license by the Division, the Division shall specify in the revocation letter the terms of the revocation. The licensee shall not be eligible to reapply for a license for a minimum of one (1) year or longer, if specified in the revocation order. Related parties shall not be eligible to apply for a license for the same specified period. (Related parties are defined as immediate family members, member of Board of Directors, persons or entities associated or affiliated with, or which share common ownership, control, or common board members or which have control of or is controlled by the licensee. An immediate family member is defined as a spouse, step and in-law relationships, a child, a natural or adoptive parent, a sibling, a grandparent, a grandchild or a son or daughter-in-law.) (Applicants who are denied a license or registration due to this requirement may appeal the denial to the Child Care Facility Review Panel.) Facilities wishing to be re-licensed must submit a new application for licensure for review and approval by the Division. Approval must be obtained and a new license issued before the facility provides care to a licensable number of children.

#### **104 License Fee**

1. Each facility shall submit an annual license fee as long as the facility is in compliance with

the Minimum Licensing Requirements for Child Care Facilities. A facility license fee is determined by combining the maximum license capacity of all licenses located within the same premises.

- a. Facilities serving up to 17 children- \$15 per year
  - b. Facilities serving 17 to 99 children- \$50 per year
  - c. Facilities serving 100 or more children- \$100 per year
2. Upon review and determination of a licensing recommendation by the Child Care Licensing Specialist, the Specialist shall issue a Notice of License Fee Due to the facility.
  3. The Division shall not issue a license unless the required license fee has been paid.
  4. A copy of the license fee notice shall be submitted at the time of licensure recommendation.
  5. The fee schedule shall apply to all child care facility recommendations for licensure as follows:
    - a. New Provisional License-(Provisional License for new operation to be issued for a period of twelve (12) months.) A one-year license fee shall be paid prior to the issuance of a provisional license.
    - b. New Regular License or conversion from provisional to regular status-A license fee shall be paid prior to the issuance of a new license.
    - c. Conversion to Provisional Status-No license fee is due for licenses converted to provisional status during the term of a regular license.
  6. A second notice of license fee due will be sent to facilities failing to submit the required license fee (Notice of License Fee Past Due). This notice will be sent twenty (20) days after the initial notice of fee due. Failure to submit a license fee within twenty (20) days of receipt of the past due notice will result in action to suspend the license until such time as the fee is paid.
  7. Refunds of license fees paid are made only when the Division does not approve issuance of a license. There shall be no refunds of license fees paid for voluntary closure of a facility or for Division action to revoke or suspend a license.
  8. All license fees paid to the Division shall be deposited in a special Child Care Provider's Fund. This fund shall be used to meet the cost of conducting statewide criminal record checks, with the remaining money used for training or materials to be loaned to child care providers.

### **105 Appeal of Licensing Actions**

1. A licensee or applicant for license may request an appeal of any of the following licensing actions:
  - a. Adverse licensing actions (revocation or suspension of a license, conversion to a

- provisional license or denial of an application for a license)
  - b. Founded licensing complaints
  - c. Denials of alternative compliance requests
  - d. Cited noncompliance with the published standards
2. An appeal may be initiated on any of the above actions by requesting an appeal in writing to the Licensing Specialist or Licensing Supervisory Staff. Requests to appeal adverse licensing actions must be mailed within ten (10) calendar days of the receipt of the notice of the adverse action. Requests to appeal licensing actions, other than adverse, must be mailed within twenty (20) calendar days from receipt of the notification of the action. The request to appeal shall include a statement of the action(s) taken by the Division and the reason(s) the licensee or applicant for license disagrees with that action. The request to appeal will be reviewed by the Licensing Supervisor and the Licensing Administrator. If the appeal is not resolved to the satisfaction of the licensee or applicant for license, the matter will be referred to the Child Care Appeal Review Panel for hearing. (This appeal process also applies to Church Operated exempt facilities.) **(Additional information regarding the appeal procedures and the Child Care Appeal Review Panel is available on request.)**

## 106 Alternative Compliance

1. The Division may grant alternative compliance with the Minimum Licensing Requirements for Child Care Centers if the Division determines that the alternative form of compliance offers equal protection of health, safety and welfare to children and meets the basic intent of the requirements for which the center is making the request.
2. The Division shall consider all requests for alternative compliance with the Licensing requirements except those requirements that are enforced by the Department of Health, Local Fire Marshal or State Fire Marshal's office and applicable city ordinances including zoning.
3. To request alternative compliance, the following procedure shall be initiated by the person responsible for the operation of the facility.
4. The applicant/licensee shall submit the request for alternative compliance in writing.
5. The request shall include:
  - a. The specific standards for which alternative compliance is sought.
  - b. An explanation of how the alternative form of compliance is equal to or exceeds the stated requirements.
  - c. Full justification and description of what the alternative compliance method will be and the method by which the facility will carry out this plan to continue to provide for the health, safety and welfare of children as intended by the requirements.
  - d. The applicant/licensee shall provide clear and supportive evidence and upon request of the Division, and expert's opinion on the effect of the request on health, safety, and welfare of the children.

6. A separate written request shall be submitted for each requirement of which alternative compliance is sought. The approved alternative compliance is effective for the duration of the license unless a shorter time frame is specified.
7. The granting of alternative compliance for a requirement shall in no way constitute a precedent. If an alternate means of complying with the requirement is granted by the Division and the facility fails to satisfactorily implement this alternate means, the original requirement for which alternative compliance was sought shall become immediately enforceable.
8. The Division shall have the right to obtain an expert opinion to corroborate expert opinions provided by the applicant/licensee.
9. The Division shall have the right to deny requests for alternative compliance when it finds that such requests do not adequately protect the health, safety and welfare of children and do not meet the intent of the requirements.
10. All requests for alternative compliance shall be answered in writing by the Division.

### **107 Church-Operated Exemptions**

**Please note that all regulations included in this manual also apply to Church Operated Exempt (COE) facilities.**

1. Act 245 of 1983 defines those facilities that may apply for an exemption from obtaining of license to operate a child care facility and the process through which such exemption may be granted. The facility must be operated by a church or group of churches and be exempt from the State Income Tax levied by Act 118 of 1929, as amended. The person or persons in charge of such a facility shall submit a written request to the Division for such exemption along with the following:
  - a. Verification of Tax ID ownership by the church
  - b. Verification that the facility is operated by a church or group of churches
  - c. Verification that the facility has been inspected annually and meets the applicable fire safety and health standards
  - d. Certification from the facility that it is in substantial compliance with published standards that similar nonexempt child care facilities are required to meet
2. The Division shall review each request for a church-operated exemption and reply in writing within 60 days from receipt of such request.
3. The facility shall be visited by Division staff to verify the facility's substantial compliance with the published standards prior to the consideration and review by the Division.
4. The Division shall consider each request for exemption and shall review the Division staff's written report in determining a facility's substantial compliance with published standards.

5. If a facility claims and states the belief that a particular standard is of a religious nature, the Division shall consider and make a determination on the statements that shall then be a final action subject to review under the Administrative Procedures Act.
6. Written notification of an exemption shall be made to the facility stating the maximum number of children allowable, the dates of exemption and any other conditions by which an exemption is granted.
7. Division staff shall have the authority to visit any church-operated exempt facility to review, advise and verify the maintenance of substantial compliance at the direction of the Division.

**108 Licensing Investigations**

1. Child Care Licensing staff shall investigate all complaints involving the possible violation of licensing requirements.

**109 Child Maltreatment Checks**

1. The following persons shall be required to have their background reviewed through an Arkansas Child Maltreatment Central Registry Check. A check or money order for \$10.00 made out to Department of Human Services (DHS) must be attached to each form.
 

a. Each applicant to own or operate a child care facility	At application and every two years thereafter
b. Staff members and applicants for employment in a child care facility	At application or within 10 days of hire/start date and every two years thereafter
c. All volunteers who have routine contact with children	At application and every two years thereafter
d. Administrative staff and/or members of Board of Directors who have supervisory and/or disciplinary control over children or who have routine contact with children	At application and every two years thereafter
e. Student Observers	At beginning of observation or within 10 days of first observation and every two years thereafter if applicable
f. Therapist or other persons who have routine contact with children	Within 10 days of the time they begin to provide services or begin to participate in center activities and every two years thereafter
2. If a complaint of child maltreatment is filed against any owner/operator, staff or other

person in a child care center, the Child Care Licensing Specialist shall evaluate the risk to children and determine the suitability of the person(s) to supervise, be left alone with children, have disciplinary control over children or remain in the center during hours of care until the allegations have been determined true or unsubstantiated. (Pending the evaluation of risk to children by the Child Care Licensing Unit, the person(s) alleged shall not be left alone with children.)

3. If corrective action is appropriate, the facility shall require all staff members who have had a founded report of child maltreatment to follow the corrective action plan specified by the Child Care Licensing Unit. Corrective action measures may vary from relevant training to reassignment or termination. Failure to comply with corrective action plans may constitute grounds for adverse action against the license.
4. The statewide Child Maltreatment "Hot Line" and the Child Care Licensing Central Office number shall be posted in a conspicuous place in the child care facility. The "Hot Line" number is 1-800-482-5964 and the Licensing Central Office number is (501) 682-8590 or toll free 1-800-445-3316.

### **110 Criminal Records Check**

1. The following persons shall apply to the Identification Bureau of the Arkansas State Police for a nationwide criminal record check, to be conducted by the FBI, which shall include a fingerprint check: (The individual is responsible for the cost of a nationwide check. Each request must be accompanied by a check or money order made out to the Arkansas State Police ~~for \$16.50~~)

Fingerprints submitted will be used to check the criminal history records of the FBI. Individuals with results showing a prohibited offense shall be advised to contact the Licensing Unit for procedures to obtain the results and for procedures to update or make corrections to the record of their individual history.

- |  |   |
|--|---|
| a. Each applicant to own or operate a child care facility  | Initial application only  |
| b. Staff who have not been a resident of the State of Arkansas for the five (5) preceding years                                | Within 10 days of hire/start date.  |
| c. Administrative persons who have direct contact with children  | If the person has not been a resident of Arkansas for 5 years.  |
| d. Therapist or other persons who have supervisory control, disciplinary control over children or are left alone with children | If the person has not been a resident of Arkansas for 5 years, then at the time they begin to provide services or begin to participate in center activities |

2. The following persons shall be required to have their background reviewed through

Criminal Records check (which includes the Arkansas Sexual Offender Registry) conducted by the Arkansas State Police.

- a) Each applicant to own or operate a child care facility      At application and every 5 years thereafter
- b) Staff and applicants for employment in a child care facility      Within 10 days of hire/start date and every 5 years thereafter
- c) Administrative persons who have direct contact with children      Within 10 days of hire and every 5 years thereafter
- d) Therapist or other persons who have supervisory or disciplinary control over children, or are left alone with children      Within 10 days of the time they begin to provide services or begin to participate in center activities and every 5 years thereafter

3. Criminal records will be returned to the division for review. Any charge/convictions listed in this section (Section 110) that are returned will be considered regardless of whether the record is expunged, pardoned or otherwise sealed.
4. No person shall be eligible to be a child care facility owner, operator, or employee if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are permanently prohibited:

01. Abuse of an endangered or impaired person, if felony	§5-28-103
02. Arson	§5-38-301
03. Capital Murder	§5-10-101
04. Endangering the Welfare of an Incompetent person- 1 <sup>st</sup> degree	§5-27-201
05. Kidnapping	§5-11-102
06. Murder in the First degree	§5-10-102
07. Murder in the Second degree	§5-10-103
08. Rape	§5-14-103
09. Sexual Assault in the First degree	§5-14-124
10. Sexual Assault in the Second degree	§5-14-125

5. No person shall be eligible to be a child care facility owner, operator, or employee if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are prohibited:

01. Criminal Attempt to commit any offenses in MLR Section 110	§5-3-201
02. Criminal Complicity to commit any offenses in MLR Section 110	§5-3-202
03. Criminal Conspiracy to commit any offenses in MLR Section 110	§5-3-401
04. Criminal Solicitation to commit any offenses in MLR Section 110	§5-3-301

05. Assault in the First, Second, or Third degree	§5-13-205 - §5-13-207
06. Assault, Aggravated	§5-13-204
07. Assault, Aggravated on a Family or Household Member	§5-26-306
08. Battery in the First, Second, or Third Degree	§5-13-201 - §5-13-203
09. Breaking or Entering	§5-39-202
10. Burglary	§5-39-201
11. Coercion	§5-13-208
12. Computer Crimes Against Minors	§5-27-601 et. seq.
13. Contributing to the Delinquency of a Juvenile	§5-27-220
14. Contributing to the Delinquency of a Minor	§5-27-209
15. Criminal Impersonation	§5-3-208
16. Criminal Use of a Prohibited Weapon	§5-73-104
17. Death Threats Concerning a School Employee or Students	§5-17-101
18. Domestic Battery in the First, Second, or Third Degree	§5-26-303 - §5-26-305
19. Employing or Consenting to the Use of a Child in a Sexual Performance	§5-27-402
20. Endangering the Welfare of a Minor in the First or Second Degree	§5-27-205 and §5-27-206
21. Endangering the Welfare of an Incompetent Person in the First or Second Degree	§5-27-201 and §5-27-202
22. Engaging Children in Sexually Explicit Conduct for Use in Visual or Print Media	§5-27-303
23. False Imprisonment in the First or Second Degree	§5-11-103 and §5-11-104
24. Felony Abuse of an Endangered or Impaired Person	§5-28-103
25. Felony Interference with a Law Enforcement Officer	§5-54-104
26. Felony Violation of the Uniform Controlled Substance Act	§5-64-101 - §5-64-508 et. seq.
27. Financial Identity Fraud	§5-37-227
28. Forgery	§5-37-201
29. Incest	§5-26-202
30. Interference with Court Ordered Custody	§5-26-502
31. Interference with Visitation	§5-26-501
32. Introduction of Controlled Substance into Body of Another Person	§5-13-210
33. Manslaughter	§5-10-104
34. Negligent Homicide	§5-10-105
35. Obscene Performance at a Live Public Show	§5-68-305
36. Offense of Cruelty to Animals	§5-62-103
37. Offense of Aggravated Cruelty to Dog, Cat, or Horse	§5-62-104
38. Pandering or Possessing Visual or Print Medium Depicting Sexually Explicit Conduct Involving a Child	§5-27-304
39. Patronizing a Prostitute	§5-70-103
40. Permanent Detention or Restraint	§5-11-106



41. Permitting Abuse of a Minor	§5-27-221
42. Producing, Directing, or Promoting a Sexual Performance by a Child	§5-27-403
43. Promoting Obscene Materials	§5-68-303
44. Promoting Obscene Performance	§5-68-304
45. Promoting Prostitution in the First, Second, or Third Degree	§5-70-104 - §5-70-106
46. Prostitution	§5-70-102
47. Public Display of Obscenity	§5-68-205
48. Resisting Arrest	§5-54-103
49. Robbery	§5-12-102
50. Robbery (Aggravated Robbery)	§5-12-103
51. Sexual Offense (any)	§5-14-101 et. seq.
52. Simultaneous Possession of Drugs and Firearms	§5-74-106
53. Soliciting Money or Property from Incompetents	§5-27-229
54. Stalking	§5-71-229
55. Terroristic Act	§5-13-310
56. Terroristic Threatening	§5-13-301
57. Theft by Receiving	§5-36-106
58. Theft of Property	§5-36-103
59. Theft of Services	§5-36-104
60. Transportation of Minors for Prohibited Sexual Conduct	§5-27-305
61. Unlawful Discharge of a Firearm from a Vehicle	§5-74-107
62. Voyeurism	§5-16-102

6. Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed above (Section 110.5), may not work in child care unless:
  - a. The date of the conviction, plea of guilty or nolo contendere for a misdemeanor offense is at least five (5) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the five (5) year period preceding the background check request.
  - b. The date of the conviction, plea of guilty or nolo contendere for a felony offense is at least more than ten (10) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the ten (10) year period preceding the background check request.
  
7. If the licensee wishes to employ an individual with a conviction or plea of guilty or nolo contendere for the following nonviolent offenses, they shall submit a written request for a waiver prior to employment. § 20-38-103 (e) (3) (a) Act 990 of 2013
  - a. Theft by receiving § 5-36-106
  - b. Forgery § 5-37-201
  - c. Financial identity fraud § 5-37-227
  - d. Resisting arrest § 5-54-103
  - e. Criminal impersonation in the second degree § 5-37-208(b)

- f. Interference with visitation § 5-26-501
- g. Interference with court-ordered visitation § 5-26-502
- h. Prostitution § 5-70-102
- i. Patronizing a prostitute § 5-70-203

The waiver may be approved if all of the following conditions are met:

- The individual has completed probation or parole supervision
  - The individual has paid all court ordered fees, fines and/or restitution
  - The individual has fully complied with all court orders pertaining to the conviction or plea
8. The waiver will be revoked, if after employment, the individual pleads guilty or nolo contendere or is found guilty of any prohibited offense (including the list above a-i) or has a true or founded report of child maltreatment or adult maltreatment in a central registry.
  9. The request for waiver and certification of approval shall be kept in the individual's file for the term of employment and three years after termination of employment.
  10. If approved, the waiver is not transferable to another licensed facility.
  11. Anyone employed in a licensed center, COE center, licensed child care family home or a registered child care family home prior to 9/1/2009 with a clear background check history may remain eligible for employment unless the employee had a conviction, plead guilty, or plead nolo contendere to an offense listed in the above section (Section 110.6) since 9/1/2009.

## **200 ORGANIZATION AND ADMINISTRATION**

### **201 Administrative Procedures**

1. The Owner and/or Board of Directors shall be responsible for operating the facility and shall have final responsibility to ensure that the facility meets licensing requirements. Names, addresses, and telephone numbers of Board members shall be provided to the Licensing Specialist.
2. The facility shall provide a written procedure for reporting suspected of child maltreatment. This procedure shall be followed and a call made to the Hot Line whenever there is a suspicion of child maltreatment (1-800-482-5964). These reports of child maltreatment shall include all allegations made to the licensee by parents, staff members or the general public. The licensee should call Child Care Licensing for guidance if there is any question about whether or not the Hot Line should be called regarding any situation where potential child maltreatment is involved.
3. The facility shall provide a written procedure for reporting suspected licensing violations. Serious licensing violations shall be reported to the Licensing Unit. These include, but are not limited to, violations relating to transportation, inappropriate behavior guidance, leaving children unattended or unsupervised, staff/child ratio violations or any other violations or

any other violation that could imminently affect the health and safety of children.

4. Parents shall be informed in writing upon enrollment of their child that children may be subject to interviews by licensing staff, child maltreatment investigators and/or law enforcement officials for the purpose of determining licensing compliance or for investigative purposes. Child interviews do not require parental notice or consent.
5. The facility shall provide a copy of the Kindergarten Readiness Skills Calendar or Checklist, prepared by the Arkansas Department of Education (copies can be requested online, by phone, or by mail from the DHS DCCECE Program Support Unit), to the parents of all three and four year old children enrolled. (Act 825 of 2003) A statement, signed by the parent, that they have received a copy of the list shall be maintained in the child's record.

### **300 PERSONNEL**

#### **301 Staff/Child Ratio**

1. A licensee shall not have more children in care at any one time that the maximum specified on the license.
2. The following staff child ratios shall be maintained:

Ages of Children	Number of Staff	Number of Children
a. Birth – 18 months	1	65
b. 18 months – 36 months	1	98
c. 2 ½ - 3 years	1	12
d. 4 years	1	15
e. 5 years to Kindergarten	1	18
f. Kindergarten and above	1	2018

**Providers licensed prior to the effective date of this rule will have ~~two~~ four years from the implementation of this rule to comply with the revised ratios.**

3. Children ages 30 to 36 months may be placed in the group most suited to their social, emotional and developmental maturity.
4. Infants and toddlers shall not be mixed with ~~day-care~~ preschool children, except as listed in the following requirement.
5. When a total of eight (8) or fewer children are in care at a licensed site, age groups may be mixed according to the following ratios:

Number of Staff	Number of Children	Ages of Children
a. 1	6	No more than 3 under the age of 2 years
b. 1	7	No more than 2 under the age of 2 years

c. 1	8	No more than 1 under the age of 2 years
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6. In a group containing children of different ages, the staff/child ratio shall meet the requirements for the youngest child in the group.
7. During lunch or outdoor play activities, if children of different age groups are together, the staff child ratio for the respective age groups shall be maintained.
8. At no time shall children be left unsupervised or unattended. The child care center shall provide additional staff for any temporary absence of primary child caring staff for activities such as breaks, meal preparation, transportation, etc.
9. The use of cell phones by staff while supervising children shall be prohibited except in emergency situations.
10. DDS (Developmental Disabilities Services) staff/child ratios shall be maintained during DDS program hours in all facilities that are licensed or certified by both Child Care Licensing and DDS.
11. Additional staff provisions shall be made for enrollment of children with disabilities who require individual attention.
12. During naptime for children 2 1/2 years of age and above, a minimum of 50% of the staff shall remain with the children, with a total of 75% of the staff remaining in the building.
13. Group size shall be limited to 2 times the number of children allowed with one staff member. This does not apply to periodic or special group activities. ~~or to school-age children, K5 and above.~~ Existing structures licensed prior to November 1, 2002 are exempt from this requirement. However, any expansions, additions or any newly licensed structures effective November 1, 2002 shall be in compliance.
14. For ages 2 1/2 and above, ratios may be exceeded momentarily as long as children are never left unattended and at least one staff member remains in the classroom with the children. (This would apply to situations such as brief absences for bathroom breaks or to take a sick or injured child to the Director's office.)

### **302 Director**

1. There shall be a director/~~person in charge~~ or assistant director/site supervisor who shall be responsible for:
  - a. Administering, planning, managing and controlling the daily activities of the center;
  - b. Ensuring that the facility meets licensing requirements;
  - c. Ensuring the health and safety of children;
  - d. Providing prudent supervision of all staff and volunteers.
2. Directors shall be twenty-one (21) years of age or older, and provide documentation of one

of the following educational levels (Directors previously approved prior to the implementation of these requirements may continue in their position and do not have to meet these educational levels):

- a. Bachelor's Degree or higher Degree in Early Childhood, Child Development or a related field from a regionally accredited college or university. (Determination of "related field" shall be made by the Division)
- b. Bachelor's Degree in a non-related field from a regionally accredited college or university plus one of the following:
  - Four years of experience in early childhood education ~~the Director shall obtain a~~
  - ~~Current~~ Child Development Associate Credential (CDA)
  - Birth – Pre K Credential ~~within their first year of employment~~
- c. Associate's degree in Early Childhood, Child Development or a related field, plus six (6) years of experience in Early Childhood Education
- d. Eight years of experience in Early Childhood Education and completion of one of the following, within two years of employment:
  - a. Child Development Associate Credential
  - b. Birth – Pre K Credential
  - c. Director's Credential or the equivalent
  - d. Technical Certificate in Early Childhood Education

Individuals who have been employed in the position of Director or Site Supervisor at any time prior to implementation of this rule will not be required to meet the new director's qualifications. These individuals may change employers after this date and still qualify as director.

- ~~e. AA Degree with an emphasis in Early Childhood or Child Development~~
- ~~f. A one (1) year technical certificate in Child Development~~
- ~~g. Child Development Associate (CDA) child care credential from an approved program~~

~~3. A high school diploma or GED with a minimum of four (4) program years of experience in a licensed child care or elementary education program(s) may be substituted for above educational requirements.~~

~~3. The director shall be on site a minimum of 50% of the center's operational day. Directors who oversee multiple sites or have extended operational hours shall name a site supervisor who shall be on site and shall fully meet director's qualifications.~~

A Director or Assistant Director/Site Supervisor, who meets director qualifications, must be present at each licensed site a minimum of 50% of the center's primary operational day, on a routine basis.

4. When the Director and assistant director/site supervisor are both away from the center, there shall be a person in charge ~~site supervisor~~ who shall have the ability and authority to carry out daily operations. The person in charge ~~site supervisor~~ shall be twenty-one (21)

years of age or older.

5. All new directors and assistant director/site supervisors shall attend New Directors Orientation, PAS (Program Administration Scale), and ERS (Environment Rating Scale) training (or other approved tools that are considered equivalent in the states QRIS) within six months of employment. This is an orientation class sponsored by the Division. Proof of attendance shall be maintained in the director's file.
6. The Directors, and assistant director/site supervisors shall obtain fifteen (15) clock hours in early childhood education each year. ~~as approved by the Division.~~ Training shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry, or Department of Education or Department of Higher Education approved. Documentation of training shall be maintained and available for review.
7. Topics appropriate for continuing early childhood education shall include, but are not limited to the following:
  - a. Child growth and development;
  - b. Nutrition and food service;
  - c. Parent communication and involvement;
  - d. ~~Curriculum and~~ Curriculum development and implementation;
  - e. Developmentally appropriate practice and learning environments;
  - f. Behavior ~~management~~ guidance and positive interaction;
  - g. Emergency care and first aid;
  - h. ~~Administration and management~~ Program planning, management, and leadership of early childhood programs.

See Division web-site for a list of courses for which The Division maintains contracts to meet the above requirements.

8. The Licensee shall notify the Licensing Unit of any change in the person named as director, or assistant director/site supervisor within five (5) calendar days.

### **303 Staff Requirements**

1. A person shall be considered a staff member if they have disciplinary or supervisory control over children, is left alone with children at any time, or is counted in staff/child ratio, regardless if they are paid by the facility or not.
2. Staff members in a child care center shall be 18 years of age or older. Exceptions may be allowed for individuals sixteen (16) or seventeen (17) years of age to work in a center if they meet all of the following criteria:
  - a. The individual shall not have disciplinary control over children.
  - b. The individual shall not be left alone with children at any time.
  - c. The individual shall be under the direct supervision of an adult staff member at all times.
  - d. The individual shall meet all other staff requirements.

- e. The individual shall be enrolled in a high school or GED curriculum.
3. All staff members hired after January 1, 1990, to who work directly with children shall have a high school diploma or GED. ~~or shall be enrolled in a high school or GED curriculum and complete the curriculum within one year of hire.~~
  4. All staff members who work directly with children shall obtain at least fifteen (15) hours of ~~in-service training or outside workshop~~ training each year in continuing Early Childhood Education. This training shall be ~~approved by the Division~~ registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved and shall be geared toward the age group they spend the majority of their time with.
  5. ~~At least one (1) adult caregiver who has current certification by the American Heart Association or the American Red Cross in infant and child cardiopulmonary resuscitation (CPR) and at least one (1) caregiver who has a current certification from the American Heart Association or the American Red Cross in First Aid shall be present within the confines of the center while children are in care. Adult CPR is also required if school age children are in care, or documentation that the current certification covers the ages of children in care. Infant/Child/Adult CPR certification will also be accepted from the AR Department of Labor; with documentation they conducted the course. Certifications may be held by the same person.~~
  5. ~~Prior to providing direct child care, staff shall receive an orientation in basic health & safety, facility behavior management policies, center schedules, Minimum Licensing Requirements, and shall be advised that they are mandated reporters under the Child Maltreatment Reporting Act.~~
  6. ~~All staff members working in a child care center, in any capacity, shall obtain a health card or physician's statement showing the absence of contagious Tuberculosis. This shall be renewed on a yearly basis.~~
  6. All staff members caring for children shall be able to perform necessary job functions.
  7. Staff shall not engage in behavior that could be viewed as sexual, dangerous, exploitative or physically harmful to children. A caregiver shall not use profanity or speak in an abusive manner when children are present.
  8. No caregiver shall consume or be under the influence of illegal drugs. (A drug test may be required if there is reasonable cause to suspect violation of this requirement and the issue cannot otherwise be resolved.) No caregiver shall consume or be under the influence of alcohol while delivering care. No caregiver shall consume or be under the influence of medications (prescription or non-prescription) which impair their ability to provide care.

### **304 Volunteer Requirements**

1. Volunteers are those individuals who have routine contact with children and assist staff in the facility. If they are left alone with children, considered in the staff/child ratios or given supervisory/disciplinary control over children they shall be considered staff and must meet

the requirements for personnel (Section 300) and staff requirements (Section 303).

2. All volunteers in a child care center shall be 18 years of age or older unless the volunteer is under the direct supervision of the director or ~~person-in-charge~~ assistant director/site supervisor and has been approved on an individual basis by the Child Care Licensing Unit.
3. Volunteers who have routine contact with children, shall have on file a ~~physician's statement or health card and~~ a child-maltreatment Central Registry check. An exception shall be given to parents who volunteer to assist ~~in~~ on field trips, but are not left alone with children. Child maltreatment Central Registry checks for volunteers under 18 years of age must include a parent's signature.
4. Individuals who provide health services or program enrichment activities on a limited basis are not considered volunteers. The facility shall retain a register of such persons listing name, organization, address, telephone number, date and time in the center. (Note: This section does not apply to therapists or others who have routine contact with children. Therapists who are not left alone with children are required to have child maltreatment background checks. Therapists who are left alone with children at any time are subject to all background check required for personnel. The therapist is entitled to a copy of the initial background/maltreatment check results, and may share a copy with other facilities the therapist may be working in.)

### **305 Student Observers**

1. Students visiting the center on a regular or periodic basis to **observe** classroom activities, or for similar purposes, shall not be counted in the staff/child ratio, shall not have disciplinary control over children and shall not be left alone with children. These individuals shall have the following documentation on file:
  - a. Child maltreatment background check
  - b. ~~A health care or physician's statement showing the absence of contagious tuberculosis~~
2. Students that are conducting practicum, student teaching, or working in the same capacity as a staff member or volunteer must meet the criteria in the appropriate section. (Sections 303 and 304)

### **306 Professional Development**

1. All directors, site supervisors, and staff who provide direct care to children shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry within 30 days of hire and all training shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved.
2. All new staff shall have a probationary period of at least 30 days, but not more than six months, during which they are closely supervised, mentored, and evaluated. Evaluations shall be documented and maintained in the employee file.



3. All new staff members who provide direct care to children shall receive a basic orientation to facility management policies, center schedules, and emergency procedures prior to providing care. This shall be documented in the employee file.
4. All new staff, including volunteers who are counted in the ratios shall receive the following orientation (unless the staff has prior documented training in the required areas).
  1. Introduction (8 clock hours) to be completed before being left alone with children:
    - a. Proper supervision of children
    - b. Behavioral guidance practices
    - c. Safe sleep practices for infants
    - d. Shaken baby syndrome; which includes prevention (Carter's Law, Act 1208)
    - e. Appropriately responding to a crying/fussy infant/child
    - f. Emergency procedures in the event of severe weather, or fire, including evacuation procedures and routes, and location and use of fire extinguishers.
    - g. Mandated reporter training
    - h. Administering medication
    - i. Caring for children with special needs / care plans
    - j. Transportation and car seat safety
    - k. Policies regarding release of children to authorized individuals

See Division web-site for a list of courses, that The Division maintains contracts for, which meet the above requirements.

2. All staff shall have 15 hours of job specific training each year for the ages of children they work with. This shall be training focused on their job responsibilities, such as "Hands on Routine Care" for infants, or "Basics of Assessment" for preschool staff.

See Division web-site for a list of courses, that The Division maintains contracts for, which meet the above requirements.

5. The director, assistant director/site supervisor, and 50% of the facility staff that are on site at any given time shall have a certificate of successful completion of first aid and CPR from an approved organization.
  - a. The curriculum shall conform to current American Heart Association or American Red Cross guidelines.
  - b. The curriculum shall require hands on, skill-based instruction, as well as ~~written~~ ~~and~~ practical testing. Training and certification that is provided solely "on-line" will not be accepted.

- c. The instructor shall be qualified and authorized to teach the curriculum and shall be certified by a nationally recognized organization. (Including but not limited to: Health and Safety Institute; EMS Safety Services, Inc.)

## **400 PROGRAM**

### **401 Program Requirements for all ages**

1. Each child care center shall be equipped with supplies, resources, and indoor and outdoor equipment to take care of the needs of the total group and to provide each child with a variety of activities throughout the day.
2. Children shall have a variety of toys, books, creative materials, and equipment that is easily accessible and arranged to support learning. This includes equipment for:
  - a. Large muscle/Gross Motor activities (such as climbing and running)
  - b. Manipulative/Fine Motor activities (such as things done with the hands: puzzles, drawing, modeling clay)
3. There shall be a written daily ~~routine~~ schedule posted in each classroom, listing developmentally appropriate activities for children. The program shall offer alternating periods of active play and quiet times throughout the day.
4. There shall be a total of ~~one hour~~ 30 minutes per day of moderate to vigorous physical activity. This could be included in outdoor play time if it meets this criterion. ~~these criteria.~~ See Division web-site.
5. Staff shall plan and provide experiences that meet children's needs and stimulate learning in ~~all six developmental areas~~ the following developmental areas: physical, social/emotional, creative/aesthetic cognitive/intellectual and language, ~~literacy, and cultural~~ found in the *Arkansas Early Childhood Frameworks Handbook*.
  - a. The facility shall have an approved curriculum with weekly activity plans appropriate for the developmental needs of each group of children. See Division web-site for a list of approved curricula.
  - b. Each child is viewed by staff as a unique person with an individual pattern of growth and development.
  - c. The center has a variety of learning areas, for example, areas for dramatic play, blocks, books, art, language, literacy, math, and science.
  - d. Children are provided opportunities to work individually or in small, informal groups most of the day and permitted to choose staff-directed or self-selected activities or not to participate.
6. Facility staff shall avoid activities or experiences that may be damaging to children's self-esteem and positive self-image.

7. There shall be meaningful, positive interaction between staff and children, to include but not limited to the following:
  - a. Comfort children who are upset;
  - b. Engage in frequent, multiple and rich social interchanges such as smiling, conversation, touching, and singing;
  - c. ~~Be play partners as well as protectors;~~ Interact with children by being their play partner as well as protector.
  - d. ~~Be attuned to children's feelings and~~ Help children identify and label feelings by being attuned to children's needs.
  - e. Communicate consistently with parents/guardians;
  - f. Interact with children and develop a relationship in the context of everyday routines.
  
8. There shall be an opportunity for a supervised rest period. ~~that:~~
  - a. The supervised rest period shall be at least one (1) hour, but ~~does~~ shall not exceed two (2) hours.
  - b. ~~Children shall not be forced to remain on cot or mat if they do not fall asleep, and~~ If children do not fall asleep, they shall be allowed to participate in a quiet activity either on their cots, in the area or in another room under direct supervision. ~~that does not disturb the children who are asleep.~~
  
9. There shall be sufficient lighting during nap time to provide adequate supervision of the children.
  
10. Parents shall not be denied access to their child at any time during hours of operation. **(Clarification: The intent of this rule is to ensure that the parent(s) or guardian(s) is able to have contact with their child during hours of care. It is not intended to be a determining factor in child custody/visitation matters, nor should it be used to circumvent court ordered custody/visitation rights or schedules. Facilities should encourage parents to resolve custody/visitation issues outside of the care environment. Parents should be informed that continuing problems could result in the dismissal of their child.)**
  
11. Each center is required to provide at least four Division approved opportunities for parental involvement. Examples of approved activities are listed below. (See Arkansas Better Beginnings website for resources. [www.arbetterbeginnings.com](http://www.arbetterbeginnings.com))
  - Parents are allowed to observe, eat lunch with a child, or volunteer in the classroom.
  - Conferences are held at least once a year and at other times, as needed, to discuss children's development and learning.
  - A parent resource area is available with books, pamphlets or articles on parenting and child development.
  - Parent meetings are held with guest speakers or special events, for example, open house or a family activity night.

- Parents are informed of the center's programs and activities through a parents' bulletin board, regular newsletter, email or web page.
  - Parents participate in program and policy development through board involvement, planning meetings or questionnaires surveys.
12. The facility shall distribute materials developed or approved by the Department of Health on prevention of Shaken Baby Syndrome to all parents of infants, upon enrollment. Written documentation of receipt of this information by each parent, with a signature, shall be placed in the child's file. (Carter's Law, Act 1208 of 2013)
13. Staff shall not release a child to anyone who is not immediately recognized as the child's parent or as someone on the authorized pick-up list unless:
- a. The individual can provide an official picture ID AND
  - b. The person in charge can match the ID to the individual named on the child's data sheet
14. Verification of permission for persons not on the authorized list shall be obtained by the person in charge by calling the parent at a number listed in the child's record. The person in charge shall view an official picture ID of the individual to verify identity.
15. There shall be a total of at least one (1) hour of outdoor play per day in suitable weather. When making a determination if children should play outside, staff shall consider the following environmental factors:
- a. When the heat index is forecast to be ninety (90) degrees Fahrenheit or above, outdoor play should be scheduled during early morning hours or the length of time spent outdoors should be reduced to avoid heat stress.
  - b. When outdoor play occurs during the hotter part of the day, children should have shaded area, an ample supply of water and should be monitored closely for signs of heat stress.
  - c. When outdoor play occurs during the winter months and when temperatures are extremely cold, the time scheduled for outdoor play should be reduced or suspended depending on the temperature and other weather conditions.
16. The use of television, DVDs, video cassettes, and computer/video games and other screen time activities shall meet the following requirements;
- a. Shall be prohibited for children younger than ~~18 months~~ two years of age. (The use of DVDs or other video programs for any activities with this age group would have to be approved through an alternative compliance request.)
  - b. Shall be limited to programs of educational value which are age-appropriate
  - c. Shall be scheduled and shall not exceed one (1) hour daily per child or group of children. Children shall not be required to participate in screen time activities and shall be offered other choices. (Viewing time may be extended for special events or occasions such as a current event, holiday or birthday celebration or for the occasional viewing of age appropriate movies or other programs that may exceed one hour in length.)
  - d. Educational computer learning periods for children below 5 years of age may not exceed

two (2) hours a day per child or group of children. Educational computer learning periods for children 5 years of age and older may exceed two hours per day.

17. Photos or video recordings shall not be made of any child without prior written permission from the child's parent or guardian.
18. Photos or video recordings of children shall not be placed on social media or any other websites without prior written parental permission.

#### **402 Infant & Toddler Specific Program Requirements**

- ~~2. Each infant/toddler shall be given opportunity during the day to explore the area outside the crib or baby bed.~~
1. The facility shall provide a safe and clean learning environment, both indoors and outdoors, with age appropriate materials and equipment arranged to support learning.
2. Toys used by infants and toddlers shall be safe and sanitized as needed to help prevent the spread of contagious diseases. Toys that cannot be cleaned and sanitized shall not be used. ~~Toys that children have placed in their mouths or that are otherwise contaminated by body secretion shall be set aside prior to use by another child, until they are cleaned by hand with water and detergent, rinsed, sanitized, and air dried, or washed in a mechanical dishwasher approved by the Department of Health for sanitizing. Machine washable cloth toys shall be used by one individual at a time. These toys shall be laundered before being used by another child.~~
3. Infants and toddlers, shall have a learning/play environment that shall include staff being on their level interacting with them frequently when they are awake.
- ~~3. Infants/toddlers, when awake, may remain in the crib/playpen as long as he or she is content, but never for periods longer than one (1) hour.~~
- ~~4. Stimulation shall be given to an infant in a variety of ways. Caregivers shall hold children, and offer nurturing, responsive care in addition to the routine care of diapering and feeding.~~
4. The facility shall implement relationship-based practices that promote consistency. Infant and toddler caregivers/teachers shall
  - a. Respond promptly to cries and calls of distress by verbally acknowledging, gently touching, and holding children.
  - b. Engage children in frequent rich social exchanges in a variety of ways; for example, holding, patting, making frequent eye contact, smiling, singing, and using a pleasant calm voice in conversation.
  - c. Engage children in frequent positive social exchanges during routine care such as eating, diaper changing, toileting, and preparing for rest.

- d. Provide consistent emotional support to infant and toddlers by acknowledging their feelings and emotions and providing physical and verbal support.
  - e. Communicate consistently with parents/guardians by greeting them warmly and exchanging information that promotes continuity between the center and the child's home.
  - f. Engage in play activities with children by providing a safe environment to explore, modeling play behavior such as imagination and use of toys and equipment, and providing verbal encouragement and support.  
(See Division web site for brain development diagram.)
5. It is recommended that the facility ~~should~~ promote continuity of care for infants and toddlers by maintaining consistency in staffing.
  6. Staff shall plan and provide experiences that meet infant/toddlers needs and stimulate learning in ~~all six developmental areas~~ the following developmental areas: self concept, physical, social, emotional, cognitive and language, ~~meet children's needs and stimulate learning in all six the following developmental areas: physical, social, emotional, cognitive and language / literacy~~ as found in the "Arkansas Frameworks for Infant & Toddler Care." (~~Learning standards.~~)
  7. The center shall have an approved curriculum with weekly lesson plans appropriate for the developmental needs of each group of children. (When available.)
  8. Infants and toddlers shall be taken outside for a period of time every day, unless prevented by weather or special medical conditions.
  9. Outdoor play for infants and toddlers may include riding in a carriage or stroller; however, infants and toddlers shall be offered opportunities for gross motor play outdoors as well.
  10. An age appropriate daily schedule (for each age group) shall be posted in each classroom and shall be accessible to parents and staff.

## **500 BEHAVIOR GUIDANCE**

### **501 Behavior Guidance Requirements**

1. Behavior guidance shall be:
  - a. Individualized and consistent for each child
  - b. Appropriate to the child's level of understanding
  - c. Directed toward teaching the child acceptable behavior and self-control

See Division web-site for recommended behavior guidance training.

2. Physical punishment shall not be administered to children.

3. The length of time a child is placed in time out shall not exceed one minute per year of the child's age.
4. Acceptable behavior guidance techniques include:
  - a. Look for appropriate behavior and reinforce the child with praise and encouragement when they are behaving well.
  - b. Remind the child on a daily basis of the rules by using clear positive statements regarding how they are expected to behave rather than what they are not supposed to do.
  - c. Attempt to ignore minor inappropriate behavior and concentrate on what the child is doing properly.
  - d. Use brief supervised separation from the group only when the child does not respond to a verbal command which instructs the child as to how he or she is supposed to behave.
  - e. When a misbehaving child begins to behave appropriately, encourage and praise small steps rather than waiting until the child has behaved for a long period of time.
  - f. Attend to the children who are behaving appropriately and other children will follow their example in order to obtain your attention.
5. The following activities or threats of such activities are unacceptable as behavior guidance measures and shall not be used for children. These include, but are not limited to the following:
  - a. Restraints (Restraining a child briefly by holding the child is allowed when the child's actions place the child or others at risk of injury.)
  - b. Washing mouth with soap
  - c. Taping or obstructing a child's mouth
  - d. Placing unpleasant or painful tasting substances in mouth, on lips, etc.
  - e. Profane or abusive language
  - f. Isolation without supervision
  - g. Placing child in dark area
  - h. Inflicting physical pain, hitting, pinching, pulling hair, slapping, kicking, twisting arms, biting or biting back, spitting, swatting, etc.
  - i. Yelling (This does not include a raised voice level to gain a child's attention to protect the child from risk of harm.)
  - j. Forcing physical activity, such as running laps, doing push-ups, etc. (This does not include planned group physical education activities that are not punitive in nature.)
  - k. Associating punishment with rest, toilet training or illness
  - l. Denying food (lunch or snacks) as punishment or punishing children for not eating. Children shall not be forced or bribed to eat.
  - m. Shaming, humiliating, frightening, labeling, physically or mentally harming children
  - n. Covering the faces of children with blankets or similar items
6. Posted group behavior charts shall not be used. (Individual behavior charts that are not viewable by children and individual charts used by therapists are allowable.) ~~if used, should be used to encourage positive behavior. Behavior charts shall record only the child's~~

~~behavior for the current day and shall not be punitive. (Behavior charts used to record only positive behavior may be maintained on a weekly basis.) The child's age and level of understanding should be considered when using behavior charts.~~

7. Behavior guidance practices used by the center shall be discussed with each child's parents and provided to them in writing at the time of enrollment with a copy signed by the parent maintained in the child's record.

## **502 Infant & Toddler Behavior Guidance Requirements**

1. Time-out shall not be used for children under two years of age.
2. The child may be placed in a supervised area away from the group or in a crib or playpen while staff attends to the situation. Brief separation from the group is acceptable when the child's behavior places the child or others at risk of harm. Example: A child who has bitten another child would be removed from the group, briefly, while staff attends to the bitten child.

## **600 RECORDS**

### **601 Record Requirements**

1. All staff, child and facility records shall be kept and made available to the Child Care Licensing Unit on request. The records shall be maintained for three (3) years unless otherwise indicated.
2. Licensing compliance forms (DCC-521) shall be available at the facility for 3 years. The facility shall advise parents in writing that the compliance forms are available for review upon request.
3. The facility shall maintain daily attendance records on all children as follows:
  - a. Children shall be signed in and out daily by a parent or guardian, or designee. Electronic sign in and out systems will meet this requirement.
  - b. The record shall include the date and time of arrival and departure.

### **602 Facility Records**

1. Facility Records shall be maintained on site and include:
  - a. Attendance records on all children
  - b. Transportation rosters, if applicable (maintained for one year)
  - c. Verification of current vehicle registration, if applicable
  - d. Verification of required commercial vehicle insurance coverage, if applicable
  - e. Verification of required Child Care Liability Insurance
  - f. Verification of current pet vaccinations, if applicable
  - g. Verification of annual fire department approval



- h. Verification of annual health department approval
- i. Verification of zoning approval (maintained as part of permanent record)
- j. Verification of annual approval by the Boiler Inspector Division of the Department of Labor
- k. Mobile Home Commission approval for double wide manufactured homes, if applicable (maintained as part of permanent record)
- l. Record of emergency drills
- m. Plans and procedures of Emergency Preparedness
- n. Procedures for reporting allegations of child maltreatment
- o. Procedures for reporting suspected licensing violations
- p. Licensing compliance forms
- q. Log of Product Recall and Safety Notices from CPSC or Attorney General's Office
- r. Articles of Incorporation, if applicable (maintained as part of permanent record)
- s. Current list of names, addresses and phone numbers of the Board of Directors, if applicable

### **603 Staff Records**

1. Staff records may be maintained off site, unless otherwise noted, and shall contain the following:
  - a. Name, date of birth, address and telephone number
  - b. Education, training and experience, including a copy of the GED or high school diploma (If these documents are no longer available, proof of reasonable effort to obtain the documentation is acceptable.) **Clarification:** Training hours will be counted on a calendar year basis or by the facility's operating schedule if they do not operate year round.
  - ~~c. Health record, including current health card and/or physician's statement verifying the staff is free of contagious tuberculosis (copy must be on site)~~
  - c. Employment related information for previous six (6) years, with written documentation of verification of employment and reference checks
  - d. Attendance record, listing days and hours worked
  - e. Date of employment and date of separation
  - f. Documented training or continuing education; i.e., orientation, in-service training, and workshop documentation, which shall include title of workshop, presenter, hours of training and date
  - g. Initiation of Criminal Record Checks and Central Registry Checks and the results obtained when received
  - h. Verification of completion of the required transportation training and a readable, current copy of the driver's license for all staff who transport children (copy must be on site)
  - i. Verification of First Aid and/or CPR for applicable staff (copy must be on site)
  - j. Documentation of new employee evaluations.

### **604 Children's Records**

1. The child care facility shall maintain a record for each child in care which shall be on site. Records for children no longer enrolled may be maintained off site. Children's records shall

contain the following information:

- a. Application form which includes child's name, date of birth and address, name of parent or guardian, telephone numbers (home and business), work hours of parents or guardians, and date of enrollment in facility.
- b. The name, address, and telephone number (home and business) of a responsible person to contact in an emergency if the parent or guardian cannot be located promptly.
- c. Name, address and telephone of child's physician or emergency care facility.
- d. Written permission of parent or guardian authorizing emergency medical care and transportation of child for emergency treatment (This authorization shall accompany children anytime they are transported.)
- e. Name(s) of persons authorized to pick up child.
- f. Permission slips signed by parent or guardian authorizing the child to be taken on specific field trips.
- g. Pertinent medical history on the child.
- h. An authorized record of up-to-date immunizations or documentation of a religious, medical or philosophical exemption from the Arkansas Department of Health (Updated immunization schedules will be provided as changes are received from the Arkansas Department of Health.)
- i. A written record of all significant changes in the child's physical or emotional state and accidents, incidents or injuries, indicating the date, location, time of day, area or piece of equipment where the incident occurred. A copy of this shall be given to the parent on the day of occurrence.
- j. Any legal or medical documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the child.
- k. Written permission for the facility to photograph or video tape their child, if applicable.
- l. Written permission for the facility to place photos and video recordings of their child on social media or other websites, if applicable.
- m. Infant feeding documentation shall be maintained for at least one year.
- n. Documentation of distribution of Shaken Baby Syndrome information to all parents of infants in accordance with Carter's Law.

## **700 NUTRITION**

### **701 Nutrition Requirements**

1. The center shall ensure that lunch is served to each child.
2. Breakfast, lunch, snacks and evening meals shall each meet *current* U.S. Department of Agriculture guidelines, including portion size. (See Appendix C) Menus for all food service shall be posted. See Division web-site. If sack lunches are utilized, the facility shall ensure that they also meet these requirements. Milk shall be served to each child during the day. Exceptions may be made for children who suffer allergies to milk.
3. Breakfast shall be made available for children who arrive before 7:00 a.m. Breakfast may be served to all children rather than a morning snack provided there is no more than 3 hours between the beginning of breakfast and the beginning of lunch.

4. ~~Meals shall be served at tables.~~ All food service surfaces shall be kept sanitary.
5. Food shall be served on individual plates, bowls, or other dishes that can be sanitized or discarded.
6. Food and drinks which are not available to the children shall not be consumed by staff in the children's presence.
7. Mid-morning snacks or breakfast, and mid-afternoon snacks shall be provided for all children.
8. All food brought from outside sources shall come from Health Department approved kitchens and shall be transported as per Health Department requirements, or the food shall be in an individual, commercially pre-packaged container. (This does not include individual sack lunches brought from home.)
9. All refrigerators used for food storage shall be maintained at a temperature of 41 degrees or below, and all freezers used for food storage shall be maintained at a temperature of 0 degrees or below.

## **702 Infant & Toddler Nutrition Requirements**

**It is recommended that mothers should be allowed and encouraged to breast feed their children at the facility.**

1. The routine use of food, bottles and formula shall be agreed upon by the caregiver and parent. Instructions regarding special needs for food, bottles and formula, such as food allergies, shall be obtained in writing from the parent and followed by the caregiver. (See Appendix D).
2. Feedings for all children up to twelve (12) months of age shall be documented by the caregiver and available for review by the parent. This documentation shall continue for all children older than twelve (12) months of age who are still being given bottles.
3. Infant bottles and food shall be prepared and heated in an area separate from the diaper changing area.
4. Microwaves shall not be used for heating bottles, due to the danger of uneven heating.
5. Infants no longer held for feeding shall either sit in low chairs at low tables or in infant seats with trays, or in high chairs with wide bases. Safety straps shall be used if directed by the manufacturer.
6. Children under 2 years of age shall not be fed foods that may cause choking, such as, but not limited to hard candy, raw carrots, hot dogs, nuts, seeds, or popcorn.

7. Water used for the preparation of formula shall not come from the hot water supply. (Water from hot water systems may contain high levels of lead and other substances which could be harmful to small children.)
8. Children shall not share the same bottle or eating utensils. The facility shall practice a sanitary method of cleansing baby bottles, cups and utensils.
9. Bottles shall not be propped. Infants under six months of age shall be held while being bottle-fed. ~~If needed, infants six months of age or older shall be held while being bottle-fed.~~
10. ~~Children shall not be given bottles in their cribs, swings, bouncy seats or car seats.~~
10. Bottles and "sippy cups" shall be labeled with the child's name and shall be refrigerated.

## **800 BUILDINGS**

### **801 Building Requirements**

1. Child care centers shall comply with the Minimum Requirements of The ~~National Fire Safety Code 101~~ currently adopted Arkansas Fire Prevention Code as administered by local fire department or by the State Fire Marshal, who has final authority. Written verification of annual approval shall be maintained on file. **(Note that the State and Local Fire Codes may not allow the use of basements or floors above ground level by children, first grade and younger, unless there is a ground level exit.)**
2. State Health Department requirements shall be met. Written verification of annual approval shall be maintained on file.
3. Department of Labor, Boiler Inspection Division requirements shall be met. All water heaters and any other boilers in licensed child care settings shall be inspected on an annual basis and/or upon installation. Verification that initial inspection has been scheduled and annual approval shall be maintained on file. Inspection, or proof of attempt to set up initial inspection, shall be completed within six (6) months of licensure. Scheduling and completion of annual inspections will be the responsibility of the Department of Labor, however, the facility is responsible for cooperating and keeping documentation of such inspection on file for review. (AR Code §20-23-101 et. seq.)
4. All space used by a center shall be kept clean and free of hazardous or potentially hazardous objects. (These objects include, but are not limited to, poisonous substances, firearms, explosives, broken toys/equipment, or other objects that could be harmful or dangerous, if they are determined to be accessible to children.)
5. Thirty-five square feet per child of usable floor space shall be required for indoor activities. This does not include bathrooms, kitchen and hallways. Usable space in the child care center shall include areas in the classroom used for storage of programmatic materials which are accessible to children. This does not include closets or storage space for equipment that is not in use.

6. Separate space shall be provided for the isolation of children who become ill and shall be located in an area that can be supervised at all times by a staff member.
7. All parts of the center used by the children shall be well heated, air conditioned, lighted, and ventilated and maintained at a comfortable temperature.
8. Glass doors shall be clearly marked.
9. When windows and doors are used for ventilation, they shall be screened and shall not present a safety hazard.
10. Floor furnaces, gas heaters, electric heaters, hot radiators, water heaters, air conditioners and electric fans shall have guards and shall not present a safety hazard. Portable fuel fired heaters shall not be used.
11. It is recommended that if natural gas or propane is used, the facility's heating & ventilation systems shall be inspected and cleaned if necessary before each heating season by a qualified HVAC technician. ~~The facility shall have on file documentation that these inspections and cleanings have been completed.~~
12. Carbon monoxide detectors shall be placed in facilities according to manufacturer's recommendations if one of the following ~~guidelines is met~~ situations applies:
  - a. ~~The child care program uses any sources of~~ Facilities using wood, propane, natural gas or any other product as a heat source that can produce carbon monoxide indoors or in an attached garage.
  - b. ~~If~~ Any situations where carbon monoxide detectors are required by state or local law.
13. Floors, ceilings and walls shall be in good repair and kept clean. Paints used at the facility shall be lead free.
14. A child care center shall have an operable telephone on site all hours children are in care. The Licensee shall provide the phone number to the Licensing Unit and to the parents. (This phone may be a cell phone if the phone stays operable, stays at the facility during all hours of care, and is the phone number provided to the Licensing Unit and the parents.)
15. The following structures shall not be used as child care centers:
  - a. Manufactured homes constructed prior to June, 1976
  - b. Manufactured homes constructed with metal roofs and outside walls
  - c. Single-wide manufactured homes
  - d. Portable storage type buildings
16. Double-wide manufactured homes may be considered provided they are tied down in accordance with the manufacturer's tie down specifications manual. Any new applicant for a child care center that requests the use of a manufactured home shall obtain an inspection

at the applicant's expense from the Arkansas Manufactured Home Commission.

17. Manufactured homes currently licensed as child care facilities shall be tied down as recommended by the Arkansas Manufactured Home Commission.
18. Portable classroom buildings are not considered manufactured homes, but do require Fire Department approval. Portable classroom buildings installed after November 1, 2002, shall have Fire Department approval prior to purchase and installation.

### **802 Infant & Toddler Building Requirements**

1. If Infant and Toddler Centers and Child Care Centers are operated in the same building, the areas designated for care of infants and toddlers shall be in rooms separate from the activity of other children.
2. When infants/toddlers share the same eating areas with older children, arrangements shall be made to maintain separation.

### **900 ~~GROUNDS~~ Playgrounds / Outdoor Learning Environment**

To provide the safest possible playground environment, you are encouraged to meet Consumer Product Safety Commission's guidelines listed in the "Handbook for Public Playground Safety". However, the following are minimum requirements and shall be met.

**Please note that these requirements do not mandate the use of any large and/or permanently anchored pieces of playground equipment that would require fall use zones and protective surfacing. Numerous options for suitable playground environments are available and acceptable. For information on playground options, contact your Licensing Specialist.** Examples of such activities are:

- Sand boxes
- Activity walls at ground level
- Art easels
- Balls & games
- Play houses
- Nature walks
- Use of the approved natural environment for outdoor learning
- ~~Any other equipment that children use when their feet remain in contact with the ground surface~~

~~It is not recommended to use~~ The use of ~~Because~~ public playgrounds and other play environments away from the facility is not recommended as these environments may not meet acceptable safety standards. If these playgrounds are used, staff should provide close supervision and not allow children to use any equipment that appears unsafe (eg: broken equipment, sharp objects, strangulations hazards, etc.). Using playgrounds and other play environments away from the facility ~~shall be~~ is considered a field trip and all field trip ~~regulations~~ requirements shall be followed.

## **901 Layout & Design**

1. A diagram of the playground shall be submitted, clearly identifying the perimeter of the playground, with measurements, and identifying each piece of equipment used by the children enrolled at the licensed facility. This documentation shall be in the form of ~~photographs with a diagram or a satellite photo from an internet site such as Google Maps, or a diagram if a satellite photo is not available. The designated and agreed upon play area, specifying the exact play area and equipment to be used and the associated documents, are critical parts of the terms of the license.~~
2. Any changes in the play area boundaries and/or equipment requested must be submitted in writing and approved prior to use.
3. All equipment and protective surfacing shall be installed and maintained according to manufacturer's guidelines.
4. The play area/outdoor learning area shall be fenced or otherwise enclosed and provide at least 75 square feet per child present on the playground at any time.
5. There shall be an outside exit from the play area.
6. The area shall be well drained.
7. There shall be equipment and activities appropriate for the age and number of children enrolled in the facility.
8. Separate play areas or time schedules shall be provided if, infants and toddlers share playgrounds with older children.
9. A shady area shall be provided where children can get out of direct sunlight. This can be accomplished by utilizing existing shade such as trees and buildings, or by creating shade with manufactured structures such as awnings. If shade is not available the schedule for outdoor play shall be altered so that children are outdoors during early morning hours to avoid extreme heat and direct sunlight.
10. All areas where children play outdoors shall be properly maintained. ~~The enclosed play area shall be free from weeds, tall grass, untrimmed shrubbery, standing water, and litter to prevent vermin and insect infestation.~~

## **902 General Hazards**

1. The area shall be free of hazards or potentially hazardous objects.
2. Equipment that has been determined by the Division to be unsafe for the children in the licensed facility to use shall be removed from the play area, or enclosed by a fence or

other suitable barrier so the children will not have access to it.

3. All newly purchased playground equipment designed for children to play on or climb on, such as slides, swings, composite structures, etc., shall be commercially manufactured and certified to meet ASTM or CPSC standards for public playgrounds. Equipment in place prior to January 1, 2014 may continue to be used provided it meets all other licensing requirements.
4. Equipment, which is designed to be anchored, shall be properly anchored so that the anchoring devices are below ground level.
5. Sand for playing shall be kept safe and clean.
6. Paint on equipment shall be lead free.
7. All fasteners, including S-hooks, shall be securely tightened or closed.
8. There shall be no sharp points, corners, edges, or splinters.
9. Equipment shall not have protrusion hazards. (A protrusion is a projection which, when tested, is found to be a hazard having the potential to cause bodily injury to a user who impacts it.)
10. Equipment shall not have entanglement hazards. (An entanglement is a condition in which the user's clothes or something around the user's neck becomes caught or entwined on a component of playground equipment.)
11. ~~The only~~ Trampolines shall not be used. ~~allowed shall be mini-tramps used under direct supervision on site or on field trips off site.~~ (Therapeutic use of trampolines is acceptable if supervised by the therapist on a one-on-one basis.) ~~for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.~~
12. Ball pits shall not be used. ~~allowed on site or on field trips.~~ (Ball pits are large areas or "pits" filled with balls intended for children to jump in and play. Therapeutic use of ball pits is acceptable if supervised by the therapist on a one-on-one basis.) ~~for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.~~
13. Wading pools shall not be used. ~~allowed on site or on field trips.~~ This does not prohibit the use of sprinklers and water play.
14. To prevent entrapment, there shall be no opening(s) between any interior opposing surfaces between 3.5 and 9 inches. (Openings in equipment that might allow a child's body to pass through, but not their head.) Ground bounded openings are exempt.
15. Providers/caregivers shall be aware of and remove when possible any hazardous items



children may wear on play equipment such as helmets, drawstrings, and other accessories around the neck that may cause a strangulation/entanglement hazard.

16. All children one year of age and older shall wear properly fitted and approved helmets while riding on bicycles and when using roller skates, skate boards, roller blades and scooters. ~~toys with wheels (tricycles, bicycles, etc.) or using any wheeled equipment (rollerblades, skateboards, etc.).~~ Helmets shall be removed as soon as children stop riding the wheeled equipment. Helmets shall meet CPSC standards. (Helmet use is recommended while riding tricycles and other wheeled toys.)

17. All soccer goals shall be commercially manufactured and installed and anchored according to manufacturer's guidelines.

~~18. Balance beams higher than 12 inches shall have fall zones.~~

### **903 Balance Beams**

1. Balance beams shall not be higher than 12 inches and shall have use zones with protective surfacing.

2. Children under age 2 shall not use balance beams.

### **903 904 Slides**

1. Slides shall not have any spaces or gaps between the platform and the slide surface.

2. Slides shall have a transition platform of at least 14 inches deep for preschool and school age children, and 19 inches deep for toddlers.

### **904 905 Swings**

1. The following swings shall not be used for any ages:

- a. Multi-occupancy swings designed to hold more than one child, except tire swings
- b. Heavy molded swings such as animal figure swings
- c. Free swinging rope (Tarzan ropes)
- d. Swinging exercise rings
- e. Trapeze bars
- f. Swings attached to a composite structure (Composite Structure is defined by CPSC as, "Two or more play structures attached or functionally linked, to create one integral unit that provides more than one play activity.")

2. There shall be no wood or metal swing seats.

3. Toddler swings shall ~~provide support on all sides, if seat is above 12" from ground~~ have fully enclosed bucket seats.

4. Direct supervision shall be provided for children in toddler swings.

### **905 906 Climbing Equipment**

1. Free standing arch climbers ~~exceeding 4 feet in height~~ shall not be used for pre-schoolers.
2. Flexible grid climbing devices, such as rope or chain ladders, climbing ropes, etc., shall be securely anchored at both ends.
3. Flexible grid climbing devices shall not be used for preschoolers unless they are anchored at both ends and have a means of transitioning from one piece of equipment to the next.
4. Preschoolers shall not use sliding poles.
5. Sliding poles shall have no protruding welds or seams along the sliding surface and the pole shall not change directions.

### **906 907 Merry Go Rounds**

1. The only merry-go-rounds allowed are portable merry-go-rounds not designed to be anchored and they shall have handgrips or other secure means of holding on.

### **907 908 Seesaws**

1. Seesaws without spring centering devices shall have shock absorbing materials, such as partial tires embedded in the ground underneath the seats or secured to the underside of the seats.
2. Hand holds shall be provided for both hands at each seating position and shall not turn when grasped.
3. Hand holds shall not protrude beyond the sides of the seat on seesaws.

### **908 909 Fall Zones/~~Surfacing~~ Protective Surfacing**

1. There shall be ~~fall~~ use zones and protective surfacing under and around all equipment that ~~is over 24" in height at the highest accessible point requires a child to be standing or sitting above ground level~~ is over 18" in height at the highest accessible point. The highest accessible point is defined as the highest surface on the piece of equipment where children would stand or sit when the equipment is being used as intended. ~~(The highest accessible point is defined as the highest surface on the piece of equipment where children would stand or sit when the equipment is being used as intended.)~~ Fall Use zones shall extend a minimum of 6' in all directions (unless otherwise specified) from the perimeter of the equipment. ~~Exceptions may be granted for structures that have protective barriers in place.~~ (Playground equipment that is between 18 inches and 24 inches at the highest accessible point and that was installed prior to the enforcement date of this revision is allowable)

without fall surfacing, as long as it meets all other requirements.)

2. Swings require ~~fall~~ use zones and surfacing regardless of height. (~~Toddler swings equipped with safety straps are exempt from this requirement, provided their use is closely supervised.~~)
3. ~~Fall~~ Use zone surfacing depths shall be as follows:
  - a. ~~Structures over 2' and under 3 1/2"~~ at the highest accessible point shall have a minimum surfacing material depth of 6"
  - b. ~~Structures 3 1/2' up to 5'~~ at the highest accessible point shall have a minimum surfacing material depth of 9" (shredded tires or other shredded or chopped rubber products shall have a minimum depth of 6")
  - c. ~~Structures 5' and taller~~ at the highest accessible point shall have a minimum surfacing material depth of 12" (shredded tires or other shredded or chopped rubber products shall have a minimum of 6" depth)

Minimum compressed loose-fill surfacing depths

	Inches	Loose-Fill Material	Protects to Fall Height of:
a.	6*	Shredded/recycled rubber	10 feet
b.	9	Sand	4 feet
c.	9	Pea Gravel	5 feet
d.	9	Wood mulch (non-CCA)	7 feet
e.	9	Wood chips	10 feet

\*Shredded/recycled rubber loose-fill surfacing does not compress in the same manner as other loose-fill materials. However, it is recommended, care ~~should~~ be taken to maintain a constant depth as displacement may still occur

4. Shock absorbent material such as sand, pea gravel, wood chips, wood mulch, shredded tires, etc., shall be used in ~~fall~~ use zone areas under and around playground equipment which requires a ~~fall~~ use zone.
  - a. When purchasing gravel, care should be taken prior to purchase to insure that the gravel is actually pea gravel that is smooth and rounded, and not crushed rock or gravel with sharp edges. Crushed rock and sharp gravel will not be approved.
  - b. Pea gravel used for ~~fall~~ use zones shall not be over 1/2 inch in diameter.
  - c. Different types of surfacing materials shall not be combined within the same use zone area.
5. Hard surface materials, such as asphalt and concrete shall not be used as base surfaces in the ~~fall~~ use zones except under commercial matting or other systems/products designed to be installed over hard surfaces as directed by the manufacturer.
6. SLIDES: The ~~fall~~ use zone for slides measuring 6 feet or over, measured from the slide

platform to the ground, shall extend ~~to~~ 8 feet from the exit end of the slide. Use zones for slides measuring under 6 feet from the platform to the ground shall extend 6 feet from the exit end of the slide.

7. SWINGS: The ~~fall~~ use zone for single-axis swings (standard swings) (except toddler swings) shall extend to the front and to the rear of the swing a minimum distance of two times the height of the pivot point (where the chain attaches to the frame) above the playing surface. The ~~fall~~ use zone for toddler swings shall extend to the front and rear of the swing a minimum of two times the distance from the pivot point to the swing seat. (~~Note exemption listed in 908.1 above.~~) ~~Fall~~ Use zones shall also extend ~~six~~ 6 feet to the sides of the swing set.
8. SWINGS: The ~~fall~~ use zone for multi-axis swings (such as tire swings or others with three or more suspending chains) shall extend in all directions a minimum of six feet, plus the height of the suspending rod or chain. The use zone from the end of the structure must also extend a minimum of 6 feet in all directions.
9. ~~Fall~~ Use zones shall be free of obstacles onto which children may fall.

## **1000 FURNITURE & EQUIPMENT**

### **1001 Furniture & Equipment Requirements**

1. All manufacturer guidelines shall be followed for furniture and equipment that is used by, or around, children.
2. All equipment shall be sturdy, clean, and safe.
3. Paint on toys, equipment and other materials shall be lead free.
4. ~~Chairs and tables shall be the size appropriate for children.~~ Child size tables and chairs, highchairs, and equipment designed for or other age appropriate and comfortable seating options shall be used during snack and meal times.
5. Safety straps shall be used at all times in high chairs or any other seats designed to be used with straps.
6. The center shall provide individualized space for storing personal belongings.
7. There shall be storage space for extra materials and other equipment when not in use.
8. Outdoor equipment that requires fall zones and surfacing shall require the same fall zones and surfacing if used inside the facility. (This does not apply to equipment specifically designed for indoor use only.)

### **1002 Sleeping Equipment Requirements for Preschool**

1. There shall be a labeled, individual cot or mat, bottom sheet, and adequate cover for each child in care during rest time.
2. The use of mats shall be acceptable if they are at least 2 inches thick, washable, waterproof, and size-appropriate for children.
3. All sleeping equipment shall be kept at least one foot apart for napping to prevent cross-contamination and to ensure ease of access in an emergency.
4. Sheets and covers shall be washed at least once a week or more frequently as needed. Once a sheet/cover/blanket has been used by a child, it shall not be used by another child until it has been washed.

### **1003 Infant & Toddler Sleeping Equipment Requirements**

1. Sleeping ~~children~~ infants & toddlers shall be visually monitored at all times and physically checked regularly for breathing.
2. Infants/toddlers shall be placed in age appropriate cribs, cots, or mats meeting CPSC standards, for when they fall asleep. (Note: Also, any items used in the crib must be used according to manufacturer guidelines, regardless if the child is sleeping or not, in accordance with 1001.1).
3. Infants (children 12 months of age and below) shall be placed flat on their backs to sleep, in accordance with American Academy of Pediatrics guidelines, to lessen the risk of suffocation and Sudden Infant Death Syndrome. (If a child rolls over on his/her own, the facility is not required to reposition the child.) If there is a medical reason a child cannot sleep on his/her back, then a signed statement from the child's physician must be in the file stating the reason, the sleep position indicated, and the time frame this is required
4. Infants' sleep space (e.g. crib) shall be free of loose bedding. If a light blanket is necessary, it should be kept at or below the mid-chest area of the child. Staff shall not cover the faces of infants.
7. Swaddling infants is not recommended and shall require a note from the child's physician if continued past the age of 3 months. ~~shall not be practiced except as directed in writing by the child's physician.~~
8. Pillows (including nursing or "boppy" pillows), bumpers/bumper pads, and stuffed animals shall not be placed in cribs.
9. Bibs, necklaces, and garments with ties or hoods shall be removed from infants prior to rest/naptime to reduce the risk of entanglement and strangulation while the child is sleeping.
9. Any cribs or playpens that have been identified as unsafe, or have been subject to recall as defined by the Consumer Products Safety Commission (CPSC) guidelines or law, shall be

removed or repaired as indicated.

10. An individually labeled crib or safe playpen with a waterproof mattress shall be provided for each child less than 12 months of age. A bassinet shall not be used. (Please note that the CPSC does not recommend the use of playpens in licensed child care.)
11. The following guidelines shall be required for cribs:
  - a. Slats shall be no greater than 2 3/8" apart
  - b. Cribs that have end panels with decorative cutout areas shall not be used
  - c. Mattresses shall fit snugly in the crib, be waterproof and in good repair.
  - d. The space between crib and mattress shall measure no more than 1 inch.
  - e. Corner posts shall be the same height as end panels
  - f. End panels shall extend below mattress at the lowest position of the mattress
12. Crib bedding shall be changed daily or more frequently when wet or soiled.

## **1100 HEALTH**

### **1101 General Health Requirements**

~~1. No child or staff shall be admitted who has a contagious or infectious disease. Parents and guardians shall be notified to pick up the child if the child exhibits any of the symptoms listed below:~~

- ~~a. **Fever:** A body temperature of 101 degrees Fahrenheit or greater (Recommendation- Infants, six months of age or under, which have a temperature of 100 degrees Fahrenheit greater should be excluded.)~~
- ~~b. **Diarrhea:** three (3) or more watery stools in a 24 hour period~~
- ~~c. **Vomiting:** Vomiting on two or more occasions within the past 24 hour period~~
- ~~d. **Rash:** Body rashes, not obviously associated with diapering, heat or allergic reactions to medications~~
- ~~e. **Sore Throat:** if associated with fever or swollen glands in the neck~~
- ~~f. **Severe Coughing:** Episodes of coughing which may lead to repeated gagging, vomiting or difficulty breathing~~
- ~~g. **Pink Eye:** Pink or red eye(s) which may be swollen with white or yellow discharge, until on antibiotics for 24 hours~~
- ~~h. **Untreated Scabies, Head Lice or the presence of nits:** May return after treatment and removal of nits~~
- ~~i. **Multiple Sores inside mouth with drooling:** unless health care provider determines the condition is non-infectious~~
- ~~j. **Ring Worm:** a fungal infection of the scalp or skin: may return after evaluation and under treatment by a health care provider~~
- ~~k. **Impetigo:** may return 24 hours after treatment is initiated~~

1. No child or staff shall be admitted who has a contagious or infectious disease.

2. The parent or legal guardian shall be notified as soon as possible when a child has any symptom that requires exclusion from the facility. The child shall be separated from other children and closely monitored until the parent arrives to pick the child up.
3. The caregiver shall determine if the illness prevents the child from participating comfortably in activities, results in a greater need for care than the child care staff can provide without compromising the health and safety of the other children, or poses a risk of spread of harmful diseases to others.

The caregiver shall temporarily exclude the child from child care if the child has:

- a. Sudden change in behavior, such as:
  - lethargy or lack of responsiveness
  - unexplained irritability or persistent crying
  - difficult breathing
  - a quickly-spreading rash
- b. Fever over 101 degrees/oral, 100/axillary (or equivalent method) in a child who also has pain, behavior changes, or other symptoms of illness.
  - An infant younger than 2 months with any increased temperature shall get urgent medical attention, within an hour
  - An infant younger than 6 months with any increased temperature shall be medically evaluated
- c. Diarrhea, defined as watery/runny stools, if frequency exceeds 2 or more stools above normal for that child, and is not related to a change in diet or medication. Exclusion from child care is required if diarrhea cannot be contained in the diaper or if diarrhea is causing soiled clothing in toilet-trained children
- d. Blood or mucus in stools (unless caused by hard stools)
- e. Vomiting illness (2 or more episodes of vomiting in the previous 24 hours)
- f. Abdominal pain which lasts more than 2 hours
- g. Mouth sores with drooling
- h. Rash with fever or behavior change
- i. Conjunctivitis or "pink eye" – with white, yellow, or green eye discharge and red ("bloodshot") eyes, exclude only if child has:
  - fever,
  - eye pain
  - redness and/or swelling of the skin around the eyes, or
  - if more than one child in the program has symptoms
- j. Pediculosis (head lice), until after the first treatment.
- k. Active tuberculosis, until a health care provider or health official states that the child is on appropriate therapy and can attend child care.
- l. Impetigo, until treatment has been started;
- m. Strep throat, until 24 hours after antibiotic treatment has been started
- n. Chicken pox, until all lesions have crusted (usually 6 days after the rash appears)
- o. Rubella, until 6 days after onset of rash
- p. Pertussis (whooping cough); until 5 days of antibiotic treatment
- q. Mumps, until 5 days after onset of gland swelling

- r. Measles, until 4 days after onset of rash
  - s. Hepatitis A, until 1 week after onset of illness or as directed by the health department
- ~~5. Any child who becomes ill and unable to participate in daily activities shall be separated from other children, supervised, and parents shall be called to pick up the child.~~
- 4. Any child who is injured shall have immediate attention. Parents shall be notified of all injuries. Injuries that require the attention of medical personnel shall be reported to the parent immediately and to the Licensing Unit within one business day.
  - 5. Parents or guardians of all children shall be notified of contagious illness as soon as possible.
  - 6. Medication shall be given to children only with signed parental permission which includes date, type, drug name, time and dosage, length of time to give medication, and what the medication is being given for. It shall be in the original container with a child resistant cap, not have an expired date, and be labeled with the child's name. (Aspirin substitutes, such as ibuprofen and acetaminophen, may be provided by the facility if parental permission has been granted. These medications shall be in the original container.) Staff shall not dispense medications in dosages that exceed the recommendations stated on the medication bottle.
  - 7. Children with special health care needs (ex. asthma, seizures, diabetes, etc.) who require scheduled daily medications or medications to be given on an emergent basis (Benadryl, EpiPen, rescue asthma medication, etc.) shall have a care plan. Care plans shall have clearly stated parameters, directions, and symptoms for giving the medications. Care plans shall be updated as needed, but at least yearly.
  - 8. The facility shall share information with families regarding medical homes for children.
  - 9. Medication shall be returned to the parent or disposed of properly when a child withdraws from the program or when the medication is out of date.
  - 10. Medicine shall be stored at the proper temperature, separately from food at all times.
  - 11. A first aid supply shall be kept out of reach of the children. A first aid kit containing medications shall be locked. This kit shall include the following:
    - a. Adhesive Band-Aids (various sizes)
    - b. Sterile gauze squares
    - c. Adhesive tape
    - d. Roll of gauze bandages
    - e. Antiseptic
    - f. Thermometer
    - g. Scissors
    - h. Disposable gloves
    - i. Tweezers



12. Medicine shall be kept out of the reach of the children when dispensing and shall be stored in a locked area at all other times.
13. The staff person who administers the medication shall initial the permission slip and record the date, time and dosage administered.
14. Facilities shall comply with the Clean Indoor Air Act of 2006. Smoking (including e-cigarettes) in a child care center is prohibited at all times. This includes:
  - a. All areas of the facility, regardless of whether children are in care (includes time periods such as nights, weekends, holidays, etc., also includes office areas or other areas of the facility that share the same ventilation systems)
  - b. Outdoor play area(s)
  - c. Other outdoor areas when children are present
  - d. In any vehicle used to transport children, whether children are present in the vehicle or not
15. The facility shall follow any health or medical care plans and/or medical documentation as provided by the child's physician, parent, or guardian.
16. It is recommended that universal precautions ~~shall~~ be used when handling and disposing of materials containing bodily secretions. ~~Example:~~ such as wet or soiled diapers, fecal matter, etc. Universal precautions shall be used when handling items contaminated by blood. These items shall be disposed of separately and by using rubber gloves that shall be properly disposed of after each use. (Note: hands must be washed even after gloves are used.)
17. Garbage and soiled diapers shall be kept in closed containers. Garbage and trash shall be removed from the center daily and from the grounds at least once a week.
18. The facility shall be free of insects, rodents, and pests.
19. There shall be no pets or animals allowed that present a health and safety threat. A licensed veterinarian shall certify that dogs and cats have a current vaccination against rabies.
20. The communicable diseases listed in Appendix B, whether suspected in a child or adult shall be reported within 24 hours to either the local County Health Unit or the toll free Reporting System (800-482-8888). Immediate notification is recommended for the following:
  - a. Hepatitis
  - b. Rash illness (including MEASLES & RUBELLA)
  - c. WHOOPING COUGH (pertussis)
  - d. MENINGITIS
  - e. MUMPS
  - f. Tuberculosis
  - g. Salmonellas (including typhoid).
  - h. E-coli

21. Reporting data should include:
  - a. The reporter's name, location, and phone number
  - b. The name of the disease reported and the date of onset
  - c. The patient's name, address, phone number, age, sex and race (Please spell the patient's name)
  - d. The attending physician's name, location and phone number
  - e. Any pertinent clinical and laboratory information used in the diagnosis (Please give the laboratory name)
  - f. Any treatment information, if known
  
22. A roster shall be maintained on infants and toddlers who have not completed the minimum immunization requirements and parents shall be notified of the needed immunization(s).
  
23. Within 15 days of enrollment of a child, the child care facility shall verify that the child has been immunized as required by the Arkansas Department of Health and Human Services or the child cannot remain in care (Arkansas Code 20-78-206 as amended by Act 870 of 1997-- a current immunization schedule is provided as an insert in this publication).
  
24. It is recommended that all staff members who ~~has~~ have direct contact with children ~~should~~ receive annual Influenza (flu) immunizations.
  
25. It is recommended that all staff members who ~~has~~ have direct contact with children ~~should~~ receive a one-time Tdap (Diphtheria, Tetanus & Pertussis) immunization.
  
26. It is recommended that all staff members who ~~has~~ have direct contact with children ~~should be required to have~~ receive the recommended series of immunizations for chicken pox, mumps, measles and rubella or evidence of immunity.
  
27. Children shall be protected from overexposure to the sun. Sunscreen shall be used if needed and as directed by the parent. Suntan lotions and/or sunscreens used for infants/toddlers and preschool children shall be kept out of the children's reach and shall be administered only with written parental permission. School age children may apply sunscreen to themselves with supervision. Blanket permission may be obtained annually.
  
28. It is recommended that the facility ~~should~~ have an automated external defibrillator on site and have a staff member(s) on-site who is trained in the proper use of this device.

### **1102 Hand Washing**

1. Individual towels, paper towels or forced air dryers shall be within the reach of children.
2. A liquid soap shall be accessible in the hand washing area and used by caregivers and children.
3. Running water shall be available in all lavatories.
4. Caregiver's and children's hand shall be washed with soap before meals and snacks, after

toileting, after each diaper change, and as needed. The use of hand sanitizer shall not be a replacement for soap and running water.

5. A wash cloth or towel shall not be used more than one time before laundering.

~~6. A hand washing sink shall be available for the staff within the diaper change areas.~~

### **1103 Infant & Toddler Hand-Washing**

1. Caregivers' hands shall be washed with soap upon entering the work area.

2. There shall be at least one sink in each infant/toddler room for ages under 18 months for diapering. Existing structures licensed prior to implementation of this rule are exempt from this requirement. However, any expansions, additions, rearrangement of classrooms being used or any newly licensed structures shall comply with this requirement.

### **1104 Drinking Facilities**

1. The water supply shall be approved by the Arkansas Department of Health.

2. Drinking water shall be provided to the children.

3. Drinking water shall not be obtained from the hot water supply.

### **1105 Toilet Facilities**

1. There shall be 1 toilet and 1 sink available for each group of fifteen (15) children.

2. Clean clothes shall be available for children who soil themselves.

3. Each center licensed or approved for more than thirty (30) children over the age of 18 months shall have a separate rest room for staff. Infant and Toddler Center staff and Day Care Center staff may share the same toilet facilities when both programs are located in the same building.

4. Toilet tissue shall be located within reach of the children when toileting.

### **1106 Infant & Toddler- Toilet Facilities**

~~1. There shall be at least one toilet and one sink available to each infant/toddler center. For every fifteen (15) children 18 months age and above, there shall be an additional one toilet and sink.~~

~~2. The child care center shall either provide a bathroom that opens directly into the room where toddlers are located, or the facility shall provide additional staff for assisting children with toileting.~~

3. Potty chairs shall not be counted in lieu of conventional toilets. If potty chairs are used, they shall be placed in the same area with a conventional toilet and sink and shall be emptied and sanitized immediately after each use.

### **1107 Diaper Changing**

- ~~1. When infants and toddlers are in care, there shall be a safe diaper changing area which shall be sanitized after every use and equipped with necessary supplies and cleaning materials.~~
1. A hand washing sink shall be available for the staff within the diaper change areas.
2. There shall be a safe diaper changing table that meets the following requirements:
  - a. Impervious (non-absorbent) smooth surfaces that do not trap soil and are easily disinfected
  - b. There shall be a changing pad capable of being sanitized used as a cushion between the child and the changing table surface.
  - c. The table shall be sturdy and stable to prevent tipping over.
  - d. The table shall be a convenient height for use by caregivers/teachers
  - e. The table shall be equipped with a raised edge or other provision to help reduce the risk of a child rolling off of the table. ~~solid barriers that extend at least 6 inches above the changing surface.~~
3. Children shall always be attended during diapering.
4. Soiled or wet diapers shall be removed and replaced with clean, dry diapers. The caregiver shall ensure that children are properly cleaned and dried.
5. Soiled cloth diapers or clothing shall not be rinsed. If a child's own diapers are used, they shall be sanitarily bagged to be taken home daily.
6. Diaper covers or plastic pants shall be handled in the same manner as cloth diapers.
7. All diapering preparations shall be placed out of the reach of children. The use of all diapering preparations shall be agreed upon by the caregiver and parent.

### **1108 Toilet Learning**

1. The caregiver shall assist children in toilet routine and hygiene practices.
2. The following methods shall not be used in toilet learning:
  - a. Placing child on toilet or potty chair for prolonged time periods.
  - b. Using harsh language.
  - c. Punishing or berating in any way for soiling clothing.
  - d. Using physical force to place child on a toilet or potty chair against their will.

- e. Leaving a child unsupervised on toilet.

## **1200 SAFETY**

### **1201 Safety Requirements**

1. Within 30 days of licensure and within 30 days of any change or modification of the floor plan, the facility shall file a copy of their floor plan with the local Office of Emergency Management including the following (§ 20-78-228 Act 1159 of 2013):
  - a. A schematic drawing of the facility and property used by the child care facility including the configuration of rooms, spaces, and other physical features of the building
  - b. The location or locations where children enrolled in child care spend time regularly
  - c. The escape routes approved by the local fire department for the child care facility
  - d. The licensed capacity and ages of children per room at the facility
  - e. The contact information for at least two emergency contacts for the facility
  - f. An aerial view of the child care facility and property used by the child care facility shall be included with the floor plan if available
2. The facility shall have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats, etc.) (Act 801 of 2009). The plan and procedures are required for emergencies that could cause structural damage to the facility, be identified as a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the children and staff.
3. The written plan shall include the following information:
  - a. Designated relocation site and evacuation route
  - b. Procedures for notifying parents of relocation
  - c. Procedures for ensuring family reunification
  - d. Procedures to address the needs of individual children, including children with special needs
  - e. Procedures and documentation for annual training of staff regarding the plan and possible reassignment of staff duties in an emergency
  - f. Plans to ensure that all staff and volunteers are familiar with the components of the plan
4. The facility shall coordinate with local emergency management officials to plan for emergencies.
5. Written procedures and evacuation diagrams for emergency drills shall be posted in each classroom.
6. Fire and tornado drills shall be practiced ~~each month~~ as follows:
  - a. Monthly
  - b. Fire and tornado drills shall be practiced on separate days and at different times of the day.

- c. Everyone in the facility, to include all program types (i.e. infant & toddler, preschool, school age), at the time of the drill shall participate in the drill
  - d. Staff, including volunteers and substitutes, shall be trained in emergency drill procedures
  - e. During all hours when children are in care (evenings, nights, weekends, etc.)
  - f. If applicable, the facility shall provide a crib with evacuation casters or equivalent that will provide one (1) bed for every six (6) infants, twelve (12) months and younger, that may be used for the safe evacuation of the infants.
7. The facility shall maintain a record of emergency drills. This record shall include:
- a. Date of drill
  - b. Type of drill
  - c. Time of day
  - d. Number of children participating in the drill
  - e. Length of time taken to reach safety
  - f. Notes regarding things any items that need improvement upon
8. The facility shall maintain an evacuation pack that shall be taken on all drills and during actual emergency evacuations. The pack shall be easily accessible in an emergency and all staff shall know the location of the pack. The evacuation pack shall include, but is not limited to the following:
- a. List of emergency numbers
  - b. List of all emergency and contact information for children
  - c. List of all emergency and contact information for staff
  - d. First aid kit (requirement 1101.6) with extra gloves
  - e. Kleenex
  - f. Battery powered flashlight and extra batteries
  - g. Battery powered radio and extra batteries
  - h. Hand sanitizer
  - i. Notepad and pens/pencils
  - j. Whistle
  - k. Disposable cups
  - l. Wet wipes
  - m. Emergency survival blanket
9. The facility shall immediately notify the Licensing Unit of any extended utility outages or significant damage to the building and/or grounds. If phone service is not available, notification shall be as soon as service is restored or available.
10. Child care centers shall maintain a log of all child product recalls and safety notices issued by CPSC or distributed by the Attorney General's Office and shall post or otherwise make these notices available for parents to review on site. The facility director shall certify, on an annual basis, that these notices have been maintained and reviewed and that any identified items have been removed from the facility. Forms for self-certification will be provided by the Licensing Specialist and shall be submitted annually. (Act 1313 of 2001).

11. There shall be no alcoholic beverages in any part of the facility during hours of care.
12. Illegal drugs/paraphernalia shall not be in any part of the facility or on the premises, regardless if children are present or not.
13. All medications and poisonous substances shall be kept in separately locked areas.
14. Rescue medications such as inhalers or EpiPens shall be inaccessible to children (kept in a cabinet with a child proof type safety latch or carried by a staff member).
15. All detergents and cleaning supplies shall be kept out of the reach of children. (This does not include hand soap in children's or staff bathrooms.)
16. Supplies used for children's activities shall be carefully supervised.
17. All bags belonging to children shall be checked on arrival to eliminate possible hazards.
18. Purses and bags belonging to staff shall be stored out of reach of children.
19. Electrical outlets shall be guarded.
20. Balloon use shall be carefully supervised.
21. Staff shall be instructed in the use of fire extinguishers.
22. The facility shall maintain smoke detectors/fire extinguishers as required by the Fire Department. Smoke detectors shall be kept in working order at all times.
23. Chemicals and toxins shall not be stored in the food storage area.

### **1202 Infant & Toddler Safety Requirements**

1. Balloon use shall not be allowed in infant/toddler areas.
2. Pacifiers, if used, shall not be secured around the neck by a cord or any other means that could represent a strangulation hazard. ~~or have strangulation hazards attached.~~

### **1203 Swimming Pools**

1. Swimming pools and natural pools of water may be used for water play for children age 3 and up if the following requirements are met:
  - a. Health Department approval where applicable
  - b. Written parental permission
  - c. One person present at all times who has current certification in Red Cross Life Saving or Y.M.C.A. aquatic instruction.
2. Adult supervision of the children shall be provided at all times, with grouping based on the

following staff/child ratio: (Unless children are participating in an authorized swimming instruction program.)

- |                      |     |
|----------------------|-----|
| a. Kindergarten & up | 1:8 |
| b. 5 years           | 1:5 |
| c. 4 years           | 1:3 |
| d. 3 years           | 1:2 |

3. When children of different ages are swimming in a group, the staff/child ratio shall be based on the youngest child within the group.
4. Lifeguards, swimming instructors or any other swimming pool staff may be counted in the ratio when the facility's children are the only occupants of the pool and these persons have completed criminal and child maltreatment background checks and have a current health card.
5. Swimming pools located within the play area of the center shall be enclosed. The enclosure shall consist of a locked gate and a fence that is at least four feet high.

#### **~~1204 Infant & Toddler Swimming Pools~~**

- ~~1. Swimming pools, wading pools, and natural pools of water shall not be used for children in Infant/Toddler programs. This does not prohibit the use of sprinklers and water play for this age child.~~

### **1300 TRANSPORTATION**

#### **1301 Transportation Requirements**

1. The requirements in this section apply to all transportation provided by the licensee, including transportation provided by any person on behalf of the licensee, regardless of whether the person is employed by the licensee. Periodic transportation, such as a parent requesting that their child be picked up at school due to the parent's work schedule or other conflicts, is also covered by these requirements, whether a fee is charged for this service or not.
2. When children are transported emergency contact information shall be maintained on the vehicle at all times.
3. Staff transporting children shall meet the following requirements:
  - a. Be at least twenty-one (21) years of age or the minimum age required by the Licensee's commercial auto insurance
  - b. Hold a current valid driver's license or commercial driver's license as required by state law, and a readable copy shall be maintained in the staff's record
  - c. Successfully completed the training course in Driver Safety that is offered or approved by the Division prior to transporting children. Verification of the completed course in



- Driver Safety shall be maintained on site in the staff's record.
- d. At least one adult on the vehicle shall be certified in CPR and First Aid.
  4. The vehicle(s) used for the transportation of children shall be in compliance with Arkansas state laws on transportation of children.
  5. Vehicles shall be licensed and maintained in proper working condition including air conditioning and heating systems.
  6. Commercial insurance coverage shall be maintained for any vehicle used for transportation by the facility. Verification of commercial insurance coverage shall be provided to the Licensing Specialist prior to transportation of children. (Facilities licensed prior to the effective date of these regulations shall obtain required coverage within ninety (90) days.) Required coverage amounts to be maintained are:
    - a. Minimum coverage of \$100,000 Combined Single Limit (CSL)
    - b. Minimum coverage of \$100,000 for both Uninsured Motorist (UM) and Under Insured Motorist (UIM)
    - c. Minimum coverage of \$5,000 Personal Injury Protection (PIP) for each passenger (based on the number of passengers the vehicle is manufactured to transport)
  7. Driver may be counted in staff/child ratio, but shall not be the only adult when more than 12 children over three years of age and older are transported.
  8. For transporting children kindergarten and above only, a ratio of ~~1:20~~ 1:18 shall be maintained. Driver may be counted in staff/child ratio. Providers licensed prior to the effective date of this rule will have four years from the implementation of this rule to comply with the revised ratios.
  9. Any child who is less than 6 years old or weighs less than 60 pounds shall be restrained in a child passenger safety seat. Any child who is at least 6 years or weighs at least 60 pounds must be restrained by a safety belt. (Act 470 of 2001). Conventional school busses are exempt from this requirement except for the transportation of infants/toddlers. (See#1302.2) Child passenger safety seats shall be used in accordance with manufacturer's guidelines.
  10. There shall be a seating space and an individual, appropriate restraint system provided for each child transported.
  11. Rosters listing the date, the names and the ages/date of birth of all children being transported as well as the name of the driver and any other staff member on the vehicle shall be maintained. These rosters shall be used to check children on and off the vehicle when they are picked up and dropped off at home, school, etc. and when they arrive at and leave the facility. Transportation rosters shall be kept by the facility and available for review for one year.
  12. To insure that no children are left on the vehicle, the driver or a staff member must walk

through the vehicle and physically inspect each seat before leaving the vehicle. The driver or the staff member, who conducted the walk through inspection, must sign the transportation roster to verify that all children have exited the vehicle.

13. To insure that children have safely arrived in the appropriate classroom, the transportation roster shall be reviewed by the Director or designee and compared with classroom attendance records. The Director or designee shall sign off on the transportation roster to verify that all children have safely transitioned from the vehicle to the classroom.
14. Any vehicles designed or used to transport more than seven (7) passengers and one (1) driver must have approved child safety alarm devices installed. These devices must be properly maintained in working order at all times.

Vehicles in service at licensed facilities prior to July 1, 2005, shall have the alarm installed by a qualified technician or mechanic no later than December 31, 2005. On or after July 1, 2005, all vehicles at newly licensed facilities and newly acquired vehicles at existing facilities shall have a child safety alarm installed before placing the vehicle in service.

The Child Care Licensing Unit shall maintain a list of approved alarm systems.

#### **Clarification –**

- The alarm system shall be installed so that the driver must walk to the very back of the vehicle to reach the switch that deactivates the alarm. Alarm switches installed in locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.
- The alarm system may be installed by any certified technician or mechanic employed by a recognized electronics or automotive business in accordance with the devices manufacturer's recommendations.
- The time delay from activation of the alarm until the alarm sounds shall be no longer than one minute. **Any of the following three options are acceptable to meet the intent of Act 1979 when children are being delivered at the facility. Other options must be approved by the Licensing Unit.**

#### **Options**

1. Unload all of the children, walk through the vehicle to ensure that no children remain on board and deactivate the alarm. (This option will only work if you are able to unload all children in less than one minute.)
2. Upon arrival, have one staff member immediately walk through the vehicle to deactivate the alarm system. That staff member will remain near the alarm switch at the back of the vehicle until all children have been unloaded to ensure that no child is left on board. (This option will require at least two staff members, one to supervise the children and one to remain inside the vehicle.)

3. Upon arrival, deactivate the alarm and unload the children. Immediately after unloading, start the vehicle and move it to a different location for final parking. (This will reactivate the alarm and require a final walk through.)

### **1302 Infant & Toddler—Transportation Requirements**

1. In a vehicle transporting infants and toddlers, the driver may be counted in the staff/child ratio but shall not be the only adult. A ratio of one adult for each three infants/toddlers shall be maintained.
2. Infants and toddlers shall not be transported on school buses that are not equipped to accommodate required child safety seats.

### **1400 SPECIAL NEEDS**

Individuals with Disabilities Education Act (IDEA):

- It is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities.
- It defines a child with Special Needs as:
  - A child determined eligible for special services under the Individual with Disabilities Education Act (IDEA) for whom a current IFSP (Individual Family Service Plan) or IEP (Individual Education Plan) exists and/or
  - A child whose physical condition has lasted or is expected to last at least two (2) years as diagnosed by a licensed medical or psychological examiner
- It is specified in Public Law 108-466 §635.16 A-B (IDEA as reauthorized) as:
  - Children with disabilities including children in public or private institutions or other care facilities are educated to the maximum extent appropriate with children who are not disabled.
  - Special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of the child is such that the child is not achieving a satisfactory education in a regular class that provides supplementary aids and services.

**All child care facilities are required by IDEA to refer a child with any suspected delays or disabilities to the appropriate lead agency (as determined by the child's age).**

### **1401 Special Needs Requirements**

1. All child care facilities shall comply with all applicable provisions as specified in IDEA:

- a. The facility shall enroll children with special needs without regard to disability.  
**(Programs are required to provide space and care for a child who can be placed in their facility with existing services, as well as added supports from special educational services, and as long as the health and safety of the child can be met.)**
- b. Staff shall provide care in the general classroom with children who are not disabled
- c. The facility shall assist in facilitation of services required to meet the "special needs" of children in the center or in the classroom as specified on the individualized education/individual family service plan.
- d. Facility staff (regular classroom staff) shall be a partner in the IFSP/IEP plan process
- e. The facility shall allow service providers who are representatives of DHS, DDS or ADE access to the facility to provide special services as prescribed on the plan to enable the plan to be implemented in the classroom (natural/ least restrictive environment).
- f. The facility shall not charge special service providers for space, accept "gratuities", or payment for allowing special service providers to provide services in their facility.
- g. The facility is not required to "displace" children or staff to make space available to special service providers.
- h. In order for a special service provider to provide special services in the facility, the IFSP/IEP planning team under the authority of the Arkansas Department of Education and/or the Arkansas Department of Human Services, Developmental Disabilities Services, shall identify the needed special services on the IFSP/IEP.
- i. Classroom staff shall reinforce the specified goals and objectives as part of the daily routine of the classroom.

### **1402 Infant & Toddler Special Needs Requirements**

1. To the maximum extent appropriate, children birth to two (2) years of age shall participate in early intervention services provided in "natural environments."
2. When infants and toddlers cannot achieve satisfactory results from early intervention services in a natural environment, the provision of early intervention services shall occur in other appropriate settings as determined by the parent and the Individualized Family Service Team.

## **PROGRAM SPECIFIC VARIATIONS**

PROGRAM-SPECIFIC VARIATIONS ARE NUMBERED ACCORDING TO THE REGULATION WITH WHICH IT VARIES. UNLESS A VARIANCE IS LISTED BELOW, ALL BASIC REQUIREMENTS APPLY.

### **1500 SCHOOL AGE/SUMMER DAY CAMP**

#### **301 Staff/Child Ratio**

1. Kindergarten and above, 1 worker per 20 18 children.

#### **401 Program Requirements**

1. The program of activities shall be flexible and shall provide some opportunities for a child to choose how he will spend his time.
2. The program shall provide a variety of activities suitable to the ages and interests of the children.
3. School age children who leave the child care center to participate in other activities shall have written permission from the parents naming the activity, time of leaving and returning and method of transportation.
4. Children in camp situations shall be under direct supervision of staff at all times.

#### **604 Children's Records**

1. Immunization records shall not be required for school age children.
2. Permission for specialized summer activities shall be maintained.
3. Emergency information and medical permission sheet shall be maintained at camp site.

#### **701 Nutrition Requirements**

1. Children arriving for after-school care shall be provided with a nutritious snack.
2. Mid-morning snacks shall be provided for all children who are in care for more than 3 hours prior to lunch. Midafternoon snacks shall be provided for all children.
3. Vending machines in school age settings are acceptable provided they are not the only source of snacks and/or beverages.
4. Milk is not required to be served in rural day camp settings.

## **801 Building Requirements**

1. Twenty-five (25) square feet of floor space shall be provided for each school age child.
2. If a facility utilizes the out-of doors as its major program component for school-age children, covered pavilions and other roofed structures shall provide 25 square feet per child.
3. If preschool children are not present, electrical outlets need not be plugged.

## **901 Grounds**

- ~~1. The requirements for an enclosure of the outdoor play area shall be met if there are health, safety, or fire hazards present.~~

## **1002 Sleeping Equipment**

1. A period of quiet activities shall be provided when children are in care all day.

## **1101 Health Requirements**

1. Provisions shall be made for waterproof cots or mats if a child becomes ill.

## **1102 Hand Washing**

1. Alternative methods of hand washing shall be provided if running water is not available.

## **1104 Drinking Facilities**

1. Water that is transported to the camp sites for drinking purposes shall be in enclosed containers. Fresh water shall be provided each day.

## **1105 Toilet Facilities**

1. There shall be one toilet and one sink for each 30 children. Separate toilet facilities for boys and girls shall be provided.

## **1203 Swimming Pools**

1. Lifeguards, swimming instructors, or any other swimming pool staff may be counted in the ratio when the facility's children are the only occupants of the pool and these persons have completed criminal and child maltreatment background checks and have a current Health card.

## **1301 Transportation Requirements**

1. Driver may be counted in staff/child ratio.

2. There shall be a minimum of two staff members present whenever more than 20 children are transported.

## **1600 EVENING & NIGHT CARE VARIATIONS**

Night care is any care provided after midnight.

### **301 Staff/Child Ratio**

1. Staff members shall be awake at all times and shall have children in view at all times.

### **401 Program Requirements**

1. Evening quiet time activity shall be provided to each child arriving before bedtime.

### **701 Nutrition Requirements**

1. Children who are in care overnight shall be provided with a breakfast prior to leaving for school or other activities.
2. Supper shall be provided to children during evening meal hours.
3. Snacks meeting the current U.S. Department of Agriculture guidelines shall be provided to children in attendance for more than 2 ½ hours prior to bedtime.

### **1002 Sleeping Arrangements**

1. Bedtime schedules shall be established for children in consultation with the child's parent(s).
2. Storage space for clothing and personal belongings shall be provided within easy reach of the children.
3. Individual beds or cots equipped with comfortable mattresses, sheets, pillows, pillow cases and blankets shall be provided for children in all-night care. Bed linens shall be changed at least once a week or daily when wet or soiled.
4. Mats may be used for children in evening care.
5. The upper level of double deck beds shall be allowed for children 10 years or older if a bed rail and safety ladder is provided.
6. Children shall have clean and comfortable sleeping garments for their individual use.

### **1105 Toilet Facilities**

1. There shall be age appropriate bathing facilities available for all children. For children 2 ½

years of age and older in night care (after midnight), there shall be a bathtub or shower available. Bathtubs and showers shall be equipped to prevent slipping.

2. Bathrooms shall be located near the sleeping areas.
3. No child under 6 years of age shall be left alone or with another child while in the bathtub or shower.

## **1700 PART-TIME PROGRAM VARIATIONS**

### **401 Program Requirements**

1. A rest period is not required for children who are in care for less than 4 hours per day or arrive shortly after lunch.
2. Outside play may be scheduled for periods of less than 1 hour daily.

### **701 Nutrition Requirements**

1. Facilities in operation for more than 3 hours per day shall provide a snack that meets current U.S. Department of Agriculture Guidelines.

## **1800 SICK CARE COMPONENT**

### **301 Staff/Child Ratio**

1. The following ratios shall be maintained at all times:
  - a. Infant/Toddler 1:3, Maximum group size =6
  - b. Preschool/School Age 1:5, Maximum group size 10
2. Staff shall be separated in the same manner children are separated to prevent cross infection.

### **302 Director**

1. If the component is part of a child care facility, the program director shall be accountable to the facility director. If the component is an entity unto itself the program director may also be the facility director.
2. The program director shall have completed the following training:
  - a. Communicable disease control
  - b. Recognition and care of usual childhood illness
  - c. CPR certification
  - d. First Aid certification



#### **401 Program Requirements**

1. Children shall be provided with quiet activities according to their age and abilities.
2. Caregivers shall:
  - a. Administer medicine according to prescribed instructions
  - b. Take temperature frequently or as needed
  - c. Monitor any changes in condition
  - d. Record necessary medical or physiological data or changes
  - e. Notify parents immediately if their child's condition changes significantly for the worse, especially if the condition meets one of the excludable diseases or symptoms
3. The child shall be removed immediately from sick care when his/her condition meets one of the excludable diseases or symptoms.
4. Children may be returned to regular day care when a doctor's statement has been obtained or when the child is free of symptoms for 24 hours.

#### **604 Children's Records**

1. The record shall contain information on the specific condition or illness placing the child in sick care.
2. The record shall contain any recommendations for needed medical treatment and/or program or environment modifications that the child needs.

#### **801 Building Requirements**

1. If located in the same facility as day care, sick care shall be separate with a separate entrance and separate ventilation system.
2. Children with respiratory illnesses shall be cared for in separate space from children with gastrointestinal illness. Any child with an undiagnosed condition shall be separated from other children to prevent cross infection. A separate area can be defined by curtains; partitions etc. if airborne transmission is not likely.
3. A hand-washing sink shall be available in each room.
4. To prevent cross contamination, a designated toilet shall be available to each sick care room.
5. The facility shall be self-contained-i.e. food, water, bedding, toileting (no potty chairs) etc.

#### **1001 Furniture & Equipment Requirements**

1. No furniture, fixtures, equipment and supplies designated for use in the sick care

component shall be used or shared by well children.

2. All laundry shall be washed each day. The items shall be placed in a plastic bag and labeled "contaminated" so necessary precautions can be taken.
3. All toys and equipment shall be disinfected after every use.

### 1101 General Health Requirements

TABLES OF COMMUNICABLE DISEASES AND SYMPTOMS THAT EXCLUDE CHILDREN FROM SICK CARE: (asterisk denotes reportable diseases)

#### 1. Communicable Diseases:

<b>a. RESPIRATORY ILLNESS</b>	<b>b. GASTROINTESTINAL ILLNESS</b>	<b>c. CONTACT</b>
Chicken Pox	Giardia Lamblia*	Impetigo
German Measles	Hepatitis A*	Lice
Hemophilus influenza	Salmonella*	Scabies
Measles*	Shigella*	
Meningococcus*		
Mumps*		
Strep throat		
Tuberculosis*		
Whooping Cough*		

#### 2. Symptoms that Exclude Children from Sick Care:

A symptom is a condition that indicates an illness that may not be identifiable by one of the above listed names but presents a situation where the child shall not be admitted to or remain in sick care and should be seen by the family physician.

##### a. Diarrhea

- Accompanied by evidence of dehydration for excessive fluid loss
- Accompanied by history of poor fluid intake and/or marked lethargy
- With blood or mucous in the stool unless at least one stool culture shows the absence of Salmonella, Shigella, Campylobacter or E-Coli
- That exceeds 5 bowel movements in an 8 hour period or is continued over 3 or 4 days unless the child is under the supervision of a physician with written documentation

##### b. Vomiting for over a 6 hour period

##### c. Difficult or rapid breathing

##### d. Severe coughing: episodes of coughing which may lead to gagging, vomiting, or difficulty breathing

##### e. Mucous (phlegm) that is foul smelling, yellow or green and the child has a fever over 102 degrees Fahrenheit

##### f. Asthmatics with severe upper respiratory infections who have not been seen by a physician or whose distress is not controlled by medication

- g. Sore throat and fever greater than 103 degrees Fahrenheit or confirmed Strep throat until treated with antibiotics for over 24 hours
- h. Skin conditions that have not been diagnosed as noncontiguous by a physician; including but not limited to:
  - Yellow (jaundiced) eyes or skin
  - Child in contagious stages of chicken pox, measles, mumps or rubella
  - Untreated impetigo
  - Untreated scabies or head lice
  - Blood-red rashes and skin conditions with spontaneous bruising
- i. Children who are in the contagious states of Pertussis, diphtheria, or tuberculosis
- j. Pink or red eye(s) which may be swollen with white or yellow discharge until on antibiotics for over 24 hours
- k. Abdominal pain that is intermittent or persistent
- l. Fever over 102 degrees Fahrenheit for greater than 24 hours, or any fever over 103 degrees Fahrenheit unless the child has been evaluated and treated by a physician and does not have other exclusion criteria.

## APPENDIX A: DEFINITIONS

1. "**Act**" means the Child Care Facility Licensing Act as amended.
2. "**Child Care Center**" means any Child Care Facility conducted under public or private auspices on a profit or nonprofit basis providing direct care and protection for children. Any facility that is open more than five (5) hours during any 24 hour period or more than a total of ten (10) hours during a seven (7) day period is considered a Child Care Center and shall be subject to the provisions of the Child Care Facility Licensing Act. Those facilities meeting the above definitions but operating no more than three (3) weeks per calendar year are not required to comply with the licensing requirements, i.e.: Summer Bible Schools and Camps.

For purposes of determining the need for a license, all care provided at the site of a licensed program is considered a part of the licensed program and therefore subject to licensing requirements. This includes separate buildings located on the same property or any other property under the same ownership. However, Mother's Day Out and other part time programs serving children not participating in the licensed program are exempt as long as they operate no more than 5 hours per day or 10 hours per week.

A public or private school which operates a Kindergarten (K5) in conjunction with grades one and above, or for grades one and above only and provides short-term custodial care (not to exceed 20 hours weekly) prior to and/or following classes for those students, is not required to comply with licensing requirements for the short-term custodial care provided.

3. "**Child Care Facility**" means any facility defined by Ark. Code Ann. § 20-78-202(4).
4. "**Child Care Licensing Unit**" means the unit within the Department of Human Services, Division of Child Care and Early Childhood Education, that inspects and investigates any proposed or operating Child Care Center and any personnel connected with the center to determine if the facility will be or is being operated in accordance with the Child Care Facility Licensing Act and the Licensing Requirements for the Child Care Centers.
5. "**Child Maltreatment Central Registry Check**" means a check of the Arkansas Child Maltreatment Central Registry for any record of founded child abuse and neglect or maltreatment.
6. "**Criminal Record Check**" means a statewide criminal record check conducted by the Identification Bureau of the Arkansas State Police.
7. "**Criminal FBI Check**" means a nationwide criminal record check conducted by the Federal Bureau of Investigation that conforms to the applicable federal standards and includes the taking of fingerprints. Application for a nationwide criminal check shall be made to the Identification Bureau of the Department of the Arkansas State Police.
8. "**Day Care Centers**" means child care for children age 2 1/2 or 30 months and above.

9. "**Department**" means the Arkansas Department of Human Services.
10. "**Division**" means the Division of Child Care and Early Childhood Education.
11. "**Employee**" or "**Staff**" means all full or part-time employees or any person(s) who perform services under the direction and control of the Child Care Facility, regardless if they are paid or not. This includes any person(s) that has supervisory or disciplinary control over children, is at any point left alone with children, or is counted in staff/child ratios.
12. "**Evening and Night Care**" means child care provided between 7:00 p.m. and 6:00 a.m.
13. "**Infant Center**" means child care for children from birth to age 18 months.
14. "**Kindergarten**" means a school based program offered for children five (5) years of age (**K5**) during the school year prior to their entry into the first grade.
15. "**Operator**" means any person or entity exercising any measure of supervision or control over a Child Care Facility.
16. "**Owner**" means any person who assumes the legal responsibility for operation of a child care facility.
17. "**Part-time Care**" means child care provided no longer than four (4) hours per day or not to exceed a maximum of 20 hours per week. These types of programs may include, but are not limited to, half day kindergarten, mother's day out programs, play schools and some nursery schools.
18. "**Personnel**" is defined as the facility owner or operator, staff or volunteer.
19. "**Program**" is defined as all activities that comprise the child's day at the center.
20. "**Toddler Center**" means child care for ages 18 to 36 months.
21. "**School Age Care**" means child care for children who are in kindergarten (K5) and above. School age child care includes before and after school care and extended care during school holidays and summer day camps. School age programs, which operate with children arriving and leaving voluntarily for scheduled classes, activities, practices, games and meetings, shall not be considered as meeting this definition.
22. "**Sick Care**" is defined as a separate service providing care for children who are too sick to attend day care as stated in Section 1000 but who do not exhibit any of the excludable diseases as defined in Section 1500. The primary objective of this service is to insure that children in care receive the required attention necessary for moderately ill children.
23. "**Staff**" or "**Employee**" means all full or part-time employees/staff or any person(s) who perform services under the direction and control of the Child Care Facility, regardless if they are paid or not. This includes any person(s) that has supervisory or disciplinary control over

children, is at any point left alone with children, or is counted in staff/child ratios.

24. "**Substantial Compliance**" means compliance with all **essential standards** necessary to protect the health, safety and welfare of the children attending the Child Care Center. Essential standards include **but are not limited to** those relating to issues involving fire, health, safety, nutrition, discipline, staff/child ratio and space.
25. "**Swimming Pool**" means any pool of water in excess of 12 inches deep. This does not include natural pools of water such as lakes, ponds and rivers.
26. "**Volunteer**" means a person who provides services to a Child Care Facility, but has no supervisory or disciplinary control over children, is not left alone with children, and is not counted in staff/child ratios.

## APPENDIX B: LIST OF REPORTABLE DISEASES

The following are the more common reportable diseases which occur with moderate frequency in Arkansas:

Gonorrhea	Salmonellosis (including typhoid)
Hepatitis (A, B, Non-A, Non-B	Shigellosis
Unspecified and results of serologies)	Syphilis
Rash illnesses (including	Tuberculosis
*MEASLES & RUBELLA)	MUMPS
*WHOOPING COUGH (pertussis)	
MENINGITIS	

The following are less common reportable diseases that occur with low frequency in Arkansas

*AIDS (Acquired Immune Deficiency Syndrome)	* Leprosy
Amebiasis	* Leptospirosis
ANTHRAX	* Lyme Disease
*Aseptic Meningitis	Lymphogranuloma Venereum
Blastomycosis	* Malaria
BOTULISM	* Meningitis, <u>Hemophilus</u>
*Brucellosis	Influenza Type B
Campylobacter Interitis	* Meningococcal infection
Chancroid	Mumps
CHOLERA	Pesticide Poisoning
Coccidioidomycosis	PLAGUE
*Congenital Rubella Syndrome	* POLIOMYELITIS
DIPHTHERIA	* Psittacosis (Ornithosis)
Encephalitis (all types)	Q Fever
FOOD POISONINGS (all types)	RABIES
Giardiasis	* Relapsing Fever
Gonococcal Ophthalmia	* Reyes Syndrome
Granuloma Inguinale	Rheumatic Fever
*Guillain - Barre Syndrome	* Rocky Mountain Spotted Fever
Histoplasmosis	SMALL POX
HIV [Human Immuno Deficiency Virus by (name & address)]	* Tetanus
**Influenza	* Toxic Shock Syndrome
*Kawasaki Disease	Toxoplasmosis
*Legionellosis	* Trichinosis
	* Tularemia
	TYPHUS FEVER
	YELLOW FEVER

\*The reporting physician will be contacted for additional information.

\*\*Individual cases to be reported only when laboratory testing has determined the viral type.

**The diseases in capital letters are to be brought to the immediate attention of the State Epidemiologist when suspected.**

Reporting data shall include:

- a) Name and location of reporting person
- b) Disease or suspected disease and date of onset
- c) Name, age, sex, address and phone number of patient (please spell patient's name)
- d) Name of patient's physician

The following diseases are also of public health importance and should be reported whenever there is an unusual incidence or outbreak (including seasonal). It is necessary to report 1) the physician's name and location, 2) the suspected disease and 3) the number of cases and interval during which the cases were seen:

Acute respiratory disease	Hospital acquired infections
Chicken pox	Infectious Mononucleosis
Conjunctivitis	Influenza (estimate number)
Dermatophytosis (ringworm)	Pediculosis
Enteropathogenic E. Coli Diarrhea	Pleurodynia
Epidemic Diarrhea of unknown cause	Pneumonia (bacterial, Mycoplasma, viral)
Gastroenteritis	Staphylococcal-Infections
Herpangina	Streptococcal-Infections

The following occupational diseases also shall be reported:

Asbestosis	Mesothelioma
Silicosis	Coal Workers Pneumoconiosis
Byssinosis	

**FOR FURTHER ASSISTANCE CONTACT THE LOCAL COUNTY HEALTH UNIT.**



**APPENDIX C**  
U.S. DEPARTMENT OF AGRICULTURE CHILD CARE MEAL PATTERN

Children age 12 and up may be served adult-size portions based on the greater food needs of older children, but shall be served not less than the minimum quantities specified in this section for children age 6 through 12 years.

For purposes of the requirements outlined in this paragraph, a cup means a standard measuring cup. Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

<b>Breakfast</b>	<b>Children 1 and 2 years</b>	<b>Children 3 through 5 years</b>	<b>Children 6 through 12</b>
Milk, fluid	1/2 cup (4 ounces)	3/4 cup	1 cup (8 ounces)
Juice or fruit or Bread, bread and/or cereal enriched or whole	1/4 cup	1/2 cup	1/2 cup
Bread or Cereal: Cold	1/2 slice (1/2 ounces)	1/2 slice (1/2 ounce)	1 slice (1 ounce)
Hot cooked	1/4 cup*	1/3 cup**	3/4 cup***
<b>AM or PM snack</b>			
(select 2 of these 4 components)			
Milk, fluid			
Meat or meat alternate	1/2 cup (4 ounces)	1/2 cup	1 cup (8 ounces)
Juice or fruit or Bread, bread and/or cereal enriched or whole	1/2 ounce	1/2 ounce	1 ounce
Bread or Cereal: Cold	1/2 cup	1/2 cup	3/4 cup
hot cooked	1/2 slice (1/2 ounces)	1/2 slice (1/2 ounce)	1 slice (1 ounce)
	1/4 cup*		
<b>Lunch or Supper</b>			
Milk, fluid	1/2 cup (4 ounces)	3/4 cup (4 ounces)	1 cup (8 ounces)
Meat or meat alternate (lean meat or poultry)	1 ounce	1 ounce	2 ounces
Cheese	1 ounce	1 ounce	2 ounces
Egg	1 large egg	1 large egg	1 large egg
Cooked dry beans or Peanut butter	1/4 cup	3/8 cup	1/2 cup
Yogurt (plain or (Or an equivalent any combination of meat/meat alternates)	2 tbsp	3 tbsp	4 tbsp
Vegetable and/or fruit (total of two or more)	1/2 cup	3/4 cup	1 cup
Bread or bread enriched or whole	1/4 cup	1/2 cup	

\* 1/4 cup (volume) or 1/3 ounce (weight)

\*\* 1/3 cup (volume) or 1/2 ounce (weight)

\*\*\* 3/4 cup (volume) or 1 ounce (weight)

\*\*\*\* Refer to Food Buying Guide "Grains and Breads" for equivalent quantities

(CASA-1)

## APPENDIX D

### U. S. DEPARTMENT OF AGRICULTURE INFANT CARE MEAL PATTERN

Meals served to infants ages birth through, 11 months must meet the requirements described in this meal pattern. Foods included in the infant meal must be of a texture and a consistency that are appropriate for the age of the infant being served. Either breast milk or iron-fortified infant formula must be served for the entire first year.

<b>Age</b>	<b>Breakfast</b>	<b>Lunch or Supper</b>	<b>Snack</b>
Birth through 3 months	4-6 fluid ounces milk* or formula**	4-6 fluid ounces milk* or formula**	4-6 fluid ounces milk* or formula**
4 months through 7 months	4-8 fluid ounces milk* or formula**  0-3 tablespoons Cereal***	4-8 fluid ounces milk* or formula**  0-3 tablespoons cereal*** and  0-3 tablespoons vegetable or both	4-6 fluid ounces breast milk* or formula**
8 months up to first birthday	6-8 fluid ounces milk* or formula**  and  2-4 tablespoons cereal  and  1-4 tablespoons and/or vegetable or both	6-8 fluid ounces milk* or formula** and  2-4 tablespoons cereal*** and/or  1-4 tablespoons fish poultry, egg or cooked dry beans peas, or 1/2 -2 cheese, or 1-4 tablespoons cottage cheese, cheese cheese spread and  1-4 tablespoons vegetable or both	2-4 fluid ounces breast milk or formula** or fruit juice****  and  0- 1/2 slice bread or crackers*****

\* It is recommended that breast milk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry.

\*\* Iron-fortified infant formula

\*\*\* Iron-fortified dry infant cereal

\*\*\*\* Full-strength fruit juice

\*\*\*\*\* Made from whole-grain or enriched meal or flour

**(CASA-1)**

APPENDIX E: DISASTER/EMERGENCY PREPAREDNESS

<b>DISASTER/EMERGENCY NUMBERS</b>	<b>CONTACT/TOWN</b>	<b>TELEPHONE NUMBER</b>
<b>AMBULANCE</b>		
<b>APPLIANCE REPAIR</b>		
<b>BUILDING INSPECTOR</b>		
<b>CHILD ABUSE HOT LINE</b>		1-800-482-5964
<b>CHILD CARE LICENSING UNIT</b>	Little Rock	1-800-445-3316 or 501-682-8590
<b>CLEANING/MAINTENANCE</b>		
<b>ELECTRIC COMPANY</b>		
<b>ELECTRICIAN</b>		
<b>EMERGENCY CHILD LOCATOR</b>		1-866-908-9572
<b>FACILITY DIRECTOR</b>		
<b>FIRE DEPARTMENT</b>		
<b>FIRE DEPARTMENT (Non-Emergency)</b>		
<b>GAS COMPANY</b>		
<b>GLASS COMPANY</b>		
<b>HEALTH DEPARTMENT (Local)</b>		
<b>HEATING/AIR CONDITIONING</b>		
<b>INSURANCE AGENT AND POLICY NUMBER</b>		
<b>LICENSING SPECIALIST</b>		
<b>LOCKS</b>		
<b>NATIONAL EMERGENCY FAMILY REGISTRY AND LOCATOR</b>		1-800-588-9822
<b>PLUMBER</b>		
<b>POISON CONTROL</b>		1-800-376-4766
<b>POLICE</b>		
<b>POLICE (Local Non-Emergency)</b>		
<b>RED CROSS (Local)</b>		
<b>SHERIFF</b>		
<b>TRASH REMOVAL</b>		
<b>WATER DEPARTMENT</b>		

## Child Care Immunization Requirements

Recommended by Arkansas Department of Health and  
Required by the Department of Human Services, Division of Child Care and Early Childhood, Licensing Division

<b>AGE</b>	<b>DTaP DTP/DT</b>	<b>POLIO</b>	<b>Hib **</b>	<b>HEPATITI S B</b>	<b>MMR ****</b>	<b>VARICEL LA ****</b>	<b>PNEUMOCO CCAL **</b>
<b>1-2 Months</b>	None	None	None	None (1-2 doses possible)	None	None	None
<b>3-4 Months</b>	1 dose	1 dose	1 dose	1 dose (1-2 doses possible)	None	None	1 dose
<b>5-6 Months</b>	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	None	None	2 doses <b>OR</b> 1 dose within last 8 weeks
<b>7-12 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None	None	2-3 doses <b>OR</b> 1 dose within last 8 weeks
<b>13-15 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None (1 dose possible)	None (1 dose possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)
<b>16-18 Months</b>	3 doses or 1 dose within last 8 weeks	2 doses or 1 dose within last 8 weeks (3 doses possible)	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	2 doses <b>OR</b> 1 dose within the last 8 weeks (3 doses possible)	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 2 doses on/after 1st birthday

<b>19-48 months</b>	4 doses <b>OR</b> 3rd dose within last 6 months <b>OR</b> 1 dose within last 8 weeks	3 doses <b>OR</b> 1 dose within last 8 weeks	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	3 doses *** <b>OR</b> 1 dose within last 8 weeks	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday
<b>49-72 Months</b>	5 doses * <b>OR</b> 4th dose within last 6 months <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 4 doses with last dose on/after 4th birthday	4 doses <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 3 doses with last dose on/after 4th birthday	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses <b>Not required on/after 5th birthday</b>	3 doses *** <b>OR</b> 1 dose within the last 8 weeks	1 dose	1 dose	3-4 doses with last dose on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday <b>Not required on/after 5th birthday</b>

\* **5th DTaP/DTP/DT** (Pre-school dose) must be given on/after the child's 4th birthday and may be given at any time from 49 to 72 months of age. Interval between 4th DTaP/DTP/DT and 5th DTaP/DTP/DT should be at least 6 months.

\*\* **For Hib and Pneumococcal**, children receiving the first dose of vaccine at age 7 months or older require fewer doses to complete the series.

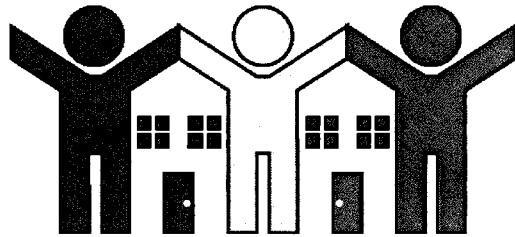
\*\*\* **3rd dose of hepatitis B** should be given at least 8 weeks after the 2nd dose, at least 16 weeks after the 1st dose, and it should not be administered before the child is 24 weeks of age.

\*\*\*\* **MMR and Varicella** vaccine must be given on/after the child's first birthday.

# WYOMING DEPARTMENT OF NATURAL RESOURCES

FOR

## Out-of-School Time Facilities



This document provides information on the requirements for  
out-of-school time facilities in Wyoming.

For more information, contact:

Wyoming Department of Natural Resources

1000 East 17th Avenue, Cheyenne, WY 82002

(307) 777-3333





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## MINIMUM LICENSING REQUIREMENTS FOR

### Out-of-School Time Facilities

#### **100 CHILD CARE OUT-OF-SCHOOL TIME LICENSING**

##### **101 Related Laws and Requirements**

1. The "Child Care Facility Licensing Act" Ark. Code Ann. 20-78-201-220, as amended, is the statutory authority for licensing ~~child care facilities~~ Out-of-School Time (OST) Programs. This act created the Division of Child Care and Early Childhood Education and authorized the Division to establish rules and regulations governing the granting, revocation, denial and suspension of licenses for ~~child care~~ OST facilities and the operation of ~~child care~~ OST facilities in this state. The Minimum Licensing Requirements for ~~Child Care Centers~~ Out-of-School Time Facilities are the Division's rules and regulations for ~~Child Care Centers~~ OST Facilities.
2. The Child Care Facility Licensing Act designates the Arkansas Department of Human Services, Division of Child Care and Early Childhood Education as the administrative agency responsible for administering the Act in accordance with the Minimum Licensing Requirements for ~~Child Care Centers~~ Out-of-School Time Facilities. The Division is authorized to inspect and investigate any proposed or operating ~~Child Care Centers~~ OST Facilities and any personnel connected with the ~~Center~~ OST Facilities to determine if the facility will be or is being operated in accordance with the Child Care Facility Licensing Act and the Minimum Licensing Requirements for ~~Child Care Centers~~ Out-of-School Time Facilities.
- ~~3. The licensing requirements contained in this manual apply to group child care. (Refer to the Minimum Licensing Requirements for Day Care Family Homes for the requirements that apply to child care provided in a day care family home.)~~
3. The Child Care Licensing Unit will notify the applicable federal agency at any time they become aware of or are advised of violations of any of the following or similar laws. The owner should be aware of applicable federal laws which may affect the operation of the facility, such as, but not limited to:
  - a. Americans with Disabilities Act (ADA).
  - b. Environmental Protection Agency (EPA) regulations to ensure that any renovation or repair work on a home, child care facility, or school that was constructed prior to 1978 shall be completed by a contractor that is certified by the Environmental Protection Agency (EPA), when the repairs and/or renovations consist of any or all of the following: the repair or renovation disturbs six (6) or more square feet of the interior, the repair or renovation disturbs twenty (20) feet or more square feet of the exterior, and/or the repair or renovation involves removing a window.
  - c. Federal civil rights laws state that a facility may not discriminate on the basis of race, color, sex, religion, national origin, physical or mental handicap, or veteran status.

4. The Licensee shall maintain Child Care Liability Insurance (Act 778 of 2009), and comply with the following requirements:
  - a. Prior to the approval of an application, the applicant shall provide verification of the required coverage to the Licensing Specialist and provide subsequent verification when requested. (Facilities licensed prior to the effective date of this revision shall have ninety (90) days to comply with this requirement.)
  - b. The Licensee shall maintain the minimum amount of coverage as follows:

Licensed Capacity of <del>Center</del> -OST Facility	Minimum Child Care Liability Insurance Coverage Required
1-74	\$500,000 per occurrence
75 and up	\$1,000,000 per occurrence

5. Laws relevant to the operation of ~~child care~~-OST facilities are available upon request.
6. The following standards are the minimum licensing requirements which shall be met by persons or organizations which operate ~~a child care~~ an OST facility. In recommending a license be issued, the Division of Child Care and Early Childhood Education works in coordination with the local and state Health Departments, Fire Departments, City Planning or Zoning Departments and the Boiler Division of the Department of Labor. Persons considering opening or expanding ~~a child care~~ an OST facility shall immediately contact these individual departments for inspection and information on their separate regulations.

A prospective Licensee should request clarification regarding the codes or covenants enforced by these departments as some may prevent the operation of ~~a child care~~ OST facility at a particular location, may limit the number of ~~children~~ participants in care or may impose additional safety requirements.

7. The Licensing Unit shall share information on the location and status of new applicants applying for a license and on facilities holding a license when a city or county requests the information.

## 102 General Requirements

1. ~~Child Care Centers~~ OST Facilities shall maintain compliance with the licensing requirements at all times. To be in substantial compliance, the ~~Child Care Center~~ OST Facility shall meet all essential standards necessary to protect the health, safety and welfare of the ~~children~~ participants attending the ~~Child Care Center~~ OST Facility. Essential standards include but are not limited to those relating to issues involving fire, health, safety, nutrition, discipline, staff/~~child~~ participant ratio and space. Failure to comply with any of the licensing requirements for ~~Child Care Centers~~-OST Facilities may result in any of the following adverse actions:
  - a. Denial of an application for a license or for church exempt status
  - b. Revocation or suspension of a license or church exempt status

- c. Issuance of a provisional license or provisional church exempt status
2. The following factors may be considered when determining the appropriate adverse action:
    - a. Severity of the deficiency cited
    - b. Number of violations cited
    - c. Frequency of violations cited
    - d. Past history of compliance
    - e. Willingness/ability to correct violations
  3. Each ~~Child Care Center~~ OST Facility shall be reviewed by the Child Care Licensing Unit to determine whether the facility is in compliance with all the Minimum Licensing Requirements for ~~Child Care Centers~~ OST Facilities. Child Care Licensing staff shall have access to ~~Child Care Centers~~ OST Facilities for the purpose of conducting inspections, reviews and complaint investigations. (**Clarification:** In addition to rooms used for care, Child Care Licensing Staff must also be given access to all other rooms or spaces not used for ~~child~~ care. Any rooms or areas that are not accessible to ~~children~~ participants in care will only be viewed briefly for major health and safety issues and will not be routinely monitored for general licensing compliance. This is to help insure that there are no dangers such as fire hazards, which could impact the safety of the entire structure.)
  4. Denial of access to the facility or to interview ~~children~~ participants may result in any of the adverse action described above.
  5. Any facility that has not provided care to ~~children~~ participants for a period of one year shall be closed unless a written request is made by the licensee stating why closure should not take place. If the licensee requests that the license remain open, license fees and required annual inspections shall be kept current.
  6. Falsification of any document or the submission of false information to the Child Care Licensing Unit or any other unit of the Division may constitute grounds for revocation of the license. (Falsification means the submission of untrue information, whether by statement or omission.)

### **103 Licensing Procedures**

1. Application- An application shall be obtained from the Child Care Licensing Unit. The completed application packet shall be submitted to the Child Care Licensing Unit for review and approval. A completed application packet shall consist of:
  - a. A signed application form with a designated person who assumes legal responsibility for operation of the ~~child care~~ OST facility
  - b. Name of proposed director and their qualifications
  - c. Names, addresses and telephone number of Board of Directors, if applicable
  - d. Clear written guidelines of responsibility for the Board of Directors, if applicable
  - e. Building/facility diagram
  - f. Description of the services that will be provided to the ~~children~~ participants

- g. Verification that criminal record checks and child maltreatment central registry checks have been initiated on all owners, operators and staff members of the ~~Child Care Center~~ OST Facility.
  - h. Boiler inspection, or verification that inspection has been scheduled
  - i. Fire Department approval
  - j. Health Department approval
  - k. Zoning approval
  - l. Verification of Child Care Liability Insurance (if Child Care Liability Insurance cannot be obtained before application, it must be obtained with proof provided to the Child Care Licensing Unit **before** care of ~~children~~ participants can be provided)
  - m. A reasonable plan with a proposed budget for the financial support of the ~~center~~ program covering costs of staffing, building (including rent or mortgage and repairs), utilities, equipment, safety, and nutrition. (This is a one-time only requirement that applies to new applicants for a license.)
2. Time for processing: The Licensing Specialist has sixty days to submit a recommendation to the Division.
  3. A pre-approval consultation meeting shall be required for all applicants for a license prior to the approval of the application. This meeting shall be offered to the applicant prior to application or within 30 days of the receipt of the application.
  4. License- The Child Care Licensing Unit shall conduct a licensing study of each ~~Child Care Center~~ OST Facility to determine eligibility for a license. The facility shall be approved by the Child Care Licensing Unit before a license may be issued by the Division. A license for a ~~Child Care Center~~ OST Facility shall specify:
    - a. The name and address of the facility
    - b. The owner/operator of the ~~Child Care Center~~ OST Facility
    - c. The number of ~~children~~ participants authorized for care at the ~~Child Care Center~~ OST Facility
    - d. The expiration of any provisional licenses
    - e. The type of care the ~~Child Care Center~~ OST Facility will be providing
  5. License—Non-transferable- A license for a ~~Child Care~~ OST Facility or approval for a church-operated exempt status shall apply only to the address and location stated on the license or approval issued. It shall not be transferable from one holder of the license or approval to another or from one place to another. If the location of a ~~Child Care~~ OST Facility is changed, or the operator of the ~~Child Care~~ OST Facility is changed, then the license or approval for that ~~Child Care~~ OST Facility shall be automatically closed on such a change. The ~~Child Care~~ OST Facility shall notify the Licensing Unit of a change of location or ownership.
  6. Compliance—On-site inspections of ~~Child Care Centers~~ OST Facilities are conducted by the Child Care Licensing Unit on a routine basis to determine a facility's continued compliance with the standards. The caregivers shall cooperate with licensing staff during licensing visits and investigations.

Violations of rules are documented in writing by use of the licensing compliance record. Documentation shall include:

- a. Reference to the specific rule violated
  - b. A factual description of the nature of the violation and how the ~~Child Care Center~~ OST Facility failed to comply
  - c. A date of expected corrections
7. If video recordings are made by the facility and maintained for viewing as part of a continuous monitoring system, they shall be made available to licensing staff as needed upon request. This does not include video recordings of special events, etc.
8. The Child Care Licensing Unit shall have the authority to make both scheduled and unscheduled visits to:
- a. Conduct inspections and reviews to determine compliance with the licensing requirements.
  - b. Investigate complaints involving possible violations of licensing requirements.
  - c. Offer consultation and technical assistance.
9. The Child Care Licensing Specialist may increase unscheduled monitor visits where numerous or severe violations of standards are cited.
10. If a violation is of imminent threat to the health, safety and welfare of the ~~children~~ participants attending the OST Program ~~Child Care Center~~, corrective action or compliance shall be obtained within 24 hours in order to insure the health, safety and welfare of the children in care. If a ~~Child Care Center~~ an OST Facility violates an administrative standard or standard that does not directly threaten the immediate health, safety or welfare of the ~~children~~ participants in care, these violations shall be corrected within a reasonable time as mutually agreed upon by the Child Care Licensing Unit and the ~~Child Care Center~~ OST Facility.

Once a violation has been corrected, the correction will be documented on the Licensing Compliance Record and a copy provided to the ~~Child Care Center~~ OST Facility.

11. New Provisional License- The Child Care Licensing Specialist shall recommend a new provisional license when the facility is newly opened or a facility has been acquired by new owners whose compliance history has not been determined. A new provisional license shall not exceed twelve (12) months in length.

At the end of the provisional license, the Division may in its discretion:

- a. Issue a regular license
- b. Revoke the license
- c. Suspend the license
- d. Issue a successive provisional license

12. Regular License: The Child Care Licensing Specialist will recommend a regular license when the facility has demonstrated substantial compliance, or when an existing Licensee with a Regular license relocates their facility and their past demonstrates a substantial level of compliance.
13. Probationary Provisional License- The Licensing Unit may issue a Probationary Provisional license when the center is not maintaining substantial compliance due to deficiencies which are so numerous, frequent or severe as to potentially jeopardize the health, safety and welfare of ~~children~~ participants. The facility and Licensing Unit shall have a corrective action plan in place addressing the issues.

Based on the level of compliance during the period of the Probationary Provisional license, the Licensing Unit may:

- a. Issue a Regular license
  - b. Suspend the license
  - c. Revoke the license
14. Suspension of License- The Division may suspend a license when the Licensing Unit determines that the facility has serious areas of non-compliance, but the facility would be able to resume normal operation when the harmful conditions are eliminated.

If granted, the suspension order remains in effect until the order expires or until the Division determines that the problem necessitating the suspension order have been resolved. The suspension of a license may not exceed twelve (12) months. If the Division finds that the terms of the suspension order have been met prior to the expiration of the suspension period, the Division retains the discretion to reinstate the license. If the terms of the order have not been met, the Division may revoke the license.

15. Revocation of License-The Division may revoke a license when any of the following situations occur:
  - a. The facility fails to maintain substantial compliance with licensing requirements.
  - b. The facility fails or refuses to correct cited deficiencies in a timely manner.
  - c. The facility fails to insure the health, safety and welfare of ~~children~~ participants in care.
16. The revocation of a license nullifies and cancels the license. At the time of a final determination of revocation of the license by the Division, the Division shall specify in the revocation letter the terms of the revocation. The licensee shall not be eligible to reapply for a license for a minimum of one (1) year or longer, if specified in the revocation order. Related parties shall not be eligible to apply for a license for the same specified period. (Related parties are defined as immediate family members, member of Board of Directors, persons or entities associated or affiliated with, or which share common ownership, control, or common board members or which have control of or is controlled by the licensee. An immediate family member is defined as a spouse, step and in-law relationships, a child, a natural or adoptive parent, a sibling, a grandparent, a grandchild or a son or daughter-in-



law.) (Applicants who are denied a license or registration due to this requirement may appeal the denial to the Child Care Facility Review Panel.) Facilities wishing to be re-licensed must submit a new application for licensure for review and approval by the Division. Approval must be obtained and a new license issued before the facility provides care to a licensable number of ~~children~~ participants.

#### **104 License Fee**

1. Each facility shall submit an annual license fee as long as the facility is in compliance with the Minimum Licensing Requirements for Child-Care OST Facilities. A facility license fee is determined by combining the maximum license capacity of all licenses located within the same premises.
  - a. Facilities serving up to 17 ~~children~~-participants- \$15 per year
  - b. Facilities serving 17 to 99 ~~children~~-participants- \$50 per year
  - c. Facilities serving 100 or more ~~children~~ participants- \$100 per year
2. Upon review and determination of a licensing recommendation by the Child Care Licensing Specialist, the Specialist shall issue a Notice of License Fee Due to the facility.
3. The Division shall not issue a license unless the required license fee has been paid.
4. A copy of the license fee notice shall be submitted, ~~at the time of licensure~~ recommendation.
5. The fee schedule shall apply to all ~~child-care~~ OST facility recommendations for licensure as follows:
  - a. New Provisional License-(Provisional License for new operation to be issued for a period of twelve (12) months.) A one-year license fee shall be paid prior to the issuance of a provisional license.
  - b. New Regular License or Conversion from provisional to regular status-A license fee shall be paid prior to the issuance of a new license.
  - c. Conversion to Provisional Status-No license fee is due for licenses converted to provisional status during the term of a regular license.
6. A second notice of license fee due will be sent to facilities failing to submit the required license fee (Notice of License Fee Past Due). This notice will be sent 20 days after the initial notice of fee due. Failure to submit a license fee within 20 days of receipt of the past due notice will result in action to suspend the license until such time as the fee is paid.
7. Refunds of license fees paid are made only when the Division does not approve issuance of a license. There shall be no refunds of license fees paid for voluntary closure of a facility or for Division action to revoke or suspend a license.
8. All license fees paid to the Division shall be deposited in a special Child Care Provider's

Fund. This fund shall be used to meet the cost of conducting statewide criminal record checks, with the remaining money used for training or materials to be loaned to child care providers.

### **105 Appeal of Licensing Actions**

1. A licensee or applicant for license may request an appeal of any of the following licensing actions:
  - a. Adverse licensing actions (revocation or suspension of a license, conversion to a provisional license or denial of an application for a license)
  - b. Founded licensing complaints
  - c. Denials of alternative compliance requests
  - d. Cited noncompliance with the published standards
2. An appeal may be initiated on any of the above actions by requesting an appeal in writing to the Licensing Specialist or Licensing Supervisory Staff. Requests to appeal adverse licensing actions must be mailed within ten (10) calendar days of the receipt of the notice of the adverse action. Requests to appeal licensing actions, other than adverse, must be mailed within twenty (20) calendar days from receipt of the notification of the action. The request to appeal shall include a statement of the action(s) taken by the Division and the reason(s) the licensee or applicant for license disagrees with that action. The request to appeal will be reviewed by the Licensing Supervisor and the Licensing Administrator. If the appeal is not resolved to the satisfaction of the licensee or applicant for license, the matter will be referred to the Child Care Appeal Review Panel for hearing. (This appeal process also applies to Church Operated exempt facilities.) **(Additional information regarding the appeal procedures and the Child Care Appeal Review Panel is available on request.)**

### **106 Alternative Compliance**

1. The Division may grant alternative compliance with the Minimum Licensing Requirements for ~~Child Care Centers~~ Out-of-School Time Facilities if the Division determines that the alternative form of compliance offers equal protection of health, safety and welfare to ~~children~~-participants and meets the basic intent of the requirements for which the ~~center~~ program is making the request.
2. The Division shall consider all requests for alternative compliance with the Licensing requirements except those requirements that are enforced by the Department of Health, Local Fire Marshal or State Fire Marshal's office and applicable city ordinances including zoning.
3. To request alternative compliance, the following procedure shall be initiated by the person responsible for the operation of the facility.
4. The applicant/licensee shall submit the request for alternative compliance in writing.

5. The request shall include:
  - a. The specific standards for which alternative compliance is sought.
  - b. An explanation of how the alternative form of compliance is equal to or exceeds the stated requirements.
  - c. Full justification and description of what the alternative compliance method will be and the method by which the facility will carry out this plan to continue to provide for the health, safety and welfare of ~~children~~ participants as intended by the requirements.
  - d. The applicant/licensee shall provide clear and supportive evidence and upon request of the Division, and expert's opinion on the effect of the request on health, safety, and welfare of the ~~children~~-participants.
6. A separate written request shall be submitted for each requirement of which alternative compliance is sought. The approved alternative compliance is effective for the duration of the license unless a shorter time frame is specified.
7. The granting of alternative compliance for a requirement shall in no way constitute a precedent. If an alternate means of complying with the requirement is granted by the Division and the facility fails to satisfactorily implement this alternate means, the original requirement for which alternative compliance was sought shall become immediately enforceable.
8. The Division shall have the right to obtain an expert opinion to corroborate expert opinions provided by the applicant/licensee.
9. The Division shall have the right to deny requests for alternative compliance when it finds that such requests do not adequately protect the health, safety and welfare of ~~children~~ participants and do not meet the intent of the requirements.
10. All requests for alternative compliance shall be answered in writing by the Division.

### **107 Church-Operated Exemption**

**Please note that all regulations included in this manual also applies apply to Church Operated Exempt (COE) OST facilities.**

1. Act 245 of 1983 defines those facilities that may apply for an exemption from obtaining of license to operate a child care facility and the process through which such exemption may be granted. The facility must be operated by a church or group of churches and be exempt from the State Income Tax levied by Act 118 of 1929, as amended. The person or persons in charge of such a facility shall submit a written request to the Division for such exemption along with the following:
  - a. Verification of Tax ID ownership by the church
  - b. Verification that the facility is operated by a church or group of churches
  - c. Verification that the facility has been inspected annually and meets the applicable fire safety and health standards

- d. Certification from the facility that it is in substantial compliance with published standards that similar nonexempt ~~child care~~-OST facilities are required to meet
2. The Division shall review each request for a church-operated exemption and reply in writing within 60 days from receipt of such request.
3. The facility shall be visited by Division staff to verify the facility's substantial compliance with the published standards prior to the consideration and review by the Division.
4. The Division shall consider each request for exemption and shall review the Division staff's written report in determining a facility's substantial compliance with published standards.
5. If a facility claims and states the belief that a particular standard is of a religious nature, the Division shall consider and make a determination on the statements that shall then be a final action subject to review under the Administrative Procedures Act.
6. Written notification of an exemption shall be made to the facility stating the maximum number of ~~children~~-participants allowable, the dates of exemption and any other conditions by which an exemption is granted.
7. Division staff shall have the authority to visit any church-operated exempt facility to review, advise and verify the maintenance of substantial compliance at the direction of the Division.

### **108 Licensing Investigations**

1. Child Care Licensing staff shall investigate all complaints involving the possible violation of licensing requirements.

### **109 Child Maltreatment Checks**

1. The following persons shall be required to have their background reviewed through an Arkansas Child Maltreatment Central Registry Check. A check or money order for ~~\$10.00~~ made out to Department of Human Services (DHS) must be attached to each form.
 

a. Each applicant to own or operate a <del>child care</del> -OST facility	At application and every two years thereafter
b. Staff members and applicants for employment in a <del>child care</del> OST facility	At application or within 10 days of hire/start date and every two years thereafter
c. All volunteers who have routine contact with <del>children</del> -participants	At application and every two years thereafter
d. Administrative staff and/or members of Board of Directors who have supervisory and/or disciplinary control over <del>children</del> participants or who have routine contact with <del>children</del> -participants	At application and every two years thereafter

- e. Student Observers At beginning of observation or within 10 days of first observation and every two years thereafter if applicable
- f. Therapist or other persons who have routine contact with ~~children~~ participants Within 10 days of the time they begin to provide services or begin to participate in ~~center~~ program activities and every two years thereafter

2. If a complaint of child maltreatment is filed against any owner/operator, staff or other person in a ~~child care center~~ OST Facility, the Child Care Licensing Specialist shall evaluate the risk to ~~children~~ participants and determine the suitability of the person(s) to supervise, be left alone with ~~children~~ participants, have disciplinary control over ~~children~~ participants or remain in the ~~center~~ program during hours of care until the allegations have been determined true or unsubstantiated. (Pending the evaluation of risk to ~~children~~ participants by the Child Care Licensing Unit, the person(s) alleged shall not be left alone with ~~children~~ participants.)
3. If corrective action is appropriate, the facility shall require all staff members who have had a founded report of child maltreatment to follow the corrective action plan specified by the Child Care Licensing Unit. Corrective action measures may vary from relevant training to reassignment or termination. Failure to comply with corrective action plans may constitute grounds for adverse action against the license.
4. The statewide Child Maltreatment "Hot Line" and the Child Care Licensing Central Office number shall be posted in a conspicuous place in the ~~child care~~ OST facility. The "Hot Line" number is 1-800-482-5964 and the Licensing Central Office number is (501) 682-8590 or toll free 1-800-445-3316.

### 110 Criminal Records Check

1. The following persons shall apply to the Identification Bureau of the Arkansas State Police for a nationwide criminal record check, to be conducted by the FBI, which shall include a fingerprint check: (The individual is responsible for the cost of a nationwide check. Each request must be accompanied by a check or money order made out to the Arkansas State Police. ~~for \$16.50~~)

Fingerprints submitted will be used to check the criminal history records of the FBI. Individuals with results showing a prohibited offense shall be advised to contact the Licensing Unit for procedures to obtain the results and for procedures to update or make corrections to the record of their individual history.

- a. Each applicant to own or operate a ~~child care facility~~ OST facility. Initial application only

- b. Staff who have not been a resident of the State of Arkansas for the five (5) preceding years Within 10 days of hire/start date
  - c. Administrative persons who have direct contact with ~~children~~-participants. If the person has not been a resident of Arkansas for 5 years.
  - d. Therapist or other persons who have supervisory control, disciplinary control over ~~children~~ participants or are left alone with ~~children~~-participants. If the person has not been a resident of Arkansas for 5 years, then at the time they begin to provide services or begin to participate in ~~center~~ program activities
2. The following persons shall be required to have their background reviewed through Criminal Records check (which includes the Arkansas Sexual Offender Registry) conducted by the Arkansas State Police.
- a. Each applicant to own or operate a ~~child care~~-OST facility At application and every 5 years thereafter
  - b. Staff and applicants for employment in a ~~child care~~-an OST facility Within 10 days of hire/start date and every 5 years thereafter
  - c. Administrative persons who have direct contact with ~~children~~-participants Within 10 days of hire and every 5 years thereafter
  - d. Therapist or other persons who have supervisory or disciplinary control over ~~children~~-participants, or are left alone with ~~children~~-participants Within 10 days of the time they begin to provide services or begin to participate in ~~center~~ program activities and every 5 years thereafter
3. Criminal records will be returned to the division for review. Any charge/convictions listed in this section (Section 110) that are returned will be considered regardless of whether the record is expunged, pardoned or otherwise sealed.
4. No person shall be eligible to be a ~~child care~~-an OST facility owner, operator, or employee if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are permanently prohibited:

01. Abuse of an endangered or impaired person, if felony	§5-28-103
02. Arson	§5-38-301
03. Capital Murder	§5-10-101
04. Endangering the Welfare of an Incompetent person- 1 <sup>st</sup> degree	§5-27-201
05. Kidnapping	§5-11-102
06. Murder in the First degree	§5-10-102

07. Murder in the Second degree	§5-10-103
08. Rape	§5-14-103
09. Sexual Assault in the First degree	§5-14-124
10. Sexual Assault in the Second degree	§5-14-125

5. No person shall be eligible to be a ~~child care~~ an OST facility owner, operator, or employee if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are prohibited:

01. Criminal Attempt to commit any offenses in MLR Section 100.110	§5-3-201
02. Criminal Complicity to commit any offenses in MLR Section 100.110	§5-3-202
03. Criminal Conspiracy to commit any offenses in MLR Section 100.110	§5-3-401
04. Criminal Solicitation to commit any offenses in MLR Section 100.110	§5-3-301
05. Assault in the First, Second, or Third degree	§5-13-205 - §5-13-207
06. Assault, Aggravated	§5-13-204
07. Assault, Aggravated on a Family or Household Member	§5-26-306
08. Battery in the First, Second, or Third Degree	§5-13-201 - §5-13-203
09. Breaking or Entering	§5-39-202
10. Burglary	§5-39-201
11. Coercion	§5-13-208
12. Computer Crimes Against Minors	§5-27-601 et. seq.
13. Contributing to the Delinquency of a Juvenile	§5-27-220
14. Contributing to the Delinquency of a Minor	§5-27-209
15. Criminal Impersonation	§5-3-208
16. Criminal Use of a Prohibited Weapon	§5-73-104
17. Death Threats Concerning a School Employee or Students	§5-17-101
18. Domestic Battery in the First, Second, or Third Degree	§5-26-303 - §5-26-305
19. Employing or Consenting to the Use of a Child in a Sexual Performance	§5-27-402
20. Endangering the Welfare of a Minor in the First or Second Degree	§5-27-205 and §5-27-206
21. Endangering the Welfare of an Incompetent Person in the First or Second Degree	§5-27-201 and §5-27-202
22. Engaging Children in Sexually Explicit Conduct for Use in Visual or Print Media	§5-27-303
23. False Imprisonment in the First or Second Degree	§5-11-103 and §5-11-104
24. Felony Abuse of an Endangered or Impaired Person	§5-28-103
25. Felony Interference with a Law Enforcement Officer	§5-54-104
26. Felony Violation of the Uniform Controlled Substance Act	§5-64-101 - §5-64-508 et. seq.

27. Financial Identity Fraud	§5-37-227
28. Forgery	§5-37-201
29. Incest	§5-26-202
30. Interference with Court Ordered Custody	§5-26-502
31. Interference with Visitation	§5-26-501
32. Introduction of Controlled Substance into Body of Another Person	§5-13-210
33. Manslaughter	§5-10-104
34. Negligent Homicide	§5-10-105
35. Obscene Performance at a Live Public Show	§5-68-305
36. Offense of Cruelty to Animals	§5-62-103
37. Offense of Aggravated Cruelty to Dog, Cat, or Horse	§5-62-104
38. Pandering or Possessing Visual or Print Medium Depicting Sexually Explicit Conduct Involving a Child	§5-27-304
39. Patronizing a Prostitute	§5-70-103
40. Permanent Detention or Restraint	§5-11-106
41. Permitting Abuse of a Minor	§5-27-221
42. Producing, Directing, or Promoting a Sexual Performance by a Child	§5-27-403
43. Promoting Obscene Materials	§5-68-303
44. Promoting Obscene Performance	§5-68-304
45. Promoting Prostitution in the First, Second, or Third Degree	§5-70-104 - §5-70-106
46. Prostitution	§5-70-102
47. Public Display of Obscenity	§5-68-205
48. Resisting Arrest	§5-54-103
49. Robbery	§5-12-102
50. Robbery (Aggravated Robbery)	§5-12-103
51. Sexual Offense (any)	§5-14-101 et. seq.
52. Simultaneous Possession of Drugs and Firearms	§5-74-106
53. Soliciting Money or Property from Incompetents	§5-27-229
54. Stalking	§5-71-229
55. Terroristic Act	§5-13-310
56. Terroristic Threatening	§5-13-301
57. Theft by Receiving	§5-36-106
58. Theft of Property	§5-36-103
59. Theft of Services	§5-36-104
60. Transportation of Minors for Prohibited Sexual Conduct	§5-27-305
61. Unlawful Discharge of a Firearm from a Vehicle	§5-74-107
62. Voyeurism	§5-16-102

6. If the licensee wishes to employ an individual with a conviction or plea of guilty or nolo contendere for the following nonviolent offenses, they shall submit a written request for a waiver prior to employment. § 20-38-103 (e) (3) (a) Act 990 of 2013
- a. Theft by receiving § 5-36-106
  - b. Forgery § 5-37-201



- c. Financial identity fraud § 5-37-227
- d. Resisting arrest § 5-54-103
- e. Criminal impersonation in the second degree § 5-37-208(b)
- f. Interference with visitation § 5-26-501
- g. Interference with court-ordered visitation § 5-26-502
- h. Prostitution § 5-70-102
- i. Patronizing a prostitute § 5-70-203

The waiver may be approved if all of the following conditions are met:

- The individual has completed probation or parole supervision
  - The individual has paid all court ordered fees, fines and/or restitution
  - The individual has fully complied with all court orders pertaining to the conviction or plea
7. The waiver will be revoked if after employment the individual pleads guilty or nolo contendere or is found guilty of any prohibited offense (including the list above a-i) or has a true or founded report of child maltreatment or adult maltreatment in a central registry.
  8. The request for waiver and certification of approval shall be kept in the individual's file for the term of employment and three years after termination of employment.
  9. If approved, the waiver is not transferable to another licensed facility.
  10. Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed as prohibited above (Section 110.5, 0-62) may not work in child care unless:
    - a. The date of the conviction, plea of guilty or nolo contendere for a misdemeanor offense is at least five (5) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the five (5) year period preceding the background check request.
    - b. The date of the conviction, plea of guilty or nolo contendere for a felony offense is at least more than ten (10) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the ten (10) year period preceding the background check request.
  11. Anyone employed in a licensed center, COE center, licensed child care family home or a registered child care family home prior to 9/1/2009 with a clear background check history may remain eligible for employment unless the employee had a conviction, plead guilty, or plead nolo contendere to an offense listed in the above section (Section 110.6) since 9/1/2009.

## **200 ORGANIZATION AND ADMINISTRATION**

### **201 Administrative Procedures**

1. The Owner and/or Board of Directors shall be responsible for operating the facility and shall have final responsibility to ensure that the facility meets licensing requirements. Names, addresses, and telephone numbers of Board members shall be provided to the Licensing Specialist.
2. The facility shall provide a written procedure for reporting suspected of child maltreatment. This procedure shall be followed and a call made to the Hot Line whenever there is a suspicion of child maltreatment (1-800-482-5964). These reports of child maltreatment shall include all allegations made to the licensee by parents, staff members or the general public. The licensee should call Child Care Licensing for guidance if there is any question about whether or not the Hot Line should be called regarding any situation where potential child maltreatment is involved.
3. The facility shall provide a written procedure for reporting suspected licensing violations. Serious licensing violations shall be reported to the Licensing Unit. These include, but are not limited to, violations relating to transportation, inappropriate behavior guidance, ~~leaving children unattended or unsupervised~~, inadequate supervision, staff/~~child~~-participant ratio violations or any other violations or any other violation that could imminently affect the health and safety of ~~children~~-participants.
4. Parents shall be informed in writing upon enrollment of their child that ~~children~~-participants may be subject to interviews by licensing staff, child maltreatment investigators and/or law enforcement officials for the purpose of determining licensing compliance or for investigative purposes. ~~Child~~-Participant interviews do not require parental notice or consent.
5. ~~The facility shall provide a copy of the list of Kindergarten Readiness Skills Calendar or Checklist, prepared by the Arkansas Department of Education (copies can be requested online, by phone, or by mail from the DHS DCCECE Program Support Unit), to the parents of all three and four year old children enrolled. (Act 825 of 2003) A statement, signed by the parent, that they have received a copy of the list shall be maintained in the child's record.~~

## **300 PERSONNEL**

### **301 Staff/~~Child~~ Participant Ratio**

1. A licensee shall not have more ~~children~~-participants in care at any one time than the maximum specified on the license.
2. The following staff ~~child~~/participant ratios shall be maintained:

Ages of Children-Participants	Number of Staff	Number of Children
<del>a. Birth—18 months</del>	<del>1</del>	<del>6</del>
<del>b. 18 months—36 months</del>	<del>1</del>	<del>9</del>
<del>c. 2 ½—3 years</del>	<del>1</del>	<del>12</del>
<del>d. 4 years</del>	<del>1</del>	<del>15</del>
<del>e. 5 years to Kindergarten</del>	<del>1</del>	<del>18</del>
a. Kindergarten and above	1	20-18

Providers who were licensed to serve school age participants prior to the effective date of this rule will have four years from the implementation of this rule to comply with the new ratio requirement.

- ~~3. Children ages 30 to 36 months may be placed in the group most suited to their social, emotional and developmental maturity.~~
- ~~4. Infants and toddlers shall not be mixed with day care children, except as listed in the following requirement.~~
- ~~5. When a total of eight (8) or fewer children are in care at a licensed site, age groups may be mixed according to the following ratios:~~

Number of Staff	Number of Children	Ages of Children
<del>a. 1</del>	<del>6</del>	<del>No more than 3 under the age of 2 years</del>
<del>b. 1</del>	<del>7</del>	<del>No more than 2 under the age of 2 years</del>
<del>c. 1</del>	<del>8</del>	<del>No more than 1 under the age of 2 years</del>

- ~~6. In a group containing children of different ages, the staff/child ratio shall meet the requirements for the youngest child in the group.~~
- ~~7. During lunch or outdoor play activities, if children of different age groups are together, the staff-child ratio for the respective age groups shall be maintained.~~
3. At no time shall children be left unsupervised or unattended. The child care center shall provide additional staff for any temporary absence of primary child caring staff for activities such as breaks, meal preparation, transportation, etc. All participants shall be adequately supervised at all times. Though participants are generally required to be within the sight or hearing of staff, OST participants, second grade and above, may be provided opportunities to take part in short-term activities not within the sight and hearing of OST staff. Such short-term activities include but are not limited to going to a restroom, transitioning to other activities, returning to a classroom within a school building, etc. In order to minimize the risks associated with such short-term activities, the following provisions must be adhered to:

- a. The appropriateness of the degree of direct staff supervision required shall be based on an individual participant's ability to handle such responsibility. Only participants able to handle such responsibility shall be provided it.
  - b. Participants shall be accompanied at a minimum by another participant when engaging in short term activities (as defined above).
  - c. Systems of monitoring, (ex. use of two-way communication devices walkie talkies) shall be in place.
  - d. Staff shall make contact with the participant at least every ten (10) minutes. If the participant is anticipated being gone longer than ten (10) minutes, prior to releasing the participant, staff should make contact with the responsible adult (ex. teacher) that will provide supervision during this extended time to ensure that adequate supervision provisions are in place.
4. DDS (Developmental Disabilities Services) staff/ participant ratios shall be maintained in all facilities that are licensed or certified by both Child Care Licensing and DDS.
  5. Additional staff provisions shall be made for enrollment of children participants with disabilities, or participants who require individual attention.
  - ~~6. During naptime for children age 2 1/2 and above, a minimum of 50% of the staff shall remain with the children, with a total of 75% of the staff remaining in the building.~~

### **302 Maximum Group Size**

1. Maximum group size limitations do not apply during meal times, rest times, transitions, outdoor time periods, field trips, or the length of a special occasion, including but not limited to ~~holiday party~~ celebrations or visits from guest speakers.
2. Group size shall be limited to 2 times the number of children allowed with one staff member. This does not apply to periodic or special group activities ~~or to school-age children, K5 and above.~~ Existing structures licensed prior to November 1, 2002 are exempt from this requirement. However, any expansions, additions or any newly licensed structures effective November 1, 2002 shall be in compliance.
- ~~6. For ages 2 1/2 and above, ratios may be exceeded momentarily as long as children are never left unattended and at least one staff member remains in the classroom with the children. (This would apply to situations such as brief absences for bathroom breaks or to take a sick or injured child to the Director's office.)~~

### **303 Director**

- ~~1. The licensee shall ensure that there is a Director present at all times when participants are present. In the absence of the Director, the licensee shall ensure there is a designated person in charge who shall serve as the Site Supervisor and have the authority to carry out the daily operations of the OST Program.~~
1. There shall be a Director/~~person in charge~~ or Site Supervisor who shall be responsible for:

- a. Administering, planning, managing and controlling the daily activities of the center
  - b. Ensuring that the facility meets licensing requirements
  - c. Ensuring the health and safety of ~~children~~ participants
  - d. Providing prudent supervision of all staff and volunteers
2. Directors shall be age twenty-on (21) or older, and provide documentation of one of the following educational levels: ~~(Directors previously approved prior to the implementation of these requirements may continue in their position and do not have to meet these educational levels):~~
- a. Bachelor's Degree or higher Degree in Early Childhood, Elementary Education, Child/Youth Development or a related field from a regionally accredited college or university. (Determination of "related field" shall be made by the Division of Child Care & Early Childhood Education.)
  - b. Bachelor's Degree in a non-related field from a regionally accredited college or university plus one of the following:
    - Four years of experience in early childhood education or elementary education ~~the Director shall obtain a~~
    - Child Development Associate Credential (CDA) or Out of School Time Credential
    - Nine college hours of credit in child/youth development
  - c. Associate's Degree in Early Childhood, Child or Youth Development or a related field, plus six years of experience in Early Childhood Education or Elementary Education
  - d. Eight years of experience in Early Childhood or Elementary Education and completion of one of the following, within two years of employment:
    - Out of School Time Credential
    - Child Development Associate Credential
    - Director's Credential or the equivalent
    - Technical Certificate in Early Childhood Education

Individuals who have been employed in the position of Director prior to implementation of this rule will not be required to meet the new director's qualifications. These individuals may change employers after this date and still qualify as director.

- ~~e. AA Degree with an emphasis in Early Childhood or Child Development~~
- ~~f. A one (1) year technical certificate in Child Development~~
- ~~g. Child Development Associate (CDA) child care credential from an approved program~~

~~3. A high school diploma or GED with a minimum of four (4) program years experience in a licensed child care, elementary education program(s), or non-licensed out of school time program, may be substituted for above educational requirements if verification and documentation of work history in such setting is provided.~~

3. The director shall be on site a minimum of 50% of the program's operational day. Directors who oversee multiple sites or have extended operational hours shall name a site supervisor

who shall be in charge.

A director or assistant director/site supervisor, who meets director qualifications, must be present at each licensed site a minimum of 50% of the center's primary operational day, on a routine basis.

4. When the director and assistant director/site supervisor are ~~is~~ away from the center, there shall be a ~~site-supervisor~~ person in charge who shall have the ability and authority to carry out daily operations. The ~~site-supervisor~~ person in charge shall be age twenty-one (21) or older.
5. All new directors and assistant directors/site supervisors shall attend New Director's Orientation, PAS (Program Administration Scale) or YPQA form B, and ERS (Environment Rating Scale) training or introduction to YPQA (Youth Program Quality Assessment) within six months of employment. Programs operating seasonally (90 days or less within a calendar year) must, at a minimum, have Directors/Site Directors attend OST Director's "Essentials" within the first thirty (30) days. This is an orientation class sponsored by the Division. Proof of attendance shall be maintained in the director's file.
6. The director and assistant director/site supervisor shall obtain fifteen (15) clock hours in early childhood education or child/youth development each year. Training shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved. Documentation of training shall be maintained and available for review.
7. Topics appropriate for continuing early childhood education or child/youth development shall include, but are not limited to the following:
  - a. Child growth and development;
  - b. Nutrition and food service;
  - c. ~~Parent~~ Family communication and involvement;
  - d. Curriculum ~~and curriculum~~ development and implementation;
  - e. Developmentally appropriate practice and learning environments;
  - f. Behavior ~~management~~ guidance and positive interaction;
  - g. Emergency care and first aid;
  - h. ~~Administration and management of early childhood OST programs~~ Program planning, management, and leadership of early childhood/OST programs.
  - i. Building partnerships with schools and the larger community
  - j. Creating a culturally competent OST Program
8. The Licensee shall notify the Licensing Unit of any change in the person named as director and/or assistant director/site supervisor within five (5) calendar days.

### **304 Staff Requirements**

1. A person shall be considered a staff member if they have disciplinary or supervisory control over children-participants, is left alone with children-participants at any time, or is counted in staff/child participant ratio, regardless if they are paid by the facility or not.

2. Staff members in ~~a child care center~~ an OST facility shall be age 18 years or older. Exceptions may be allowed for individuals sixteen (16) or seventeen (17) years of age to work in ~~a center~~ an OST facility if they meet all of the following criteria:
  - a. The individual shall not have disciplinary control over ~~children~~ participants.
  - b. The individual shall not be left alone with ~~children~~ participants at any time.
  - c. The individual shall be under the direct supervision of an adult (18 years of age or older) staff member at all times.
  - d. The individual shall meet all other requirements.
  - e. The individual shall be a high school graduate, have a GED, or be enrolled in a high school or GED curriculum.
3. All staff members ~~hired after January 1, 1990,~~ who ~~to~~ work directly with ~~children~~ participants shall have a high school diploma or GED or shall be enrolled in a high school or GED curriculum and complete the curriculum within one year of hire.
4. All staff members who work directly with ~~children~~ participants shall obtain at least fifteen (15) hours of training registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved training each year in continuing Early Childhood Education or child/youth development. This training shall be ~~approved by the Division~~ appropriate for working with school age children/youth.
5. ~~At least one (1) adult caregiver who has current certification by the American Heart Association or the American Red Cross in infant and child cardiopulmonary resuscitation (CPR) and at least one (1) caregiver who has a current certification from the American Heart Association or the American Red Cross in First Aid shall be present within the confines of the center while children facility while participants are in care. Adult CPR is also required if school age children participants over the age of eight (8) are in care, or documentation that the current certification covers the ages of children in care. Infant/Child/Adult CPR certification will also be accepted from the AR Department of Labor, with documentation they conducted the course. Certifications may be held by the same person.~~
5. ~~Prior to providing direct child care to the participants, staff shall receive an orientation at the minimum addressing in basic health & safety, facility behavior management policies, program schedules, Minimum Licensing Requirements, and shall be advised that they are mandated reporters under the Child Maltreatment Reporting Act.~~
6. ~~All staff members working in a child care center an OST Facility, in any capacity, shall obtain a health card or physician's statement showing the absence of contagious Tuberculosis. This shall be renewed on a yearly basis.~~
5. All staff members caring for ~~children~~ participants shall be able to perform necessary job functions.
6. Staff shall not engage in behavior that could be viewed as sexual, dangerous, exploitative or physically harmful to ~~children~~ participants. A caregiver shall not use profanity or speak in an abusive manner when ~~children~~ participants are present.

7. No caregiver shall consume or be under the influence of illegal drugs. (A drug test may be required if there is reasonable cause to suspect violation of this requirement and the issue cannot otherwise be resolved.) No caregiver shall consume or be under the influence of alcohol while delivering care. No caregiver shall consume or be under the influence of medications (prescription or non-prescription) which impair their ability to provide care.

### **305 Volunteer Requirements**

1. Volunteers are those individuals who have routine contact with ~~children~~ participants and assist staff in the facility. If they are left alone with ~~children~~ participants considered in the staff/~~child~~ participant ratios or given supervisory/~~disciplinary control over children~~ participants they shall be considered staff and must meet the requirements for personnel (Section 300) and staff requirements (Section 303).
2. All volunteers in a ~~child care center~~ an OST Facility shall be 18 years or older unless the volunteer is under the direct supervision of the director or ~~person in charge~~ site supervisor and has been approved on an individual basis by the Child Care Licensing Unit.
3. Volunteers who have routine contact with children, shall have on file a ~~physician's statement or health card and~~ a child-maltreatment Central Registry check. An exception shall be given to parents who volunteer to assist in on field trips, but are not left alone with participants. Child maltreatment Central Registry checks for volunteers under age 18 must include a parent's signature.
4. Volunteers who are left alone with children must have an orientation ~~making them aware of~~ regarding program policies and practices that are related to the scope of the services they will be providing at the facility.
5. Individuals who provide health services or program enrichment activities on a limited basis are not considered volunteers. The facility shall retain a register of such persons listing name, organization, address, telephone number, date and time in the center. (Note: This section does not apply to therapists or others who have routine contact with ~~children~~ participants. Therapists who are not left alone with ~~children~~ participants are required to have child maltreatment background checks. Therapists who are left alone with ~~children~~ participants at any time are subject to all background check required for personnel. The therapist is entitled to a copy of the initial background/maltreatment check results, and may share a copy with other facilities the therapist may be working in.)

### **306 Student Observers**

1. Students visiting the ~~center~~ OST Facility on a regular or periodic basis to **observe** ~~classroom activities~~ program activities, or for similar purposes, shall not be counted in the staff/~~child~~ participant ratio, shall not have disciplinary control over ~~children~~ participants and shall not be left alone with ~~children~~ participants. These individuals shall have a Child Maltreatment background check ~~the following documentation~~ on file.



- ~~a. Child maltreatment background check~~
  - ~~b. A health care or physician's statement showing the absence of contagious tuberculosis~~
2. Students that are conducting practicum, student teaching, or working in the same capacity as a staff member or volunteer must meet the criteria in the appropriate section. (Sections 304 and 305)

### **307 Professional Development**

1. All directors, site supervisors, and staff who provide direct care to children shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry within 30 days of hire and all training shall be registered with the Division of Child Care and Early Childhood Education Professional Development Registry or Department of Education or Department of Higher Education approved.
2. All new staff shall have a probationary period of at least 30 days, but no more than six months, during which they are closely supervised, mentored, and evaluated. Evaluations shall be documented and maintained in the employee file.
3. All new staff members who provide direct care to children shall receive a basic orientation to facility management policies, center schedules, minimum licensing standards, and emergency procedures prior to providing care. This shall be documented in the employee file.
4. All new staff, including volunteers who are counted in the ratios shall receive the following orientation (unless the staff has prior documented training in the required areas).
  - a. Introduction (8 clock hours) to include the following, which shall be completed ~~to be~~ completed before being left alone with children:
    - Proper supervision of children
    - Behavioral guidance practices
    - Shaken baby syndrome; which includes prevention (Carter's Law, Act 1208)
    - Emergency procedures in the event of severe weather, or fire, including evacuation procedures and routes, and location and use of fire extinguishers.
    - Mandated reporter training
    - Administering medication
    - Caring for children with special needs / care plans
    - Transportation and car seat safety
    - Policies regarding release of children to authorized individuals

See Division Web Site for a list of courses, that The Division maintains contracts for, which meet the above requirements.

- b. All staff shall have 15 hours of job specific training each calendar year for the ages of children they work with. This shall be training focused on their job responsibilities.

See Division Web Site for a list of courses, that The Division maintains contracts for, which meet the above requirements.

5. The director, assistant director/site supervisor, and 50% of the facility staff that are on site at any given time shall have a certificate of successful completion of first aid and CPR from an approved organization.
  - a. The curriculum shall conform with current American Heart Association or American Red Cross guidelines.
  - b. The curriculum shall require hands on, skill-based instruction, as well as ~~written~~ and practical testing. Training and certification that is provided solely "on-line" will not be accepted.
  - c. The instructor shall be qualified and authorized to teach the curriculum and shall be certified by a nationally recognized organization. (Including but not limited to: Health and Safety Institute; EMS Safety Services, Inc.)

## **400 PROGRAM**

### **401 Program Requirements**

1. The OST program shall develop a written weekly routine listing developmentally appropriate activities for participants and provide a copy of the routine of weekly activities to parents when they enroll the participants.
2. Each ~~child care center~~ OST Program shall be equipped with supplies, resources, and ~~indoor and outdoor~~ equipment to take care of the needs of the total group and to provide each child participant with a variety of activities ~~throughout the day~~ during program operations.
3. The OST program shall post a daily schedule in each ~~classroom~~ program space that reflects activities that promote physical, social, emotional, cognitive language/literacy, and cultural. Activities shall:
  - a. ~~The program of activities shall~~The program shall organize its environment so that participants may participate in activities individually and in small groups, so that the development of each participant is supported. Be flexible and shall provide some opportunities for a ~~child~~ participant to choose how he will spend his time.
  - b. ~~The program shall~~ Provide a variety of activities suitable to the ages and interests of the ~~children~~ participants.
  - c. Be age and skill level appropriate
  - d. Offer project-based, experiential activities that promote creativity and youth self-expression

- e. Offer short and long term projects
  - f. Offer opportunities for alternating periods of indoor and outdoor activities, weather permitting
  - g. Offer alternating periods of active and quiet activities
  - h. Offer a balance of large and small muscle activities
  - i. Offer more than one (±) option for an activity including individual, small group or large group activities
4. The OST program shall offer activities that target life skill development that:
- a. Encourages development of critical thinking skills
  - b. Offers a progression of skill levels within activities
5. The OST program shall offer activities that integrate opportunities throughout the program for the participants to develop personal responsibility, self-direction and leadership by providing opportunities to:
- a. Work on self-directed projects
  - b. Make content choices
  - c. Plan and conduct activities
  - d. Offer opportunities for leadership roles throughout the program
  - e. Support participant leadership through the policies and engagement strategies of the program
  - f. Form special clubs/groups within the program
  - g. Plan and participate in community service
6. The OST program shall provide activities that provide recognition of achievement and participation that:
- a. Promote diversity in cultures, religion, ethnicities, abilities, etc.
  - b. Are representative of the varying ages, cultures, and abilities of the participants
  - c. Are adaptable for different levels of ability
7. School age children who leave the ~~child care center~~ OST Program to participate in other activities shall have written permission from the parents naming the activity, date, time of leaving and returning and method of transportation.
8. Each facility is required to provide at least four Division approved opportunities to increase parental/family involvement. Examples of approved activities are listed below. (See Better Beginnings website for resources. [www.arbetterbeginnings.com](http://www.arbetterbeginnings.com))
- Parents are allowed to observe, eat meals or snacks with a participant, or volunteer in the program.
  - Conferences are held at least once a year and at other times, as needed to discuss participant's progress, accomplishments and difficulties.
  - A parent resource area is available with books, pamphlets or articles on parenting and child/youth development.

- Parent meetings are held with guest speakers or special events, for example, open house or participant's programs.
  - Parents are informed of the facilities programs and activities through a parent's bulletin board or regular newsletter.
  - Parents participate in program and policy development through board involvement, planning meetings or questionnaires.
8. ~~Children shall have a variety of toys, books and creative materials, and equipment. This includes equipment for:~~
- a. ~~Large muscle/Gross Motor activities (such as climbing and running)~~
  - b. ~~Manipulative/Fine Motor activities (such as things done with the hands: puzzles, drawing, modeling clay)~~
9. There shall be a written daily routine listing developmentally appropriate activities for children. The program shall offer alternating periods of active play and quiet times throughout the day.
10. Facility staff shall avoid activities or experiences which may be damaging to children's self-esteem and positive self image.
11. There shall be an opportunity for a supervised rest period that:
- a. Is at least one (1) hour, but does not exceed two (2) hours.
  - b. ~~Children shall not be forced to remain on cot or mat if they do not fall asleep, and shall be allowed to participate in a quiet activity that does not disturb the children who are asleep.~~
9. There shall be sufficient lighting to provide adequate supervision of the children participants.
10. Parents shall not be denied access to their child/youth at any time during hours of operation. **(Clarification: The intent of this rule is to ensure that the parent(s) or guardian(s) is able to have contact with their child during hours of care. It is not intended to be a determining factor in child custody/visitation matters, nor should it be used to circumvent court ordered custody/visitation rights or schedules. Facilities should encourage parents to resolve custody/visitation issues outside of the care environment. Parents should be informed that continuing problems could result in the dismissal of their child.)**
11. Staff shall not release a child-participant to anyone who is not immediately recognized as the child's participant's parent or as someone on the authorized pick-up list unless:
- a. The individual can provide an official picture ID AND
  - b. The person in charge can match the ID to the individual named on the child's participant's data sheet

12. Verification of permission for persons not on the authorized list shall be obtained by the person in charge by calling the parent at a number listed in the ~~child's~~ participant's record. The person in charge shall view an official picture ID of the individual to verify identity.
13. Photos or video recordings shall not be made of any participant without prior written permission from the parent or guardian.
14. Photos or video recordings of participants shall not be placed on social media or other websites without prior written parental permission.

#### **402 Outdoor Play-Time**

1. ~~There shall be a total of at least one (1) hour of outdoor play per day in suitable weather. For full time programs, there shall be a total of at least one (1) hour of outdoor activity time per day in suitable weather. For programs operating part day schedules (five hours per day or less) a minimum of 30 minutes of outdoor activity shall be provided in suitable weather. An OST program shall dedicate at least 20% of the program's weekly operational time or a minimum of 60 minutes during full day (operating more than five (5) hours a day) program operations to outdoor time. OST programs are encouraged to offer daily outdoor time opportunities to program participants. Such time shall be under the supervision of an adult to encourage physical activity and the promotion of gross motor skills.~~
  - a. ~~Such determination of required minimum outdoor time is as follows: ex. A program that operates 15 hours (900 minutes) weekly x 20 (percent of time) = 180 minutes (3 hours) of outdoor play time offered over the course of a week.~~
  - b. ~~The amount of outdoor time offered daily may vary as long as minimum weekly outdoor time requirements are met.~~
2. When making a determination if ~~children~~ participants should ~~play outside~~ have outdoor time, staff shall consider the following environmental factors:
  - a. When the heat index is forecast to be ninety (90) degrees or above, it is recommended that outdoor ~~play~~ time ~~should~~ be scheduled during early morning hours or the length of time spent outdoors should be reduced to avoid heat stress.
  - b. When outdoor ~~play~~ time occurs during the hotter part of the day, it is recommended that ~~children~~ participants ~~should~~ have shaded area, an ample supply of water and should be monitored closely for signs of heat stress.
  - c. When outdoor ~~play~~ time occurs during the winter months and when temperatures are extremely cold, it is recommended that the time scheduled for outdoor ~~play~~ time ~~should~~ be reduced or suspended depending on the temperature and other weather conditions.

#### **403 Screen Time**

1. An OST Program shall ensure that their weekly schedules are constructed in a way that no more than 25% of the program's total weekly program hours of operation allow participants to engage or use electronic media, solely for recreational purposes. (Participants who require use of electronic devices for communication or navigational purposes shall be exempt.)

2. If television programming, videos, DVDs, or computer programs are built into an OST Program as an activity option, the content shall be age-appropriate, non-violent, and should have educational value.
3. Television and software rating systems shall be used to determine appropriate use.
4. Participants shall not be required to participate in recreational screen time activities and shall be offered other choices.
5. ~~The use of television, DVD, video cassette viewing and computer/video games and other screen time activities shall meet the following requirements;~~
  - a. ~~Shall be prohibited for children younger than 18 months of age. (The use of DVDs or other video programs for any activities with this age group would have to be approved through an alternative compliance request.)~~
  - b. ~~Shall be limited to programs which are age appropriate ( programs should have educational value)~~
  - c. ~~Shall be scheduled and shall not exceed one (1) hour daily per child or group of children. Children shall not be required to participate in screen time activities and shall be offered other choices. (Viewing time may be extended for special events or occasions such as a current event, holiday or birthday celebration or for the occasional viewing of age appropriate movies or other programs that may exceed one hour in length.)~~
  - d. ~~Computer learning periods for children below age 5 may not exceed two (2) hours a day per child or group of children~~

#### **402 Infant & Toddler Requirements**

1. ~~Sleeping children shall be visually monitored at all times and physically checked regularly for breathing.~~
2. ~~Each infant/toddler shall be given opportunity during the day to explore the area outside the crib or baby bed.~~
3. ~~Infants/toddlers shall be placed in age appropriate cribs, cots, or mats meeting CPSC standards, for when they fall asleep. (Note: Also, any items used in the crib must be used according to manufacturer guidelines, regardless if the child is sleeping or not, in accordance with 1001.1).~~
4. ~~Infants (children 12 months and below) shall be placed flat on their backs to sleep, in accordance with American Academy of Pediatrics guidelines, to lessen the risk of suffocation and Sudden Infant Death Syndrome. (If a child rolls over on his/her own, the facility is not required to reposition the child.) If there is a medical reason a child cannot sleep on his/her back, then a signed statement from the child's physician must be in the file stating the reason, the sleep position indicated, and the time frame this is required~~
5. ~~Infants' sleep space (e.g. crib) shall be free of loose bedding. If light blanket is necessary,~~

~~it should be kept at or below the mid-chest area of the child. Staff shall not cover the faces of infants.~~

- ~~6. Pillows (including nursing or "bobby" pillows), bumpers/bumper pads, and stuffed animals shall not be placed in cribs.~~
- ~~7. Infants and toddlers shall be taken outside for a period of time every day, unless prevented by weather or special medical conditions.~~
- ~~8. Infants/toddlers, when awake, may remain in the crib/playpen as long as he or she is content, but never for periods longer than one (1) hour.~~
9. Stimulation shall be given to an infant in a variety of ways. Caregivers shall hold children, and offer nurturing, responsive care in addition to the routine care of diapering and feeding.

#### **404 Field Trips**

1. The safety and welfare of participants during field trips is in the hands of the staff on the trip. The following shall be met:
  - a. Safety risks, field trip rules, and behavior expectations shall be discussed with participants prior to field trip departure.
  - b. Accountability of children is tightly controlled and frequent "head counts" shall be conducted while on the trip, including loading and unloading upon arrival and departure, and during periods of transition.
  - c. Regardless of which mode of transportation is used, all vehicles shall be kept in proper operating conditions at all times.
  - d. Ratios shall be adjusted to a 1:9 depending on the risk associated with the field trip activity and/or to maintain proper supervision of all participants in attendance on the field trip. Risky activities include but are not limited to rock/mountain climbing, horseback riding, canoeing, etc.
2. Written permission from parents shall be on file for each field trip. If the facility has a scheduled, routine activity planned to the same location a single permission form may be used for each program year. The written permission shall include:
  - a. Name and description of activity
  - b. Date and time of leaving and returning
  - c. Method of transportation to the facility

#### **500 BEHAVIOR GUIDANCE**

##### **501 Behavior Guidance Requirements**

1. Behavior guidance shall be:
  - a. Individualized and consistent for each child

- b. Appropriate to the child's level of understanding
  - c. Directed toward teaching the child acceptable behavior and self-control
2. Physical punishment shall not be administered to children.
- ~~3. The length of time a child is placed in time out shall not exceed one minute per year of the child's age.~~
3. The Out-of-School Time (OST) Program shall offer a nurturing, respectful, supportive and responsive environment that supports frequent interactions between the participants and staff. Staff shall:
- a. Support participants in developing an understanding of self and others by assisting the participants in sharing ideas, experiences and feelings
  - b. Provide participants age-appropriate opportunities for growth and development of their social and communication skills
  - c. Assist the participants in solving problems
  - d. Foster creativity and independence in routine activities that shall include tolerance for mistakes
  - e. Treat and model equality of all participants regardless of race, religion, culture, gender and ability
  - f. Offer verbal encouragement to the participants during the course of an activity
  - g. Use respectful voice tone and positive guidance practices
  - h. Promote teamwork among participants
4. For behavior guidance practices used by the OST Program, the program shall:
- a. Discuss the behavior guidance practices of the OST Program with the parents of each participant at the time of enrollment
  - b. Provide a copy of the behavior guidance practices in writing to the parents
  - c. Have each parent verify in writing their receipt of a copy of the behavior guidance practices
  - d. Maintain the signed verification in the participant's record
5. The OST Program shall guide the behavior of the participants based on an understanding of the participant's individual needs and stages of development by:
- a. Supporting the participant's developmentally appropriate social behavior, self-control and respect for the rights of others
  - b. Ensuring that the behavior management and discipline practices are fair, reasonable, consistent and related to the participant's behavior
  - c. Ensuring that staff are responsible for implementing the behavior management and discipline practices of the OST Program
  - d. Ensuring that staff do not administer discipline that is cruel, unusual, hazardous, frightening or humiliating
6. Acceptable behavior guidance techniques include:



- a. Look for appropriate behavior and reinforce the ~~child~~-participant with praise and encouragement when they are behaving well.
  - b. Remind the ~~child~~-participant on a daily basis of the rules by using clear positive statements regarding how they are expected to behave rather than what they are not supposed to do.
  - c. Attempt to ignore minor inappropriate behavior and concentrate on what the ~~child~~ participant is doing properly.
  - d. Use brief supervised separation from the group only when the ~~child~~ participant does not respond to a verbal command which instructs the ~~child~~-participant as to how he or she is supposed to behave.
  - e. When a misbehaving ~~child~~-participant begins to behave appropriately, encourage and praise small steps rather than waiting until the ~~child~~-participant has behaved appropriately for a long period of time.
  - f. Attend to the ~~children~~-participants who are behaving appropriately and other ~~children~~ participants will follow their example in order to obtain your attention.
7. The following activities or threats of such activities are unacceptable as behavior guidance measures and shall not be used for ~~children~~-participants. These include, but are not limited to the following:
- a. Using physical punishment such as biting, or biting back, jerking, swatting, pulling hair, twisting arms, shaking, spanking, slapping, hitting, striking, kicking or exercising other means of inflicting physical or emotional pain or causing bodily harm
  - b. Restraints (~~Restraining a child briefly by holding the child is allowed when the child's actions place the child or others at risk of injury.~~) Using a physical restraint method that may cause injury to the participant
  - c. Using mechanical restraint, locked time-out room or closet
  - d. Washing mouth with soap
  - e. Taping or obstructing a ~~child's~~-participant's mouth
  - f. Placing unpleasant or painful tasting substances in mouth, on lips, etc.
  - g. Profane or abusive language
  - h. Isolation without supervision
  - i. Placing ~~child~~-participant in dark area
  - ~~j. Inflicting physical pain, hitting, pinching, pulling hair, slapping, kicking, twisting arms, biting or biting back, spitting, swatting, etc.~~
  - j. Yelling (This does not include a raised voice level to gain a child's attention to protect the ~~child~~-participant from risk of harm.)
  - k. Forcing physical activity, such as running laps, doing push-ups, etc. (This does not include planned group physical education activities that are not punitive in nature.)
  - l. Associating punishment with rest, toilet training or illness
  - m. Denying food (lunch or snacks) as punishment or punishing ~~children~~-participants for not eating. Participants shall not be forced or bribed to eat.
  - n. Shaming, humiliating, frightening, physically or mentally harming ~~children~~-participants or labeling ~~children~~-participants
  - o. Covering the faces of ~~children~~-participants with blankets or similar items

- ~~6. Behavior charts, if used, should be used to encourage positive behavior. Behavior charts shall record only the child's behavior for the current day and shall not be punitive. (Behavior charts used to record only positive behavior may be maintained on a weekly basis.) The child's age and level of understanding should be considered when using behavior charts.~~
- ~~6. Behavior guidance practices used by the center shall be discussed with each child's parent and provided to them in writing at the time of enrollment with a copy signed by the parent maintained in the child's record.~~

## **502 Infant & Toddler Behavior Guidance Requirements**

- ~~1. Time-out shall not be used for children under two years of age.~~
- ~~2. The child may be placed in a supervised area away from the group or in a crib or playpen while staff attend to the situation. Brief separation from the group is acceptable when the child's behavior places the child or others at risk of harm. Example: A child who has bitten another child would be removed from the group, briefly, while staff attends to the bitten child.~~

## **600 RECORDS**

### **601 Record Requirements**

1. All staff, child participant and facility records shall be kept and made available to the Child Care Licensing Unit on request. The records shall be maintained for three (3) years unless otherwise indicated.
2. Licensing compliance forms (DCC-521) shall be available at the facility for 3 years. The facility shall advise parents in writing that the compliance forms are available for review upon request.
3. The facility shall maintain daily attendance records on all participants as follows:
  - a. Participants shall be signed in and out daily by a parent, guardian, or designee. Electronic sign in and out systems will satisfy this requirement.
  - b. The record shall include the date and time of arrival and departure.

### **602 Facility Records**

1. Facility Records shall be maintained on site and include:
  - a. Attendance records on all children participants
  - b. Transportation rosters, if applicable (maintained for one year)
  - c. Verification of current vehicle registration, if applicable
  - d. Verification of required commercial vehicle insurance coverage, if applicable
  - e. Verification of required Child Care Liability Insurance

- f. Verification of current pet vaccinations, if applicable
- g. Verification of annual fire department approval
- h. Verification of annual health department approval
- i. Verification of zoning approval (maintained as part of permanent record)
- j. Verification of annual approval by the Boiler Inspector Division of the Department of Labor
- k. Mobile Home Commission approval for double wide manufactured homes, if applicable (maintained as part of permanent record)
- l. Record of emergency drills
- m. Plans and procedures of Emergency Preparedness
- n. Procedures for reporting allegations of child maltreatment
- o. Procedures for reporting suspected licensing violations
- p. Licensing compliance forms
- q. Log of Product Recall and Safety Notices from CPSC or Attorney General's Office
- r. Articles of Incorporation, if applicable (maintained as part of permanent record)
- s. Current list of names, addresses and phone numbers of the Board of Directors, if applicable

### **603 Staff Records**

1. Staff records may be maintained off site, unless otherwise noted, and shall contain the following:
  - a. Name, date of birth, address and telephone number
  - b. Education, training and experience, including a copy of the GED or high school diploma (If these documents are no longer available, proof of reasonable effort to obtain the documentation is acceptable.) (**Clarification:** Training hours will be counted on a calendar year basis or by the facility's operating schedule if they do not operate year round.)
  - ~~e. Health record, including current health card and/or physician's statement verifying the staff is free of contagious tuberculosis (copy must be on site)~~
  - c. Employment related information for previous six (6) years, with written documentation of verification of employment and reference checks
  - d. Attendance record, listing days and hours worked
  - e. Date of employment and date of separation
  - f. Documented training or continuing education; i.e., orientation, in-service training, and workshop documentation, which shall include title of workshop, presenter, hours of training and date
  - g. Initiation of Criminal Record Checks and Central Registry Checks and the results obtained when received
  - h. Verification of completion of the required transportation training and a readable, current copy of the driver's license for all staff who transport children-participants (copy must be on site)
  - i. Verification of First Aid and/or CPR for applicable staff (copy must be on site)
  - j. Documentation of new employee evaluations.

### **604 Children's-Participants' Records**

1. The ~~child care facility~~ OST Program shall maintain a record for each ~~child~~ participant in care which shall be on site. Records for ~~children~~ participants no longer enrolled may be maintained off site. ~~Children's~~ Participants' records shall contain the following information:
  - a. Application form which includes ~~child's~~ participant's name, date of birth and address, name of parent or guardian, telephone numbers (home and business), work hours of parents or guardians, and date of enrollment in facility.
  - b. The name, address, and telephone number (home and business) of a responsible person to contact in an emergency if the parent or guardian cannot be located promptly.
  - c. Name, address and telephone of ~~child's~~ participant's physician or emergency care facility.
  - d. Written permission of parent or guardian authorizing emergency medical care and transportation of ~~child~~ participant for emergency treatment (This authorization shall accompany ~~children~~ participants anytime they are transported.)
  - e. Name(s) of persons authorized to pick up ~~child~~ participant.
  - f. Permission slips signed by parent or guardian authorizing the ~~child~~ participant to be taken on specific field trips.
  - g. Pertinent medical history on the ~~child~~ participant.
  - h. An authorized record of up-to-date immunizations or documentation of a religious, medical or philosophical exemption from the Arkansas Department of Health (Updated immunization schedules will be provided as changes are received from the Arkansas Department of Health.)
  - i. A record of all accidents, incidents, or injuries indicating the location, time of day, area or piece of equipment where the incident occurred. A copy of this shall be given to the parent on the day of occurrence.
  - j. Any legal or medical documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the ~~child~~ participant.
  - k. Written permission for the facility to photograph or video tape their child, if applicable.
  - l. Written permission for the facility to place photos and video recordings of their child on social media websites, if applicable.

## **700 NUTRITION**

### **701 Nutrition Requirements**

1. The ~~center~~ OST Program shall ensure that during all day program operations that a lunch and a mid-morning and mid-afternoon snack is served to each ~~child~~ participant.
2. Breakfast, lunch, snacks and evening meals shall each meet *current* U.S. Department of Agriculture guidelines, including portion size. (See Appendix C) Menus for all food service shall be posted. If sack lunches are utilized, the facility shall ensure that they also meet these requirements. Milk shall be served to each ~~child~~ participant during the day. Exceptions may be made for ~~children~~ participants who suffer allergies to milk. The facility shall obtain written instructions for allergy substitutions.
3. ~~Breakfast shall be made available for children who arrive before 7:00 a.m.~~ Breakfast may

be served to all children-participants rather than a morning snack provided there is no more than 3 hours between the beginning of breakfast and the beginning of lunch.

4. ~~Meals shall be served at tables.~~ All food service surfaces shall be kept sanitary.
5. Food shall be served on individual plates, bowls, or other dishes that can be sanitized or discarded.
6. Food and drinks which are not available to the children participants shall not be consumed by staff in the children's-participants' presence.
7. All food brought in from outside sources shall come from Health Department approved kitchens and shall be transported as per Health Department requirements, or the food shall be in an individual, commercially pre-packed container. (This does not include individual sack lunches brought from home.)
8. All refrigerators used for food storage shall be maintained at a temperature of 41 degrees or below, and all freezers used for food storage shall be maintained at a temperature of 0 degrees or below.
9. Vending machines are acceptable provided they are not the only source of snacks/or beverages.
10. Staff shall provide supper to participants during the evening meal hours.
11. Staff shall provide snacks to participants in attendance for more than 2 ½ hours prior to bedtime.

## **~~702 Infant & Toddler Nutrition Requirements~~**

1. ~~The routine use of food, bottles and formula shall be agreed upon by the caregiver and parent. Instructions regarding special needs for food, bottles and formula, such as food allergies, shall be obtained in writing from the parent and followed by the caregiver. (See Appendix D).~~
2. ~~Feedings for all children up to twelve (12) months of age shall be documented by the caregiver and available for review by the parent. This documentation shall continue for all children older than twelve (12) months of age who are still being given bottles.~~
3. ~~Infant bottles and food shall be prepared and heated in an area separate from the diaper changing area.~~
4. ~~Water used for the preparation of formula shall not come from the hot water supply. (Water from hot water systems may contain high levels of lead and other substances which could be harmful to small children.)~~
5. ~~Children shall not share the same bottle or eating utensils. The facility shall practice a~~

sanitary method of cleansing baby bottles, cups and utensils.

6. ~~Bottles shall not be propped. Infants under six months of age shall be held while being bottle fed. If needed, infants six months of age or older shall be held while being bottle fed.~~
7. ~~Bottles and "sippy cups" shall be labeled with the child's name and shall be refrigerated.~~

## **800 BUILDINGS**

### **801 Building Requirements**

1. ~~Child care centers~~ OST Facilities shall comply with the Minimum Requirements of The ~~National Fire Safety Code 101~~ currently adopted Arkansas Fire Prevention Code as administered by local fire department or by the State Fire Marshal, who has final authority. Written verification of annual approval shall be maintained on file. **(Note that the State and Local Fire Codes may not allow the use of basements or floors above ground level by children participants, first grade and younger, unless there is a ground level exit.)**
2. State Health Department requirements shall be met. Written verification of annual approval shall be maintained on file.
3. Department of Labor, Boiler Inspection Division requirements shall be met. All water heaters and any other boilers in licensed ~~child care~~ OST Facility settings shall be inspected on an annual basis and/or upon installation. Verification that initial inspection has been scheduled and annual approval shall be maintained on file. Inspection, or proof of attempt to set up initial inspection, shall be completed within six (6) months of licensure. Scheduling and completion of annual inspections will be the responsibility of the Department of Labor, however, the facility is responsible for cooperating and keeping documentation of such inspection on file for review. (AR Code §20-23-101 et. seq.)
4. All space used by ~~a center~~ the OST Program shall be kept clean and free of hazardous or potentially hazardous objects. (These objects include, but are not limited to, poisonous substances, firearms, explosives, broken toys/equipment, or other objects that could be harmful or dangerous, if they are determined to be accessible to ~~children~~ participants.)
5. ~~Thirty~~ Twenty-five square feet per ~~child~~ participant of usable floor space shall be required for indoor activities. This does not include bathrooms, kitchen and hallways. Usable space in the ~~child care center~~ OST Program shall include areas in the ~~classroom~~ program used for storage of programmatic materials which are accessible to ~~children~~ participants. This does not include closets or storage space for equipment that is not in use.
6. If a facility utilizes the out-of doors as its major program component for school-age children, covered pavilions and other roofed structures shall provide 25 square feet per child.
7. Separate space shall be provided for the isolation of ~~children~~ participants who become ill and shall be located in an area that can be supervised at all times by a staff member.

8. All parts of the ~~center~~ OST Facility used by the ~~children~~ participants shall be well heated, air conditioned, lighted and ventilated and maintained at a comfortable temperature. Glass doors shall be clearly marked. When windows and doors are used for ventilation, they shall be screened and shall not present a safety hazard.
9. Floor furnaces, gas heaters, electric heaters, hot radiators, water heaters, air conditioners and electric fans shall have guards and shall not present a safety hazard. Portable fuel fired heaters shall not be used.
- ~~10.~~ It is recommended that if natural gas or propane is used, the facility's heating & ventilation systems shall be inspected and cleaned (if necessary) before each heating season by a qualified HVAC technician. ~~The facility shall have on file documentation that these inspections and cleanings have been completed.~~
11. Carbon monoxide detectors shall be placed in facilities according to manufacturer's recommendations if one of the following ~~guidelines is met~~ situations applies:
  - a. ~~The child care program uses any sources of~~ Facilities using wood, propane, natural gas or any other product as a heat source that can produce carbon monoxide indoors or in an attached garage.
  - b. ~~If~~ Any situations where carbon monoxide detectors are required by state or local law
12. Floors, ceilings and walls shall be in good repair and kept clean. Paints used at the facility shall be lead free.
13. ~~A child care center~~ An OST Facility shall have an operable telephone on site all hours ~~children~~ participants are in care. The Licensee shall provide the phone number to the Licensing Unit and to the parents. (This phone may be a cell phone if the phone stays operable, stays at the facility during all hours of care, and is the phone number provided to the Licensing Unit and the parents.)
14. The following structures shall not be used as ~~child care centers~~ OST Facilities:
  - a. Manufactured homes constructed prior to June, 1976
  - b. Manufactured homes constructed with metal roofs and outside walls
  - c. Single-wide manufactured homes
  - d. Portable storage type buildings
15. Double-wide manufactured homes may be considered provided they are tied down in accordance with the manufacturer's tie down specifications manual. Any new applicant for ~~a child care center~~ an OST Facility that requests the use of a manufactured home shall obtain an inspection at the applicant's expense from the Arkansas Manufactured Home Commission.
16. Manufactured homes currently licensed as child care facilities shall be tied down as recommended by the Arkansas Manufactured Home Commission.

17. Portable classroom buildings are not considered manufactured homes, but do require Fire Department approval. Portable classroom buildings installed after 11-1-2002 shall have Fire Department approval prior to purchase and installation.

### **802 Infant & Toddler Building Requirements**

- ~~1. If Infant and Toddler Centers and Child Care Centers are operated in the same building, the areas designated for care of infants and toddlers shall be in rooms separate from the activity of other children.~~
- ~~2. When infants/toddlers share the same eating areas with older children, arrangements shall be made to maintain separation.~~

### **900 GROUNDS- Playgrounds/Outdoor Learning Environment**

To provide the safest possible playground environment, you are encouraged to meet Consumer Product Safety Commission's guidelines listed in the "Handbook for Public Playground Safety". However, the following are minimum requirements and shall be met.

**Please note that these requirements do not mandate the use of any large and/or permanently anchored pieces of playground equipment that would require fall use zones and protective surfacing. Numerous options for suitable playground environments are available and acceptable. For information on playground options, contact your Licensing Specialist.** Examples of such activities are:

- Sand boxes
- Activity walls at ground level
- Art easels
- Balls & games
- Play houses
- Nature walks
- Use of the approved natural environment for outdoor learning
- ~~• Any other equipment that children use when their feet remain in contact with the ground surface~~

~~It is not advisable to use~~ The use of ~~Because~~ public playgrounds and other play environments away from the facility is not recommended as these environments may not meet acceptable safety standards. If these playgrounds are used staff should provide close supervision and not allow children to use any equipment that appears unsafe (eg: broken equipment, sharp objects, strangulations hazards, etc.). Using playgrounds and other play environments away from the facility ~~shall be~~ is considered a field trip and all field trip ~~regulations~~ requirements shall be followed.

### **901 Layout & Design**

1. A diagram of the playground shall be submitted, clearly identifying the perimeter of the



playground, with measurements, and identifying each piece of equipment used by the children enrolled at the licensed facility. This documentation shall be in the form of ~~photographs with a diagram or~~ a satellite photo from an internet site such as Google Maps, or a diagram if a satellite photo is not available. ~~The designated and agreed upon play area, specifying the exact playground area and equipment to be used and the associated documents, are critical parts of the terms of the license.~~

2. Any changes in the playground area boundaries and/or equipment requested must be submitted in writing and approved prior to use.
3. All equipment and protective surfacing shall be installed and maintained according to manufacturer's guidelines.
4. The play area/outdoor learning area shall be fenced or otherwise enclosed and provide at least 75 square feet per child present on the playground at any time.
5. There shall be an outside exit from the play area.
6. The area shall be well drained.
7. There shall be equipment and activities appropriate for the age and number of children enrolled in the facility.
8. Separate play areas or time schedules shall be provided if, infants and toddlers share playgrounds with older children.
- ~~9. A shady area shall be provided where children can get out of direct sunlight. This can be accomplished by utilizing existing shade such as trees and buildings, or by creating shade with manufactured structures such as awnings.~~
10. ~~The enclosed play area shall be free from weeds, tall grass, untrimmed shrubbery, standing water, and litter to prevent vermin and insect infestation. All outdoor areas used by participants shall be properly maintained.~~

## **902 General Hazards**

1. The area shall be free of hazards or potentially hazardous objects.
2. Equipment that has been determined by the Division to be unsafe for the children in the licensed facility to use shall be removed from the play area, or enclosed by a fence or other suitable barrier so the children will not have access to it.
3. All newly purchased playground equipment designed for participants to play or climb on, such as slides, swings, composite structures, etc., shall be commercially manufactured and certified to meet ASTM or CPSC standards for public playgrounds. Equipment in place prior to January 1, 2014 may continue to be used provided it meets all other licensing requirements.

4. Equipment, which is designed to be anchored, shall be properly anchored so that the anchoring devices are below ground level.
5. Sand for playing shall be kept safe and clean.
6. Paint on equipment shall be lead free.
7. All fasteners, including S-hooks, shall be securely tightened or closed.
8. There shall be no sharp points, corners, edges, or splinters.
9. Equipment shall not have protrusion hazards. (A protrusion is a projection which, when tested, is found to be a hazard having the potential to cause bodily injury to a user who impacts it.)
10. Equipment shall not have entanglement hazards. (An entanglement is a condition in which the user's clothes or something around the user's neck becomes caught or entwined on a component of playground equipment.)
11. ~~The only~~ Trampolines shall not be ~~allowed used. shall be mini-tramps used under direct supervision on-site or on field trips off-site.~~ (Therapeutic use of trampolines is acceptable if supervised by the therapist on a one-on-one basis.) ~~allowed for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.~~
12. Ball pits shall not be used. ~~allowed on-site or on field trips.~~ (Ball pits are large areas or "pits" filled with balls intended for children to jump in and play. Therapeutic use of ball pits is acceptable if supervised by the therapist on a one-on-one basis.) ~~allowed for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.~~
13. Wading pools shall not be used. ~~allowed on-site or on field trips.~~ This does not prohibit the use of sprinklers and water play.
14. To prevent entrapment, there shall be no opening(s) between any interior opposing surfaces between 3.5 and 9 inches. (Openings in equipment that might allow a child's body to pass through, but not their head.) Ground bounded openings are exempt.
15. Providers/caregivers shall be aware of and remove when possible any hazardous items children may wear on play equipment such as helmets, drawstrings, and other accessories around the neck that may cause a strangulation/entanglement hazard.
16. All participants shall wear properly fitted and approved helmets while riding on bicycles and when using roller skates, skate boards, roller blades and scooters. ~~toys with wheels (tricycles, bicycles, etc.) or using any wheeled equipment (rollerblades, skateboards, etc.).~~ Helmets shall be removed as soon as children stop riding ~~the wheeled~~ this equipment.

Helmets shall meet CPSC standards.

17. All soccer goals shall be commercially manufactured and installed and anchored according to manufacturer's guidelines.

~~18. Balance beams higher than 12 inches shall have fall zones.~~

### **903 Balance Beams**

1. Balance beams shall not be higher than 12 inches.
2. Balance beams shall have use zones with protective surfacing.

### **~~903~~ 904 Slides**

1. Slides shall not have any spaces or gaps between the platform and the slide surface.
2. Slides shall have a transition platform of at least 14 inches deep for school age participants.

### **904 905 Swings**

1. The following swings shall not be used for any ages:
  - a. Multi-occupancy swings designed to hold more than one child, except tire swings
  - b. Heavy molded swings such as animal figure swings
  - c. Free swinging rope (Tarzan ropes)
  - d. Swinging exercise rings
  - e. Trapeze bars
  - f. Swings attached to a composite structure (Composite Structure is defined by CPSC as, "Two or more play structures attached or functionally linked, to create one integral unit that provides more than one play activity.")
2. There shall be no wood or metal swing seats.
- ~~3. Toddler swings shall provide support on all sides, if seat is above 12" from ground have fully enclosed bucket seats.~~

### **905 906 Climbing Equipment**

- ~~1. Free standing arch climbers exceeding 4 feet in height shall not be used for pre-schoolers.~~
1. Flexible grid climbing devices, such as rope or chain ladders, climbing ropes, etc., shall be securely anchored at both ends.
2. Sliding poles shall have no protruding welds or seams along the sliding surface and the pole

shall not change directions.

### **906 907 Merry Go Rounds**

1. The only merry-go-rounds allowed are portable merry-go-rounds not designed to be anchored.
2. Merry-go-rounds ~~and they~~ shall have handgrips or other secure means of holding on.

### **907 908 Seesaws**

1. Seesaws without spring centering devices shall have shock absorbing materials, such as partial tires embedded in the ground underneath the seats or secured to the underside of the seats.
2. Hand holds shall be provided for both hands at each seating position and shall not turn when grasped.
3. Hand holds shall not protrude beyond the sides of the seat on seesaws.

### **908 909 Fall Zones/~~Surfacing~~ Protective Surfacing**

1. There shall be ~~fall~~ use zones and protective surfacing under and around all equipment that ~~is over 24" in height at the highest accessible point requires a child/participant to be standing or sitting above ground level.~~ is over 18 inches in height at the highest accessible point. The highest accessible point is defined as the highest surface on the piece of equipment where participants will sit or stand when the equipment is used as intended. ~~(The highest accessible point is defined as the highest surface on the piece of equipment where children would stand or sit when the equipment is being used as intended.)~~ Fall Use zones shall extend a minimum of 6' in all directions (unless otherwise specified) from the perimeter of the equipment. ~~Exceptions may be granted for structures that have protective barriers in place.~~ (Playground equipment that is between 18 inches and 24 inches at the highest accessible point and that was installed prior to the enforcement date of this revision is allowable without fall surfacing, as long as it meets all other requirements.)
2. Swings require ~~fall~~ use zones and surfacing regardless of height. ~~(Toddler swings equipped with safety straps are exempt from this requirement, provided their use is closely supervised.)~~
3. ~~Fall~~ Use zone surfacing depths shall be as follows:
  - a. ~~Structures over 2' and under 3 1/2' at the highest accessible point shall have a minimum surfacing material depth of 6"~~
  - b. ~~Structures 3 1/2' up to 5' at the highest accessible point shall have a minimum surfacing material depth of 9" (shredded tires or other shredded or chopped rubber products shall have a minimum depth of 6")~~
  - c. ~~Structures 5' and taller at the highest accessible point shall have a minimum surfacing~~

~~material depth of 12" (shredded tires or other shredded or chopped rubber products shall have a minimum of 6" depth)~~

Minimum compressed loose-fill surfacing depths

	<b>Inches</b>	<b>Loose-Fill Material</b>	<b>Protects to Fall Height of:</b>
a.	6*	Shredded/recycled rubber	10 feet
b.	9	Sand	4 feet
c.	9	Pea Gravel	5 feet
d.	9	Wood mulch (non-CCA)	7 feet
e.	9	Wood chips	10 feet

\*Shredded/recycled rubber loose-fill surfacing does not compress in the same manner as other loose-fill materials. However, it is recommended that care be taken to maintain a constant depth as displacement may still occur

4. Shock absorbent material such as sand, pea gravel, wood chips, wood mulch, shredded tires, etc., shall be used in ~~fall~~ use zone areas under and around playground equipment which requires a ~~fall~~ use zone.
  - a. When purchasing gravel, care should be taken prior to purchase to insure that the gravel is actually pea gravel that is smooth and rounded, and not crushed rock or gravel with sharp edges. Crushed rock and sharp gravel will not be approved.
  - b. Pea gravel used for ~~fall~~ use zones shall not be over 1/2 inch in diameter.
  - c. Different types of surfacing materials shall not be combined within the same use zone area.
5. Hard surface materials, such as asphalt and concrete shall not be used as base surfaces in the ~~fall~~ use zones except under commercial matting or other systems/products designed to be installed over hard surfaces as directed by the manufacturer.
6. SLIDES: The ~~fall~~ use zone for slides measuring 6 feet or over, measured from the slide platform to the ground, shall extend ~~to~~ 8 feet from the exit end of the slide. Use zones for slides measuring under 6 feet from the platform to the ground shall extend 6 feet from the exit end of the slide.
7. SWINGS: The ~~fall~~ use zone for single-axis swings (standard swings) (except toddler swings) shall extend to the front and to the rear of the swing a minimum distance of two times the height of the pivot point (where the chain attaches to the frame) above the playing surface. The ~~fall~~ use zone for toddler swings shall extend to the front and rear of the swing a minimum of two times the distance from the pivot point to the swing seat. ~~(Note exemption listed in 908.1 above.)~~ ~~Fall~~ Use zones shall also extend ~~six~~ 6 feet to the sides of the swing set.
8. SWINGS: The ~~fall~~ use zone for multi-axis swings (such as tire swings or others with three

or more suspending chains) shall extend in all directions a minimum of six feet, plus the height of the suspending rod or chain. The use zone from the end of the structure must also extend a minimum of 6 feet in all directions.

9. ~~Fall~~ Use zones shall be free of obstacles onto which children may fall.

## **1000 FURNITURE & EQUIPMENT**

### **1001 Furniture & Equipment Requirements**

1. All manufacturer guidelines shall be followed for furniture and equipment that is used by, or around, ~~children~~-participants.
2. All equipment shall be sturdy, clean, and safe.
3. Paint on toys, equipment and other materials shall be lead free.
4. Chairs and tables shall be size-appropriate for ~~children~~-participants.
- ~~5. Safety straps shall be used at all times in high chairs or any other seats designed to be used with straps.~~
5. The ~~center~~-OST Program shall provide individualized space for storing personal belongings.
6. There shall be storage space for extra materials and other equipment when not in use.
7. Outdoor equipment that requires fall zones and surfacing shall require the same fall zones and surfacing if used inside the facility. (This does not apply to equipment specifically designed for indoor use only.)

### **1002 Sleeping Equipment**

1. There shall be a labeled, individual cot or mat, bottom sheet, and adequate cover for each ~~child~~-participant in care during rest time.
2. The use of mats shall be acceptable if they are at least 2 inches thick, washable, waterproof, and size-appropriate for ~~children~~-participants.
3. All sleeping equipment shall be kept at least one foot apart ~~for napping~~ to prevent cross-contamination and ease of access in an emergency.
4. Sheets and covers shall be washed at least once a week. Once a sheet/cover/blanket has been used by a ~~child~~-participant, it shall not be used by another ~~child~~-participant until it has been washed.

### **~~1003 Infant & Toddler Sleeping Equipment~~**

- ~~1. Any cribs or playpens that have been identified as unsafe, or have been subject to recall as defined by the Consumer Products Safety Commission (CPSC) guidelines or law, shall be removed or repaired as indicated.~~
- ~~2. An individually labeled crib or safe playpen with a waterproof mattress shall be provided for each child under 12 months of age. A bassinet shall not be used. (Please note that the CPSC does not recommend the use of playpens in licensed child care.)~~
- ~~3. The following guidelines shall be required for cribs:
 
  - ~~a. Slats shall be no greater than 2 3/8" apart~~
  - ~~b. Cribs that have end panels with decorative cutout areas shall not be used~~
  - ~~c. Mattresses shall fit snugly in the crib, be waterproof and in good repair.~~
  - ~~d. The space between crib and mattress shall measure no more than 1 inch.~~
  - ~~e. Corner posts shall be the same height as end panels~~
  - ~~f. End panels shall extend below mattress at the lowest position of the mattress~~~~
- ~~4. Crib bedding shall be changed daily or more frequently when wet or soiled.~~

## **1100 HEALTH**

### **1101 General Health Requirements**

- ~~1. No child participant or staff shall be admitted who has a contagious or infectious disease. Parents and guardians shall be notified to pick up the child participant if the child participant exhibits any of the symptoms listed below:
 
  - ~~a. **Fever:** A body temperature of 101 or greater (Recommendation-Infants, six months of age or under, who have a temperature of 100 greater should be excluded.)~~
  - ~~b. **Diarrhea:** three (3) or more watery stools in a 24 hour period~~
  - ~~c. **Vomiting:** Vomiting on two or more occasions within the past 24 hour period~~
  - ~~d. **Rash:** Body rashes, not obviously associated with diapering, heat or allergic reactions to medications~~
  - ~~e. **Sore Throat:** if associated with fever or swollen glands in the neck~~
  - ~~f. **Severe Coughing:** Episodes of coughing which may lead to repeated gagging, vomiting or difficulty breathing~~
  - ~~g. **Pink Eye:** Pink or red eye(s) which may be swollen with white or yellow discharge, until on antibiotics for 24 hours~~
  - ~~h. **Untreated Scabies, Head Lice or the presence of nits:** May return after treatment and removal of nits~~
  - ~~i. **Multiple Sores inside mouth with drooling:** unless health care provider determines the condition is non-infectious~~
  - ~~j. **Ring Worm:** a fungal infection of the scalp or skin: may return after evaluation and under treatment by a health care provider~~
  - ~~k. **Impetigo:** may return 24 hours after treatment is initiated~~~~
1. No child participant or staff shall be admitted who has a contagious or infectious disease.

2. The parent or legal guardian shall be notified as soon as possible when a participant has any symptom that requires exclusion from the facility. The participant shall be separated from other participants and closely monitored until the parent arrives to pick the participant up.
3. The caregiver should determine if the illness prevents the child from participating comfortably in activities, results in a greater need for care than the child care staff can provide without compromising the health and safety of the other children, or poses a risk of spread of harmful diseases to others.
4. The caregiver shall temporarily exclude the participant from care if the participant has:
  - a. Sudden change in behavior, such as:
    - lethargy or lack of responsiveness
    - unexplained irritability or persistent crying
    - difficult breathing
    - a quickly-spreading rash
  - b. Fever over 101 degrees/oral, 100/axillary (or equivalent method) in a child who also has pain, behavior changes, or other symptoms of illness.
  - c. Diarrhea, defined as watery/runny stools, if frequency exceeds 2 or more stools above normal for that child, and is not related to a change in diet or medication. Exclusion from child care is required if diarrhea cannot be contained in the diaper or if diarrhea is causing soiled clothing in toilet-trained children
  - d. Blood or mucus in stools (unless caused by hard stools)
  - e. Vomiting illness (2 or more episodes of vomiting in the previous 24 hours)
  - f. Abdominal pain which lasts more than 2 hours
  - g. Mouth sores with drooling
  - h. Rash with fever or behavior change
  - i. Conjunctivitis or "pink eye" – with white, yellow, or green eye discharge and red ("bloodshot") eyes, exclude only if child has:
    - fever,
    - eye pain
    - redness and/or swelling of the skin around the eyes, or
    - if more than one child in the program has symptoms
  - j. Pediculosis (head lice), until after the first treatment.
  - k. Active tuberculosis, until a health care provider or health official states that the child is on appropriate therapy and can attend child care.
  - l. Impetigo, until treatment has been started;
  - m. Strep throat, until 24 hours after antibiotic treatment has been started
  - n. Chicken pox, until all lesions have crusted (usually 6 days after the rash appears)
  - o. Rubella, until 6 days after onset of rash
  - p. Pertussis (whooping cough); until 5 days of antibiotic treatment
  - q. Mumps, until 5 days after onset of gland swelling
  - r. Measles, until 4 days after onset of rash
  - s. Hepatitis A, until 1 week after onset of illness or as directed by the health department



- ~~2. Any child participant who becomes ill and unable to participate in daily activities shall be separated from other children participants, supervised, and parents shall be called to pick up the child participant.~~
5. Any child-participant who is injured shall have immediate attention. Parents shall be notified of all injuries. Injuries that require the attention of medical personnel shall be reported to the parent immediately and to the Licensing Unit within one business day.
6. Parents or guardians of all children-participants shall be notified of contagious illness as soon as possible.
7. If the policy of an OST Program authorizes staff to administer prescription medications, staff shall do so only:
8. Medication shall be given to children only with signed parental permission which includes date, type, drug name, time and dosage, length of time to give medication, and what the medication is being given for. It shall be in the original container with a child resistant cap, not have an expired date, and be labeled with the child's name. (Aspirin substitutes, such as ibuprofen and acetaminophen, may be provided by the facility if parental permission has been granted. These medications shall be in the original container.) Staff shall not dispense medications in dosages that exceed the recommendations stated on the medication bottle.
9. Children with special health care needs (ex. asthma, seizures, diabetes, etc.) who require scheduled daily medications or medications to be given on an emergent basis (Benadryl, EpiPen, rescue asthma medication, etc.) shall have a care plan. Care plans shall have clearly stated parameters, directions, and symptoms for giving the medications. Care plans shall be updated as needed, but at least yearly.
10. The facility shall share information with families regarding medical homes for children.
11. The staff person who administers the medication shall initial the permission slip and record the date, time and dosage the medication was administered.
12. Medication shall be returned to the parent or disposed of properly when a child withdraws from the program or when the medication is out of date.
13. Medicine shall be stored at the proper temperature, separately from food at all times.
14. A first aid supply shall be kept out of reach of the children. A first aid kit containing medications shall be locked. This kit shall include the following:
  - a. Adhesive Band-Aids (various sizes)
  - b. Sterile gauze squares
  - c. Adhesive tape
  - d. Roll of gauze bandages

- e. Antiseptic
  - f. Thermometer
  - g. Scissors
  - h. Disposable gloves
  - i. Tweezers
15. Medicine shall be kept out of the reach of the children when dispensing and shall be stored in a locked area at all other times.
  16. Facilities shall comply with the Clean Indoor Air Act of 2006. Smoking in ~~a child care center~~ an OST Program is prohibited at all times. This includes:
    - a. All areas of the facility, regardless of whether ~~children~~ participants are in care (includes time periods such as nights, weekends, holidays, etc., also includes office areas or other areas of the facility that share the same ventilation systems)
    - b. Outdoor play area(s)
    - c. Other outdoor areas when ~~children~~ participants are present
    - d. In any vehicle used to transport ~~children~~ participants, whether ~~children~~ participants are present in the vehicle or not
  17. The facility shall follow any health or medical care plans and/or medical documentation as provided by the ~~child's~~ participant's physician, parent, or guardian.
  18. Universal precautions shall be used when handling items contaminated by blood. These items shall be disposed of separately and by using rubber gloves that shall be properly disposed of after each use. (Note: hands must be washed even after gloves are used.) It is recommended that universal precautions ~~shall be used~~ when handling and disposing of materials containing bodily secretions, such as ~~Example:~~ wet or soiled diapers, fecal matter, etc. ~~or items~~
  19. Garbage ~~and soiled diapers~~ shall be kept in closed containers. Garbage and trash shall be removed from the ~~center~~ program daily and from the grounds at least once a week.
  20. The facility shall be free of insects, rodents, and pests.
  21. There shall be no pets or animals allowed that present a health and safety threat. Certification from a licensed veterinarian shall be maintained on site verifying ~~certify~~ that dogs and cats have a current vaccination against rabies.
  22. The communicable diseases listed in Appendix B, whether suspected in a ~~child~~ participant or adult shall be reported within 24 hours to either the local County Health Unit or the toll free Reporting System (800-482-8888). Immediate notification is recommended for the following:
    - a. Hepatitis
    - b. Rash illness (including MEASLES & RUBELLA)
    - c. WHOOPING COUGH (pertussis)

- d. MENINGITIS
- e. MUMPS
- f. Tuberculosis
- g. Salmonellas (including typhoid).
- h. E-coli

23. Reporting data should include:

- a. The reporter's name, location, and phone number
- b. The name of the disease reported and the date of onset
- c. The patient's name, address, phone number, age, sex and race (Please spell the patient's name)
- d. The attending physician's name, location and phone number
- e. Any pertinent clinical and laboratory information used in the diagnosis (Please give the laboratory name)
- f. Any treatment information, if known

~~14. A roster shall be maintained on infants and toddlers who have not completed the minimum immunization requirements and parents notified of the needed immunization(s).~~

~~15. Within 15 days of enrollment of a child, the child care facility shall verify that the child has been immunized as required by the Arkansas Department of Health and Human Services or the child cannot remain in care (Arkansas Code 20-78-206 as amended by Act 870 of 1997— a current immunization schedule is provided as an insert in this publication).~~

24. Immunization records shall not be required for school-age children OST participants.

25. It is recommended that all staff members who have direct contact with participants should receive annual Influenza (flu) immunizations.

26. It is recommended that all staff members who have direct contact with participants should receive a one-time Tdap (Diphtheria, Tetanus & Pertussis) immunization.

27. It is recommended that all staff members who have direct contact with participants should be required to have receive the recommended series of immunizations for chicken pox, mumps, measles and rubella or evidence of immunity.

28. ~~Children-Participants shall be protected from overexposure to the sun. Sunscreen shall be used if needed and as directed by the parent. Suntan lotions and/or sunscreens used for infants/toddlers and preschool children shall be kept out of the children's reach and shall be administered only with written parental permission. School age children~~ OST participants may apply sunscreen to themselves with supervision. A blanket permission may be obtained annually.

29. It is recommended that the facility should have an automated external defibrillator on site and have a staff member(s) on-site who is trained in the proper use of this device.

## **1102 Hand Washing**

1. Individual towels, paper towels or forced air dryers shall be within the reach of ~~children~~ participants.
2. A liquid soap shall be accessible in the hand washing area and used by caregivers and ~~children~~ participants.
3. Running water shall be available in all lavatories.
4. ~~Caregiver's and children's hands shall be washed with soap before meals and snacks, after toileting, after each diaper change, and as needed.~~ All staff and participants shall wash their hands with soap and water at the following times:
  - a. Before meals and snacks
  - b. Before preparing meals
  - c. After toileting
  - d. After each diaper change (if applicable)
  - e. After contact with bodily fluids
  - f. After outdoor time
  - g. After coming in contact with animals
  - h. Other times as needed
5. Alternative methods of hand washing shall be provided if running water is not available.
6. The use of hand sanitizer shall not be a replacement for soap and running water.
7. A wash cloth or towel shall not be used more than one time before laundering.
8. ~~A hand washing sink shall be available for the staff within the diaper change areas.~~

## **~~1103 Infant & Toddler Hand Washing~~**

1. ~~Caregivers hands shall be washed with soap upon entering the work area.~~

## **1104 Drinking Facilities**

1. The water supply shall be approved by the Arkansas Department of Health.
2. Drinking water shall be provided to the ~~children~~ participants.
3. Drinking water shall not be obtained from the hot water supply.

## **1105 Toilet Facilities**

1. There shall be 1 toilet and 1 sink available for each group of 30 ~~children~~ participants.

2. Separate toilet facilities for boys and girls shall be provided.
3. Clean clothes shall be available for ~~children~~-participants who might soil themselves.
4. Each ~~center~~-OST Program licensed or approved for more than thirty (30) ~~children~~ participants ~~over the age of 18 months~~ shall have a separate rest room for staff. ~~Infant and Toddler Center staff and Day Care Center staff may share the same toilet facilities when both programs are located in the same building.~~
5. Toilet tissue shall be located within reach of the ~~children~~ participants when toileting.
6. Staff shall assist participants in toilet routines and hygiene practices as needed.
7. Toileting equipment shall be safe and sanitary.

#### **~~1106 Infant & Toddler Toilet Facilities~~**

1. ~~There shall be at least one toilet and one sink available to each infant/toddler center. For every fifteen (15) children 18 months age and above, there shall be an additional toilet and sink.~~
2. ~~The child care center shall either provide a bathroom that opens directly into the room where toddlers are located or the facility shall provide additional staff for assisting children with toileting.~~
3. ~~Potty chairs shall not be counted in lieu of conventional toilets. If potty chairs are used, they shall be placed in the same area with a conventional toilet and sink and shall be emptied and sanitized immediately after each use.~~

#### **1107 Diaper Changing**

1. When ~~infants and toddlers are in care~~ participants require diapering, there shall be a safe diaper changing area which meets the following criteria: ~~shall be sanitized after every use and equipped with necessary supplies and cleaning materials.~~
  - a. Impervious (non-absorbant) smooth surfaces that do not trap soil and are easily disinfected
  - b. There shall be a changing pad capable of being sanitized used as a cushion between the child and the changing surface.
2. ~~Children~~-Participants shall always be attended during diapering.
3. Soiled or wet diapers shall be removed and replaced with clean, dry diapers. The caregiver shall ensure that ~~children~~-participants are properly cleaned and dried.
4. Soiled cloth diapers or clothing shall not be rinsed. If a ~~child's~~-participant's own diapers are

used, they shall be sanitarily bagged to be taken home daily.

5. Diaper covers or plastic pants shall be handled in the same manner as cloth diapers.
6. All diapering preparations shall be placed out of the reach of ~~children~~-participants. The use of all diapering preparations shall be agreed upon by the caregiver and parent.

### **~~1108 Toilet Learning~~**

- ~~1. The caregiver shall assist children in toilet routine and hygiene practices.~~
- ~~2. The following methods shall not be used in toilet learning:~~
  - ~~a. Placing child on toilet or potty chair for prolonged time periods.~~
  - ~~b. Using harsh language.~~
  - ~~c. Punishing or berating in any way for soiling clothing.~~
  - ~~d. Using physical force to place child on a toilet or potty chair against their will.~~
  - ~~e. Leaving a child unsupervised on toilet.~~

### **1200 SAFETY**

#### **1201 Safety Requirements**

1. Within 30 days of licensure and within 30 days of any change or modification of the floor plan the facility shall file a copy of their floor plan with the local Office of Emergency Management including the following (§ 20-78-228 Act 1159 of 2013):
  - a. A schematic drawing of the facility and property used by the child care facility including the configuration of rooms, spaces, and other physical features of the building
  - b. The location or locations where children enrolled in child care spend time regularly
  - c. The escape routes approved by the local fire department for the child care facility
  - d. The licensed capacity and ages of children per room at the facility
  - e. The contact information for at least two emergency contacts for the facility
  - f. An aerial view of the child care facility and property used by the child care facility shall be included with the floor plan if available
2. The OST Facility ~~facility~~ shall have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats, etc.) (Act 801 of 2009). The plan and procedures are required for emergencies that could cause structural damage to the facility, be identified as a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the ~~children~~-participants and staff.
3. The written plan shall include the following information:
  - a. Designated relocation site and evacuation route
  - b. Procedures for notifying parents of relocation

- c. Procedures for ensuring family reunification
  - d. Procedures to address the needs of individual ~~children~~-participants, including ~~children~~ participants with special needs
  - e. Procedures and documentation for annual training of staff regarding the plan and possible reassignment of staff duties in an emergency
  - f. Plans to ensure that all staff and volunteers are familiar with the components of the plan
3. The facility shall coordinate with local emergency management officials to plan for emergencies.
4. Written procedures and evacuation diagrams for emergency drills shall be posted in each ~~classroom~~-program space.
5. Fire and tornado drills shall be practiced ~~each month~~ as follows:
- a. Monthly
  - b. Fire and tornado drills shall be practiced on separate days and at different times of the day.
  - c. Everyone in the facility, ~~to include all program types (i.e. infant & toddler, preschool, school-age)~~, at the time of the drill shall participate.
  - d. Staff, including volunteers and substitutes, shall be trained in emergency drill procedures.
  - e. Drills shall be conducted during all hours when participants are in care (evenings, nights, weekends, etc.)
  - f. ~~If applicable, the facility shall provide a crib with evacuation casters or equivalent that will provide one (1) bed for every six (6) infants, twelve (12) months and younger, that may be used for the safe evacuation of the infants.~~
6. The facility shall maintain a record of emergency drills. This record shall include:
- a. Date of drill
  - b. Type of drill
  - c. Time of day
  - d. Number of ~~children~~-participants participating in the drill
  - e. Length of time taken to reach safety
  - f. Notes regarding things that need improved upon.
7. The ~~facility~~ OST Facility shall maintain an evacuation pack that shall be taken on all drills and during actual emergency evacuations. The pack shall be easily accessible in an emergency and all staff shall know the location of the pack. The evacuation pack shall include, but is not limited to the following:
- a. List of emergency numbers
  - b. List of all emergency and contact information for ~~children~~-participants
  - c. List of all emergency and contact information for staff
  - d. First aid kit (requirement 1101.6) with extra gloves
  - e. Kleenex

- f. Battery powered flashlight and extra batteries
  - g. Battery powered radio and extra batteries
  - h. Hand sanitizer
  - i. Notepad and pens/pencils
  - j. Whistle
  - k. Disposable cups
  - l. Wet wipes
  - m. Emergency survival blanket
8. The facility shall immediately notify the Licensing Unit of any extended utility outages or significant damage to the building and/or grounds. If phone service is not available, notification shall be as soon as service is restored or available.
  9. ~~Child care centers~~ OST Facilities shall maintain a log of all child product recalls and safety notices issued by CPSC or distributed by the Attorney General's Office and shall post or otherwise make these notices available for parents to review on site. The facility director shall certify, on an annual basis, that these notices have been maintained and reviewed and that any identified items have been removed from the facility. Forms for self-certification will be provided by the Licensing Specialist and shall be submitted annually. (Act 1313 of 2001).
  10. There shall be no alcoholic beverages in any part of the facility during hours of care. Illegal drugs/paraphernalia shall not be in any part of the facility or on the premises, regardless if ~~children~~ participants are present or not.
  11. All medications and poisonous substances shall be kept in separately locked areas.
  12. Rescue medications such as inhalers or EpiPens shall be inaccessible to children (kept in a cabinet with a child proof type safety latch or carried by a staff member.)
  13. All detergents and cleaning supplies shall be kept out of the reach of ~~children~~ participants. (This does not include hand soap in ~~children's~~ participants' or staff bathrooms.)
  14. Supplies used for ~~children's~~ participants' activities shall be carefully supervised.
  15. All bags belonging to ~~children~~ participants shall be checked on arrival to eliminate possible hazards. Purses and bags belonging to staff shall be stored out of reach of ~~children~~ participants.
  - ~~16. Electrical outlets shall be guarded.~~
  15. Balloon use shall be carefully supervised.
  16. Staff shall be instructed in the use of fire extinguishers.
  17. The facility shall maintain smoke detectors/fire extinguishers as required by the Fire Department. Smoke detectors shall be kept in working order at all times.



18. Chemicals and toxins shall not be stored in the food storage area.

**~~1202 Infant & Toddler Safety Requirements~~**

~~1. Balloon use shall not be allowed in infant/toddler areas.~~

**1203 Swimming Pools**

1. Swimming pools and natural pools of water may be used for water play if the following requirements are met:
  - a. Health Department approval where applicable
  - b. Written parental permission
  - c. One person present at all times who has current certification in Red Cross Life Saving, or Y.M.C.A. aquatic instruction, or other industry recognized certification entity.
  
2. Adult supervision of the children shall be provided at all times, with grouping based on a 1:8 ~~the following~~ staff/child-participant ratio. (Unless children participants are participating in an authorized swimming instruction program.)

a. Kindergarten & up	1:8
b. 5 years	1:5
c. 4 years	1:3
d. 3 years	1:2
  
- ~~3. When children of different ages are swimming in a group, the staff/child ratio shall be based on the youngest child within the group.~~
  
3. Lifeguards, swimming instructors or any other swimming pool staff may be counted in the ratio when the ~~facility's children~~ OST Facilities' participants are the only occupants of the pool and these persons have completed criminal and child maltreatment background checks and have a current health card.
  
4. Swimming pools located within the play area of the OST Facility ~~center~~ shall be enclosed. The enclosure shall consist of a locked gate and a fence that is at least four feet high.

**~~1204 Infant & Toddler Swimming Pools~~**

~~1. Swimming pools, wading pools, and natural pools of water shall not be used for children in Infant/Toddler programs. This does not prohibit the use of sprinklers and water play for this age child.~~

**1300 TRANSPORTATION**

**1301 Transportation Requirements**

1. The requirements in this section apply to all transportation provided by the licensee, including transportation provided by any person on behalf of the licensee, regardless of whether the person is employed by the licensee. Periodic transportation, such as a parent requesting that their child be picked up at school due to the parent's work schedule or other conflicts, is also covered by these requirements, whether a fee is charged for this service or not.
2. When participants are transported emergency contact information shall be maintained on the vehicle at all times.
3. Staff transporting ~~children~~-participants shall meet the following requirements:
  - a. Be at least twenty-one (21) years old or the minimum age required by the Licensee's commercial auto insurance
  - b. Hold a current valid driver's license or commercial driver's license as required by state law, and a readable copy shall be maintained in the staff's record
  - c. Successfully completed the training course in Driver Safety that is offered or approved by the Division prior to transporting ~~children~~-participants. Verification of the completed course in Driver Safety (when available) shall be maintained on site in the staff's record.
  - d. At least one adult on the vehicle shall be certified in CPR and First Aid.
4. The vehicle(s) used for the transportation of ~~children~~-participants shall be in compliance with Arkansas state laws on transportation of ~~children~~-participants.
5. Vehicles shall be licensed and maintained in proper working condition including air conditioning and heating systems.
6. Commercial insurance coverage shall be maintained for any vehicle used for transportation by the facility. Verification of commercial insurance coverage shall be provided to the Licensing Specialist prior to transportation of ~~children~~-participants. (Facilities licensed prior to the effective date of these regulations shall obtain required coverage within ninety (90) days.) Required coverage amounts to be maintained are:
  - a. Minimum coverage of \$100,000 Combined Single Limit (CSL)
  - b. Minimum coverage of \$100,000 for both Uninsured Motorist (UM) and Under Insured Motorist (UIM)
  - c. Minimum coverage of \$5,000 Personal Injury Protection (PIP) for each passenger (based on the number of passengers the vehicle is manufactured to transport)
- ~~7. Driver may be counted in staff/child ratio, but shall not be the only adult when more than 12 children over the age of three are transported.~~ During routine transporting of participants to and from an OST Program, a ratio of 1:18 does not need to be maintained as long as there is one additional adult present in the vehicle besides the driver. When transporting participants for non-routine purposes (ex. field trip) a ratio of 1:18 needs to be maintained at all times. The driver may be counted in staff/participant ratio.

3. ~~For transporting children kindergarten and above only, a ratio of 1:20 shall be maintained. Driver may be counted in staff/child ratio.~~
8. Any ~~child~~ participant who is less than 6 years old or weighs less than 60 pounds shall be restrained in a child passenger safety seat. Any ~~child~~ participant who is at least 6 years or weighs at least 60 pounds must be restrained by a safety belt. (Act 470 of 2001). Conventional school busses are exempt from this requirement except for the transportation of infants/toddlers. (See#1302.2) Child passenger safety seats shall be used in accordance with manufacturer's guidelines.
9. There shall be a seating space and an individual, appropriate restraint system provided for each ~~child~~ participant transported.
10. Rosters listing the date, the names and ages/date of birth of all ~~children~~ participants being transported as well as the name of the driver and any other staff member on the vehicle shall be maintained. These rosters shall be used to check ~~children~~ participants on and off the vehicle when they are picked up and dropped off at home, school, etc. and when they arrive at and leave the facility. Transportation rosters shall be kept by the facility and available for review for one year.
11. To insure that no ~~children~~ participants are left on the vehicle, the driver or a staff member must walk through the vehicle and physically inspect each seat before leaving the vehicle. The driver or the staff member, who conducted the walk through inspection, must sign the transportation roster to verify that all ~~children~~ participants have exited the vehicle.
12. To insure that ~~children~~ participants have safely arrived in the appropriate ~~classroom~~ program space, the transportation roster shall be reviewed by the Director or designee and compared with ~~classroom~~ attendance records. The Director or designee shall sign off on the transportation roster to verify that all ~~children~~ participants have safely transitioned from the vehicle to the ~~classroom~~ program.
13. Any vehicles designed or used to transport more than seven (7) passengers and one (1) driver must have approved child safety alarm devices installed. These devices must be properly maintained in working order at all times.

Vehicles in service at licensed facilities prior to July 1, 2005, shall have the alarm installed by a qualified technician or mechanic no later than December 31, 2005. On or after July 1, 2005, all vehicles at newly licensed facilities and newly acquired vehicles at existing facilities shall have a child safety alarm installed before placing the vehicle in service.

The Child Care Licensing Unit shall maintain a list of approved alarm systems.

#### **Clarification –**

- The alarm system shall be installed so that the driver must walk to the very back of the vehicle to reach the switch that deactivates the alarm. Alarm switches installed in

locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.

- The alarm system may be installed by any certified technician or mechanic employed by a recognized electronics or automotive business in accordance with the devices manufacturer's recommendations.
- The time delay from activation of the alarm until the alarm sounds shall be no longer than one minute. **Any of the following three options are acceptable to meet the intent of Act 1979 when children participants are being delivered at the facility. Other options must be approved by the Licensing Unit.**

### Options

1. Unload all of the ~~children~~-participants, walk through the vehicle to ensure that no ~~children~~ participants remain on board and deactivate the alarm. (This option will only work if you are able to unload all ~~children~~ participants in less than one minute.)
2. Upon arrival, have one staff member immediately walk through the vehicle to deactivate the alarm system. That staff member will remain near the alarm switch at the back of the vehicle until all ~~children~~-participants have been unloaded to ensure that no ~~child~~-participant is left on board. (This option will require at least two staff members, one to supervise the ~~children~~ participants and one to remain inside the vehicle.)
3. Upon arrival, deactivate the alarm and unload the ~~children~~ participants. Immediately after unloading, start the vehicle and move it to a different location for final parking. (This will reactivate the alarm and require a final walk through.)

### **~~1302 Infant & Toddler Transportation Requirements~~**

- ~~1. In a vehicle transporting infants and toddlers, the driver may be counted in the staff/child ratio but shall not be the only adult. A ratio of one adult for each three infants/toddlers shall be maintained.~~
- ~~2. Infants and toddlers shall not be transported on school buses that are not equipped to accommodate required child safety seats.~~

### **1400 SPECIAL NEEDS**

1. Participants with disabilities should be included, ~~as much as possible~~, in the same general activities as their same-age peers. Certain accommodations for their disability and some modifications to activities may be necessary and these should be determined on an individual basis and be related to the specific needs of the individual. Out of School Time providers are encouraged to make available additional staff training in the area of disability awareness. Such training would/might encompass the use of people-first language,

general communication strategies, and disability etiquette. In general, it is desirable to treat an individual with a disability in the same way one would treat an individual of the same age but without a disability.

2. Additional information from the parent/caregiver of a child with a disability may be necessary. Questions that cover usual routines, special instructions for care and interaction, the child's interests, and things or situations to avoid are important; as is determining what kinds of things will motivate the child. If there are individualized requirements for rest, nutrition, hydration, etc. these should be noted. Emergency contact information—with back up contacts—may be essential
3. Consideration should be given to special needs related to medical as well as developmental, social/emotional, and mental health/behavioral concerns.
4. While IDEA is specific to educational needs, consideration should also include cooperation with 504 and Medical Plans to best meet the needs of the individual child.

#### ~~Individuals with Disabilities Education Act (IDEA):~~

- ~~• It is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities.~~
- ~~• It defines a child with Special Needs as:
  - ~~○ A child determined eligible for special services under the Individual with Disabilities Education Act (IDEA) for whom a current IFSP (Individual Family Service Plan) or IEP (Individual Education Plan) exists and/or~~
  - ~~○ A child whose physical condition has lasted or is expected to last at least two (2) years as diagnosed by a licensed medical or psychological examiner~~~~
- ~~• It is specified in Public Law 108 466 §635.16 A-B (IDEA as reauthorized) as:
  - ~~○ Children with disabilities including children in public or private institutions or other care facilities are educated to the maximum extent appropriate with children who are not disabled.~~
  - ~~○ Special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of the child is such that the child is not achieving a satisfactory education in a regular class that provides supplementary aids and services.~~~~

#### **1401 Special Needs Requirements**

1. ~~All child care facilities shall comply with all applicable provisions as specified in IDEA:~~
  - a. ~~The facility shall enroll children with special needs without regard to disability.~~  
**(Programs are required to provide space and care for a child who can be**

**placed in their facility with existing services, as well as added supports from special educational services, and as long as the health and safety of the child can be met.)**

- ~~b. Staff shall provide care in the general classroom with children who are not disabled~~
- ~~e. The facility shall assist in facilitation of services required to meet the "special needs" of children in the center or in the classroom as specified on the individualized education/individual family service plan.~~
- ~~d. Facility staff (regular classroom staff) shall be a partner in the IFSP/IEP plan process~~
- ~~e. The facility shall allow service providers who are representatives of DHS, DDS or ADE access to the facility to provide special services as prescribed on the plan to enable the plan to be implemented in the classroom (natural/ least restrictive environment).~~
- ~~f. The facility shall not charge special service providers for space, accept "gratuities", or payment for allowing special service providers to provide services in their facility.~~
- ~~g. The facility is not required to "displace" children or staff to make space available to special service providers.~~
- ~~h. In order for a special service provider to provide special services in the facility, the IFSP/IEP planning team under the authority of the Arkansas Department of Education and/or the Arkansas Department of Human Services, Developmental Disabilities Services, shall identify the needed special services on the IFSP/IEP.~~
- ~~i. Classroom staff shall reinforce the specified goals and objectives as part of the daily routine of the classroom.~~

### **1402 Infant & Toddler Special Needs Requirements**

- ~~1. To the maximum extent appropriate, children ages 0 — 2 shall participate in early intervention services provided in "natural environments."~~
- ~~2. When infants and toddlers cannot achieve satisfactory results from early intervention services in a natural environment, the provision of early intervention services shall occur in other appropriate settings as determined by the parent and the Individualized Family Service Team.~~

### **PROGRAM SPECIFIC VARIATIONS**

PROGRAM-SPECIFIC VARIATIONS ARE NUMBERED ACCORDING TO THE REGULATION WITH WHICH IT VARIES. UNLESS A VARIANCE IS LISTED BELOW, ALL BASIC REQUIREMENTS APPLY.

### **1500 SCHOOL AGE/SUMMER-DAY CAMP**

#### **301 Staff/Child Ratio**

- ~~1. Kindergarten and above, 1 worker per 20 children.~~

#### **401 Program Requirements**

1. If hazardous items (ex. archery equipment) are used during activities offered, such equipment must be used under close supervision and must be safely stored.
2. If specialized activities take place such as, but not limited to horseback riding, water activities, rock climbing, and other adventure based activities, supervision of such activities must be provided by qualified staff that have received the proper training in the activity's guidelines, safety regulations, and emergency procedures.
- ~~3. School age children who leave the child care center to participate in other activities shall have written permission from the parents naming the activity, time of leaving and returning and method of transportation.~~
- ~~4. Children in camp situations shall be under direct supervision of staff at all times.~~

### **603 Children's Participants' Records**

1. Permission for specialized summer activities shall be maintained.
2. Emergency information and medical permission sheet shall be maintained at day camp site.

### **701 Nutrition Requirements**

1. Milk is not required to be served in day camp settings.

### **901 Grounds**

1. Outdoor day camps need to have a shelter or permanent building for protection from inclement weather.
2. An outdoor day camp shall perform daily visual inspections of the outdoor space and facilities prior to the arrival of participants to ensure all buildings, structures, and activity areas are in good repair and free of hazards.

### ~~**1002 Sleeping Arrangements**~~

- ~~1. A period of quiet activities shall be provided when children are in care all day.~~

### ~~**1101 Health Requirements**~~

- ~~1. Provisions shall be made for waterproof cots or mats if a child becomes ill.~~

### **1104 Drinking Facilities**

1. Water that is transported to the camp sites for drinking purposes shall be in enclosed containers. Fresh water shall be provided each day.

### **1600 EVENING & NIGHT CARE VARIATIONS**

Night care is any care provided after midnight.

### **301 Staff/~~Child~~ Participant Ratio**

1. Staff members shall be awake at all times and shall have ~~children~~ participants in view at all times.

### **401 Program Requirements**

1. Evening quiet time activity shall be provided to each ~~child~~ participant arriving before bedtime.

### **701 Nutrition Requirements**

1. ~~Children~~ Participants who are in care overnight shall be provided with a breakfast prior to leaving for school or other activities.
2. Snacks meeting the current U.S. Department of Agriculture guidelines shall be provided to ~~children~~ participants in attendance for more than 2 ½ hours prior to bedtime.

### **1002 Sleeping Arrangements**

1. Bedtime schedules shall be established for ~~children~~ participants in consultation with the ~~child's~~-participant's parent(s).
2. Storage space for clothing and personal belongings shall be provided within easy reach of the ~~children~~-participant.
3. Individual beds or cots equipped with comfortable mattresses, sheets, pillows, pillow cases and blankets shall be provided for ~~children~~ participants in all-night care. Bed linens shall be changed at least once a week or daily when wet or soiled.
4. Mats may be used for ~~children~~-participants in evening care.
5. The upper level of double deck beds shall be allowed for ~~children~~-participants 10 years or older if a bed rail and safety ladder are provided.
6. ~~Children~~ Participants shall have clean and comfortable sleeping garments for their individual use.

### **1105 Toilet Facilities**

1. There shall be age appropriate bathing facilities available for all ~~children~~ participants. ~~For children 2 ½ years and older in night care (after midnight), there shall be including a bathtub or shower available.~~ Bathtubs and showers shall be equipped to prevent slipping.



2. Bathrooms shall be located near the sleeping areas.
3. No ~~child~~ participant under 6 years of age shall be left alone or with another ~~child~~ participant while in the bathtub or shower.

## **1700 PART-TIME PROGRAM VARIATIONS**

### **701 Nutrition Requirements**

1. Facilities in operation for more than 3 hours per day shall provide a snack that meets current U.S. Department of Agriculture Guidelines.

## **1800 SICK CARE COMPONENT**

### **301 Staff/~~Child~~ Participant Ratio**

1. The following ratios shall be maintained at all times:
  - a. ~~Infant/Toddler 1:3, Maximum group size =6~~
  - b. ~~Preschool/School Age~~ OST Participant 1:5, Maximum group size 10
2. Staff shall be separated in the same manner ~~children~~ participants are separated to prevent cross infection.

### **302 Director**

1. If the component is part of a ~~child care facility~~ an OST Facility, the program director shall be accountable to the facility director. If the component is an entity unto itself the program director may also be the facility director.
2. The program director shall have completed the following training:
  - a. Communicable disease control
  - b. Recognition and care of usual childhood illness
  - c. CPR certification
  - d. First Aid certification

### **401 Program Requirements**

1. ~~Children~~ Participants shall be provided with quiet activities according to their age and abilities.
2. Caregivers shall:
  - a. Administer medicine according to prescribed instructions
  - b. Take temperature frequently or as needed
  - c. Monitor any changes in condition
  - d. Record necessary medical or physiological data or changes

- e. Notify parents immediately if their child's condition changes significantly for the worse, especially if the condition meets one of the excludable diseases or symptoms
3. The ~~child~~-participant shall be removed immediately from sick care when his/her condition meets one of the excludable diseases or symptoms.
4. ~~Children~~ Participants may be returned to the regular ~~day-care~~ OST Program when a doctor's statement has been obtained or when the ~~child~~-participant is free of symptoms for 24 hours.

### **603 Children's Participants' Records**

1. The record shall contain information on the specific condition or illness placing the ~~child~~ participant in sick care.
2. The record shall contain any recommendations for needed medical treatment and/or program or environment modifications that the ~~child~~ participant needs.

### **801 Building Requirements**

1. If located in the same facility as ~~day-care~~ an OST Program, sick care shall be separate with a separate entrance and separate ventilation system.
2. ~~Children~~ Participants with respiratory illnesses shall be cared for in separate space from ~~children~~ participants with gastrointestinal illness. Any ~~child~~ participant with an undiagnosed condition shall be separated from other ~~children~~-participants to prevent cross infection. A separate area can be defined by curtains; partitions etc. if airborne transmission is not likely.
3. A hand-washing sink shall be available in each room.
4. To prevent cross contamination, a designated toilet shall be available to each sick care room.
5. The facility shall be self-contained, i.e. food, water, bedding, toileting (no potty chairs) etc.

### **1001 Furniture & Equipment Requirements**

1. No furniture, fixtures, equipment and supplies designated for use in the sick care component shall be used or shared by well ~~children~~-participants.
2. All laundry shall be washed each day. The items shall be placed in a plastic bag and labeled "contaminated" so necessary precautions can be taken.
3. All toys and equipment shall be disinfected after every use.

### **1101 General Health Requirements**

TABLES OF COMMUNICABLE DISEASES AND SYMPTOMS THAT EXCLUDE CHILDREN FROM SICK CARE: (asterisk denotes reportable diseases)

1. Communicable Diseases:

**a. RESPIRATORY ILLNESS      b. GASTROINTESTINAL ILLNESS      c. CONTACT**

Chicken Pox  
 German Measles  
 Hemophilus influenza  
 Measles\*  
 Meningococcus\*  
 Mumps\*  
 Strep throat  
 Tuberculosis\*  
 Whooping Cough\*

Giardia Lamblia\*  
 Hepatitis A\*  
 Salmonella\*  
 Shigella\*

Impetigo  
 Lice  
 Scabies

2. Symptoms that Exclude Children Participants from Sick Care:

A symptom is a condition that indicates an illness that may not be identifiable by one of the above listed names but presents a situation where the child participant shall not be admitted to or remain in sick care and should be seen by the family physician.

a. Diarrhea

- Accompanied by evidence of dehydration for excessive fluid loss
- Accompanied by history of poor fluid intake and/or marked lethargy
- With blood or mucous in the stool unless at least one stool culture shows the absence of Salmonella, Shigella, Campylobacter or E-Coli
- That exceeds 5 bowel movements in an 8 hour period of is continued over 3 or 4 days unless the child participant is under the supervision of a physician with written documentation

b. Vomiting for over a 6 hour period

c. Difficult or rapid breathing

d. Severe coughing: episodes of coughing which may lead to gagging, vomiting, or difficulty breathing

e. Mucous (phlegm) that is foul smelling, yellow or green and the child-participant has a fever over 102

f. Asthmatics with severe upper respiratory infections who have not been seen by a physician or whose distress is not controlled by medication

g. Sore throat and fever greater than 103 or confirmed Strep throat until treated with antibiotics for over 24 hours

h. Skin conditions that have not been diagnosed as noncontiguous by a physician; including but not limited to:

- Yellow (jaundiced) eyes or skin
- Child in contagious stages of chicken pox, measles, mumps or rubella
- Untreated impetigo
- Untreated scabies or head lice

- Blood-red rashes and skin conditions with spontaneous bruising
- i. ~~Children~~ Participants who are in the contagious states of Pertussis, diphtheria, or tuberculosis
- j. Pink or red eye(s) which may be swollen with white or yellow discharge until on antibiotics for over 24 hours
- k. Abdominal pain that is intermittent or persistent
- l. Fever over 102 for greater than 24 hours, or any fever over 103 unless the ~~child~~ participant has been evaluated and treated by a physician and does not have other exclusion criteria.

## APPENDIX A: DEFINITIONS

1. **"Act"** means the Child Care Facility Licensing Act as amended.
2. **"Assistive electronic device"** means any electronic device that is used/needed by a child or youth with a disability. Such a device might be used for communication, for environmental manipulation, to keep a schedule or checklist of activities, or for other specific and generalized therapeutic activities that promote independence. The device may be used at all times or at the discretion of the user, but has a functional application for the user.
2. **"Child Care Center"** means any Child Care Facility conducted under public or private auspices on a profit or nonprofit basis providing direct care and protection for children. Any facility that is open more than five (5) hours during any 24 hour period or more than a total of ten (10) hours during a seven (7) day period is considered a Child Care Center and shall be subject to the provisions of the Child Care Facility Licensing Act. Those facilities meeting the above definitions but operating no more than three (3) weeks per calendar year are not required to comply with the licensing requirements, i.e.: Summer Bible Schools and Camps.

For purposes of determining the need for a license, all care provided at the site of a licensed program is considered a part of the licensed program and therefore subject to licensing requirements. This includes separate buildings located on the same property or any other property under the same ownership. However, Mother's Day Out and other part time programs serving children not participating in the licensed program are exempt as long as they operate no more than 5 hours per day or 10 hours per week.

A public or private school which operates a Kindergarten (K5) in conjunction with grades one and above, or for grades one and above only and provides short-term custodial care (not to exceed 20 hours weekly) prior to and/or following classes for those students, is not required to comply with licensing requirements for the short-term custodial care provided.

3. **"Child Care Licensing Unit"** means the unit within the Department of Human Services, Division of Child Care and Early Childhood Education, that inspects and investigates any proposed or operating Child Care Center and any personnel connected with the center to determine if the facility will be or is being operated in accordance with the Child Care Facility Licensing Act and the Licensing Requirements for the Child Care Centers.
4. **"Child Maltreatment Central Registry Check"** means a check of the Arkansas Child Maltreatment Central Registry for any record of founded child abuse and neglect or maltreatment.
5. **"Criminal Record Check"** means a statewide criminal record check conducted by the Identification Bureau of the Arkansas State Police.
6. **"Criminal FBI Check"** means a nationwide criminal record check conducted by the Federal

Bureau of Investigation that conforms to the applicable federal standards and includes the taking of fingerprints. Application for a nationwide criminal check shall be made to the Identification Bureau of the Department of the Arkansas State Police.

- ~~7. "Day Care Centers" means child care for children age 2 1/2 or 30 months and above.~~
7. **"Department"** means the Arkansas Department of Human Services.
8. **"Division"** means the Division of Child Care and Early Childhood Education.
9. **"Employee"** or **"Staff"** means all full or part-time employees or any person(s) who perform services under the direction and control of the ~~Child Care~~ OST Facility, regardless if they are paid or not. This includes any person(s) that has supervisory or disciplinary control over ~~children~~ participants, is at any point left alone with ~~children~~ participants, or is counted in staff/~~child~~-participant ratios.
10. **"Evening and Night Care"** means ~~child-participant-care~~ provided between 7:00 p.m. and 6:00 a.m.
- ~~11. "Infant Center" means child care for children from birth to age 18 months.~~
- ~~11.~~ **"Kindergarten"** means a school based program offered for children five (5) years of age (**K5**) during the school year prior to their entry into the first grade.
12. **"Operator"** means any person or entity exercising any measure of supervision or control over a ~~Child Care an~~ OST Facility.
13. **"Out-of-School Time Program"** means a child care/school-age or youth development program caring for children who are in kindergarten (K-5 years of age) and above. OST care includes before and after school care, extended care during the school holiday, summer day camps, and youth development programs. OST Programs which operate with children arriving and leaving voluntarily for scheduled classes, activities, practice, games, and meetings are defined as recreational programs, and do not fall under the definition of requiring licensure as an OST Program.
12. For purposes of determining the need for a license, all care provided at the site of a licensed OST program is considered a part of the licensed program and therefore subject to licensing requirements. This includes separate buildings located on the same property or any other property under the same ownership. ~~However, Mother's Day Out and other~~ Part time programs serving ~~children~~ participants not participating in the licensed OST program are exempt as long as they operate no more than 5 hours per day or 10 hours per week.
13. A public or private school which operates a Kindergarten (K5) in conjunction with grades one and above, or for grades one and above only and provides short-term custodial care (not to exceed 20 hours weekly) prior to and/or following classes for those students, is not required to comply with licensing requirements for the short-term custodial care

provided.

14. **"Owner"** means any person who assumes the legal responsibility for operation of a ~~child care~~ an OST-facility.
15. **"Participant"** refers to a child who is enrolled in kindergarten or a higher grade. If the OST Program provides care to children over 13 years of age, the program must meet all regulatory standards in regard to such children just as if the children were under 13 years of age. Children may receive care through the conclusion of high school.
16. **"Part-time Care"** means ~~child care~~ provided no longer than four (4) hours per day or not to exceed a maximum of 20 hours per week. ~~These types of programs may include, but are not limited to, half day kindergarten, mother's day out programs, play schools and some nursery schools.~~
17. **"Personnel"** is defined as the facility owner or operator, staff or volunteer.
19. **"Program"** is defined as all activities that comprise the ~~child's~~ participant's day at the center.
20. ~~**"Toddler Center"** means child care for ages 18 to 36 months.~~
20. **"Screen time"** refers to the amount of time that a participant uses or is engaged with electronic media. Electronic media includes but it not limited to television, videos, DVDs, computers, portable electronic devices, etc.
21. ~~**"School Age Care"** means child care for children who are in kindergarten (K5) and above. School age child care includes before and after school care and extended care during school holidays and summer day camps. School age programs, which operate with children arriving and leaving voluntarily for scheduled classes, activities, practices, games and meetings, shall not be considered as meeting this definition.~~
21. **"Sick Care"** is defined as a separate service providing care for ~~children~~ participants who are too sick to attend the OST Program ~~day care~~ as stated in Section 1000 but who do not exhibit any of the excludable diseases as defined in Section 1500. The primary objective of this service is to insure that ~~children~~ participants in care receive the required attention necessary for moderately ill ~~children~~ participants.
22. **"Staff" or "Employee"** means all full or part-time employees/staff or any person(s) who perform services under the direction and control of the ~~Child Care~~ OST Facility, regardless if they are paid or not. This includes any person(s) that has supervisory or disciplinary control over ~~children~~ participants, is at any point left alone with ~~children~~ participant, or is counted in staff/~~child~~ participant\_ratios.
23. **"Substantial Compliance"** means compliance with all **essential standards** necessary to protect the health, safety and welfare of the ~~children~~ participants-attending the ~~Child Care Center~~ OST Program. Essential standards include **but are not limited to** those relating to

issues involving fire, health, safety, nutrition, discipline, staff/~~child~~ participant ratio and space.

24. **"Swimming Pool"** means any pool of water in excess of 12 inches deep. This does not include natural pools of water such as lakes, ponds and rivers.

26. **"Volunteer"** means a person who provides services to a ~~Child-Care-Facility~~ an OST Program, but has no supervisory or disciplinary control over ~~children~~ participants, is not left alone with ~~children~~ participants, and is not counted in staff/~~child~~\_participant ratios.



## APPENDIX B: LIST OF REPORTABLE DISEASES

The following are the more common reportable diseases which occur with moderate frequency in Arkansas:

Gonorrhea Hepatitis (A, B, Non-A, Non-B Unspecified and results of serologies) Rash illnesses (including *MEASLES & RUBELLA) *WHOOPING COUGH (pertussis) MENINGITIS	Salmonellosis (including typhoid) Shigellosis Syphilis Tuberculosis MUMPS
---	---

The following are less common reportable diseases that occur with low frequency in Arkansas

*AIDS (Acquired Immune Deficiency Syndrome) Amebiasis ANTHRAX *Aseptic Meningitis Blastomycosis BOTULISM *Brucellosis Campylobacter Interitis Chancroid CHOLERA Coccidioidomycosis *Congenital Rubella Syndrome DIPHTHERIA Encephalitis (all types) FOOD POISONINGS (all types) Giardiasis Gonococcal Ophthalmia Granuloma Inguinale *Guillain - Barre Syndrome Histoplasmosis HIV [Human Immuno Deficiency Virus by (name & address)] **Influenza *Kawasaki Disease *Legionellosis	* Leprosy * Leptospirosis * Lyme Disease Lymphogranuloma Venereum * Malaria * Meningitis, <u>Hemophilus</u> Influenza Type B * Meningococcal infection Mumps Pesticide Poisoning PLAGUE * POLIOMYELITIS * Psittacosis (Ornithosis) Q Fever RABIES * Relapsing Fever * Reyes Syndrome Rheumatic Fever * Rocky Mountain Spotted Fever SMALL POX * Tetanus * Toxic Shock Syndrome Toxoplasmosis * Trichinosis * Tularemia TYPHUS FEVER YELLOW FEVER
--	--

\*The reporting physician will be contacted for additional information.

\*\*Individual cases to be reported only when laboratory testing has determined the viral type.

**The diseases in capital letters are to be brought to the immediate attention of the State Epidemiologist when suspected.**

Reporting data shall include:

- a) Name and location of reporting person
- b) Disease or suspected disease and date of onset
- c) Name, age, sex, address and phone number of patient (please spell patient's name)
- d) Name of patient's physician

The following diseases are also of public health importance and should be reported whenever there is an unusual incidence or outbreak (including seasonal). It is necessary to report 1) the physician's name and location, 2) the suspected disease and 3) the number of cases and interval during which the cases were seen:

Acute respiratory disease	Hospital acquired infections
Chicken pox	Infectious Mononucleosis
Conjunctivitis	Influenza (estimate number)
Dermatophytosis (ringworm)	Pediculosis
Enteropathogenic E. Coli Diarrhea	Pleurodynia
Epidemic Diarrhea of unknown cause	Pneumonia (bacterial, Mycoplasma, viral)
Gastroenteritis	Staphylococcal-Infections
Herpangina	Streptococcal-Infections

The following occupational diseases also shall be reported:

Asbestosis	Mesothelioma
Silicosis	Coal Workers Pneumoconiosis
Byssinosis	

**FOR FURTHER ASSISTANCE CONTACT THE LOCAL COUNTY HEALTH UNIT.**

**APPENDIX C**  
U.S. DEPARTMENT OF AGRICULTURE CHILD CARE MEAL PATTERN

Children age 12 and up may be served adult-size portions based on the greater food needs of older children, but shall be served not less than the minimum quantities specified in this section for children age 6 through 12 years.

For purposes of the requirements outlined in this paragraph, a cup means a standard measuring cup. Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

<b>Breakfast</b>	<b>Children 3 through 5 years</b>	<b>Children 6 through 12 years</b>	<b>Adults</b>
Milk, fluid	3/4 cup	1 cup (8 ounces)	1 cup (8 ounces)
Juice or fruit or Bread, bread and/or cereal enriched or whole	1/2 cup	1/2 cup	1/2 cup
Bread or Cereal: Cold	1/2 slice (1/2 ounce)	1 slice (1 ounce)	2 slices (2 ounces)
Hot cooked	1/3 cup**	3/4 cup***	
	1/4 cup	1/2 cup	
<b>AM or PM snack</b> (select 2 of these 4 components)			
Milk, fluid			
Meat or meat alternate	1/2 cup	1 cup (8 ounces)	1 cup (8 ounces)
Juice or fruit or Bread, bread and/or cereal enriched or whole	1/2 ounce	1 ounce	1 ounce
Bread or Cereal: Cold	1/2 cup	3/4 cup	1/2 cup
hot cooked	1/2 slice (1/2 ounce)	1 slice (1 ounce)	1 slice (1 ounce)
	1/3 cup**	3/4 cup***	
<b>Lunch or Supper</b>			
Milk, fluid	3/4 cup (4 ounces)	1 cup (8 ounces)	1 cup (8 ounces)
Meat or meat alternate (lean meat or poultry)	1 ounce	2 ounces	2 ounces
Cheese	1 ounce	2 ounces	2 ounces
Egg	1 large egg	1 large egg	2 ounces
Cooked dry beans or Peanut butter	3/8 cup	1/2 cup	1 large egg
Yogurt (plain or (Or an equivalent any combination of meat/meat alternates)	3 tbsp	4 tbsp	1/2 cup
Vegetable and/or fruit (total of two or more)	3/4 cup	1 cup	4 tbsp
Bread or bread enriched or whole	1/2 cup	3/4 cup	1 cup

\*\* 1/3 cup (volume) or 1/2 ounce (weight)

\*\*\* 3/4 cup (volume) or 1 ounce (weight)

\*\*\*\* Refer to Food Buying Guide "Grains and Breads" for equivalent quantities

(CASA-1)



APPENDIX E: DISASTER/EMERGENCY PREPAREDNESS

<b>DISASTER/EMERGENCY NUMBERS</b>	<b>CONTACT/TOWN</b>	<b>TELEPHONE NUMBER</b>
<b>AMBULANCE</b>		
<b>APPLIANCE REPAIR</b>		
<b>BUILDING INSPECTOR</b>		
<b>CHILD ABUSE HOT LINE</b>		1-800-482-5964
<b>CHILD CARE LICENSING UNIT</b>	Little Rock	1-800-445-3316 or 501-682-8590
<b>CLEANING/MAINTENANCE</b>		
<b>ELECTRIC COMPANY</b>		
<b>ELECTRICIAN</b>		
<b>EMERGENCY CHILD LOCATOR</b>		1-866-908-9572
<b>FACILITY DIRECTOR</b>		
<b>FIRE DEPARTMENT</b>		
<b>FIRE DEPARTMENT (Non-Emergency)</b>		
<b>GAS COMPANY</b>		
<b>GLASS COMPANY</b>		
<b>HEALTH DEPARTMENT (Local)</b>		
<b>HEATING/AIR CONDITIONING</b>		
<b>INSURANCE AGENT AND POLICY NUMBER</b>		
<b>LICENSING SPECIALIST</b>		
<b>LOCKS</b>		
<b>NATIONAL EMERGENCY FAMILY REGISTRY AND LOCATOR</b>		1-800-588-9822
<b>PLUMBER</b>		
<b>POISON CONTROL</b>		1-800-376-4766
<b>POLICE</b>		
<b>POLICE (Local Non-Emergency)</b>		
<b>RED CROSS (Local)</b>		
<b>SHERIFF</b>		
<b>TRASH REMOVAL</b>		
<b>WATER DEPARTMENT</b>		

## Child Care Immunization Requirements

Recommended by Arkansas Department of Health and  
Required by the Department of Human Services, Division of Child Care and Early Childhood, Licensing Division

<b>AGE</b>	<b>DTaP DTP/DT</b>	<b>POLIO</b>	<b>Hib **</b>	<b>HEPATITI S B</b>	<b>MMR ****</b>	<b>VARICEL LA ****</b>	<b>PNEUMOCO CCAL **</b>
<b>1-2 Months</b>	None	None	None	None (1-2 doses possible)	None	None	None
<b>3-4 Months</b>	1 dose	1 dose	1 dose	1 dose (1-2 doses possible)	None	None	1 dose
<b>5-6 Months</b>	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	None	None	2 doses <b>OR</b> 1 dose within last 8 weeks
<b>7-12 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None	None	2-3 doses <b>OR</b> 1 dose within last 8 weeks
<b>13-15 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None (1 dose possible)	None (1 dose possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)
<b>16-18 Months</b>	3 doses or 1 dose within last 8 weeks	2 doses or 1 dose within last 8 weeks (3 doses possible)	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	2 doses <b>OR</b> 1 dose within the last 8 weeks (3 doses possible)	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 2 doses on/after 1st birthday

<b>19-48 months</b>	4 doses <b>OR</b> 3rd dose within last 6 months <b>OR</b> 1 dose within last 8 weeks	3 doses <b>OR</b> 1 dose within last 8 weeks	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	3 doses *** <b>OR</b> 1 dose within last 8 weeks	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday
<b>49-72 Months</b>	5 doses * <b>OR</b> 4th dose within last 6 months <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 4 doses with last dose on/after 4th birthday	4 doses <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 3 doses with last dose on/after 4th birthday	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses <b>Not required on/after 5th birthday</b>	3 doses *** <b>OR</b> 1 dose within the last 8 weeks	1 dose	1 dose	3-4 doses with last dose on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday <b>Not required on/after 5th birthday</b>

\* **5th DTaP/DTP/DT** (Pre-school dose) must be given on/after the child's 4th birthday and may be given at any time from 49 to 72 months of age. Interval between 4th DTaP/DTP/DT and 5th DTaP/DTP/DT should be at least 6 months.

\*\* **For Hib and Pneumococcal**, children receiving the first dose of vaccine at age 7 months or older require fewer doses to complete the series.

\*\*\* **3rd dose of hepatitis B** should be given at least 8 weeks after the 2nd dose, at least 16 weeks after the 1st dose, and it should not be administered before the child is 24 weeks of age.

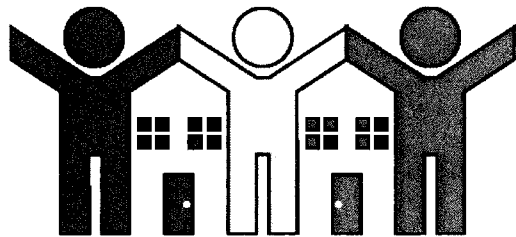
\*\*\*\* **MMR and Varicella** vaccine must be given on/after the child's first birthday.







**MINIMUM LICENSING  
REQUIREMENTS  
FOR  
Licensed Child Care  
Family Homes**



ARKANSAS DEPARTMENT OF HUMAN SERVICES  
DIVISION OF CHILD CARE AND EARLY CHILDHOOD EDUCATION  
CHILD CARE LICENSING UNIT  
P. O. BOX 1437, SLOT S150  
LITTLE ROCK, ARKANSAS 72203-1437  
(501) 682-8590



**Licensed Homes**



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# Minimum Licensing Requirements for Child Care Family Homes

## 100 CHILD CARE LICENSING

### 101 Related Laws and Requirements

1. "The Child Care Facility Licensing Act", Act 20-78-210-220, as amended, is the legal authority under which the Division of Child Care and Early Childhood Education prescribes minimum standards for a variety of child care facilities under the Act.
2. The Division of Child Care and Early Childhood Education (referred to hereafter as the Division) under the Department of Human Services is directly responsible for the inspection and evaluation of all licensed homes as defined in Section 102 of the Minimum Licensing Requirements for Child Care Family Homes.
3. The Division has the power to establish rules, regulations, and standards for licensing and operation of child care facilities. This includes all powers with respect to granting, revocation, denial and suspension of licenses. Decisions regarding special situations shall be made on an individual basis by the Division. Information regarding an appeal process is available upon request.
4. The Division works in coordination with local and state Health Departments, Fire Departments, City Planning or Zoning departments and the Boiler Division of the Department of Labor. Persons considering opening or expanding a family home shall immediately contact these individual departments for inspections and information on their separate regulations.

It is recommended that a prospective Licensee ~~should~~ request clarification regarding the codes or covenants enforced by these departments as some may prevent the operation of a child care family home at a particular location, may limit the number of children in care or may impose additional safety requirements.

5. It is recommended that the owner ~~should~~ be aware of applicable city or county zoning ordinances or codes or neighborhood covenants which may limit the number of children in care or impose additional safety requirements. The Division will share information on the location and status of licensed homes or applications for a license with any city or county that requests this information.
6. Child Care Licensing Unit will notify the applicable federal agency at any time they become aware of or are advised of violations of any of the following or similar laws. It is recommended that the owner ~~should~~ be aware of applicable federal laws which may affect the operation of the facility, such as, but not limited to:
  - a. Americans with Disabilities Act (ADA).

- b. Environmental Protection Agency (EPA) regulations to ensure that any renovation or repair work on a home, child care facility, or school that was constructed prior to 1978 shall be completed by a contractor that is certified by the Environmental Protection Agency (EPA), when the repairs and/or renovations consist of any or all of the following: the repair or renovation disturbs six (6) or more square feet of the interior, the repair or renovation disturbs twenty (20) or more square feet of the exterior, and/or the repair or renovation involves removing a window.
  - c. Federal civil rights laws state that a facility may not discriminate on the basis of race, color, sex, religion, national origin, physical or mental handicap, or veteran status.
7. The Licensee shall maintain Child Care Liability insurance and comply with the following requirements:
- a. Prior to approval of an application, the applicant shall provide verification of the required coverage to the Licensing Specialist and provide subsequent verification when requested. (Homes licensed prior to the effective date of this revision shall have ninety (90) days to comply with this requirement.)
  - b. Maintain the minimum amount of \$100,000 per occurrence

**Laws relevant to the operation of child care facilities are available upon request.**

## **102 General Requirements**

1. A Child Care Family Home is defined as a situation in which children are cared for in a caregiver's own family residence or in some other suitable family type residence. There shall be no more than one license issued per home/structure. (This does not apply to situations such as duplex where two licenses could be issued to two separate applicants.)
2. In determining a recommendation for licensing the home shall be reviewed by a Child Care Licensing Specialist to determine that the home is in substantial compliance with the requirements.
3. Substantial Compliance means compliance with all essential standards necessary to protect the health, safety and welfare of the children attending the Child Care Family Home. Essential standards include but are not limited to those relating to issues involving fire, health, safety, nutrition, behavior guidance, staff/child ratio and space.
4. A home requires licensing when one (1) or more persons care for six (6) or more children, from more than one (1) family at the same time. A maximum of sixteen (16) children may be cared for with a Child Care Family Home license.
5. An individual shall be eligible to hold only one license, which shall be issued for one location. The holder(s) of the license shall be considered the primary caregiver(s) and shall be present and responsible for children during hours of care. At least one of the licensees (primary caregivers) shall be present at all times children are in care and shall not be otherwise employed during the hours of care.



6. If a qualified secondary caregiver is present, the primary caregiver may be absent for reasons related to the operation of the childcare business such as attending required training, and for brief and/or occasional absences relating to personal business or personal time off. Compliance with staff to child ratio must still be maintained during the absence of the primary caregiver.
7. The caregiver's own preschool children shall be considered when determining the need for a license. The caregiver's own school age children are not considered when determining the need for a license. Other children in the home who are not accompanied by a parent, whether pay is received for care or not, are considered in determining the need for a license and will be counted in the ratio after a license is obtained.
8. A Child Care Family Home, which is not required to be licensed by this definition, may voluntarily choose to apply for a license or for registration with the Voluntary Registry.
9. Any home that has not provided care to children for a period of one year shall have the license closed unless a written request is made by the licensee stating why closure should not take place. If the Licensee requests that the license remain open, license fees and required annual inspections shall be kept current.

### **103 Licensing Procedures**

1. Any applicant applying for a home license may contact the local Division Office or Child Care Licensing Specialist to obtain information and/or the necessary application and related forms.
2. The primary caregiver in the home shall submit the following to complete the application process:
  - a. A completed and signed application on a form provided by the Division
  - b. Diagram of the home
  - c. Fire department approval, if applicable
  - d. Health department approval, if applicable
  - e. Zoning approval, if applicable, shall be provided by new applicants for license and by existing homes requesting increase in licensing capacity
  - f. Boiler inspection, or verification that inspection has been scheduled
  - g. Verification of Child Care Liability insurance (if Child Care Liability Insurance cannot be obtained before application, it must be obtained with proof provided to the Child Care Licensing Unit **before** care of children can be provided)
  - h. Verification of all required criminal background checks and child maltreatment central registry checks being initiated.
  - i. All caregiver's names shall be included on the application for the license.
  - ~~j. A reasonable plan with a proposed budget for the financial support of the home covering costs of staffing, building (including rent or mortgage and repairs), utilities, equipment, safety, and nutrition.~~

3. A pre-approval consultation meeting shall be required for all applicants for a license prior to the approval of the application. This meeting shall be offered prior to application or within thirty (30) days of receipt of the application.
4. Upon receipt of a signed application the Child Care Licensing Specialist shall schedule an appointment to inspect, evaluate, and make a recommendation for consideration of license to the Division.
5. The Child Care Licensing Unit shall have the authority to make both scheduled and unscheduled visits to:
  - a. Conduct inspections and reviews to determine compliance with the licensing requirements.
  - b. Investigate complaints involving possible violations of licensing requirement.
  - c. Offer consultation and technical assistance.
6. Compliance: On-site inspections of Licensed Child Care Family Homes are conducted by the Child Care Licensing Unit on a routine basis to determine a home's continued compliance with the standards. The caregiver(s) shall cooperate with licensing staff during licensing visits and investigations. (**Clarification:** In addition to rooms used for care, Child Care Licensing Staff must also be given access to all other rooms or spaces not used for child care. Any rooms or areas that are not accessible to children in care will only be viewed briefly for major health and safety issues and will not be routinely monitored for general licensing compliance. This is to help insure that there are no dangers such as fire hazards, which could impact the safety of the entire structure.)
 

Violations of rules are documented in writing by use of the licensing compliance record. Documentation shall include:

  - a. Reference to the specific rule violated
  - b. A factual description of the nature and the violation and how the home failed to comply
  - c. A date of expected corrections
7. If video recordings are made by the facility, and are maintained for viewing as a part of a continuous monitoring system, they shall be made available to licensing staff upon request. This does not include video recordings of special events, etc.
8. The license as issued shall apply only to the home's location at the time of licensing. The licensee shall notify the Child Care Licensing Specialist's office of a change of location or ownership at which time a new study shall be conducted. Upon issuance of a license, the license shall remain in effect as long as compliance is maintained with the Minimum Licensing Requirements for Child Care Family Homes.
9. New Provisional License--If the Division Staff finds that an applicant meets the licensing requirements for a Child Care Family Home or has a reasonable expectation of correcting

deficiencies in a reasonable time, the Child Care Licensing Specialist may recommend a new provisional license for operation of a child care family home to the Division. The new provisional license shall be in effect for a reasonable period, not to exceed twelve (12) months. This time frame shall be specified in the new provisional license. A written list of deficiencies shall be provided to the applicant at the time of issuance of a new provisional license. A Licensing Specialist has sixty (60) days to submit a recommendation to the Division for a provisional license.

10. Regular License: The Child Care Licensing Specialist will recommend a regular license when the facility has demonstrated substantial compliance, or when an existing Licensee with a Regular license relocates their facility and their past demonstrates a substantial level of compliance.
11. Probationary Provisional License: The Licensing Unit may issue a Probationary Provisional license when the Home is not maintaining substantial compliance due to deficiencies which are so numerous, frequent or severe as to potentially jeopardize the health, safety, and welfare of children. The home and the Licensing Unit shall have a corrective action plan in place addressing the issues.

Based on the level of compliance during the period of the Probationary Provisional license the Licensing Unit may:

- a. Issue a Regular license
- b. Suspend a license
- c. Revoke a license

12. Suspension of License--Upon final determination by the Division of a suspension of a license, the Division shall specify in the suspension order the period of the suspension. (The suspension of a license may range from one (1) month to a maximum of twelve (12) months. The license may be reinstated at such time as the Division finds that the terms of the suspension order have been met.)
13. The Division may revoke a license when any of the following situations occur:
  - a. The facility fails to maintain substantial compliance with licensing requirements.
  - b. The facility fails or refuses to correct cited deficiencies in a timely manner.
  - c. The facility fails to insure the health, safety and welfare of children in care.
14. The revocation of a license nullifies and cancels the license. At the time of a final determination of revocation of the license by the Division, the Division shall specify in the revocation letter the terms of the revocation. The licensee shall not be eligible to reapply for a license for a minimum of one year or longer, if specified in the revocation order. Related parties shall not be eligible to apply for the same specified period. (Related parties are defined as immediate family members, members on Board of Directors, persons or entities associated or affiliated with, or which share common ownership, control, or common board members or which have control of or is controlled by the licensee. An immediate

family member is defined as a spouse, step and in-law relationships, a child, a natural or adoptive parent, a sibling, a grandparent, a grandchild or a son or daughter-in-law.) Applicants who are denied a license or registration due to this requirement may appeal the denial to the Child Care Appeal Review Panel. Homes wishing to be re-licensed must submit a new application for licensure for review and approval by the Division. Approval must be obtained and a new license issued before the home provides care to a licensable number of children.

#### **104 License Fees**

1. A Child Care Family Home shall be assessed a license fee of \$15.00 per year.
2. Upon review and determination by the Child Care Licensing Specialist of a licensing recommendation to be presented to the Division, the Child Care Licensing Specialist shall issue a Notice of License Fee Due to the home.
3. The Division shall not issue a license unless the required license fee has been paid.
4. A copy of the license fee notice shall be submitted at the time of licensure recommendation.
5. A second notice of license fee due will be sent to homes failing to submit the required license fee (Notice of License Fee Past Due). This notice will be sent twenty (20) days after the initial notice of fee due. Failure to submit a license fee within twenty (20) days of the receipt of the past due notice will result in action to suspend the license until such time as the fee is paid.
6. Refunds of license fees paid are made only when the Division does not approve issuance of a license. There shall be no refunds of license fees paid upon Division action to revoke or suspend a license or for closure of a facility.

#### **105 Appeal of Licensing Actions**

1. A licensee or application for license may request an appeal of any of the following licensing action:
  - a. Adverse licensing actions (revocation or suspension of a license, conversion to a provisional license or denial of an application for license)
  - b. Founded licensing complaints
  - c. Denials of alternative compliance requests
  - d. Cited noncompliance with the published standards
2. An appeal may be initiated on any of the above actions by requesting an appeal in writing to the Licensing Specialist or Licensing Supervisory Staff. Requests to appeal adverse licensing actions must be mailed within ten (10) calendar days of the receipt of the notice of the adverse action. Requests to appeal licensing actions, other than adverse, must be mailed within twenty (20) calendar days from receipt of the notification of the action. The request

to appeal shall include a statement of the action(s) taken by the Division and the reason(s) the licensee or applicant for license disagrees with that action. The request to appeal will be reviewed by the Licensing Supervisor and the Licensing Administrator. If the appeal is not resolved to the satisfaction of the licensee or applicant for license, the matter will be referred to the Child Care Appeal Review Panel for hearing. **(Additional information regarding the appeal procedures and the Child Care Appeal Review Panel is available on request.)**

### **106 Alternative Compliance**

1. The Division may grant alternative compliance with the Minimum Licensing Requirements for Child Care Family Homes if the Division determines that the alternative form of compliance offers equal protection of health, safety and welfare to children and meets the basic intent of the requirement for which the Home is making the request.
2. The Division shall consider all requests for alternative compliance with the Licensing Requirements except those requirements which are enforced by the Department of Health, Local Fire Marshal or State Fire Marshal's Office.
3. To request alternative compliance, the following procedure shall be initiated by the person responsible for the operation of the home:
  - a. The applicant/licensee shall submit the request for alternative compliance in writing.
  - b. The request shall include
    - The specific standard for which alternative compliance is sought;
    - An explanation of how the alternative form of compliance is equal to or exceeds the stated requirement
    - Full justification and description of what the alternative compliance method will be and the method by which the facility will carry out this plan to be able to continue to provide for the health, safety, and welfare of children as intended by the requirement; and
    - The applicant/licensee shall provide clear and supportive evidence, and upon request of the Division, an expert's opinion on the effect to the health, safety and welfare of children and how it will protect through the alternative means of compliance
4. A separate written request shall be submitted for each requirement for which alternative compliance is sought. The approved alternative compliance is effective for the duration of the license unless a shorter time frame is requested or approved.
5. The granting of alternative compliance for a requirement shall in no way constitute a precedent. If an alternative means of complying with the requirement is granted by the Division and the facility fails to implement satisfactorily this alternative means, the original requirement for which alternative compliance was sought shall become immediately enforceable.
6. The Division shall have the right to obtain an expert opinion to corroborate expert opinions

provided by the applicant/licensee.

7. The Division reserves the right to deny requests for alternative compliance when it finds that such request does not adequately protect the health, safety, and welfare of children and does not meet the intent of the requirements.
8. All requests for alternative compliance shall be answered in writing by the Division.

### **107 Licensing Investigations**

1. Child Care Licensing staff shall have access to licensed homes for the purpose of conducting inspections, reviews, and complaint investigations. Denial of access to the home or denial of the right to interview children in care or other individuals present during hours of care may result in adverse action against the license.

### **108 Child Maltreatment Record Checks**

1. The following persons shall be required to have their background reviewed through an Arkansas Child Maltreatment Central Registry Check: (A check or money order for ~~\$10.00~~, payable to Department of Human Services, must be attached to each notarized form.)
  - a. Each applicant to own or operate a licensed home at application and every 2 years thereafter
  - b. All household members who are ~~18~~ 10 years of age or older at application; upon residency and every 2 years thereafter
  - c. Staff members and applicants for employment in a licensed home at application or within 10 days of hire and every 2 years thereafter
  - d. Volunteers who have access to children in the home At application and every 2 years thereafter
  - e. Student Observers At beginning of observation or within 10 days of first observation and every 2 years after that if applicable
  - f. Therapist or other persons who have supervisory or disciplinary control over children, or have routine contact with children at the time they begin to provide services or begin to participate in home activities and every 5 years thereafter
2. The Division has the authority to review and consider each true (founded) report of child maltreatment received from the Central Registry. The Division shall retain the authority to:
  - a. Deny an application

- b. Require corrective action
  - c. Take appropriate adverse action against the license
3. All caregiver(s) are mandated reporters under the Child Maltreatment Act. The caregiver(s) shall notify the Child Maltreatment Hot Line number at 1-800-482-5964 when there is a reason to believe that a child has been abused or neglected. (AR Code Annotated 12-12-501 et seq.) These reports of child maltreatment shall include all allegations made to the licensee by parents, staff members or the general public. It is recommended that the licensee ~~should~~ call Child Care Licensing for guidance if there is any question about whether or not the Hot Line should be called regarding any situation where potential child maltreatment is involved.
  4. If a complaint of child maltreatment is filed against any employee or persons in the home, the Child Care Licensing Unit shall evaluate the risk to children and determine the suitability of persons to supervise, be left alone with children or remain in the home during hours of care until the allegations have been determined true or unsubstantiated.
  5. The Child Care Family Home operator, any employees or other persons in the Home who have had a true report of child maltreatment shall follow the corrective action plan approved by the Child Care Licensing Unit. Corrective action measures may vary from relevant training to reassignment or termination. Failure to comply with corrective action plans can constitute grounds for adverse action against the license.

## 109 Criminal Record Checks

1. The following persons shall apply to the Identification Bureau of the Arkansas State Police for a nationwide criminal records check, to be conducted by the FBI, which shall include a fingerprint check: (The individual is responsible for the ~~\$16.50~~ cost of the nationwide check.)

Fingerprints submitted will be used to check the criminal history records of the FBI. Individuals with results showing a prohibited offense shall be advised to contact the Licensing Unit for procedures to obtain the results and for procedures to update or make corrections to the record of their individual history.

- a. Each applicant to own or operate a licensed home. initial application only
  - b. Each staff member who has not been a resident of the State of Arkansas for the five (5) preceding years within 10 days of hire or
  - c. Volunteers who have routine contact with children if the person has not been a resident of the State of Arkansas for the five (5) preceding years. within 10 days of hire or start date
  - d. Therapist or other persons who have supervisory or disciplinary control over children, or have routine contact with children if the person has not been a resident of Arkansas for 5 years, then at the time they begin to provide services or begin to participate in home activities
2. The following persons shall be required to have their background reviewed through criminal records check including the Arkansas Sexual Offender Registry, conducted by the Arkansas State Police:
    - a. Each applicant to own or operate a licensed home at application and every 5 years thereafter
    - b. All household members who are 18 years of age or older at application; upon residency and every 5 years thereafter
    - c. Staff members and applicants for employment in a licensed home within 10 days of hire and every 5 years thereafter
    - d. Volunteers who have routine contact with children within 10 days and every 5 years thereafter
    - e. Therapist or other persons who have within 10 days of the time they begin to



supervisory or disciplinary control over children, or have routine contact with children

provide services or begin to participate in center activities and every 5 years thereafter

3. Criminal records will be returned to the division for review. Any charge/convictions listed in this section (Section 110) that are returned will be considered regardless of whether the record is expunged, pardoned or otherwise sealed.
4. No person shall be eligible to be a child care facility owner, operator, ~~or~~ employee, household member, or volunteer who is in the home on a routine/continual basis ~~visitor or guest or~~ if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are permanently prohibited:

01. Abuse of an endangered or impaired person, if felony	§5-28-103
02. Arson	§5-38-301
03. Capital Murder	§5-10-101
04. Endangering the Welfare of an Incompetent person- 1 <sup>st</sup> degree	§5-27-201
05. Kidnapping	§5-11-102
06. Murder in the First degree	§5-10-102
07. Murder in the Second degree	§5-10-103
08. Rape	§5-14-103
09. Sexual Assault in the First degree	§5-14-124
10. Sexual Assault in the Second degree	§5-14-125

5. No person shall be eligible to be a child care facility owner, operator, ~~or~~ employee, volunteer, or household member, ~~visitor or guest~~ if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are prohibited:

01. Criminal Attempt to commit any offenses in MLR Section 110	§5-3-201
02. Criminal Complicity to commit any offenses in MLR Section 110	§5-3-202
03. Criminal Conspiracy to commit any offenses in MLR Section 110	§5-3-401
04. Criminal Solicitation to commit any offenses in MLR Section 110	§5-3-301
05. Assault in the First, Second, or Third degree	§5-13-205 - §5-13-207
06. Assault, Aggravated	§5-13-204
07. Assault, Aggravated on a Family or Household Member	§5-26-306
08. Battery in the First, Second, or Third Degree	§5-13-201 - §5-13-203
09. Breaking or Entering	§5-39-202
10. Burglary	§5-39-201
11. Coercion	§5-13-208
12. Computer Crimes Against Minors	§5-27-601 et. seq.
13. Contributing to the Delinquency of a Juvenile	§5-27-220

14. Contributing to the Delinquency of a Minor	§5-27-209
15. Criminal Impersonation	§5-3-208
16. Criminal Use of a Prohibited Weapon	§5-73-104
17. Death Threats Concerning a School Employee or Students	§5-17-101
18. Domestic Battery in the First, Second, or Third Degree	§5-26-303 - §5-26-305
19. Employing or Consenting to the Use of a Child in a Sexual Performance	§5-27-402
20. Endangering the Welfare of a Minor in the First or Second Degree	§5-27-205 and §5-27-206
21. Endangering the Welfare of an Incompetent Person in the First or Second Degree	§5-27-201 and §5-27-202
22. Engaging Children in Sexually Explicit Conduct for Use in Visual or Print Media	§5-27-303
23. False Imprisonment in the First or Second Degree	§5-11-103 and §5-11-104
24. Felony Abuse of an Endangered or Impaired Person	§5-28-103
25. Felony Interference with a Law Enforcement Officer	§5-54-104
26. Felony Violation of the Uniform Controlled Substance Act	§5-64-101 - §5-64-508 et. seq.
27. Financial Identity Fraud	§5-37-227
28. Forgery	§5-37-201
29. Incest	§5-26-202
30. Interference with Court Ordered Custody	§5-26-502
31. Interference with Visitation	§5-26-501
32. Introduction of Controlled Substance into Body of Another Person	§5-13-210
33. Manslaughter	§5-10-104
34. Negligent Homicide	§5-10-105
35. Obscene Performance at a Live Public Show	§5-68-305
36. Offense of Cruelty to Animals	§5-62-103
37. Offense of Aggravated Cruelty to Dog, Cat, or Horse	§5-62-104
38. Pandering or Possessing Visual or Print Medium Depicting Sexually Explicit Conduct Involving a Child	§5-27-304
39. Patronizing a Prostitute	§5-70-103
40. Permanent Detention or Restraint	§5-11-106
41. Permitting Abuse of a Minor	§5-27-221
42. Producing, Directing, or Promoting a Sexual Performance by a Child	§5-27-403
43. Promoting Obscene Materials	§5-68-303
44. Promoting Obscene Performance	§5-68-304
45. Promoting Prostitution in the First, Second, or Third Degree	§5-70-104 - §5-70-106
46. Prostitution	§5-70-102
47. Public Display of Obscenity	§5-68-205
48. Resisting Arrest	§5-54-103
49. Robbery	§5-12-102
50. Robbery (Aggravated Robbery)	§5-12-103
51. Sexual Offense (any)	§5-14-101 et. seq.
52. Simultaneous Possession of Drugs and Firearms	§5-74-106
53. Soliciting Money or Property from Incompetents	§5-27-229
54. Stalking	§5-71-229
55. Terroristic Act	§5-13-310
56. Terroristic Threatening	§5-13-301

57. Theft by Receiving	§5-36-106
58. Theft of Property	§5-36-103
59. Theft of Services	§5-36-104
60. Transportation of Minors for Prohibited Sexual Conduct	§5-27-305
61. Unlawful Discharge of a Firearm from a Vehicle	§5-74-107
62. Voyeurism	§5-16-102

6. If the licensee wishes to employ an individual with a conviction or plea of guilty or nolo contendere for the following nonviolent offenses, they shall submit a written request for a waiver prior to employment. (§ 20-38-103 (e) (3) (A) Act 990 of 2013)
- a. Theft by receiving § 5-36-106
  - b. Forgery § 5-37-201
  - c. Financial identity fraud § 5-37-227
  - d. Resisting arrest § 5-54-103
  - e. Criminal impersonation in the second degree § 5-37-208(b)
  - f. Interference with visitation § 5-26-501
  - g. Interference with court-ordered visitation § 5-26-502
  - h. Prostitution § 5-70-102
  - i. Patronizing a prostitute § 5-70-203

The waiver may be approved if all of the following conditions are met:

- The individual has completed probation or parole supervision
- The individual has paid all court ordered fees, fines and/or restitution
- The individual has fully complied with all court orders pertaining to the conviction or plea

7. The waiver will be revoked if after employment the individual pleads guilty or nolo contendere or is found guilty of any prohibited offense (including the list above a-i) or has a true or founded report of child maltreatment or adult maltreatment in a central registry.
8. The request for waiver and certification of approval shall be kept in the individual's file for the term of employment and three years after termination of employment.
9. If approved, the waiver is not transferable to another licensed facility.
10. Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed above (Section 109.5), may not work in child care unless:
- a. The date of the conviction, plea of guilty or nolo contendere for a misdemeanor offense is at least five (5) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the five (5) year period preceding the background check request
  - b. The date of the conviction, plea of guilty or nolo contendere for a felony offense is at least ten (10) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the ten (10) year period preceding the background check request.

11. Anyone employed in a licensed center, COE center, licensed child care family home or a registered child care family home prior to 9/1/2009 with a clear background check history may remain eligible for employment unless the employee had a conviction, plead guilty, or plead nolo contendere to an offense listed in the above section (Section 109.5) since 9/1/2009.

## **200 ADMINISTRATION**

### **201 Administrative Procedures**

1. All staff, children and home records shall be kept and made available to the Child Care Licensing Unit on request.
2. Falsification of any document or the submission of false information to the Child Care Licensing Unit, or any other unit of the Division, may constitute grounds for revocation of the license. (Falsification means the submission of untrue information, whether by statement or omission.)
3. All applicable health and fire regulations shall be met (see Regulation 301.4).
4. The home shall not exceed its licensed capacity at any time (see Regulation 801.3).
5. The caregiver shall provide prudent supervision of all staff and other persons in the home, and is responsible for the health, welfare, and safety of the children in care.
6. The facility shall provide a written procedure for reporting suspected of child maltreatment. This procedure shall be followed and a call made to the Hot Line whenever there is a suspicion of child maltreatment (1-800-482-5964). These reports of child maltreatment shall include all allegations made to the licensee by parents, staff members or the general public. ~~The licensee should call Child Care Licensing for guidance if there is any question about whether or not the Hot Line should be called regarding any situation where potential child maltreatment is involved.~~
7. The facility shall provide a written procedure for reporting suspected licensing violations. Serious licensing violations shall be reported to the Licensing Unit. These include, but are not limited to, violations relating to transportation, inappropriate behavior guidance, leaving children unattended or unsupervised, staff/child ratio violations or any other violations or any other violation that could imminently affect the health and safety of children.
8. Parents shall be informed in writing upon enrollment of their child that children may be subject to interviews by licensing staff, child maltreatment investigators, and/or law enforcement officials for the purpose of determining licensing compliance or for investigative purposes. Child interviews do not require parental notice or consent.
9. The facility shall provide a copy of the list of Kindergarten Readiness Skills Calendar or

Checklist, prepared by the Arkansas Department of Education (copies can be requested online, by phone, or by mail from the DHS DCCECE Program Support Unit), to the parents of all three (3) and four (4) year old children enrolled. (Act 825 of 2003) A statement signed by the parent that they have received a copy of the list, shall be maintained in the child's record.

10. The caregiver shall not release a child to anyone whom is not immediately recognized as the child's parent or as someone on the authorized pick-up list unless:
  - a. The individual can provide an official picture ID AND
  - b. The person in charge can match the ID to the individual named on the child's data sheet
11. Verification of permission for persons not on the authorized list shall be obtained by the caregiver by calling the parent, at a number listed in the child's record. The caregiver shall view an official picture ID of the individual to verify identity.

## 300 PERSONNEL

### 301 Staff/Child Ratios

<b>Adult Caregiver(s)</b>	<b>Number of Children</b>	<b>Ages of Children</b>
<b>301.1</b>  <b>ONE</b>	A. 3-6	0-up (no more than 3 under 2 years)
	B. 7	0-up (no more than 2 under 2 years)
	C. 8	0-up (no more than 1 under 2 years)
	D. 9	2-up (no more than 3 between 2 & 3 years)
	E. 10	3-up
<b>301.2</b>  <b>TWO</b>	A. 3-6	0-up
	B. 7	0-up (no more than 4 under 2 years)
	C. 8	0-up (no more than 4 under 2 years)
	D. 9	0-up (no more than 4 under 2 years)
	E. 10-14	0-up (no more than 4 under 2 years)
	F. 15-16	0-up (no more than 2 under 2 years)
<b>301.3</b>  <b>THREE</b>	A. 7	0-up (no more than 5 under 2 years)
	B. 8	0-up (no more than 5 under 2 years)
	C. 9	0-up (no more than 5 under 2 years)
	D. 10-14	0-up (no more than 5 under 2 years)
	E. 15-16	0-up (no more than 4 under 2 years)

4. Fire inspection is mandatory for homes licensed for eleven (11) or more children. Health inspection (food service) is mandatory for homes licensed for eleven (11) or more children.
5. The caregiver shall be responsible for children in care at all times and shall exercise prudent supervision.

- a. When a caregiver is not in the same room with children the children shall be frequently observed and the caregiver shall remain close enough to easily hear them.
  - b. Doors to rooms where children are sleeping or playing within the home shall remain open and sleeping children shall be visually monitored and periodically checked to insure they are breathing normally.
  - c. The caregiver shall be present on the outdoor play area at all times when any children under age five are present. ~~The caregiver may allow children, ages five (5) and up, to be on the outdoor play area without the caregiver being present as long as the caregiver visually observes the children at least every five (5) minutes and remains in a section of the home where he/she can hear and see the children and reach them quickly in case of an emergency.~~
6. The caregiver shall not leave children unattended in the kitchen area of the home while any cooking is occurring.
  7. Ironing shall not occur in the presence of the children.
  8. The primary caregiver's own preschool children shall be included in the caregiver/child ratio. The primary caregiver's own school age children are not considered in the ratio.
  9. A licensed home may care for two (2) school age children for a short time not to exceed a total of three (3) hours per day before and/or after a school day. These two (2) children shall not be counted in the caregiver to child ratio. School age children who are in care at times other than before and/or after a school day shall be included in the caregiver to child ratio. These same two (2) children may stay all day in care and not be counted in the ratio due to emergency school closings, such as inclement weather. The home's capacity shall not be exceeded other than the above stated exemptions. If the attendance exceeds ten (10), fire approval is required.
  10. Additional staff provisions shall be made for enrollment of children with disabilities who require individual attention.

**302 Homes specializing in Infant Care: Staff/Child Ratio**

1. Homes specializing in infant care shall maintain a 1:3 ratio.
2. Homes specializing in infant care shall have a Fire Department inspection and approval.

**303 Caregiver Qualifications and Responsibilities**

1. The primary caregiver shall be twenty-one (21) years or older. A secondary caregiver shall be age eighteen (18) or older.
2. Primary caregivers, licensed after November 1, 2002, and all secondary caregivers, ~~newly licensed after November 1, 2002,~~ shall have a high school diploma or GED. ~~or shall obtain~~

~~one of the following within the first year of licensure; a GED, a Caregiver Certification, or a Specialist Certificate. Secondary caregivers who are left alone with children shall be able to read and write well enough to keep required records, read the licensing requirements and administer medication. If a diploma or proof of a GED is not available, a reasonable attempt to obtain a copy shall be documented.~~

3. The primary caregiver shall not be otherwise employed during the time he/she is responsible for children in the home. Employment at other times shall not affect the quality of care given to the children. When two persons are listed as joint holders of the license and are both primary caregivers, at least one shall be present in the home while children are in care. (Also refer to Regulation 102.6).
4. A caregiver shall not use profanity or speak in an abusive manner when children are present. The caregiver shall also cooperate with licensing staff during licensing monitor visits.
5. The caregiver shall have a person who would be able to care for the children in the event of an emergency.
6. All caregivers who work directly with children shall obtain at least fifteen (15) hours of training registered with the Division of Child Care and Early Childhood Education Professional Development Registry, or Department of Education or Department of Higher Education approved ~~in-service training or outside workshop~~ training each year in continuing early childhood education. ~~This training shall be approved by the Division (Act 584 of 1993).~~
7. ~~At least one (1) caregiver who has current certification by the American Heart Association or the American Red Cross in infant and child cardiopulmonary resuscitation (CPR) and at least one (1) caregiver who has a current certification from the American Heart Association or the American Red Cross in First Aid shall be present within the confines of the home while children are in care. Adult CPR is also required if school age children are in care, or documentation that the current certification covers the ages of children in care. Infant/Child/Adult CPR certification will also be accepted from the AR Department of Labor, with documentation they conducted the course. Certifications may be held by the same person.~~

At least one caregiver who has a current certificate of successful completion of first aid and CPR from an approved organization shall be on site at all times.

- a. The curriculum shall conform to current American Heart Association or American Red Cross guidelines.
- b. The curriculum shall require hands on, skill-based instruction, as well as ~~written and~~ practical testing. Training and certification that is provided solely "on-line" will not be accepted.



- c. The instructor shall be qualified and authorized to teach the curriculum and shall be certified by a nationally recognized organization. (Including but not limited to: Health and Safety Institute; EMS Safety Services, Inc.)
8. ~~All caregivers shall provide a tuberculin test annually.~~ All caregivers shall be physically and emotionally able to care for children.
9. Child Care Licensing may require a physician's statement for any caregiver anytime behavioral or physical indicators warrant.
10. Staff shall not engage in behavior that could be viewed as sexual or as dangerous, exploitative or physically harmful to children. A caregiver shall not use profanity or speak in an abusive manner when children are present.
11. No caregiver shall consume or be under the influence of illegal drugs. (A drug test may be required if there is reasonable cause to suspect violation of this requirement and the issue cannot be otherwise resolved.) No caregiver shall consume or be under the influence of alcohol while delivering care. No caregiver shall consume or be under the influence of medications (prescription or non-prescription), which impair his/her ability to provide care.
12. Newly licensed caregivers shall attend Family Child Care Provider Training and BAS (Business Administration Scale) training (or other approved tools that are considered equivalent in the state's QRIS) within the first six (6) months of being licensed.
13. The licensee shall notify the Licensing Unit within five (5) calendar days of any change in the person(s) designated as secondary caregivers.

### **304 Adults in the Home**

1. The caregiver(s) shall provide a clear statement regarding the presence of any other adults eighteen (18) years of age and above who remain in the home during any hours in which care is being given. Such persons shall not present a threat to the safety or welfare of children.
2. The home shall have additional staff when there are persons in the home who require constant or routine care.
3. ~~Any adult(s) in addition to the caregiver(s) present in the home on a regular basis while children are in care shall provide an annual tuberculin test verifying that the adult is free from TB.~~

### **305 Student Observers**

1. Students visiting the Home on a regular or periodic basis to observe classroom activities or for other similar purposes shall not be counted in the staff/child ratio, shall not have disciplinary control over children and shall not be left alone with children. These individuals

shall have the following documentation on file:

- a. Child maltreatment background check
  - ~~b. A health care or physician's statement showing the absence of contagious tuberculosis~~
2. Students that are conducting practicum, student teaching, or working in the same capacity as an employee or volunteer must meet the criteria in the appropriate section. (Sections 304 and 305)

## **400 PROGRAM AND ACTIVITIES**

### **401 Program Requirements**

1. There shall be a posted daily schedule, ~~available for review by parents and Licensing staff,~~ posted, which includes age-appropriate activities, including alternating periods of active play and quiet activities throughout the day.
2. Staff shall plan and provide experiences that meet children's needs and stimulate learning in ~~all six~~ the following developmental areas: physical, social/emotional, creative/aesthetic, cognitive/intellectual and language ~~/literacy and cultural~~, found in the "Arkansas Early Childhood Frameworks." ~~(Learning standards.)~~ (Experiences that promote self-concept development for infant/toddlers shall also be provided if that age group is in care.)
3. There shall be meaningful interaction between staff and children, to include but not limited to the following:
  - a. Comfort children who are upset;
  - b. Engage in frequent, multiple and rich social interchanges such as smiling, talking, touching, and singing;
  - c. ~~Be play partners as well as protectors;~~ Interact with children by being their play partner as well as protector.
  - d. ~~Be attuned to children's feelings and reflect them back;~~ Help children identify and label feelings by being attuned to children's needs.
  - e. Communicate consistently with parents/guardians;
  - f. Interact with children and develop a relationship in the context of everyday routines.
4. The caregiver(s) shall not engage in activities or experiences which may be damaging to children's self-esteem and positive self-image.
5. There shall be an opportunity for a supervised rest period that does not exceed two hours.
  - a. ~~Does not exceed two (2) hours.~~
  - b. ~~Does not force children to remain on cot or mat if they do not fall asleep, and allows them to participate in a quiet activity that does not disturb the children who are asleep.~~
6. There ~~should~~ shall be an opportunity for a supervised rest period. ~~that:~~

- a. The supervised rest period shall be at least one hour but shall ~~Does not~~ exceed two hours.
  - b. ~~Does not force children to remain on cot or mat if they~~ If children do not fall asleep, ~~and allows them~~ they shall be allowed to participate in a quiet activity either on their cots, in the area or in another room under direct supervision ~~that does not disturb the children who are asleep.~~
7. There shall be a total of at least one (1) hour of outdoor play per day in suitable weather. When making a determination if children should play outside, staff shall consider the following environmental factors:
    - a. When the heat index is forecast to be ninety (90) degrees or above, it is recommended that outdoor play ~~should~~ be scheduled during early morning hours or the length of time spent outdoors should be reduced to avoid heat stress.
    - b. When outdoor play occurs during the hotter part of the day, it is recommended that children ~~should~~ have a shaded area, an ample supply of water and should be monitored closely for signs of heat stress.
    - c. When outdoor play occurs during the winter months and when temperatures are extremely cold, it is recommended that the time scheduled for outdoor play ~~should~~ be reduced or suspended depending on the temperature and other weather conditions.
  8. There shall be a total of ~~one hour~~ 30 minutes per day of moderate to vigorous physical activity. This could be included in outdoor play time if it meets this criterion.
  9. Indoor activity equipment shall be adequate for the number and ages of children in the home to meet their physical and developmental needs.
  10. Children shall have a variety of toys, books, ~~and~~ creative materials and equipment that is easily accessible and arranged to support learning. This includes equipment for:
    - a. Large muscle activities (such as climbing and running)
    - b. Manipulative activities (such as things done with the hands)
  11. The use of television, DVD, video cassette viewing and computer/video games and other screen time activities shall meet the following requirements;
    - a. Shall be limited to programs which are age-appropriate (It is recommended that programs ~~should~~ have educational value.)
    - b. Shall not exceed one (1) hour daily per child or group of children. Children shall not be required to participate in screen time activities and shall be offered other choices. (Viewing time may be extended for special events or occasions such as a current event, holiday or birthday celebration or for the occasional viewing of age appropriate movies or other programs that may exceed one hour in length.)
    - c. Computer learning periods for children below age 5 may not exceed two (2) hours a day per child or group of children

12. A verbal or written system of communication shall be used by caregivers to share with parents or guardians day-to-day happenings, such as significant changes in a child's physical or emotional state or information regarding any known cuts, bruises, or injuries that may require attention or evaluation by a physician.
13. It is recommended that the caregiver ~~should~~ encourage parents to be involved in planning and participating in activities at the child care family home.
14. The caregiver shall distribute materials developed or approved by the Department of Health on prevention of Shaken Baby Syndrome to all parents of infants, upon enrollment. (Carter's Law, Act 1208)
15. Photos or video recordings shall not be made of any child without prior written parental permission.
16. Photos or video recordings of children shall not be placed on social media web sites without prior written parental permission.

#### **402 Infant & Toddler-Specific Program Requirements**

1. Infants shall be carefully supervised at all times.
2. The caregiver shall provide a safe and clean learning environment, both indoors and outdoors, with age appropriate materials and equipment arranged to support learning.
3. Infants and toddlers shall have a learning/play environment that shall include staff being on their level interacting with them frequently, when they are awake.
4. ~~Stimulation shall be given to an infant in a variety of ways. Caregivers shall hold children, and offer nurturing, responsive care in addition to the routine care of diapering and feeding.~~

The caregiver shall implement relationship-based practices that promote consistency and continuity of care for infants and toddlers. Infant and toddler caregivers/teachers shall

- a. Respond promptly to cries and calls of distress by verbally acknowledging, gently touching, and holding children.
- b. Engage children in frequent rich social exchanges in a variety of ways; for example, holding, patting, making frequent eye contact, smiling, singing, and using a pleasant calm voice in conversation.
- c. Engage children in frequent positive social exchanges during routine care such as eating, diaper changing, toileting, and preparing for rest.
- d. Provide consistent emotional support to infant and toddlers by acknowledging their feelings and emotions and providing physical and verbal support.

- e. Communicate consistently with parents/guardians by greeting them warmly and exchanging information that promotes continuity between the center and the child's home.
  - f. Engage in play activities with children by providing a safe environment to explore, modeling play behavior such as imagination and use of toys and equipment, and providing verbal encouragement and support.
5. Infants shall be taken outside for a period of time every day, unless prevented by weather or special medical reasons.
  6. Outdoor play for infants and toddlers may include riding in a stroller; however, infants and toddlers shall be offered opportunities for gross motor play outdoors as well.
  7. If a child falls asleep while in a walker, swing, high chair, etc., that child shall be placed in appropriate sleep equipment.
  8. Infants/toddlers shall be placed in age appropriate cribs, cots, or mats meeting CPSC standards, when they fall asleep. (Note: Also, any items used in the crib must be used according to manufacturer guidelines, regardless if the child is sleeping or not, in accordance with 1001.1).
  9. Infants (children 12 months and below) shall be placed flat on their backs to sleep, in accordance with American Academy of Pediatrics guidelines, to lessen the risk of suffocation and Sudden Infant Death Syndrome. (If a child rolls over on his/her own, the facility is not required to reposition the child.) If there is a medical reason a child cannot sleep on his/her back, then a signed statement from the child's physician must be in the file stating the reason, the sleep position indicated, and the time frame this is required.
  10. Infants' sleep space (e.g. crib) shall be free of loose bedding. If a light blanket is necessary, it is recommended that it ~~should~~ be kept at or below the mid-chest area of the child. Staff shall not cover the faces of infants.
  11. Pacifiers, if used, shall not be secured around the neck by a cord or by any other means that could represent a ~~or have~~ strangulation hazards ~~attached~~.
  12. Pillows (including nursing or "bobby" pillows), bumpers/bumper pads, and stuffed animals shall not be placed in cribs.
  13. ~~Infants and toddlers shall have clean, safe, washable toys.~~ Toys or materials used by younger children shall not be small enough to be swallowed.
  14. Toys used by infants and toddlers shall be safe and sanitized as needed to help prevent the spread of contagious diseases. Toys that cannot be cleaned and sanitized shall not be used. ~~Toys that children have put in their mouths or that are otherwise contaminated by body secretion shall be set aside until they are cleaned by hand with water and detergent, rinsed,~~

~~sanitized, and air dried, or washed in a mechanical dishwasher approved by the Department of Health for sanitizing. Machine washable cloth toys shall be used by one individual at a time. These toys shall be laundered before being used by another child.~~

15. Safety straps shall be used on all equipment originally manufactured with safety straps.

#### **403 School Age Children: Program Requirements**

1. School age children shall be provided with a choice of indoor and outdoor activities.
2. A quiet time and a private place with appropriate equipment shall be provided for one (1) person activities, including resting and homework. (A supervised rest period as required by Regulation 401.3, does not apply to school age children.)
3. Permission from parents shall be on file for school age children to leave the home.
  - a. School age children who leave the home to participate in classes, clubs or other activities shall have written permission from the parents naming the activity, time of leaving and returning and method of transportation to the activity.
  - b. Permission for regularly scheduled activities such as scouting may be given for the entire school term.

#### **404 Evening & Night Care: Program Requirements**

Night care is defined as any care provided after midnight.

1. The caregiver shall remain awake at all times children are in care. (Alternative Compliance may be requested to allow the caregiver to sleep after the children are in bed for the night. For this request to be approved, consideration will be given to the overall level of licensing compliance, the use of motion detectors and/or other alarms to alert the caregiver if children leave the sleeping area, the ages, numbers and sex of the children in overnight care and written notification to parents that the caregiver will be sleeping during overnight care.)
2. There shall be a plan for evacuating children to safety in case of fire or emergency.
3. Children arriving in the daylight hours shall have outdoor play, weather permitting. Older children shall have time for reading or doing homework during the school year.
4. Homes with only one caregiver shall limit care to no more than two (2) shifts (18 hours) per twenty four (24) hour period. Homes offering twenty-four (24) hour care shall provide a schedule verifying that they have made provisions for a secondary caregiver to provide relief care for one shift. (Alternative compliance may be requested by caregivers who provide twenty-four (24) hour care and who do not have a secondary caregiver. For this request to be approved, consideration will be given to the overall level of compliance with the licensing requirements and to the number and ages of children in care during the third shift.)

5. Evening meals shall be served. The home shall ensure that children spending the night are served breakfast.
6. Drinking water shall be available to children during the night.
7. Bathing facilities shall be available. Hot water shall be available. Children shall not take baths together or share the same bath water. Tubs or showers shall be cleaned after each use. Children shall be given fresh washcloths and towels. Preschool children shall never be left alone when bathing. Privacy shall be ensured for school age children.
8. Child in night care shall be given a bed or cot with mattress or pad and a pillow.
  - a. If linens become soiled, they shall be changed. Protective mattress covers shall be used and washed at least weekly.
  - b. Each child's bed or cot shall have a cover available.
  - c. Bed or cots shall be arranged at least one foot apart.

## **500 BEHAVIOR GUIDANCE**

### **501 Behavior Guidance Requirements**

1. Behavior guidance shall be:
  - a. Individualized and consistent for each child
  - b. Appropriate to the child's level of understanding
2. Use of behavior guidance shall show that the caregiver understands each child's needs and shall promote self-discipline and good behavior.
3. Acceptable behavior guidance techniques include:
  - a. Look for appropriate behavior and reinforce the children with praise and encouragement when they are behaving well.
  - b. Remind the children on a daily basis of the rules by using clear positive statements of how they are expected to behave rather than what they are not supposed to do.
  - c. Attempt to ignore minor inappropriate behaviors and concentrate on what the child is doing properly.
  - d. Use brief supervised separation from the group only when the child does not respond to a verbal command which instructs the child as to how he or she is supposed to behave.
  - e. When a misbehaving child begins to behave appropriately, encourage and praise small positive steps rather than waiting until the child has behaved for a long period of time.
  - f. Attend to the children who are behaving appropriately and other children will follow their example in order to obtain your attention.
  - g. When the entire group is behaving well, reward them with an activity they enjoy.

4. Physical punishment shall not be administered to children.
5. The length of time a child is placed in time-out shall not exceed one minute per year of the child's age.
6. The following activities are unacceptable as behavior guidance measures and shall not be used. These include but are not limited to:
  - a. Restraints (Restraining a child briefly by holding the child is allowed when the child's actions place the child or others at risk of injury.)
  - b. Washing mouth with soap
  - c. Taping or obstructing a child's mouth
  - d. Placing unpleasant or painful tasting substances in mouth, on lips, etc.
  - e. Profane or abusive language
  - f. Isolation without supervision
  - g. Placing child in dark area
  - h. Inflicting physical pain, hitting, pinching, pulling hair, slapping, kicking, twisting arms, biting or biting back, spitting, swatting, etc.
  - i. Yelling (This does not include a raised voice level to gain a child's attention to protect the child from risk of harm.)
  - j. Forcing physical activity, such as running laps, doing push-ups, etc. (This does not include planned group physical education activities that are not punitive in nature.)
  - k. Associating punishment with rest, toilet training or illness
  - l. Denying food (lunch or snacks) as punishment or punishing children for not eating. Children shall not be forced or bribed to eat.
  - m. Shaming, humiliating, frightening, physically or mentally harming children or labeling children
  - n. Covering the faces of children with blankets or similar items
7. Posted, group behavior charts shall not be used. (Individual behavior charts that are not viewable by children and individual charts used by therapists are allowable.) ~~if used, should be used to encourage positive behavior. Behavior charts shall record only the child's behavior for the current day and shall not be punitive. (Behavior charts used on to record only positive behavior may be maintained on a weekly basis.)~~ The child's age and level of understanding should be considered when using behavior charts.

### **502 Infant & Toddler: Behavior Guidance Requirements**

1. Time out shall not be used with children under the age of two (2). The only acceptable form of behavior guidance with infants and toddlers shall be redirection. (Brief separation from the group is acceptable when the child's behavior places the child, or others, at risk of harm. The child may be placed in a supervised area away from the group or in a crib or playpen while the caregiver attends to the situation. Example: A child who has bitten another child would be removed from the group, briefly, while the caregiver attends to the bitten child.)



## 600 RECORDS

### 601 Home Records

1. All employee, child and home records shall be kept on site and made available to the Child Care Licensing Unit on request. All required records shall be maintained for three (3) years. (This includes records on children no longer enrolled.)
2. Licensing Compliance Form(s) (DCC-521) shall be maintained at the facility for three (3) years. The facility shall advise parents in writing that the compliance forms are available for review upon request.
3. Home records that are required to be kept are as follows:
  - a. Attendance records on all children to include the date and time of arrival and departure and daily parental signatures on the sign in and out forms.
  - b. Transportation rosters, if applicable (maintain for one year)
  - c. Verification of required commercial vehicle insurance coverage, if applicable
  - d. Verification of Child Care Liability insurance
  - e. Verification of annual fire department approval, if applicable
  - f. Verification of annual health department approval, if applicable
  - g. Verification of zoning approval, if applicable (part of permanent record)
  - h. Verification of annual approval by the Boiler Inspector Division of the Department of Labor
  - i. Mobile Home Commission approval, if applicable (part of permanent record)
  - j. Record of emergency drills
  - k. Plans and procedures of Emergency Preparedness
  - l. Procedures for reporting allegations of child maltreatment
  - m. Log of Product Recall and Safety Notices from the CPSC
  - n. Pet vaccinations.

### 602 Caregiver Records

1. Caregiver records shall contain the following:
  - a. An employee application for secondary caregivers, including name, date of birth, address and telephone number.
  - ~~b. TB skin test~~
  - b. Documentation of high school diploma or GED, ~~training for~~ and continuing education hours (If these documents are no longer available, proof of reasonable effort to obtain the documentation is acceptable.)  
**(Clarification:** Training hours will be counted on a calendar year basis or by the home's operating schedule if they do not operate year round.)
  - c. Documentation of the initiation of all required background checks and results obtained.
  - d. Verification of required transportation training and current copy of the driver's license for caregiver(s) that transport children, if transporting

## **603 Children's Records**

1. Enrollment information shall be obtained for each child before admission.
2. Identifying and Personal Data shall include:
  - a. Child's name, birth date, home address, and telephone number
  - b. Name and addresses of the parents and telephone numbers where the parents can be reached while the child is in care
  - c. Date of enrollment in facility.
  - d. Name, address, and phone number of person to be contacted if parents cannot be reached.
  - e. A written behavior guidance policy provided to parents, with a copy signed by the parents and retained by the caregiver.
  - f. Any legal documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the child
3. Medical Records shall include:
  - a. The name, address and telephone number of the child's physician or emergency medical care facility.
  - b. Pertinent past medical history on the child and any change in health
  - c. Child's unusual food needs such as special formulas, diabetic diet, or food allergies
  - d. Notes of special problems (such as allergies to medication or sunburn sensitivity) or needs as indicated by the parents
  - e. An authorized record of up-to-date immunizations or documentation of a religious, medial or philosophical exemption from the Arkansas Department of Health (The caregiver shall maintain a roster of children who have not completed the minimum immunization requirements. A current immunization schedule is provided in the appendix of this publication.)
  - f. A written record shall be made of all accidents, incidents, or injuries, indicating the location, time of day, area, or piece of equipment where the incident occurred. A copy of this shall be given to the parent or legal guardian on the day of occurrence.
  - g. Any medical documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the child
4. Permissions and Agreements will be signed by parents and caregiver(s):
  - a. Consent for emergency medical care and transportation for such care which shall accompany children who are transported to and from the home
  - b. Other transportation permission, if any, including routine and special field trips
  - c. Permission to participate in water activities, if any
  - d. Signed statement by the parent stating who is authorized to pick up the child
  - e. Written permission for the facility to photograph or video tape their child, if applicable.
  - f. Written permission for the facility to place photos and video recordings of their child on

social media or other web sites, if applicable.

5. Documentation of distribution of Shaken Baby Syndrome information to all parents of infants in accordance with Carter's Law. (Act 1208 of 2013)
6. Infant feeding documentation shall be maintained for at least one year.

## **700 NUTRITION**

### **701 Nutrition Requirements**

1. A home licensed for eleven (11) or more children, if food is prepared for the children in the home, shall provide a current verification of approval by the Arkansas Department of Health, Sanitation Services
2. All licensed homes shall meet the following:
  - a. All food shall be safe and stored properly to prevent spoiling
  - b. Shall have refrigerator with thermometer visible and shall be maintained at 41 degrees or below. (Freezer thermometer shall be maintained at zero (0) degrees or below)
  - c. Food shall not be stored under sinks
  - d. Food shall be stored in original container or in a closed container
  - e. Chemical and toxins shall not be stored in food storage area
  - f. All medicines shall be stored separately from food at all times
3. All food and drink shall be prepared, distributed and served under sanitary conditions and the following shall be met:
  - a. Caregivers shall wash hands before preparing food
  - b. There shall be a two compartment sink with hot and cold running water
  - c. Individual drinking glasses or disposable cups shall be provided
  - d. All surfaces shall be kept sanitary
  - e. Food left uncovered or handled shall not be reused
  - f. When dishes are washed by hand, they shall be sanitized with a bleach solution
  - g. Drinking water and water used for the preparation of formula shall not come from the hot water supply. (Water from hot water system may contain higher levels of lead and other substances which could be harmful to small children.)
4. Food shall be served on individual plates, bowls, or other dishes that can be sanitized or discarded.
5. Age appropriate tables and chairs, highchairs, and equipment designed for children, or other comfortable seating options shall be used during snack and meal time.
6. Breakfast, if served, lunch and evening meals shall each meet current U.S. Department of Agriculture guidelines, including portion size. (See Appendix A) If sack lunches are utilized,

the home shall ensure that these also meet U.S. Department of Agriculture guidelines by supplementing the lunches if necessary. Milk shall be served to each child during the day. Exceptions may be made for children who suffer allergies to milk.

7. Menus for all ~~food service shall be posted.~~ meals and snacks shall be available for review.
8. Breakfast shall be made available to children who arrive before 7:00am. Breakfast may be served to all children rather than a morning snack provided there is no more than three (3) hours between the beginning of breakfast and the beginning of lunch.
9. Midmorning and mid-afternoon snacks shall be provided to all children and shall meet current U.S. Department of Agriculture guideline (See Appendix A).
10. All children in care during evening hours shall be offered an evening snack. Children in care during evening hours shall be served supper and children spending the night shall be served breakfast unless provided by parent or school.
11. ~~All food brought in from outside sources shall come from Health Department approved kitchens and shall be transported as per Health Department requirements, or the food shall be in an individual, commercially pre-packaged container.~~

It is recommended that food brought in from outside sources be in commercially pre-packaged containers or come from Health Department approved kitchens. This recommendation is based on concerns for the health and safety of children who may have severe food allergies, and the difficulty of monitoring ingredients in food brought in from home kitchens.

12. Children shall not be forced to eat.

## **702 Infant & Toddler Nutrition Requirements**

**It is recommended that mothers ~~should be allowed and encouraged to breast feed their child at the child care family home.~~**

1. The routine use of baby food, bottles and formula shall be agreed upon by the caregiver and parent. Instructions regarding special needs for food, bottles and formula, such as food allergies, shall be obtained in writing from the parent and followed by the caregiver (See Appendix B).
2. Feedings for all children up to twelve (12) months of age shall be documented by the caregiver and available for review by the parent. This documentation shall continue for all children older than twelve (12) months of age who are still being given bottles.
3. Children shall not share the same bottle.
4. A sanitary method of cleaning baby bottles shall be practiced.

5. Baby bottles shall be properly refrigerated.
6. Microwaves shall not be used for heating bottles due to the danger of uneven heating.
7. Infant feeding schedules shall be flexible and adapted to each infant's needs.
8. The solid foods fed to an infant shall be determined by the child's parent(s).
9. Infants under six (6) months of age shall be held while being fed. Bottles shall not be propped. Infants six (6) months of age and older shall be held if needed.
- ~~10. Children shall be held during bottle feeding. Children shall not be given bottles in their cribs, swings, bouncy seats or car seats.~~
10. Infants no longer held for feeding shall either sit in low chairs at low tables or in infant seats with trays, or in high chairs with wide bases. Safety straps shall be used with high chairs.
11. Children under 2 years of age shall not be fed foods that may cause choking, such as but not limited to hard candy, raw carrots, hot dogs, nuts, seeds, or popcorn.

## **800 BUILDINGS**

### **801 Building Requirements**

1. The home's building, grounds and equipment shall be clean, kept in good repair, and maintained as needed to protect the health and safety of the children. If the home has sustained structural damage the caregiver shall immediately notify the Child Care Licensing Specialist.
2. Department of Labor, Boiler Inspection Division requirements shall be met. All water heaters and any other boilers in licensed child care settings shall be inspected on an annual basis and/or upon installation. Verification that initial inspection or proof of attempt to set up initial inspection, shall be completed within six (6) months of licensure. Scheduling and completion of annual inspections will be the responsibility of the Department of Labor, however, the facility is responsible for cooperating and keeping documentation of such inspection on file for review. (AR Code §20-23-101 et. seq.)
3. There shall be at least thirty-five (35) square feet of usable indoor space for each child in the home. This area shall not include kitchens, bathrooms, hallways or closets.
4. The home shall have an operable telephone on site all hours children are in care. The Licensee shall provide the phone number to the Licensing Unit and to the parents. (This phone may be a cell phone if the phone stays operable, stays at the facility during all hours of care, and is the phone number provided to the Licensing Unit and the parents.)

5. Light, heating, cooling and ventilation of the home shall be adequate for safety and comfort.
6. Windows and/or doors used for ventilation shall be screened.
7. It is recommended that if natural gas or propane is used, the facility's heating & ventilation systems shall be inspected and cleaned (if necessary) before each heating season by a qualified HVAC technician. ~~The facility shall have on file documentation that these inspections and cleanings have been completed.~~
8. Carbon monoxide detectors shall be placed in homes according to manufacturer's recommendations if ~~one of the following guidelines is met~~ either of the following situations applies:
  - a. The home uses ~~any sources of~~ wood, propane, natural gas, or any other products as a source of heat that can produce carbon monoxide indoors or in an attached garage.
  - b. Situations where carbon monoxide detectors are required by state or local law.
9. Manufactured homes, licensed as Child Care Family Home, shall be tied down and under-pinned as required by the Arkansas Manufactured Home Commission. The home shall obtain an inspection and approval from the Arkansas Manufactured Home Commission prior to being licensed.
10. Annual fire approval shall be obtained on all manufactured homes licensed as Child Care Family Homes.
11. Outdoor equipment that requires fall zones and surfacing shall require the same fall zones and surfacing if used inside the facility. (This does not apply to equipment specifically designed for indoor use only.)

### **900 Grounds-Playgrounds / Outdoor Learning Environment**

To provide the safest possible playground environment, you are encouraged to meet Consumer Product Safety Commission's guidelines listed in the "Handbook for Public Playground Safety". However, the following are minimum requirements and shall be met.

**Please note that these requirements do not mandate the use of any large and/or permanently anchored pieces of playground equipment that would require fall use zones and protective surfacing. Numerous options for suitable playground environments are available and acceptable. For information on playground options, contact your Licensing Specialist.** Examples of such activities are:

- Sand boxes
- Activity walls at ground level
- Art easels
- Balls & games

- Play houses
- Nature walks
- Use of the approved natural environment for outdoor learning
- ~~Any other equipment that children use when their feet remain in contact with the ground surface~~

It is not advisable to use ~~Because~~ public playgrounds and other play environments away from the facility, as these environments may not meet acceptable safety standards. If these playgrounds are used, it is recommended that staff ~~should~~ provide close supervision and not allow children to use any equipment that appears unsafe (eg: broken equipment, sharp objects, strangulations hazards, etc.). ~~Using~~ Please remember that visiting playgrounds and other play environments away from the facility ~~shall be~~ is considered a field trip and all field trip regulations shall be followed.

### **901 Layout & Design**

1. A diagram of the playground shall be submitted, clearly identifying the perimeter of the playground, with measurements, and identifying each piece of equipment used by the children enrolled at the licensed facility. This documentation shall be in the form of ~~photographs with a diagram or~~ a satellite photo, when possible, from an internet site such as Google Maps, or a diagram of the playground if a satellite photo is not available. ~~The documentation of the designated and agreed upon play area, specifying the exact play area and equipment to be used and the associated documents, are critical part of the terms of the license.~~
2. Any changes in the play area boundaries and/or equipment requested must be submitted in writing and approved prior to use.
3. All equipment and protective surfacing shall be installed and maintained according to manufacturer's guidelines.
4. The play area/outdoor learning area shall be fenced or otherwise enclosed and provide at least 75 square feet per child present on the playground at any time.
5. There shall be an outside exit from the play area.
6. The area shall be well drained.
7. There shall be equipment and activities appropriate for the age and number of children enrolled in the facility.
8. Separate play areas or time schedules shall be provided if, infants and toddlers share playgrounds with older children.

9. ~~A shady area shall be provided where children can get out of direct sunlight. This can be accomplished by utilizing existing shade such as trees and buildings, or by creating shade with manufactured structures such as awnings.~~
9. Areas where children play outdoors shall be properly maintained. ~~The enclosed play area shall be free from weeds, tall grass, untrimmed shrubbery, standing water, and litter to prevent vermin and insect infestation.~~

## **902 General Hazards**

1. The area shall be free of hazards or potentially hazardous objects.
2. Equipment that has been determined by the Division to be unsafe for the children ~~in the licensed facility to use~~ shall be removed from the play area, or enclosed by a fence or other suitable barrier so the children will not have access to it.
3. All newly purchased playground equipment designed for children to play on or climb on, such as slides, swings, composite structures, etc., shall be commercially manufactured and certified to meet ASTM or CPSC standards for public playgrounds.
4. Equipment, which is designed to be anchored, shall be properly anchored so that the anchoring devices are below ground level.
5. Sand for playing shall be kept safe and clean.
6. Paint on equipment shall be lead free.
7. All fasteners, including S-hooks, shall be securely tightened or closed.
8. There shall be no sharp points, corners, edges, or splinters.
9. Equipment shall not have protrusion hazards. (A protrusion is a projection which, when tested, is found to be a hazard having the potential to cause bodily injury to a user who impacts it.)
10. Equipment shall not have entanglement hazards. (An entanglement is a condition in which the user's clothes or something around the user's neck becomes caught or entwined on a component of playground equipment.)
11. ~~The only~~ Trampolines shall not be used. ~~allowed shall be mini-tramps used under direct supervision on-site or on field trips off-site.~~ (Therapeutic use of trampolines is acceptable if supervised by the therapist on a "one on one" basis. ~~for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.~~ )
12. Ball pits shall not be used. ~~allowed on-site or on field trips.~~ (Ball pits are large areas or



"pits" filled with balls intended for children to jump in and play. Therapeutic use of ball pits is acceptable if supervised by the therapist on a "one on one" basis. ~~for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.)~~

13. Wading pools shall not be used. ~~allowed on site or on field trips.~~ This does not prohibit the use of sprinklers and water play.
14. To prevent entrapment, there shall be no opening(s) between any interior opposing surfaces between 3.5 and 9 inches. (Openings in equipment that might allow a child's body to pass through, but not their head.) Ground bounded openings are exempt.
15. Providers/caregivers shall be aware of and remove when possible any hazardous items children may wear on play equipment such as helmets, drawstrings, and other accessories around the neck that may cause a strangulation/entanglement hazard.
16. All children one year of age and older shall wear properly fitted and approved helmets while riding bicycles, roller blades, roller skates, scooters and skate boards. ~~on toys with wheels (tricycles, bicycles, etc.) or using any wheeled equipment (rollerblades, skateboards, etc.).~~ Helmets shall be removed as soon as children stop riding ~~the wheeled~~ this equipment. Helmets shall meet CPSC standards. (Helmet use is recommended for children while riding tricycles and other wheeled toys.)
17. All soccer goals shall be commercially manufactured and installed and anchored according to manufacturer's guidelines.
- ~~18. Balance beams higher than 12 inches shall have fall zones.~~

### **903 Balance Beams**

1. Balance beams shall not be higher than 12 inches and shall have use zones with protective surfacing.
2. Children under age 2 shall not use balance beams.

### **903 904 Slides**

1. Slides shall not have any spaces or gaps between the platform and the slide surface.
2. Slides shall have a transition platform of at least 14 inches deep for preschool and school age children, and 19 inches deep for toddlers.

### **904 905 Swings**

1. The following swings shall not be used for any ages:

- a. Multi-occupancy swings designed to hold more than one child, except tire swings
  - b. Heavy molded swings such as animal figure swings
  - c. Free swinging rope (Tarzan ropes)
  - d. Swinging exercise rings
  - e. Trapeze bars
  - f. Swings attached to a composite structure (Composite Structure is defined by CPSC as, "Two or more play structures attached or functionally linked, to create one integral unit that provides more than one play activity.")
2. There shall be no wood or metal swing seats.
  3. Toddler swings shall ~~provide support on all sides, if seat is above 12" from ground~~ have fully enclosed bucket seats.
  4. Direct supervision shall be provided for children in toddler swings.

### **905 906 Climbing Equipment**

1. Free standing arch climbers ~~exceeding 4 feet in height~~ shall not be used for preschoolers.
2. Flexible grid climbing devices, such as rope or chain ladders, climbing ropes, etc., shall be securely anchored at both ends.
3. Flexible grid climbing devices shall not be used for preschoolers unless they are anchored at both ends and have a means of transitioning from one piece of equipment to the next.
4. Preschoolers shall not use sliding poles.
5. Sliding poles shall have no protruding welds or seams along the sliding surface and the pole shall not change directions.

### **906 907 Merry Go Rounds**

1. The only merry-go-rounds allowed are portable merry-go-rounds not designed to be anchored and they shall have handgrips or other secure means of holding on.

### **907 908 Seesaws**

1. Seesaws without spring centering devices shall have shock absorbing materials, such as partial tires embedded in the ground underneath the seats or secured to the underside of the seats.
2. Hand holds shall be provided for both hands at each seating position and shall not turn when grasped.

3. Hand holds shall not protrude beyond the sides of the seat on seesaws.

**908 909 Fall Zones/Surfacing-Protective Surfacing**

1. There shall be ~~fall~~ use zones and protective surfacing under and around all equipment that ~~is over 24" in height at the highest accessible point~~ is over 18" in height at the highest accessible point. ~~requires a child to be standing or sitting above ground level.~~ (The highest accessible point is defined as the highest surface on the piece of equipment where children would stand or sit when the equipment is being used as intended.) ~~Fall~~ Use zones shall extend a minimum of 6' in all directions (unless otherwise specified) from the perimeter of the equipment. (Playground equipment that is between 18 inches and 24 inches at the highest accessible point and that was installed prior to the enforcement date of this revision is allowable without fall surfacing, as long as it meets all other requirements.)
2. Swings require ~~fall~~ use zones and surfacing regardless of height. ~~(Toddler swings equipped with safety straps are exempt from this requirement, provided their use is closely supervised.)~~
3. ~~Fall~~ Use zone surfacing depths shall be as follows:
  - a. ~~Structures over 2' and under 3 1/2" at the highest accessible point shall have a minimum surfacing material depth of 6"~~
  - b. ~~Structures 3 1/2' up to 5' at the highest accessible point shall have a minimum surfacing material depth of 9" (shredded tires or other shredded or chopped rubber products shall have a minimum depth of 6")~~
  - c. ~~Structures 5' and taller at the highest accessible point shall have a minimum surfacing material depth of 12" (shredded tires or other shredded or chopped rubber products shall have a minimum of 6" depth)~~

Minimum compressed loose-fill surfacing depths

	<b>Inches</b>	<b>Loose-Fill Material</b>	<b>Protects to Fall Height of:</b>
a.	6*	Shredded/recycled rubber	10 feet
b.	9	Sand	4 feet
c.	9	Pea Gravel	5 feet
d.	9	Wood mulch (non-CCA)	7 feet
e.	9	Wood chips	10 feet

\*Shredded/recycled rubber loose-fill surfacing does not compress in the same manner as other loose-fill materials. However, it is recommended that care ~~should~~ be taken to maintain a constant depth as displacement may still occur

4. Shock absorbent material such as sand, pea gravel, wood chips, wood mulch, shredded tires, etc., shall be used in ~~fall~~ use zone areas under and around playground equipment which requires a ~~fall~~ use zone.

- a. When purchasing gravel, it is recommended that care ~~should~~ be taken prior to purchase to insure that the gravel is actually pea gravel that is smooth and rounded, and not crushed rock or gravel with sharp edges. Crushed rock and sharp gravel will not be approved.
  - b. Pea gravel used for ~~fall~~ use zones shall not be over 1/2 inch in diameter.
  - c. Different types of surfacing materials shall not be combined within the same use zone area.
5. Hard surface materials, such as asphalt and concrete shall not be used as base surfaces in the ~~fall~~ use zones except under commercial matting or other systems/products designed to be installed over hard surfaces as directed by the manufacturer.
  6. SLIDES: The ~~fall~~ use zone for slides measuring 6 feet or over, measured from the slide platform to the ground, shall extend ~~to~~ 8 feet from the exit end of the slide. Use zones for slides measuring under 6 feet from the platform to the ground shall extend 6 feet from the exit end of the slide.
  7. SWINGS: The ~~fall~~ use zone for single-axis swings (standard swings) (except toddler swings) shall extend to the front and to the rear of the swing a minimum distance of two times the height of the pivot point (where the chain attaches to the frame) above the playing surface. The ~~fall~~ use zone for toddler swings shall extend to the front and rear of the swing a minimum of two times the distance from the pivot point to the swing seat. (~~Note exemption listed in 908.1 above.~~) ~~Fall~~ Use zones shall also extend ~~six~~ 6 feet to the sides of the swing set.
  8. SWINGS: The ~~fall~~ use zone for multi-axis swings (such as tire swings or others with three or more suspending chains) shall extend in all directions a minimum of six feet, plus the height of the suspending rod or chain. The use zone from the end of the structure must also extend a minimum of 6 feet in all directions.
  9. ~~Fall~~ Use zones shall be free of obstacles onto which children may fall.

## **1000 SLEEPING ARRANGEMENTS**

### **1001 Sleeping Arrangement Requirements**

1. All manufacturer guidelines shall be followed for furniture and equipment that is used by, or around, children.
2. Any cribs or playpens that have been identified as unsafe, or have been subject to recall as defined by the Consumer Products Safety Commission (CPSC) guidelines or law, shall be removed or repaired as indicated.
3. Each child under twelve (12) months of age shall have a separate well-constructed baby bed or play pen with a waterproof mattress or pad which shall be clean, dry and in good

condition. Sheets and covers are required and shall be kept clean and dry. Bassinets shall not be used. (Please note that the CPSC does not recommend the use of playpens in licensed child care.)

4. Waterbeds shall not be used for sleeping children under the age of two (2) years.
5. The following guidelines shall also be required for cribs:
  - a. Cribs that have end panels with decorative cutout areas shall not be used
  - b. Mattresses shall fit snugly in the crib.
  - c. The space between crib and mattress shall measure no more than 1 inch.
  - d. Corner post shall be the same height as end panels.
  - e. End panels shall extend below mattress at the lowest position of the mattress.
  - f. Baby beds shall have slats no greater than 2 <sup>3/8</sup> inches apart.
6. Each child twelve (12) months of age or older shall have a cot, bed, pallet, or mat which shall be placed at least one foot apart. Sheets and covers are required. Bedding shall be of washable material and shall be kept clean. If mats or pallets are used on floors, floors shall be clean, warm, dry and draft free. Any mat or pallet less than two (2) inches thick shall be placed on carpet.
7. Doors in rooms where children are sleeping shall remain open.
8. Swaddling of infants is not recommended and shall require a note from the child's physician if continued past the age of three months. ~~shall not be practiced except as directed in writing by the child's physician.~~
9. Bibs, necklaces, and garments with ties or hoods shall be removed from infants prior to rest/naptime, to reduce the risk of entanglement and strangulation while sleeping.

## **1100 HEALTH**

### **1101 General Health Requirements**

1. The home shall have an adequate supply of water that meets the Arkansas Health Department standards for drinking water.
2. Water shall always be available to the children.
3. The facility shall follow any health or medical care plans and/or medical documentation as provided by the child's physician, parent, or guardian.
4. Garbage shall be kept in a closed container out of children's reach.
5. All garbage, soiled diapers and trash shall be removed from the home daily and grounds at least once a week.

6. The home shall be free of insects and rodents.
7. Water and sewage disposal and toilet facilities shall be safe and sanitary. The Health Department may be consulted for its recommendation.
8. Child Care Family Homes shall comply with the Clean Indoor Air Act of 2006. Smoking (including e-cigarettes) in a child care family home is prohibited at all times. This includes:
  - a. All areas of the home, regardless of whether children are in care (includes time periods such as nights, weekends, holidays, etc., also includes office areas or other areas of the facility that share the same ventilation systems)
  - b. Outdoor play area
  - c. Other outdoor areas when children are present on those areas
  - d. In any vehicle used to transport children, whether children are present in the vehicle or not
9. First-aid materials are required and shall be kept out of reach of children. A first aid kit containing medications shall be locked. The first-aid materials shall include:
  - a. Adhesive band-aids (various sizes)
  - b. Scissors
  - c. Sterile gauze squares
  - d. Roll of gauze bandages
  - e. Adhesive tape
  - f. Antiseptic
  - g. Thermometer
  - h. Tweezers
  - i. Disposable gloves
10. There shall be no adult in the home who poses a health risk to children in care.
11. ~~All~~ It is recommended that staff who have direct contact with children ~~should~~ receive annual Influenza (flu) immunizations.
12. ~~All~~ It is recommended that staff who have direct contact with children ~~should~~ receive a one-time Tdap (Diphtheria, Tetanus & Pertussis) immunization.
13. ~~All~~ It is recommended that staff who have direct contact with children ~~should~~ be required to have the recommended series of immunizations for chicken pox, mumps, measles and rubella or evidence of immunity.

### **1102 Children's Health**

- ~~1. No child shall be admitted who has a contagious or infectious disease. Parents and guardians shall be notified to pick up the child if the child exhibits any of the following~~

symptoms listed below:

- a. ~~**Fever:** a body temperature of 101 degrees or greater (Recommendation: Infants, six months of age or under, who have a temperature of 100 degrees or greater should be excluded)~~
- b. ~~**Diarrhea:** three (3) or more watery stools in a twenty four (24) hour period~~
- c. ~~**Vomiting:** vomiting on two or more occasions within the past twenty four (24) hour period~~
- d. ~~**Rash:** body rashes, not obviously associated with diapering, heat or allergic reaction to medications~~
- e. ~~**Sore throat:** if associated with fever or swollen glands in the neck~~
- f. ~~**Severe coughing:** episodes of coughing which may lead to repeated gagging, vomiting or difficulty breathing~~
- g. ~~**Pink eye:** pink or red eye(s) which may be swollen with white or yellow discharge, until on antibiotics for twenty four (24)~~
- h. ~~**Untreated scabies, head lice or the presence of nits:** (may return after first treatment and removal of nits.)~~
- i. ~~**Multiple sores inside mouth with drooling:** unless health care provider determines the condition is non-infectious~~
- j. ~~**Ringworm:** a fungal infection of the scalp or skin: may return after evaluation and under treatment by a health care provider~~
- k. ~~**Impetigo:** may return twenty four (24) hours after treatment is initiated~~

1. No child or staff shall be admitted who has a contagious or infectious disease.
2. The parent or legal guardian shall be notified as soon as possible when a child has any symptom that requires exclusion from the facility. The child shall be separated from other children and closely monitored until the parent arrives to pick the child up.
3. It is recommended that the caregiver ~~should~~ determine if the illness prevents the child from participating comfortably in activities, results in a greater need for care than the child care staff can provide without compromising the health and safety of the other children, or poses a risk of spread of harmful diseases to others.
4. The caregiver shall temporarily exclude from child care if child has:
  - a. Sudden change in behavior, such as:
    - lethargy or lack of responsiveness
    - unexplained irritability or persistent crying
    - difficult breathing
    - a quickly-spreading rash
  - b. Fever over 101 degrees/oral, 100/axillary (or equivalent method) in a child who also has pain, behavior changes, or other symptoms of illness.
    - An infant younger than 2 months with any increased temperature shall get urgent medical attention, within an hour
    - An infant younger than 6 months with any increased temperature shall be

medically evaluated

- c. Diarrhea, defined as watery/runny stools, if frequency exceeds 2 or more stools above normal for that child, and is not related to a change in diet or medication. Exclusion from child care is required if diarrhea cannot be contained in the diaper or if diarrhea is causing soiled clothing in toilet-trained children
  - d. Blood or mucus in stools (unless caused by hard stools)
  - e. Vomiting illness (2 or more episodes of vomiting in the previous 24 hours)
  - f. Abdominal pain which lasts more than 2 hours
  - g. Mouth sores with drooling
  - h. Rash with fever or behavior change
  - i. Conjunctivitis or "pink eye" – with white, yellow, or green eye discharge and red ("bloodshot") eyes, exclude only if child has:
    - fever,
    - eye pain
    - redness and/or swelling of the skin around the eyes, or
    - if more than one child in the program has symptoms
  - j. Pediculosis (head lice), from the end of the day until after the first treatment.
  - k. Active tuberculosis, until a health care provider or health official states that the child is on appropriate therapy and can attend child care.
  - l. Impetigo, until treatment has been started;
  - m. Strep throat, until 24 hours after antibiotic treatment has been started
  - n. Chicken pox, until all lesions have crusted (usually 6 days after the rash appears)
  - o. Rubella, until 6 days after onset of rash
  - p. Pertussis (whooping cough); until 5 days of antibiotic treatment
  - q. Mumps, until 5 days after onset of gland swelling
  - r. Measles, until 4 days after onset of rash
  - s. Hepatitis A, until 1 week after onset of illness or as directed by the health department
4. Illness in the home shall be handled to protect all children in care.
  5. In case of critical illness or injury, and if the parents cannot be reached, the physician named by the parent shall be called. If necessary, the child shall be taken to the nearest emergency room. Injuries that require the attention of medical personnel shall be reported to the parent immediately.
  6. In case of critical illness or injury that requires the attention of medical personnel the Child Care Licensing Specialist shall be notified within one business day.
  7. The caregiver shall notify the child's parents of significant events that affect the children. This shall include, but not limited to:
    - a. Cases of serious contagious disease
    - b. Any injury incurred by a child
  8. The communicable diseases listed in Appendix B, whether suspected in a child or adult, shall



be reported within twenty-four (24) hours to either the local County Health Unit or the toll free Reporting System (800-482-8888). Immediate notification is recommended for the following:

- a. Hepatitis
- b. Rash illness (including MEASLES & RUBELLA)
- c. WHOOPING COUGH (Pertussis)
- d. MENINGITIS
- e. MUMPS
- f. Tuberculosis
- g. Salmonellas (including typhoid)
- h. E-coli

9. Reporting data should include:

- a. The reporter's name, location and phone number
- b. The name of disease reported and the date onset
- c. The patient's name, address, phone number, age, sex and race (Please spell the patient's name)
- d. The attending physician's name, location and phone number
- e. Any pertinent clinical and laboratory used in the diagnosis (Please give the laboratory name)
- f. Any treatment information, if known

10. It is recommended that universal precautions ~~shall~~ be used when handling and disposing of materials containing bodily secretions ~~Example:~~ such as wet or soiled diapers, fecal matter, etc. Universal precautions shall be used when handling items contaminated by blood. These items shall be disposed of separately and by using rubber gloves that shall be properly disposed of after each use. (Note: hands must be washed even after gloves are used.)

11. Within fifteen (15) days of enrollment of a child, the home shall verify that the child has been immunized as required by the Arkansas Department of Health or the child cannot remain in care. (Arkansas Code 20-78-206 as amended by Act 870 of 1997.) (A current immunization schedule is provided as an insert in this publication.)

12. Children shall be protected from overexposure to the sun. Sunscreen shall be used if needed and as directed by the parent. Suntan lotions and/or sunscreens used for infant/toddlers and pre-school children shall be kept out of the children's reach and shall be administered only with written parental permission. School age children may apply sunscreen to themselves with supervision. Blanket permission may be obtained annually.

13. It is recommended that the facility ~~should~~ have an automated external defibrillator on site and have a staff member(s) on-site who is trained in the proper use of this device.

### **1103 Toilet Arrangements**

1. At least one (1) commode and one (1) sink shall be made available for the children's use. Potty seats may be used by the younger children, if emptied, cleaned and disinfected after each use. Potty seats shall be located in the bathroom only.
2. Toilet tissue shall be located within reach of the children when toileting.
3. Individual cloth towels or paper towels shall be available for each child.
4. Liquid soap shall be accessible in the hand washing area and used by caregivers and children.
5. Running water shall be available in all lavatories.
6. Caregiver's and children's hands shall be washed with liquid soap before meals, after toileting, after each diaper change, and as needed. The use of hand sanitizer shall not be a replacement for soap and running water.
7. ~~The home shall use a diaper changing surface that is sanitized after each use.~~ There shall be a safe diaper changing table that meets the following requirements:
  - a. Impervious (non-absorbant) smooth surfaces that do not trap soil and are easily disinfected
  - b. There shall be a changing pad capable of being sanitized used as a cushion between the child and the changing table surface.
  - c. The table shall be sturdy and stable to prevent tipping over.
  - d. The table shall be a convenient height for use by caregivers/teachers.
  - e. The table shall be equipped with a raised edge or other provision to help reduce the risk of a child rolling off of the table. ~~solid barriers that extend at least 6 inches above the changing surface.~~
8. Children shall always be attended during diapering.
9. Soiled or wet diapers shall be removed, disposed of properly, and replaced with clean, dry diapers. The caregiver shall ensure that children are properly cleaned and dried.
10. The caregiver shall assist children in toilet routine and hygiene practices.
11. The following methods shall not be used in toilet training:
  - a. Placing a child on toilet or potty chair for prolonged time periods
  - b. Using harsh language
  - c. Punishing or berating in any way for soiling clothing
  - d. Using physical force to place child on a toilet or potty chair against their will
  - e. Leaving child unsupervised on toilet

## **1104 Medication Requirements**

1. Prescription medication shall be in the original container, with a child resistant cap, and labeled with the child's name, not have an expired date ~~a recent date~~, instructions, and the physician's name.
2. All non-prescription medicine (except aspirin substitutes, such as ibuprofen and acetaminophen) shall be labeled with the child's name and dated.
3. All medicines shall be given to a child only with the written permission of the child's parent(s) or guardian which includes date, type, drug name, time and dosage, length of time to give medication, and what the medication is being given for.
4. Medicines shall be kept in a locked area. Medicine shall be kept out of the reach of the children when dispensing.
5. Medicine shall be stored at the proper temperature, separately from food at all times.
6. Rescue medications such as inhalers or EpiPens shall be inaccessible to children (kept in a cabinet with a child proof type safety latch or carried by the caregiver.)
7. Medication shall be returned to the parent or disposed of properly when a child withdraws from care or when the medication is out of date.
8. Children with special health care needs (ex. asthma, seizures, diabetes, etc.) who require scheduled daily medications or medications to be given on an emergent basis (Benadryl, EpiPen, rescue asthma medication, etc.) shall have a care plan. Care plans shall have clearly stated parameters, directions, and symptoms for giving the medications. Care plans shall be updated as needed, but at least yearly.
9. The facility shall share information with families regarding medical homes for children.

## **1105 Phone Numbers Required**

1. The following phone numbers shall be available in the immediate area of the telephone:
  - a. Ambulance service or emergency medical services
  - b. Police or sheriff's department
  - c. Fire department
  - d. Poison Control Center: 1-800-376-4766
  - e. Child Abuse Hotline Number: 1-800-482-5964
  - f. The physicians named by the parents
  - g. Child Care Licensing Unit Central Office Number: 501-682-2350 or toll free 1-800-445-3316
  - h. Home and business numbers of the parents

## **1106 Pet Requirements**

1. Pets with which children have contact shall receive vaccinations as required by law. Verification of vaccinations administered by a licensed veterinarian shall be maintained. Any pet that constitutes a threat to the welfare and safety of the children shall be kept in a confined area which prevents any contact with the children.

## **1200 SAFETY**

**It is highly suggested that the home have an evacuation crib or equivalent that could be used for the safe evacuation of infants.**

### **1201 Safety Requirements**

1. Within 30 days of licensure and within 30 days of any change or modification of the floor plan the facility shall file a copy of their floor plan with the local Office of Emergency Management including the following (§ 20-78-228 Act 1159 of 2013):
  - a. A schematic drawing of the facility and property used by the child care facility including the configuration of rooms, spaces, and other physical features of the building
  - b. The location or locations where children enrolled in child care spend time regularly
  - c. The escape routes approved by the local fire department for the child care facility
  - d. The licensed capacity and ages of children per room at the facility
  - e. The contact information for at least two emergency contacts for the facility
  - f. An aerial view of the child care facility and property used by the child care facility shall be included with the floor plan if available

Homes already licensed on the effective date of this regulation shall have 30 days to comply.

2. The child care family home shall have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats, etc.) (Act 801 of 2009). The plan and procedures are required for emergencies that could cause structural damage to the facility, be identified as a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the children and staff.
3. The written plan shall include the following information:
  - a. Designated relocation site and evacuation route
  - b. Procedures for notifying parents of relocation
  - c. Procedures for ensuring family reunification
  - d. Procedures to address the needs of individual children, including children with special needs
  - e. Procedures and documentation for annual training of staff regarding the plan and possible reassignment of staff duties in an emergency

- f. Plans to ensure that all caregivers and volunteers are familiar with the components of the plan
4. The child care family home shall coordinate with local emergency management officials to plan for emergencies.
5. Written procedures and evacuation diagrams for emergency drills shall be posted in each room used for childcare.
6. Fire and tornado drills shall be practiced ~~each month~~ as follows:
  - a. Monthly
  - b. Fire and tornado drills shall be practiced on separate days and at different times of the day.
  - c. During all hours when children are in care (evenings, nights, weekends, etc.)
  - d. Everyone in the home at the time of the drill shall participate in the drill
  - e. Caregivers, including volunteers, shall be trained in safety drill procedures
7. The home shall maintain a record of emergency drills. This record shall include:
  - a. Date of drill
  - b. Type of drill
  - c. Time of day
  - d. Number of children participating in the drill
  - e. Length of time taken to reach safety
  - f. Notes regarding things that need improved upon
8. The child care family home shall maintain an evacuation pack that shall be taken on all drills and during real emergencies evacuations. The pack shall be easily accessible in an emergency and all caregivers shall know the location of the pack. The evacuation pack shall include, but is not limited to the following:
  - a. List of emergency numbers
  - b. List of all emergency and contact information for children
  - c. List of all emergency and contact information for staff
  - d. First aid kit (requirement 1101.9) with extra gloves
  - e. Kleenex
  - f. Battery powered flashlight and extra batteries
  - g. Battery powered radio and extra batteries
  - h. Hand sanitizer
  - i. Notepad and pens/pencils
  - j. Whistle
  - k. Disposable cups
  - l. Wet wipes
  - m. Emergency survival blanket

9. The home shall immediately notify the Licensing Unit of any damage to the building and/or grounds. If phone service is not available, notification shall be as soon as service is restored or available.
10. Licensed homes shall maintain a log of all child product recall and safety notices issued by CPSC or distributed the Attorney General's Office and shall post or otherwise make these notices available for parents to review on site. The licensee shall certify, on an annual basis, that these notices have been maintained and reviewed and that any identified items have been removed from the facility. Forms for self-certification will be provided by the Licensing Specialist and shall be submitted annually. (Act 1313 of 2001)
11. Electrical outlets shall be guarded. Protective caps, if used, shall be large enough to prevent swallowing.
12. Indoor or outdoor cooling units shall have guards or barriers when necessary. All outdoor electrical boxes, gas lines, and exposed electrical cords shall be enclosed.
13. Stairways shall be well lighted and guarded as needed.
14. Dangerous equipment and/or objects shall be stored away from areas used by the children.
15. All detergents and cleaning supplies shall be kept out of the reach of children. (This does not include hand soap in children's or staff bathrooms.) Supplies used for children's activities shall be carefully supervised.
16. All poisonous substances shall be kept in a locked area.
17. Guns shall be unloaded. Guns, other weapons, and ammunition shall be stored in a locked area in the home.
18. Illegal drugs/paraphernalia shall not be in any part of the home, regardless if children are present or not.
19. Tanks, ponds, swimming pools, open wells, drainage ditches and sewage drainpipes shall be fenced if located within the play area.
20. Home swimming pools shall not be used by children in care unless permission is obtained from Child Care Licensing through an alternative compliance request. This request must include written approval from the Arkansas Department of Health for the use of the pool by children in care. (Home swimming pools used by children in care are considered semi-private pools by the Department of Health and approval for these pools requires inspection during the construction phase. Obtaining approval for existing pools is usually not possible.)
21. Wading pools shall not be used. ~~by children under two (2) years of age.~~
22. Alcoholic beverages shall be kept out of reach of children.

## 1202 Fire

**The ~~National Fire Safety Code 101~~ currently adopted Arkansas Fire Prevention Code does not allow the use of basements or floors above ground level by children, first grade and younger, unless there is a ground level exit. (Please be advised that the fire code also does not allow wood paneling in child care family homes. This will fall under the authority of the local fire jurisdiction.)**

1. A home caring for eleven (11) or more children at any time (this does include school age children not counting in the ratio) shall provide verification of an approved annual Fire Department inspection.
2. A fire extinguisher with a minimum of five (5) lbs. ABC rating shall be installed in the kitchen area of the home and shall be properly maintained. Caregivers shall know how to operate the extinguisher. (**Clarification:** These fire extinguishers are required by State Code to be inspected annually and have the approval verification tag attached. An alternative to the inspection is the purchase of a new fire extinguisher annually and retention of the receipt verifying the purchase.)
3. A working smoke detector shall be installed near the kitchen area and in the children's sleeping areas.
4. All smoke detectors in the home shall be hard wired and operate in a manner that if one sounds, they all will sound. (Homes licensed prior to January 1, 2014 are exempt from this requirement, unless the home's capacity or ownership changes.)
5. The home shall be maintained to be free from fire hazards at all times. The Child Care Licensing Specialist shall consult with the local Fire Department or the State Fire Marshal when it appears hazards exist.
6. The structure and use of the home shall permit easy entry and exit and shall comply with the following:
  - a. A home with more than one (1) level shall have second exits on all levels used by children.
  - b. A home shall have at least two (2) exits to the outside located on different sides of the home.
  - c. Doors opening to the outdoors shall be constructed so the children can open them easily from the inside.
  - d. Doors between rooms in the exit route shall not be locked while children are in the home.
  - e. Doors and pathways shall be clear of equipment that blocks the movement of children and caregiver(s)

7. Wood burning stoves, gas logs, fireplaces, open flame space heaters, water heaters, floor furnaces or other sources of heat shall be guarded and/or vented when necessary for the protection of the children. Portable fuel fired heaters shall not be used.
8. Cooking stoves or ovens shall not be used as a heating source in the home.
9. Portable heaters shall not be placed within reach of children and shall be approved UL listed products.
10. The licensee shall notify the Child Care Licensing Specialist of any fires causing damage to the home. This notification shall be made no later than the end of the following working day.

## **1300 TRANSPORTATION**

### **1301 Transportation Requirements**

1. The requirement in this section apply to all transportation provided by the licensee, including transportation provided by any person on behalf of the licensee, regardless of whether the person is employed by the licensee. The requirements in this section are not limited to routinely scheduled transportation. Periodic transportation, such as a parent requesting that their child be picked up at school due to the parent's work schedule or other conflicts, is also covered by these requirements, whether a fee is charged for this service or not.
2. When children are transported, emergency contact information shall be maintained on the vehicle at all times.
3. Caregivers transporting children shall meet the following requirements:
  - a. Be at least twenty-one (21) years old or the minimum age required by the Licensee's commercial auto insurance
  - b. Hold a current valid driver's license or commercial driver's license as required by state law, and a readable copy shall be maintained in the employee's record
  - c. Successfully completed the training course in Driver Safety that is offered, or approved, by the Division prior to transporting children. Verification of the completed course in Driver Safety shall be maintained in the employee's record.
  - d. Be certified in CPR and First Aid.
4. The vehicle(s) used for the transportation of children shall be in compliance with Arkansas state laws on transportation of children.
4. Vehicles shall be licensed and maintained in proper working condition including air conditioning and heating systems.
5. Commercial insurance coverage shall be maintained for any vehicle used for transportation



by the facility. Verification of commercial insurance coverage shall be provided to the Licensing Specialist prior to transportation of children. (Facilities licensed prior to the effective date of these regulations shall obtain required coverage within ninety (90) days.) Required coverage amounts to be maintained are:

- a. Minimum coverage of \$100,000 Combined Single Limit (CSL)
  - b. Minimum coverage of \$100,000 for both Uninsured Motorist (UM) and Under Insured Motorist (UIM)
  - c. Minimum coverage of \$5,000 Personal Injury Protection (PIP) for each passenger (based on the number of passengers the vehicle is manufactured to transport)
6. The driver may be counted in the staff/child ratio, but shall not be the only adult present when more than ten (10) children age three (3) and above are transported.
  7. Any child transported in a passenger automobile, van or pick-up truck, who is less than six (6) years old or weighs less than sixty (60) pounds, shall be restrained in a child passenger safety seat. Any child who is at least six (6) years old, or weighs at least sixty (60) pounds, must be restrained by a safety belt or any other approved safety devices. (Act 470 of 2001) Child passenger safety seats shall be used in accordance with manufacturer's guidelines.
  8. The loading and unloading of children from vehicles shall be conducted in a safe manner.
  9. There shall be a seating space and an individual, appropriate restraint system provided for each child being transported.
  10. Rosters listing the date, names and ages/date of birth of all children being transported as well as the name of the driver and any other staff member on the vehicle shall be maintained. These rosters shall be used to check children on and off the vehicle when they are picked up and dropped off at home, school, etc. and when they arrive at and leave the licensed home. Transportation rosters shall be kept by the facility and available for review for one (1) year.
  11. To insure that no children are left on the vehicle, the driver or a staff member must walk through the vehicle and physically check each seat before leaving the vehicle. The transportation roster must be signed by the driver, or staff who conducts the walk through inspection, documenting that all children have exited the vehicle.
  12. To insure that children have safely arrived in the Home classroom, the transportation roster shall be reviewed by the Licensee and compared with attendance records. The Licensee shall sign off on the transportation roster to verify that all children have safely transitioned from the vehicle to the Home.
  13. Any vehicles designed or used to transport more than seven (7) passengers and one (1) driver must have approved child safety alarm devices installed. These devices must be properly maintained in working order at all times.

Vehicles in service at licensed facilities prior to July 1, 2005, shall have the alarm installed by a qualified technician or mechanic no later than December 31, 2005. On or after July 1, 2005, all vehicles at newly licensed facilities and newly acquired vehicles at existing facilities shall have a child safety alarm installed before placing the vehicle in service.

The Child Care Licensing Unit shall maintain a list of approved alarm systems.

#### **Clarification---**

- The alarm system shall be installed so that the driver must walk to the very back of the vehicle to reach the switch that deactivates the alarm. Alarm switches installed in locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.
- The alarm systems may be installed by any certified technician or mechanic employed by a recognized electronics or automotive business in accordance with the device manufacturer's recommendations.
- The time delay from activation of the alarm until the alarm sounds shall be no longer than one minute. **Any of the following three options are acceptable to meet the intent of Act 1979 when children are being delivered at the facility. Other options must be approved by the Licensing Unit.**

#### **Options:**

1. Unload all of the children, walk through the vehicle to ensure that no children remain on board and deactivate the alarm. (This option will only work if you are able to unload all children in less than one minute.)
2. Upon arrival, have one staff member immediately walk through the vehicle to deactivate the alarm system. That staff member will remain near the alarm switch at the back of the vehicle until all children have been unloaded to ensure that no child is left on board. (This option will require at least two staff members, one to supervise the children and one to remain inside the vehicle.)
3. Upon arrival, deactivate the alarm and unload the children. Immediately after unloading, start the vehicle and move it to a different location for final parking. (This will reactivate the alarm and require a final walk through.)

#### **1302 Infant & Toddler Transportation Requirements**

1. A vehicle transporting children under the age of thirty-six (36) months shall maintain a ratio of one (1) adult to three (3) children.

#### **1400 SPECIAL NEEDS**

Individuals with Disabilities Education Act (IDEA):

- It is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special education and

related services to eligible infants, toddlers, children and youth with disabilities.

- It defines a child with Special Needs as:
  - A child determined eligible for special services under the Individual with Disabilities Education Act (IDEA) for whom a current IFSP (Individual Family Service Plan) or IEP (Individual Education Plan) exists and/or
  - A child whose physical condition has lasted or is expected to last at least two (2) years as diagnosed by a licensed medical or psychological examiner
- It is specified in Public Law 108-466 §635.16 A-B (IDEA as reauthorized) as:
  - Children with disabilities including children in public or private institutions or other care facilities are educated to the maximum extent appropriate with children who are not disabled.
  - Special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of the child is such that the child is not achieving a satisfactory education in a regular class that provides supplementary aids and services.

**All child care facilities are required by IDEA to refer a child with any suspected delays or disabilities to the appropriate lead agency (as determined by the child's age).**

### **1401 Special Needs Requirements**

1. All child care facilities shall comply with all applicable provisions as specified in IDEA:
  - a. The facility shall enroll children with special needs without regard to disability.  
**(Programs are required to provide space and care for a child who can be placed in their facility with existing services, as well as added supports from special educational services, and as long as the health and safety of the child can be met.)**
  - b. Staff shall provide care in the general classroom with children who are not disabled
  - c. The facility shall assist in facilitation of services required to meet the "special needs" of children in the center or in the classroom as specified on the individualized education/individual family service plan.
  - d. Facility staff (regular classroom staff) shall be a partner in the IFSP/IEP plan process
  - e. The facility shall allow service providers who are representatives of DHS, DDS or ADE access to the facility to provide special services as prescribed on the plan to enable the plan to be implemented in the classroom (natural/ least restrictive environment).
  - f. The facility shall not charge special service providers for space, accept "gratuities", or payment for allowing special service providers to provide services in their facility.
  - g. The facility is not required to "displace" children or staff to make space available to special service providers.
  - h. In order for a special service provider to provide special services in the facility, the

IFSP/IEP planning team under the authority of the Arkansas Department of Education and/or the Arkansas Department of Human Services, Developmental Disabilities Services, shall identify the needed special services on the IFSP/IEP.

- i. Classroom staff shall reinforce the specified goals and objectives as part of the daily routine of the classroom.

#### **1402 Infant & Toddler Special Needs Requirements**

1. To the maximum extent appropriate, children ages 0 – 2 shall participate in early intervention services provided in “natural environments.”
2. When infants and toddlers cannot achieve satisfactory results from early intervention services in a natural environment, the provision of early intervention services shall occur in other appropriate settings as determined by the parent and the Individualized Family Service Team.

## APPENDIX A

### U.S. DEPARTMENT OF AGRICULTURE CHILD CARE MEAL PATTERN

Children age 12 and up may be served adult-size portions based on the greater food needs of older children, but shall be served not less than the minimum quantities specified in this section for children age 6 through 12 years. For purposes of the requirements outlined in this paragraph, a cup means a standard measuring cup. Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

<b>Breakfast</b>	<b>Children 1 and 2 years</b>	<b>Children 3 through 5 years</b>	<b>Children 6 through 12 years</b>
Milk, fluid Juice or fruit or vegetable Bread, bread alternate**** and/or cereal enriched or whole grain Bread or Cereal: Cold dry Hot cooked	1/2 cup (4 ounces) 1/4 cup  1/2 slice (1/2 ounces) 1/4 cup* 1/4 cup*	3/4 cup 1/2 cup  1/2 slice (1/2 ounce) 1/3 cup** 1/4 cup	1 cup (8 ounces) 1/2 cup  1 slice (1 ounce) 3/4 cup*** 1/2 cup
<b>AM or PM snack (supplement)</b>			
(select 2 of these 4 components) Milk, fluid Meat or meat alternate Juice or fruit or vegetable Bread, bread alternate**** and/or cereal enriched or whole grain Bread or Cereal: Cold dry hot cooked	1/2 cup (4 ounces) 1/2 ounce 1/2 cup  1/2 slice (1/2 ounces) 1/4 cup* 1/4 cup	1/2 cup 1/2 ounce 1/2 cup  1/2 slice (1/2 ounce) 1/3 cup** 1/4 cup	1 cup (8 ounces) 1 ounce 3/4 cup  1 slice (1 ounce) 3/4 cup*** 1/2 cup
<b>Lunch or Supper</b>			
Milk, fluid Meat or meat alternate (lean meat or poultry or Cheese Egg Cooked dry beans or peas Peanut butter Yogurt (plain or flavored) (Or an equivalent quantity of any combination of the above meat/meat alternates) Vegetable and/or fruit (total of two or more) Bread or bread alternate**** enriched or whole grain	1/2 cup (4 ounces)  1 ounce 1 ounce 1 large egg 1/4 cup 2 tbsp 1/2 cup  1/4 cup  1/2 slice (1/2 ounces)	3/4 cup (4 ounces)  1 ounce 1 ounce 1 large egg 3/8 cup 3 tbsp 3/4 cup  1/2 cup  1/2 slice (1/2 ounces)	1 cup (8 ounces)  2 ounces 2 ounces 1 large egg 1/2 cup 4 tbsp 1 cup  3/4 cup  1 slice (1 ounces)

\* 1/4 cup (volume) or 1/3 ounce (weight)

\*\* 1/3 cup (volume) or 1/2 ounce (weight)

\*\*\* 3/4 cup (volume) or 1 ounce (weight)

\*\*\*\* Refer to Food Buying Guide "Grains and Breads" for equivalent quantities

(CASA-1)

## APPENDIX B

### U. S. DEPARTMENT OF AGRICULTURE INFANT CARE MEAL PATTERN

Meals served to infants ages birth through, 11 months must meet the requirements described in this meal pattern. Foods included in the infant meal must be of a texture and a consistency that are appropriate for the age of the infant being served. Either breast milk or iron-fortified infant formula must be served for the entire first year.

<b>Age</b>	<b>Breakfast</b>	<b>Lunch or</b>	<b>Snack</b>
Birth through 3 months	4-6 fluid ounces breast milk* or formula**	4-6 fluid ounces breast milk* or formula**	4-6 fluid ounces breast milk* or formula**
4 months through 7 months	4-8 fluid ounces breast milk* or formula**  0-3 tablespoons infant Cereal***	4-8 fluid ounces breast milk* or formula** and  0-3 tablespoons infant cereal*** and  0-3 tablespoons fruit Or vegetable or both	4-6 fluid ounces breast milk* or formula**
8 months up to first birthday	6-8 fluid ounces breast milk* or formula**  and  2-4 tablespoons infant cereal  and  1-4 tablespoons fruit and/or vegetable or both	6-8 fluid ounces breast milk* or formula** and  2-4 tablespoons infant cereal*** and/or  1-4 tablespoons meat, fish poultry, egg yolk, or cooked dry beans or peas, or 1/2 -2 ounces cheese, or 1-4 tablespoons cottage cheese, cheese food, or cheese spread and  1-4 tablespoons fruit or vegetable or both	2-4 fluid ounces breast milk or formula** or fruit juice****  and  0- 1/2 slice bread or 0-2 crackers*****

\* It is recommended that breast milk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry.

\*\* Iron-fortified infant formula

\*\*\* Iron-fortified dry infant cereal

\*\*\*\* Full-strength fruit juice

\*\*\*\*\* Made from whole-grain or enriched meal or flour

(CASA-1)

## APPENDIX C: LIST OF REPORTABLE DISEASES

The following are the more common reportable diseases, which occur with moderate frequency in Arkansas:

gonorrhea	salmonellosis (including typhoid)
hepatitis (A, B, Non-A, Non-B)	shigellosis
unspecified and results of serologies)	syphilis
rash illnesses (including *MEASLES, & RUBELLA)	MUMPS
*WHOOPING COUGH (pertussis)	tuberculosis
	MENINGITIS

The following are less common reportable diseases that occur with low frequency in Arkansas

*AIDS (Acquired Immune Deficiency Syndrome)	* Leprosy
Amebiasis	* Leptospirosis
ANTHRAX	* Lyme Disease
*Aseptic Meningitis	Lymphogranuloma Venereum
Blastomycosis	* Malaria
BOTULISM	* Meningitis, <u>Hemophilus</u>
*Brucellosis	Influenza Type B
Campylobacter Interitis	* Meningococcal infection
Chancroid	Mumps
CHOLERA	Pesticide Poisoning
Coccidioidomycosis	PLAGUE
*Congenital Rubella Syndrome	* POLIOMYELITIS
DIPHTHERIA	* Psittacosis (Ornithosis)
Encephalitis (all types)	Q Fever
FOOD POISONINGS (all types)	RABIES
Giardiasis	* Relapsing Fever
Gonococcal Ophthalmia	* Reyes Syndrome
Granuloma Inguinale	Rheumatic Fever
*Guillain - Barre Syndrome	* Rocky Mountain Spotted Fever
Histoplasmosis	SMALL POX
HIV [Human Immuno Deficiency Virus by (name & address)]	* Tetanus
**Influenza	* Toxic Shock Syndrome
*Kawasaki Disease	Toxoplasmosis
*Legionellosis	* Trichinosis
	* Tularemia
	TYPHUS FEVER
	YELLOW FEVER

\*The reporting physician will be contacted for additional information.

\*\*Individual cases to be reported only when laboratory testing has determined the viral type.

**The diseases in capital letters are to be brought to the immediate attention of the State Epidemiologist when suspected.**

Reporting data shall include:

- a) Names & location of reporting person
- b) Disease or suspected disease and date of onset
- c) Name, age, sex, address and phone number of patient (please spell patient's name)
- d) Name of patient's physician

The following diseases are also of public health importance and it is recommended that they should be reported whenever there is an unusual incidence or outbreak (including seasonal). It is necessary to report: (1) physician's name and location (2) the suspected disease (3) the number of cases and interval during which the cases were seen:

Acute respiratory disease	Hospital acquired infections
Chicken pox	Infectious Mononucleosis
Conjunctivitis	Influenza (estimate number)
Dermatophytosis (ringworm)	Pediculosis
Enteropathogenic E. Coli Diarrhea	Pleurodynia
Epidemic Diarrhea of unknown cause	Pneumonia (bacterial, Mycoplasma, viral)
Gastroenteritis	Staphylococcal-Infections
Herpangina	Streptococcal Infections

The following occupational disease also shall be reported:

Asbestosis	Mesothelioma
Silicosis	Coal Workers Pneumoconiosis
Byssinosis	

**FOR FURTHER ASSISTANCE CONTACT THE LOCAL COUNTY HEALTH UNIT.**



**APPENDIX D: DISASTER/EMERGENCY PREPAREDNESS**

<b>DISASTER/EMERGENCY NUMBERS</b>	<b>CONTACT/TOWN</b>	<b>TELEPHONE NUMBER</b>
<b>AMBULANCE</b>		
<b>APPLIANCE REPAIR</b>		
<b>BUILDING INSPECTOR</b>		
<b>CHILD ABUSE HOT LINE</b>		1-800-482-5964
<b>CHILD CARE LICENSING UNIT</b>	Little Rock	1-800-445-3316 or 501-682-
<b>CLEANING/MAINTENANCE</b>		
<b>ELECTRIC COMPANY</b>		
<b>ELECTRICIAN</b>		
<b>EMERGENCY CHILD LOCATOR</b>		1-866-908-9572
<b>FACILITY DIRECTOR</b>		
<b>FIRE DEPARTMENT</b>		
<b>FIRE DEPARTMENT (Non-Emergency)</b>		
<b>GAS COMPANY</b>		
<b>GLASS COMPANY</b>		
<b>HEALTH DEPARTMENT (Local)</b>		
<b>HEATING/AIR CONDITIONING</b>		
<b>INSURANCE AGENT AND POLICY</b>		
<b>LICENSING SPECIALIST</b>		
<b>LOCKS</b>		
<b>NATIONAL EMERGENCY FAMILY REGISTRY AND LOCATOR</b>		1-800-588-9822
<b>PLUMBER</b>		
<b>POISON CONTROL</b>		1-800-376-4766
<b>POLICE</b>		
<b>POLICE (Local Non-Emergency)</b>		
<b>RED CROSS (Local)</b>		
<b>SHERIFF</b>		
<b>TRASH REMOVAL</b>		
<b>WATER DEPARTMENT</b>		

## Child Care Immunization Requirements

Recommended by Arkansas Department of Health and  
Required by the Department of Human Services, Division of Child Care and Early Childhood, Licensing Division

AGE	DTaP DTP/DT	POLIO	Hib **	HEPATITIS B	MMR ****	VARICELLA ****	PNEUMOCOCCAL **
<b>1-2 Months</b>	None	None	None	None (1-2 doses possible)	None	None	None
<b>3-4 Months</b>	1 dose	1 dose	1 dose	1 dose (1-2 doses possible)	None	None	1 dose
<b>5-6 Months</b>	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	None	None	2 doses <b>OR</b> 1 dose within last 8 weeks
<b>7-12 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None	None	2-3 doses <b>OR</b> 1 dose within last 8 weeks
<b>13-15 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None (1 dose possible)	None (1 dose possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)
<b>16-18 Months</b>	3 doses or 1 dose within last 8 weeks	2 doses or 1 dose within last 8 weeks (3 doses possible)	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	2 doses <b>OR</b> 1 dose within the last 8 weeks (3 doses possible)	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 2 doses on/after 1st birthday
<b>19-48 months</b>	4 doses <b>OR</b> 3rd dose within last 6 months <b>OR</b> 1 dose within last 8 weeks	3 doses <b>OR</b> 1 dose within last 8 weeks	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	3 doses *** <b>OR</b> 1 dose within last 8 weeks	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday
<b>49-72 Months</b>	5 doses * <b>OR</b> 4th dose within last 6 months <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 4 doses with last dose on/after 4th birthday	4 doses <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 3 doses with last dose on/after 4th birthday	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses <b>Not required on/after 5th birthday</b>	3 doses *** <b>OR</b> 1 dose within the last 8 weeks	1 dose	1 dose	3-4 doses with last dose on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday <b>Not required on/after 5th birthday</b>

\* **5th DTaP/DTP/DT** (Pre-school dose) must be given on/after the child's 4th birthday and may be given at any time from 49 to 72 months of age.

Interval between 4th DTaP/DTP/DT and 5th DTaP/DTP/DT should be at least 6 months.

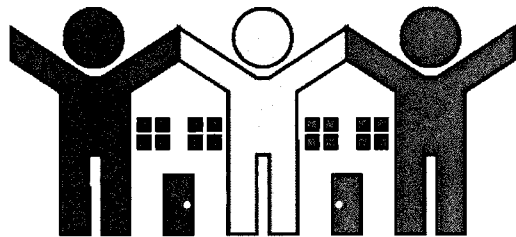
\*\* **For Hib and Pneumococcal**, children receiving the first dose of vaccine at age 7 months or older require fewer doses to complete the series.

\*\*\* **3rd dose of hepatitis B** should be given at least 8 weeks after the 2nd dose, at least 16 weeks after the 1st dose, and it should not be administered before the child is 24 weeks of age.

\*\*\*\* **MMR and Varicella** vaccine must be given on/after the child's first birthday.



MINIMUM LICENSING  
REQUIREMENTS  
FOR  
Registered Child  
Care Family Homes



ARKANSAS DEPARTMENT HUMAN SERVICES  
DIVISION OF CHILD CARE AND EARLY CHILDHOOD EDUCATION  
CHILD CARE LICENSING UNIT  
P. O. BOX 1437, SLOT S150  
LITTLE ROCK, ARKANSAS 72203-1437  
(501) 682-8590



Registered Homes



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# **Registration Requirements for Registered Child Care Family Homes**

## **100 DEPARTMENT RESPONSIBILITY**

### **101 Responsibilities and Requirements**

1. The Division of Child Care and Early Childhood Education (referred to hereafter as the Division) under the Department of Human Services is directly responsible for the inspection and evaluation of all Registered Homes.
2. The Division has the power to establish rules, regulations, and standards for licensing/registration and operation of child care facilities. This includes all powers with respect to granting, revocation, denial, and suspension of licenses and registrations. Information regarding the appeal process is available upon request.
3. The Division works in coordination with local and state Health Departments, Fire Departments, City Planning or Zoning departments and the Boiler Division of the Department of Labor.
4. It is recommended that the owner ~~should~~ be aware of any applicable city or county zoning ordinances or codes or neighborhood covenants which may limit the number of children in care or impose additional safety requirements. The Division will share information on the location and status of registered homes with any city or county that requests this information.
5. The Child Care Licensing Unit will notify the applicable federal agency at any time they become aware of or are advised of violations of any of the following or similar laws. It is recommended that the owner ~~should~~ be aware of applicable federal laws which may affect the operation of the facility, such as, but not limited to:
  - a. Americans with Disabilities Act (ADA).
  - b. Environmental Protection Agency (EPA) regulations to ensure that any renovation or repair work on a home, child care facility, or school that was constructed prior to 1978 shall be completed by a contractor that is certified by the Environmental Protection Agency (EPA), when the repairs and/or renovations consist of any or all of the following: the repair or renovation disturbs six (6) or more square feet of the interior, the repair or renovation disturbs twenty (20) or more square feet of the exterior, and/or the repair or renovation involves removing a window.
  - c. Federal civil rights laws state that a facility may not discriminate on the basis of race, color, sex, religion, national origin, physical or mental handicap, or veteran status.
6. The Registrant shall maintain Child Care Liability insurance and comply with the following requirements:
  - a. Prior to approval of an application, the applicant shall provide verification of the required



coverage to the Licensing Specialist and provide subsequent verification when requested. (Homes licensed prior to the effective date of this revision shall have ninety (90) days to comply with this requirement.)

- b. Maintain the minimum amount of coverage as follows:

Registered Capacity of Home	Minimum Child Care Liability Coverage Required
1 – 5	\$ 100,000 per occurrence

**102 General Requirements**

1. To determine a recommendation for registration, the applicant’s home shall be reviewed by a Child Care Licensing Specialist to determine that the home is in substantial compliance with the requirements. (**Clarification:** In addition to rooms used for care, Child Care Licensing Staff must also be given access to all other rooms or spaces not used for child care. Any rooms or areas that are not accessible to children in care will only be viewed briefly for major health and safety issues and will not be routinely monitored for general licensing compliance. This is to help insure that there are no dangers such as fire hazards, which could impact the safety of the entire structure.)
2. Substantial Compliance means compliance with all essential standards necessary to protect the health, safety and welfare of the children attending the registered home. Essential standards include but are not limited to those relating to issues involving fire, health, safety, nutrition, and behavior management.

**103 Definitions and Application**

There are three (3) types of registered homes as follows:

1. Registered Child Care Family Home: a situation in which five (5) or less children are cared for in the caregiver’s own residence or in some other suitable family type residence.
2. Relative Child Care Family Home: a situation in which five (5) or less children are cared for by a relative of the child(ren). The relationship must be that of a grandparent, great-grandparent, aunt, uncle, sibling (residing out of the home). The registered relative may provide the child care either in his/her home or the home of the child(ren). Proof of relationship must be provided. The following must be provided to verify proof of relationship:
  - a. the child(ren)’s birth certificate(s)
  - b. the parent’s birth certificate
  - c. marriage license of the parent (if parent’s last name has changed)
  - d. marriage license of the caregiver (if last name has changed)
  - e. birth certificate of the caregiver (if the application is for an aunt or uncle)
3. In-Home Child Care Provider: an individual selected by the family to provide the day care to five (5) or less children in the child(ren)’s own home. The In-Home Registration is not valid for child care provided outside the child(ren)’s own home.

4. There shall be no more than one registration issued per home/structure. (This does not apply to situations such as duplexes where two registrations could be issued to two separate applicants.) An individual shall be eligible to hold only one registration, which shall be issued for one specified location.
5. Home with only one caregiver shall limit care to no more than two shifts (18 hours) per 24 hour period. Homes offering 24 hour care shall provide a schedule verifying that they have made provisions for secondary caregiver to provide relief for one shift. (Alternative compliance may be requested by caregivers who provide 24 hour care and who do not have a secondary caregiver. For this request to be approved, consideration will be given to the overall level of compliance with registration requirements and to the number and ages of children in care during the third shift.
6. The holder(s) of the registration shall be the primary caregiver(s) and at least one shall be present and responsible for children during hours of care and shall not be otherwise employed during the hours of care. (If a qualified secondary caregiver is present, the primary caregiver may be absent for reasons related to the operation of the child care business, such as attending required training, and for brief and/or occasional absences relating to personal business or personal time off.)
7. If at any time care is provided to six or more children from more than one family, the law requires the provider to be licensed. The caregiver's own preschool children shall be considered when determining the need for a license or registration. The caregiver's own school age children are not considered when determining the need for a license or registration. Other children in the home who are not accompanied by a parent are considered as being in care whether pay is received for the care or not.
8. Any home that has not provided care to children for a period of one year shall have the registration closed unless a written request is made by the registrant stating why closure should not take place.
9. The primary caregiver in a Registered Home shall submit the following to complete the application process:
  - a. A completed and signed application provided by the Division
  - b. Diagram of the home indicating rooms to be used by children in care and the location of exit doors.
  - c. A Health Card on applicant, other caregivers and any adult(s) in addition to the caregiver(s) present in the home on a regular basis while children are in care.
  - d. Zoning approval, if applicable, shall be provided by new applicants for license and by existing homes requesting increase in licensing capacity
  - e. A signed Authorization for Release of Confidential Information/Child Maltreatment Central Registry Check Form. Everyone living in the home age 18 and older must complete and sign this form. A check or money order for \$10.00 made out to Department of Human Services must be attached to each form. Children under age 18 only need to be listed where applicable. This form must be notarized.
  - f. Criminal Record Check Form(s). Everyone in the home age 18 and older must complete a

- form. The form(s) must be notarized.
- g. The registrant's Social Security Number or TIN (Tax Identification Number) shall be listed on the application. (A TIN number can be obtained by calling 1-900-546-3920 or by sending a SS-4 to the Internal Revenue Service, Memphis, Tennessee 37501. It takes approximately 4 weeks to receive the TIN.)
  - h. Boiler inspection, or verification that inspection has been scheduled
  - i. Verification of Child Care Liability insurance (if Child Care Liability Insurance cannot be obtained before application, it must be obtained with proof provided to the Child Care Licensing Unit **before** care of children can be provided)
  - ~~j. A reasonable plan with a proposed budget for the financial support of the home covering costs of staffing, building (including rent or mortgage and repairs), utilities, equipment, safety, and nutrition.~~

### **104 Registration Procedures**

1. Any applicant applying for Registration may contact the local Division Office or Child Care Licensing Specialist to obtain information and/or the necessary application and related forms.
2. A pre-application consultation meeting shall be required for all applicants for registration prior to approval of the application. This meeting shall be offered prior to or within thirty (30) days of receipt of the application.
3. Upon receipt of a signed application the Child Care Licensing Specialist shall schedule an appointment to inspect, evaluate, and make a recommendation for consideration of registration of the Division.
4. The Child Care Licensing Specialist shall make unscheduled visits throughout the year to determine continued compliance of standards and to offer consultation and technical assistance.
5. The registration, as issued, shall apply only to the home's location at the time of registration. The registrant shall notify the Child Care Licensing Specialist's office of any change of location or ownership at which time a new study shall be conducted. Upon issuance of a registration, the registration shall remain in effect as long as compliance is maintained.
6. New Provisional Registration-If the Licensing Specialist finds that an applicant for a registered home meets the registration requirements or has a reasonable expectation of correcting deficiencies within specified time frames, the Child Care Licensing Specialist may recommend a new provisional registration to the Division. The new provisional registration shall be in effect for a period of time, not to exceed twelve (12) months. This time frame shall be specified in the provisional registration. (The Licensing Specialist has sixty (60) days to submit a recommendation to the Division for a provisional registration.)
7. Regular Registration- The Child Care Licensing Specialist will recommend a regular registration when the home has demonstrated substantial compliance, or when an existing registrant with a regular registration relocates their home and their past demonstrates a substantial level of compliance.

8. Probationary Provisional Registration- The Licensing Unit may issue a Probationary Provisional registration when the Home is not maintaining substantial compliance due to deficiencies which are so numerous, frequent or severe as to potentially jeopardize the health, safety, and welfare of children. The home and the Licensing Unit shall have a corrective action plan in place addressing the issues.

Based on the level of compliance during the period of the Probationary Provisional Registration the Licensing Unit may:

- a. Issue a Regular registration
  - b. Suspend a registration
  - c. Revoke a registration
9. Suspension or Revocation of Registration-At the time of a final determination by the Division of revocation or suspension of a registration, the Division shall specify in the letter the period and terms of the action. A revocation of a registration shall be set for no less than one (1) year but may be for a longer term as established by the Division. Related parties shall not be eligible to apply for registration for the same specified period. (Related parties are defined as immediate family members, members of Board of Directors, person or entities associated or affiliated with, or which share common ownership, control, or common board members or which have control of or is controlled by the registrant. An immediate family member is defined as a spouse, step and in-law relationships, a child, a natural or adoptive parent, a sibling, a grandparent, a grandchild or a son or daughter-in-law.) The revocation of a registration places that registration in a null and void status. At the completion of the terms of revocation, homes wishing to be re-registered must submit a new application for registration for review and approval by the Division.

### **105 Appeal of Registration Actions**

1. A registrant or applicant for registration may request to appeal any of the following registration actions:
  - a. Adverse registration actions (revocation of the registration or denial of an application for registration.
  - b. Founded registered complaints
  - c. Cited noncompliance with the published standards
2. An appeal may be initiated on any of the above actions by requesting an appeal in writing to the Licensing Specialist or Licensing Supervisory Staff. Requests to appeal adverse registration actions must be mailed within ten (10) calendar days of the receipt of the notice of the adverse action. Requests to appeal registration actions, other than adverse, must be mailed within twenty (20) calendar days from receipt of the notification of the action. The request to appeal shall include a statement of the action(s) taken by the Division and the reason(s) the registrant or applicant for registration disagrees with that action. The request to appeal will be reviewed by the Licensing Supervisor and the Licensing Administrator. If the appeal is not resolved to the satisfaction of the registrant or applicant for registration, the matter will be

referred to the Child Care Appeal Review Panel for hearing. (Additional information regarding the appeal procedures and the Child Care Appeal Review Panel is available on request.)

### **106 Alternative Compliance**

1. The Division may grant alternative compliance with the Minimum Standards Required for Registered Child Care Homes, if the Division determines that the alternative form of compliance offers equal protection of health, safety and welfare to children and meets the basic intent of the requirements for which the registrant is making the request.
2. The Division shall consider all requests for alternative compliance with the Registration requirements except those requirements which are enforced by the Department of Health, Local Fire Marshall or State Fire Marshall's Office.
3. To request alternative compliance, the following procedures shall be initiated by the person responsible for the operation of the facility:
  - a. The applicant/registrant shall submit the request for alternative compliance in writing.
  - b. The request shall include:
    - The specific standard for which alternative compliance is sought
    - An explanation of how the alternative compliance is equal to, or exceeds, the requirement
    - Full justification and description of what the alternative compliance method will be and the method by which the facility will carry out this plan to be able to continue to provide for the health, safety, and welfare of children as intended by the requirement.
    - The applicant/registrant shall provide clear and supportive evidence, and upon request of the Division, an expert's opinion of the effects of the health, safety and welfare of children and how it will protect through the alternative means of compliance
4. A separate written request shall be submitted for each requirement for which alternative compliance is sought.

The approved alternative compliance is effective for the duration of the registration, unless a shorter time frame is requested or approved.

5. The granting of alternative compliance for a requirement shall in no way constitute a precedent. If an alternative means of complying with the requirement is granted by the Division and the facility fails to implement satisfactorily this alternative means, the original requirement for which alternative compliance was sought shall become immediately enforceable.
6. The Division shall have the right to obtain an expert opinion to corroborate that provided by the applicant/registrant.
7. The Division reserves the right to deny requests for alternative compliance when it finds that such request does not adequately protect the health, safety and welfare of children and does

not meet the intent of the requirement.

8. All requests for alternative compliance shall be answered in writing by the Division.

### **107 Registration Investigations and Inspections**

1. Child Care Licensing staff shall have access to Registered Homes for the purpose of conducting inspections, reviews, and complaint investigations. **Denial of access to the home or denial of the right to interview children in care or other individuals present during hours of care may result in adverse action against the registration.** (Clarification: In addition to Child Care Licensing staff having access to all areas of care, they must also be given access to any other rooms or spaces not used for care, to ensure there are no possible hazards.)
2. If video recordings are made by the caregiver and are maintained for viewing as part of a continuous monitoring system, they shall be made available to licensing staff upon request. This does not include video recordings of special events, etc.

### **108 Child Maltreatment Checks**

1. The following persons shall be required to have their background reviewed through an Arkansas Child Maltreatment Central Registry Check: (A check or money order for ~~\$10.00~~, payable to Department of Human Services, must be attached to each notarized form.)
  - a. Each applicant At application and every two years thereafter
  - b. All household members who are at least ~~18~~ 10 years of age At application, upon residency, and every two years thereafter
  - c. Staff members and applicants for employment in a registered home At application or within 10 days of hire and every two years thereafter
  - d. All volunteers who have access to children in the home At application and every two years thereafter
  - e. Therapist or other persons who have routine contact with children Within 10 days of the time they begin to provide services or begin to participate in home activities and every two years thereafter
2. The Division has the authority to review and consider each true (founded) report of child maltreatment received from the Central Registry. The Division shall retain the authority to deny the applicant or revoke the registration.
3. All caregiver(s) are mandated reporters under the Child Maltreatment Act. The caregiver shall notify the Child Maltreatment Hot Line number at 1-800-482-5964 when there is reason to believe that a child has been abused or neglected. (AR Code Annotated 12-12-501 et seq.)

These reports of child maltreatment shall include all allegations made to the registrant by parents, staff members or the general public. It is recommended that the registrant ~~should~~ call the Child Care Licensing Specialist for guidance if there is any question about whether or not the Hot Line should be called regarding any situation where potential child maltreatment is involved.

If a complaint of child maltreatment is filed against any registrant or persons in the home, the Child Care Licensing Unit shall evaluate the risk to children and determine the suitability of the persons to supervise, be left alone with children or remain in the home during hours of care until the allegations have been determined true or unsubstantiated.

4. The Registered Child Care Family Home operator, any employees or other persons in the home who have had a true report of child maltreatment shall follow the corrective action plan approved by the Child Care Licensing Unit. Corrective action measures may vary from relevant training to reassignment or termination. Failure to comply with corrective action plans can constitute grounds for adverse action against the registration.

### **109 Criminal Record Checks**

1. The following persons shall apply to the Identification Bureau of the Arkansas State Police for a nationwide criminal records check, to be conducted by the FBI, which shall include a fingerprint check: (The individual is responsible for the cost of the nationwide check.)

Fingerprints submitted will be used to check the criminal history records of the FBI. Individuals with results showing a prohibited offense shall be advised to contact the Licensing Unit for procedures to obtain the results and for procedures to update or make corrections to the record of their individual history.

- a. Each applicant to own or operate a registered home and all household members age 18 and up at application only
2. The following person shall be required to have their background reviewed through Criminal Records check including the Arkansas Sexual Offender Registry conducted by the Arkansas State Police:
  - a. Each applicant At application and every 5 years thereafter
  - b. All household members who are 18 years of age or older At application; upon residency and every 5 years thereafter
  - c. Staff and applicants for employment in a registered home Within 10 days of hire or start date and every 5 years thereafter
  - d. Volunteers who have routine contact with children Within 10 days of hire and every 5 years thereafter

- e. Therapist or other persons who have supervisory control, disciplinary control over children or have routine contact with children      Within 10 days of the time they begin to provide services or begin to participate in home activities and every 5 years thereafter

3. Criminal records will be returned to the division for review. Any charge/convictions listed in this section (Section 110) that are returned will be considered regardless of whether the record is expunged, pardoned or otherwise sealed.
4. No person shall be eligible to be a child care facility owner, operator, ~~or~~ employee, household member, or volunteer who is in the home on a routine/continual basis ~~visitor or guest or~~ if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are permanently prohibited:

01. Abuse of an endangered or impaired person, if felony	§5-28-103
02. Arson	§5-38-301
03. Capital Murder	§5-10-101
04. Endangering the Welfare of an Incompetent person- 1 <sup>st</sup> degree	§5-27-201
05. Kidnapping	§5-11-102
06. Murder in the First degree	§5-10-102
07. Murder in the Second degree	§5-10-103
08. Rape	§5-14-103
09. Sexual Assault in the First degree	§5-14-124
10. Sexual Assault in the Second degree	§5-14-125

5. No person shall be eligible to be a child care facility owner, operator, ~~or~~ employee, household member or volunteer, who is in the home on a routine/continual basis, ~~or~~ guest if that person has pled guilty, or been found guilty, of any of the following offenses by any court in the State of Arkansas, any similar offense by a court in another state or any similar offense by a federal court. The following offenses are prohibited:

01. Criminal Attempt to commit any offenses in MLR Section 110	§5-3-201
02. Criminal Complicity to commit any offenses in MLR Section 110	§5-3-202
03. Criminal Conspiracy to commit any offenses in MLR Section 110	§5-3-401
04. Criminal Solicitation to commit any offenses in MLR Section 110	§5-3-301
05. Assault in the First, Second, or Third degree	§5-13-205 - §5-13-207
06. Assault, Aggravated	§5-13-204
07. Assault, Aggravated on a Family or Household Member	§5-26-306
08. Battery in the First, Second, or Third Degree	§5-13-201 - §5-13-203
09. Breaking or Entering	§5-39-202
10. Burglary	§5-39-201
11. Coercion	§5-13-208
12. Computer Crimes Against Minors	§5-27-601 et. seq.
13. Contributing to the Delinquency of a Juvenile	§5-27-220
14. Contributing to the Delinquency of a Minor	§5-27-209



15. Criminal Impersonation	§5-3-208
16. Criminal Use of a Prohibited Weapon	§5-73-104
17. Death Threats Concerning a School Employee or Students	§5-17-101
18. Domestic Battery in the First, Second, or Third Degree	§5-26-303 - §5-26-305
19. Employing or Consenting to the Use of a Child in a Sexual Performance	§5-27-402
20. Endangering the Welfare of a Minor in the First or Second Degree	§5-27-205 and §5-27-206
21. Endangering the Welfare of an Incompetent Person in the First or Second Degree	§5-27-201 and §5-27-202
22. Engaging Children in Sexually Explicit Conduct for Use in Visual or Print Media	§5-27-303
23. False Imprisonment in the First or Second Degree	§5-11-103 and §5-11-104
24. Felony Abuse of an Endangered or Impaired Person	§5-28-103
25. Felony Interference with a Law Enforcement Officer	§5-54-104
26. Felony Violation of the Uniform Controlled Substance Act	§5-64-101 - §5-64-508 et. seq.
27. Financial Identity Fraud	§5-37-227
28. Forgery	§5-37-201
29. Incest	§5-26-202
30. Interference with Court Ordered Custody	§5-26-502
31. Interference with Visitation	§5-26-501
32. Introduction of Controlled Substance into Body of Another Person	§5-13-210
33. Manslaughter	§5-10-104
34. Negligent Homicide	§5-10-105
35. Obscene Performance at a Live Public Show	§5-68-305
36. Offense of Cruelty to Animals	§5-62-103
37. Offense of Aggravated Cruelty to Dog, Cat, or Horse	§5-62-104
38. Pandering or Possessing Visual or Print Medium Depicting Sexually Explicit Conduct Involving a Child	§5-27-304
39. Patronizing a Prostitute	§5-70-103
40. Permanent Detention or Restraint	§5-11-106
41. Permitting Abuse of a Minor	§5-27-221
42. Producing, Directing, or Promoting a Sexual Performance by a Child	§5-27-403
43. Promoting Obscene Materials	§5-68-303
44. Promoting Obscene Performance	§5-68-304
45. Promoting Prostitution in the First, Second, or Third Degree	§5-70-104 - §5-70-106
46. Prostitution	§5-70-102
47. Public Display of Obscenity	§5-68-205
48. Resisting Arrest	§5-54-103
49. Robbery	§5-12-102
50. Robbery (Aggravated Robbery)	§5-12-103
51. Sexual Offense (any)	§5-14-101 et. seq.
52. Simultaneous Possession of Drugs and Firearms	§5-74-106
53. Soliciting Money or Property from Incompetents	§5-27-229
54. Stalking	§5-71-229
55. Terroristic Act	§5-13-310
56. Terroristic Threatening	§5-13-301
57. Theft by Receiving	§5-36-106
58. Theft of Property	§5-36-103

59. Theft of Services	§5-36-104
60. Transportation of Minors for Prohibited Sexual Conduct	§5-27-305
61. Unlawful Discharge of a Firearm from a Vehicle	§5-74-107
62. Voyeurism	§5-16-102

6.. If the licensee wishes to employ an individual with a conviction or plea of guilty or nolo contendere for the following nonviolent offenses, they shall submit a written request for a waiver prior to employment. (§ 20-38-103 (e) (3) (A) Act 990 of 2013)

- a. Theft by receiving § 5-36-106
- b. Forgery § 5-37-201
- c. Financial identity fraud § 5-37-227
- d. Resisting arrest § 5-54-103
- e. Criminal impersonation in the second degree § 5-37-208(b)
- f. Interference with visitation § 5-26-501
- g. Interference with court-ordered visitation § 5-26-502
- h. Prostitution § 5-70-102
- i. Patronizing a prostitute § 5-70-203

The waiver may be approved if all of the following conditions are met:

- The individual has completed probation or parole supervision
- The individual has paid all court ordered fees, fines and/or restitution
- The individual has fully complied with all court orders pertaining to the conviction or plea

7. The waiver will be revoked if after employment the individual pleads guilty or nolo contendere or is found guilty of any prohibited offense (including the list above a-i) or has a true or founded report of child maltreatment or adult maltreatment in a central registry.
8. The request for waiver and certification of approval shall be kept in the individual's file for the term of employment and three years after termination of employment.
9. If approved, the waiver is not transferable to another licensed facility.
10. Any person who has pled guilty, nolo contendere, or who has been found guilty of any one of the offenses listed above (Section 109.4), may not work in child care unless:
  - a. The date of the conviction, plea of guilty or nolo contendere for a misdemeanor offense is at least five (5) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the five (5) year period preceding the background check request.
  - b. The date of the conviction, plea of guilty or nolo contendere for a felony offense is at least ten (10) years from the date of the request for the criminal history records check and there have been no criminal convictions or pleas of guilty or nolo contendere of any type or nature during the ten (10) year period preceding the background check request.
11. Anyone employed in a licensed center, COE center, licensed child care family home or a

registered child care family home prior to 9/1/2009 with a clear background check history may remain eligible for employment unless the employee had a conviction, plead guilty, or plead nolo contendere to an offense listed in the above section (Section 109.4) since 9/1/2009.

## **200 ADMINISTRATION**

### **201 Administrative Procedures**

1. Parents shall be informed in writing upon enrollment of their child that children may be subject to interviews by licensing staff, child maltreatment investigators and/or law enforcement officials for the purpose of determining licensing compliance or for investigative purposes. (Child interviews do not require parental notice or consent.)
2. Required records shall be kept and made available to the Child Care Licensing Unit on request.
3. Falsification of any document or the submission of false information to the Child Care Licensing Unit, or any other unit of the Division, may constitute grounds for revocation of the registration. (Falsification means the submission of untrue information, whether by statement or omission.)
4. All applicable health and fire regulations shall be met.
5. The registered home shall not care for more than 5 children at any time including their own pre-school children.
6. The caregiver shall provide prudent supervision of the other persons in the Registered Home, and is responsible for the health, welfare, and safety of the children in care.
7. The caregiver shall provide a copy of the list of Kindergarten Readiness skills, prepared by the Arkansas Department of Education, to parents of all three and four year old children enrolled. (Act 825 of 2003) A statement, signed by the parent that they have received a copy of the list, shall be maintained in the child's record.
8. The caregiver shall not release a child to anyone whom is not immediately recognized as the child's parent or as someone on the authorized pick-up list unless:
  - a. The individual can provide an official picture ID AND
  - b. The person in charge can match the ID to the individual named on the child's data sheet
9. Verification of permission for persons not on the authorized shall be obtained by the caregiver by calling the parent, at a number listed in the child's record. The caregiver shall view an official picture ID of the individual to verify identity.

## **300 PERSONNEL**

### **301 Caregiver Qualifications and Responsibilities**

1. The registered home primary caregiver shall be 18 years or older.
2. The primary caregiver and all secondary caregivers shall have a high school diploma or GED. Registered homes approved prior to this revision are exempt from this requirement. ~~be able to read and write well enough to keep required records.~~
3. The caregiver shall not be otherwise employed during the time he/she is responsible for children in the home. Employment at other times shall not affect the quality of care given the children.
4. The caregiver shall not use profanity or speak in an abusive manner when children are present. The caregiver shall also cooperate with licensing staff during regular monitor visits.
5. The caregiver shall have a person who would be able to care for the children in the event of an emergency.
6. Newly registered home providers shall attend Family Child Care Provider Training within the first six months of being registered.
7. The registrant shall notify the Licensing Unit within five (5) calendar days of any change in the person(s) designated as secondary caregivers.
8. The caregiver shall obtain at least 15 hours of training registered with the Division of Child Care and Early Childhood Education Professional Development Registry, Department of Education, or Department of Higher Education approved training each year in continuing early childhood education. ~~which is approved by the Division (Act 584 of 1993).~~

Topics appropriate for continuing early education shall include, but are not limited to the following:

- a. Child growth and development
  - b. Nutrition and food service
  - c. Parent communication and involvement
  - d. Curriculum and curriculum development
  - e. Developmentally appropriate practice and learning environments
  - f. Behavior management
  - g. Emergency care and first aid
  - h. Administration and management of early childhood program
9. ~~The caregiver must be certified by the American Heart Association or the American Red Cross in infant/child cardiopulmonary resuscitation (CPR) and First Aid. Adult CPR is also required if school-age children are in care, or documentation that the current certification covers the ages of children in care. Infant/Child/Adult **CPR** certification will also be accepted from the AR Department of Labor, with documentation they conducted the course. All certifications shall be current.~~

At least one caregiver who has a current certificate of successful completion of first aid and

CPR from an approved organization shall be on site at all times.

- a. The curriculum shall conform to current American Heart Association or American Red Cross guidelines.
  - b. The curriculum shall require hands on, skill-based instruction, as well as ~~written and~~ practical testing. Training and certification that is provided solely "on-line" will not be accepted.
  - c. The instructor shall be qualified and authorized to teach the curriculum and shall be certified by a nationally recognized organization. (Including but not limited to: Health and Safety Institute; EMS Safety Services, Inc.)
10. ~~The caregiver shall provide a tuberculin test annually.~~ The caregiver shall be physically and emotionally able to care for children.
  11. Child Care Licensing may require a physician's statement for the caregiver anytime behavioral or physical indicators warrant.
  12. The caregiver shall not engage in behavior that could be viewed as sexual or as dangerous, exploitative or physically harmful to children.
  13. The caregiver shall not consume or be under the influence of illegal drugs. The caregiver shall not consume or be under the influence of alcohol while delivering care. The caregiver shall not consume or be under the influence of medications (prescription or non-prescription), which may impair his/her ability to provide care.
  14. Newly registered caregivers shall attend BAS (Business Administration Scale) training within the first six month of being registered.
  15. At no time shall children be left unsupervised.
  16. Additional staff provisions shall be made for enrollment of children with disabilities who require individual attention.
  17. It is recommended that all staff members who have direct contact with children ~~shall~~ receive annual Influenza (flu) immunizations.
  18. It is recommended that all staff members who have direct contact with children ~~should~~ receive a one-time Tdap (Diphtheria, Tetanus & Pertussis) immunization.
  19. It is recommended that all staff members who have direct contact with children ~~should be required to have~~ receive the recommended series of immunizations for chicken pox, mumps, measles and rubella or evidence of immunity.

### **302 Adults in the Registered Home**

1. The caregiver(s) shall provide a clear statement regarding the presence of any other adults 18 years of age and above who reside in the home. Any adult, residents or visitors shall not

present a threat to the safety or welfare of children.

2. A Registered Home shall have additional staff when there are persons in the home who require constant or routine care.
3. ~~Any adult(s) in addition to the caregiver(s) present in the home on a regular basis, when children are in care, shall provide an annual tuberculin test verifying that the adult is free from TB.~~

### **303 Supervision**

1. The caregiver shall be responsible for children in care at all times and shall exercise prudent supervision.
2. When a caregiver is not in the same room with children the children shall be frequently observed and the caregiver shall remain close enough to easily hear them.
3. Doors to rooms where children are sleeping or playing within the home shall remain open and sleeping children shall be visually monitored and periodically checked to insure they are breathing normally.
4. The caregiver shall be present on the outdoor play area at all times when any children are present. ~~when any children under the age of five (5) are present. Children ages five (5) and up may use the outdoor play area without the caregiver being present as long as the caregiver visually observes the children at least every five minutes and remains in a section of the home where she (he) can hear and see the children and can reach them quickly in case of an emergency.~~
5. The caregiver shall not leave children unattended in the kitchen area of the home while any cooking is occurring.
6. Ironing shall not occur in the presence of the children.

## **400 PROGRAM AND ACTIVITIES**

### **401 Program Requirements**

1. There shall be a posted daily schedule ~~posted~~, which includes age-appropriate activities, including alternating periods of active play and quiet activities throughout the day.
2. Staff shall plan and provide experiences that meet children's needs and stimulate learning in ~~all~~ ~~six~~ the following developmental areas: physical, social/emotional, creative/aesthetic, cognitive /intellectual and language/literacy ~~and cultural~~, found in the Early Childhood Frameworks. (Experiences that promote self-concept development for infants/toddlers shall also be provided if that age group is in care.)
3. There shall be meaningful interaction between staff and children to include but not limited to

the following:

- a. Comfort children who are upset;
  - b. Engage in frequent, multiple and rich social interchanges such as smiling, talking, touching, and singing;
  - c. ~~Be play partners as well as protectors;~~ Interact with children by being their play partner as well as protector.
  - d. ~~Be attuned to children's feelings and reflect them back;~~ Help children identify and label feelings by being attuned to children's needs.
  - e. Communicate consistently with parents/guardians;
  - f. Interact with children and develop a relationship in the context of everyday routines.
4. There shall be an opportunity for a supervised rest period that does not exceed two hours.
    - a. ~~Does not exceed two (2) hours.~~
    - b. ~~Does not force children to remain on cot or mat if they do not fall asleep, and allows them to participate in a quiet activity that does not disturb the children who are asleep.~~
  5. If children do not fall asleep, they shall be allowed to participate in a quiet activity either on their cot, in the area, or in another room under supervision.
  6. Staff shall not cover the faces of sleeping children with blankets or other bedding.
  7. Pacifiers, if used, shall not be secured around the neck by a cord or by any other means that could represent a ~~or have~~ strangulation hazards ~~attached~~.
  8. There shall be a total of at least one (1) hour of outdoor play per day in suitable weather. It is recommended that when making a determination if children should play outside, staff shall consider the following environmental factors:
    - a. When the heat index is forecast to be ninety (90) degrees or above, it is recommended that outdoor play ~~should~~ be scheduled during early morning hours or the length of time spent outdoors should be reduced to avoid heat stress.
    - b. When outdoor play occurs during the hotter part of the day, it is recommended that children ~~should~~ have shaded area, an ample supply of water and should be monitored closely for signs of heat stress.
    - c. When outdoor play occurs during the winter months and when temperatures are extremely cold, It is recommended that the time scheduled for outdoor play ~~should~~ be reduced or suspended depending on the temperature and other weather conditions.
  9. There shall be a total of ~~one hour~~ 30 minutes per day of moderate to vigorous physical activity. This could be included in outdoor play time if it meets this criterion. ~~these criteria.~~
  10. Indoor activity equipment shall be adequate for the number and ages of children in the Registered Home to meet their physical and developmental needs.
  11. Children shall have a variety of toys, books, ~~and~~ creative materials, and equipment that is

easily accessible and arranged to support learning. This includes equipment for:

- a. Large muscle/Gross Motor activities (such as climbing and running)
  - b. Manipulative/Fine Motor activities (such as things done with the hands: puzzles, drawing, modeling clay)
12. The use of television, DVD, video cassette viewing and computer/video games and other screen time activities shall meet the following requirements;
- a. Shall be limited to programs which are age-appropriate (It is recommended that programs ~~should~~ have educational value)
  - b. Shall not exceed one (1) hour daily per child or group of children. Children shall not be required to participate in screen time activities and shall be offered other choices. (Viewing time may be extended for special events or occasions such as a current event, holiday or birthday celebration or for the occasional viewing of age appropriate movies or other programs that may exceed one hour in length.)
  - c. Computer learning periods for children below age 5 may not exceed two (2) hours a day per child or group of children
13. It is recommended that ~~The~~ caregivers ~~should~~ encourage parents to be involved in planning and participating in activities at the registered child care family home.
14. The caregiver shall distribute materials developed or approved by the Department of Health on prevention of Shaken Baby Syndrome to all parents of infants, upon enrollment. Written documentation of receipt of this information by each parent, with a signature, shall be placed in the child's file. (Carter's Law, Act 1208)
15. Photos or video recordings shall not be made of any child without prior written parental permission.
16. Photos or video recordings of children shall not be placed on social media web sites without prior written parental permission.

#### **402 Infant & Toddler Specific Program Requirements**

1. Infants shall be carefully supervised at all times.
2. The caregiver shall provide a safe and clean learning environment, both indoors and outdoors, with age appropriate materials and equipment arranged to support learning.
3. ~~Stimulation shall be given to infants in a variety of ways. Caregivers shall hold children, and offer nurturing, responsive care in addition to the routine care of diapering and feeding.~~

The ~~facility~~ caregiver shall implement relationship-based practices that promote consistency and continuity of care for infants and toddlers. Infant and toddler caregivers/teachers shall



- a. Respond promptly to cries and calls of distress by verbally acknowledging, gently touching, and holding children.
  - b. Engage children in frequent rich social exchanges in a variety of ways; for example, holding, patting, making frequent eye contact, smiling, singing, and using a pleasant calm voice in conversation.
  - c. Engage children in frequent positive social exchanges during routine care such as eating, diaper changing, toileting, and preparing for rest.
  - d. Provide consistent emotional support to infant and toddlers by acknowledging their feelings and emotions and providing physical and verbal support.
  - e. Communicate consistently with parents/guardians by greeting them warmly and exchanging information that promotes continuity between the center and the child's home.
  - f. Engage in play activities with children by providing a safe environment to explore, modeling play behavior such as imagination and use of toys and equipment, and providing verbal encouragement and support.
4. Infants shall be taken outside for a period of time every day, unless prevented by weather or special medical reasons.
  5. Outdoor play for infants and toddlers may include riding in a stroller; however, infants and toddlers shall be offered opportunities for gross motor play outdoors as well.
  6. If a child falls asleep while in a walker, swing, high chair, etc., that child shall be placed in appropriate sleep equipment.
  7. Infants (children 12 months and below) shall be placed flat on their backs to sleep to lessen the risk of suffocation and Sudden Infant Death Syndrome. (If a child rolls over on his/her own, the facility is not required to reposition the child.) If there is a medical reason a child cannot sleep on his/her back, then a signed statement from the child's physician must be in the file stating that a different sleep position is indicated.
  8. Infants' sleep space (e.g. crib) shall be free of loose bedding. It is recommended that if light blanket is necessary, it ~~should~~ be kept at or below the mid-chest area of the child. Staff shall not cover the faces of infants.
  9. Pillows (including nursing or "boppy" pillows), bumpers/bumper pads, and stuffed animals shall not be placed in cribs.
  10. ~~Infants and toddlers shall have clean, safe, washable toys.~~ Toys or materials used by younger children shall not be small enough to be swallowed.
  11. Toys used by infants and toddlers shall be safe and sanitized as needed to help prevent the spread of contagious diseases. Toys that cannot be cleaned and sanitized shall not be used. ~~Toys that children have put in their mouths or that are otherwise contaminated by body secretion shall be set aside until they are cleaned by hand with water and detergent, rinsed, sanitized, and air dried, or washed in a mechanical dishwasher approved by the Department of Health for sanitizing. Machine washable clothes shall be used by one individual at a time.~~

~~These toys shall be laundered before being used by another child.~~

12. Safety straps shall be used on all equipment originally manufactured with safety straps.

### **403 School Age Children Program Requirements**

1. The school age child shall be provided with a choice of indoor and outdoor activities.
2. A quiet time and a private place with appropriate equipment shall be provided for one-person activities, including resting or homework. A supervised rest period does not apply to school-age children.
3. Permission of parents shall be on file for school age children to leave the Home.
  - a. School age children who leave the Registered Home to participate in classes, clubs, or other activities shall have written permission from the parents naming the activity, time of leaving and returning and method of transportation to the activity.
  - b. Permission for regular activities such as scouting may be given for the entire school term.

### **404 Evening & Night Care Program Requirements**

#### **Night care is any care provided after midnight.**

1. The caregiver shall remain awake at all times children are in care. Alternative compliance may be requested to allow the caregiver to sleep after the children are in bed for the night. For this request to be approved, consideration will be given to the overall level of licensing compliance, the use of motion detectors and/or other alarms to alert the caregiver if the children leave the sleeping area, the ages and number and sex of the children in overnight care and written notification to parents that the caregiver will be sleeping during overnight care.
2. There shall be a plan for evacuating children to safety in case of fire or emergency.
3. Children arriving in the daylight hours shall have outdoor play, weather permitting. Older children shall have time for reading or doing homework during the school year.
4. Evening meals shall be served. The home shall ensure that children spending the night are served breakfast.
5. Drinking water shall be available to children during the night.
6. Bathing facilities shall be available. Hot water shall be available. Children shall not take baths together or share the same bath water. Tubs or showers shall be cleaned after each use. Children shall be given fresh washcloths and towels. Preschool children shall never be left alone when bathing. Privacy shall be ensured for school age children.
7. Children in night care shall be given a bed or cot with mattress or pad and a pillow.

- a. If linens become soiled, they shall be changed. Protective mattress covers shall be used and washed at least weekly.
  - b. Each child's bed or cot shall have a cover available
  - c. Beds or cots shall be arranged at least one foot apart
8. Homes with only one caregiver shall limit care to no more than two shifts (18 hours) per 24 hour period. Homes offering 24 hour care shall provide a schedule verifying that they have made provisions for a secondary caregiver to provide relief for one shift. (Alternative Compliance may be requested by caregivers who provide 24 hour care and who do not have a secondary caregiver. For this request to be approved, consideration will be given to the overall level of compliance with registration requirements and to the number and ages of children in care during the third shift.

## **500 BEHAVIOR GUIDANCE**

### **501 Behavior Guidance Requirements**

1. Use of behavior guidance shall show that the caregiver understands each child's needs and shall promote self-discipline and good behavior.
2. Acceptable behavior guidance techniques include:
  - a. Look for appropriate behavior and reinforce the children with praise and encouragement when they are behaving well.
  - b. Remind the children on a daily basis of the rules by using clear positive statements of how they are expected to behave rather than what they are not supposed to do.
  - c. Attempt to ignore minor inappropriate behaviors and concentrate on what the child is doing properly.
  - d. Use brief supervised separation from the group only when the child does not respond to a verbal command which instructs the child as to how he or she is supposed to behave.
  - e. When a misbehaving child begins to behave appropriately, encourage and praise small positive steps rather than waiting until the child has behaved for a long period of time.
  - f. Attend to the children who are behaving appropriately and other children will follow their example in order to obtain your attention.
3. Physical punishment shall not be administered to children.
4. The length of time a child is placed in time-out shall not exceed one minute per year of child's age.
5. The following activities are unacceptable as behavior guidance measures and shall not be used; these include but are not limited to:
  - a. Restraints (Restraining a child briefly by holding the child is allowed when the child's actions place the child or others at risk of injury.)
  - b. Washing mouth with soap
  - c. Taping or obstructing a child's mouth

- d. Placing unpleasant or painful tasting substances in mouth, on lips, etc.
  - e. Profane or abusive language
  - f. Isolation without supervision
  - g. Placing child in dark area
  - h. Inflicting physical pain, hitting, pinching, pulling hair, slapping, kicking, twisting arms, biting or biting back, spitting, swatting, etc.
  - i. Yelling (This does not include a raised voice level to gain a child's attention to protect the child from risk of harm.)
  - j. Forcing physical activity, such as running laps, doing push-ups, etc. (This does not include planned group physical education activities that are not punitive in nature.)
  - k. Associating punishment with rest, toilet training or illness
  - l. Denying food (lunch or snacks) as punishment or punishing children for not eating. Children shall not be forced or bribed to eat.
  - m. Shaming, humiliating, frightening, physically or mentally harming children or labeling children
  - n. Covering the faces of children with blankets or similar items
6. ~~Posted group behavior charts shall not be used. (Individual behavior charts that are not viewable by children and individual charts used by therapists are allowed.) , if used, should be used to encourage positive behavior. Behavior charts shall record only the child's behavior for the current day and shall not be punitive. (Behavior charts used to record only positive behavior may be maintained on a weekly basis.) The child's age and level of understanding should be considered when using behavior charts.~~

## **502 Infant & Toddler Behavior Guidance Requirements**

1. Time out shall not be used with children under the age of two (2). The only acceptable form of behavior guidance with infants and toddlers shall be redirection. (Brief separation from the group is acceptable when the child's behavior places the child or others at risk of harm. The child may be placed in a supervised area away from the group or in a crib or playpen while the caregiver attends to the situation. Example: A child who has bitten another child would be removed from the group, briefly, while the caregiver attends to the bitten child.)

## **600 RECORDS**

### **601 Home Records**

1. All employees, child and home records shall be kept and made available to the Child Care Licensing Unit on request. All required records shall be maintained for 3 years. (This includes records on children no longer enrolled.)
  - a. Licensing/registration Compliance Form(s) (DCC-521). (The caregiver shall advise parents in writing that the compliance forms are available for review upon request.)
  - b. Verification of Child Care Liability insurance
  - c. Fire department approval, if required by local fire department, state fire code or requested by the Child Care Licensing Unit due to possible hazards.
  - d. Arkansas State Department of Health approval, if applicable

- e. Verification of annual approval by the Boiler Inspector Division of the Department of Labor
- f. Record of emergency drills
- g. Plans and procedures of Emergency Preparedness
- h. Pet vaccinations
- i. Attendance records on all children to include the date and time of arrival and departure and daily parental signatures on the sign in and out forms
- j. Transportation rosters, if applicable
- k. Verification of commercial vehicle insurance coverage

## **602 Children's Records**

1. Enrollment information shall be obtained for each child before admission. (Sample enrollment forms may be obtained from your Licensing Specialist.)
2. Identifying and Personal Data shall include:
  - a. Child's name, birth date, home address, and telephone number
  - b. Name and addresses of the parents and telephone numbers where the parents can be reached while the child is in care
  - c. Date of enrollment in facility
  - d. Name, address and phone number of person to be contacted if parents cannot be reached
  - e. The caregiver shall provide a written discipline policy to parents, with a copy signed by the parents and retained by the caregiver
  - f. Any legal documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the child
3. Medical Records shall include:
  - a. The name, address and telephone number of the child's physician or emergency medical care facility
  - b. Pertinent past medical history on the child and any change in health
  - c. Child's unusual food needs such as special formulas, diabetic diet, or food allergies
  - d. Notes of special problems (such as allergies to medication or sunburn sensitivity) or needs as indicated by the parents
  - e. An authorized record of up-to-date immunizations or documentation of a religious, medical or philosophical exemption from the Arkansas Department of Health. The caregiver shall maintain a roster of children who have not completed the minimum immunization requirements (a current immunization schedule is provided as an insert in this publication)
  - f. ~~Written record of accidents/injuries~~-A written record shall be made of all significant changes in the child's physical or emotional state and accidents, incidents or injuries, indicating the location, time of day, area or piece of equipment where the incident occurred. A copy of this shall be given to the parent on the day of occurrence.
  - f.—
  - g. Any medical documentation that has been given to the facility, by the parent or legal guardian, regarding the care of the child
4. Permissions and Agreements will be signed by the parents and caregiver(s):

- a. Consent for emergency medical care and transportation for such care which shall accompany children who are transported to and from the home.
- b. Other transportation permission, if any, including routine and special field trips.
- c. Permission to participate in water activities, if any.
- d. Signed statements by the parents stating who is authorized to pick up the child.
- e. Written permission for the facility to photograph or video tape their child, if applicable.
- f. Written permission for the facility to place photos and video recordings of their child on social media or other websites, if applicable.

### **603 Caregiver Records**

1. Caregiver records shall contain the following:

- ~~a. TB skin test~~
- a. Documentation of high school diploma or GED, ~~training for~~ and continuing education hours. (If these documents are no longer available, proof of reasonable effort to obtain the documentation is acceptable.) (**Clarification:** Training hours will be counted on a calendar year basis or by the home's operating schedule if they do not operate year round.)
- b. Documentation of the initiation of all required background checks and results obtained
- c. Verification of required transportation training and a current copy of the driver's license for caregiver(s) who transports children

## **700 NUTRITION**

### **701 Nutrition Requirements**

1. The registered home shall meet the following:

- a. All food shall be safe and stored properly to prevent spoiling.
- b. There shall be a thermometer in the refrigerator that is visible and maintained at 40 41 degrees or below. Freezer thermometers shall be maintained at 0 degrees or below. All freezers shall be inaccessible to children.
- c. Food shall not be stored under sinks.
- d. Food shall be stored in original container or in a closed container.
- e. Chemical and toxins shall not be stored in food storage area.
- f. All medicines shall be stored separately from food at all times.

2. All food and drink shall be prepared, distributed and served under sanitary conditions and the following shall be met:

- a. Caregivers shall wash hands before preparing food.
- b. There shall be a sink with hot and cold running water.
- c. Individual drinking glasses or disposable cups shall be provided.
- d. All counter tops and other food preparation surfaces shall be kept clear of clutter and in a sanitary condition.

- e. Food left uncovered or handled shall not be reused.
  - f. When dishes are washed by hand, they shall be sanitized with a bleach solution.
  - g. Drinking water and water used for the preparation of formula shall not come from the hot water supply. (Water from hot water systems may contain higher levels of lead and other substances that could be harmful to small children.)
3. Food shall be served on individual plates, bowls, or other dishes that can be sanitized or discarded.
  4. ~~Child-sized~~ Age appropriate tables and chairs, highchairs, and equipment designed for children, or other comfortable seating options shall be used during snack and meal time.
  5. Breakfast, if served, lunch and evening meals shall each meet current U.S. Department of Agriculture guidelines, including portion size. (See Appendix A). If sack lunches are utilized, the home shall ensure that these also meet U.S. Department of Agriculture guidelines by supplementing the lunches if necessary. Milk shall be served to each child during the day. Exceptions may be made for children who suffer allergies to milk.
  6. Breakfast shall be made available to children who arrive before 7:00am. Breakfast may be served to all children rather than a morning snack, provided there is no more than 3 hours between the beginning of breakfast and the beginning of lunch.
  7. Midmorning and mid-afternoon snacks shall be provided to all children and shall meet current U.S. Department of Agriculture guidelines.
  8. All children in care during hours shall be offered an evening snack. Children in care during evening hours shall be served supper and children spending the night shall be served breakfast (unless provided by parent or school).
  9. Menus for all food service shall ~~be posted~~ shall be available for review.
  10. ~~All food brought in from outside sources shall come from Health Department approved kitchens and shall be transported as per Health Department requirements, or the food shall be in an individual, commercially pre-packaged container.~~  
It is recommended that food brought in from outside sources be in commercially prepackaged containers or come from Health approved kitchens. This recommendation is based on concerns for the health and safety of children who may have severe food allergies, and the difficulty of monitoring ingredients brought in from home kitchens.
  11. Children shall not be forced or bribed to eat.

## **702 Infant & Toddler Nutrition Requirements**

**It is recommended that mothers ~~should~~ be allowed and encouraged to breast feed their child at the registered child care family home.**

1. The routine use of baby food, bottles and formula shall be agreed upon by the caregiver and parent (Appendix B). Instructions regarding special needs for food, bottles and formula, such as food allergies, shall be obtained in writing from the parent and followed by the caregiver.
2. Feedings for all children up to twelve (12) months of age shall be documented by the caregiver and available for review by the parent. This documentation shall continue for all children older than twelve (12) months of age who are still being given bottles.
3. Children shall not share the same bottle. A sanitary method of cleaning baby bottles shall be practiced.
4. Baby bottles shall be properly refrigerated.
5. Microwaves shall not be used for heating bottles due to the danger of uneven heating.
6. Infant feeding schedules shall be flexible and adapted to each infant's needs.
7. The solid foods fed to an infant shall be determined by the child's parent(s).
8. Infants under six months of age shall be held while being fed. Bottles shall not be propped. Infants six months of age or older shall be held if needed.
- ~~9. Children shall be held during bottle feeding. Children shall not be given bottles in their cribs, swings, bouncy seats or car seats.~~
9. Infants no longer held for feedings shall either sit in low chairs at low tables or in infant seats with trays, or in high chairs with wide bases and safety straps shall be used.
10. Children under 2 years of age shall not be fed foods that may cause choking, such as but not limited to hard candy, raw carrots, hot dogs, nuts, seeds, or popcorn.

## **800 BUILDING**

### **801 Building Requirements**

1. The Registered Family Home's building, grounds and equipment shall be clean, kept in good repair, and maintained as needed to protect the health and safety of the children. If the home has sustained structural damage the caregiver shall immediately notify the Child Care Licensing Specialist.
2. Department of Labor, Boiler Inspection Division requirements shall be met. All water heaters and any other boilers in licensed child care settings shall be inspected on an annual basis and/or upon installation. Verification that initial inspection or proof of attempt to set up initial inspection, shall be completed within six (6) months of licensure. Scheduling and completion of annual inspections will be the responsibility of the Department of Labor, however, the facility is responsible for cooperating and keeping documentation of such inspection on file for review. (AR Code §20-23-101 et. seq.)



3. The Registered Family Home shall have a working telephone on site all hours children are in care. The registrant shall provide the phone number to the Licensing Unit and to the parents. (This phone may be a cell phone if the phone stays operable, stays at the facility during all hours of care, and is the phone number provided to the Licensing Unit and the parents.)
4. Light, heating, cooling and ventilation of the home shall be adequate for safety and comfort.
5. Windows and/or doors used for ventilation shall be screened.
6. It is recommended that if natural gas or propane is used, the facility's heating & ventilation systems shall be inspected and cleaned (if necessary) before each heating season by a qualified HVAC technician. ~~The facility shall have on file documentation that these inspections and cleanings have been completed.~~
7. Carbon monoxide detectors shall be placed in homes according to manufacturer's recommendations if ~~one of the following guidelines is met~~ either of the following situations apply:
  - a. The home uses ~~any sources~~ of wood, propane, natural gas, or any other products as a source of heat that can produce carbon monoxide indoors or in an attached garage.
  - b. Situations where carbon monoxide ~~If~~ detectors are required by state or local law.
8. Manufactured homes, registered as Registered Child Care Family Home shall be tied down and under-pinned as required by the Arkansas Manufactured Home Commission. The Registered Child Care Family Home shall obtain an inspection and approval from the Arkansas Manufactured Home Commission prior to registration.
9. An annual fire approval shall be obtained on all manufactured homes that are registered.

## 900 GROUNDS

Recommendation: To provide the safest possible playground environment, you are encouraged to meet Consumer Product Safety Commission's guidelines listed in the "Handbook for Public Playground Safety."

**Please note that these requirements do not mandate the use of any large and/or permanently anchored pieces of playground equipment that would require fall use zones and protective surfacing. Numerous options for suitable playground environments are available and acceptable. For information on playground options, contact your Licensing Specialist.** Examples of such activities are:

- Sand boxes
- Activity walls at ground level
- Art easels
- Balls & games
- Play houses

- Nature walks
- Use of the approved natural environment for outdoor learning
- ~~Any other equipment that children use when their feet remain in contact with the ground surface~~

It is not advisable to use ~~Because~~ public playgrounds and other play environments away from the facility. These environments may not meet acceptable safety standards. If these playgrounds are used, it is recommended that staff ~~should~~ provide close supervision and not allow children to use any equipment that appears unsafe (eg: broken equipment, sharp objects, strangulations hazards, etc.). ~~Using~~ please remember that visiting playgrounds and other play environments away from the facility ~~shall be~~ is considered a field trip and all field trip regulations shall be followed.

### **901 Ground Requirements**

- ~~1.~~ A diagram of the playground shall be submitted, clearly identifying the perimeter of the playground, with measurements, and identifying each piece of equipment used by the children enrolled at the licensed facility. This documentation shall be in the form of ~~photographs with a diagram or~~ a satellite photo, when possible, from an internet site such as Google Maps, or a diagram of the playground if a satellite photo is not available. ~~The designated and agreed upon play area, specifying the exact play area and equipment to be used and the associated documents, are critical parts of the terms of the license.~~
2. Any changes in the play area boundaries and/or equipment requested must be submitted in writing and approved prior to use.
3. All equipment and protective surfacing shall be installed and maintained according to manufacturer's guidelines.
4. The ~~playground~~ area/outdoor learning area shall be fenced or otherwise enclosed and provide at least 75 square feet per child present on the playground at any time. ~~or enclosed, if necessary (if close to ponds, traffic, or other hazards.)~~
5. Children shall be supervised at all times when outdoors by someone at least 18 years of age. ~~(See Regulation 303.4).~~
6. The play area shall be maintained in good order and free of potentially hazardous items.  
  
~~Playground equipment shall be securely anchored.~~
7. Trampolines shall not be used. ~~be allowed on site or on field trips.~~ (Therapeutic use of trampolines is acceptable if supervised by the therapist on a one-on-one basis.) ~~for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.~~
8. Ball pits shall not be used. ~~allowed on site or on field trips.~~ (Ball pits are large areas or "pits"

filled with balls intended for children to jump in and play. Therapeutic use of ball pits is acceptable if supervised by the therapist on a one-on-one basis.) ~~for children with a current prescription from a licensed therapist or physician and one on one supervision shall be provided.~~

9. There shall be use zones and protective surfacing under and around all equipment that is over 18 inches in height at the highest accessible point. (The highest accessible point is defined as the highest surface on the piece of equipment where children would stand or sit when the equipment is being used as intended.) ~~requires a child to be standing or sitting above ground level.~~ Use zones shall extend a minimum of 6' in all directions (unless otherwise specified) from the perimeter of the equipment. (Playground equipment that is between 18 inches and 24 inches at the highest accessible point and that was installed prior to the enforcement date of this revision is allowable without fall surfacing, as long as it meets all other requirements.)
10. Use zone surfacing depths shall be as follows:

Minimum compressed loose-fill surfacing depths

	<b>Inches</b>	<b>Loose-Fill Material</b>	<b>Protects to Fall Height of:</b>
a.	6*	Shredded/recycled rubber	10 feet
b.	9	Sand	4 feet
c.	9	Pea Gravel	5 feet
d.	9	Wood mulch (non-CCA)	7 feet
e.	9	Wood chips	10 feet

\*Shredded/recycled rubber loose-fill surfacing does not compress in the same manner as other loose-fill materials. However, it is recommended that care ~~should~~ be taken to maintain a constant depth as displacement may still occur

## **1000 SLEEPING ARRANGEMENTS**

### **1001 Sleeping Arrangement Requirements**

1. All manufacturer guidelines shall be followed for furniture and equipment that is used by, or around, children.
2. Any cribs or playpens that have been identified as unsafe, or have been subject to recall as defined by the Consumer Products Safety Commission (CPSC) guidelines or law, shall be removed or repaired as indicated.
3. Each child under twelve (12) months of age shall have a separate well-constructed baby bed or play pen with a waterproof mattress or pad which shall be clean, dry, and in good condition. Sheets and covers are required and shall be kept clean and dry. Bassinets shall not be used.
4. Waterbeds shall not be used for sleeping children under the age of two (2) years.

5. The following guidelines shall also be required for cribs:
  - a. Cribs that have end panels with decorative cutout areas shall not be used
  - b. Mattresses shall fit snugly in the crib
  - c. The space between crib and mattress shall measure no more than 1 inch
  - d. Corner post shall be the same height as end panels
  - e. End panels shall extend below mattress at the lowest position of the mattress
  - f. Baby beds shall have slats no greater than 2<sup>3/8</sup>" apart
6. Each child twelve (12) months of age or older shall have a cot, bed, pallet, or mat which shall be placed at least one foot apart. Sheets and covers are required. Bedding shall be of washable material and shall be kept clean. If mats or pallets are used on floors, floors shall be clean, warm, dry, and draft free. Any mat or pallet less than two (2) inches thick shall be placed on carpet.
7. Doors in rooms where children are sleeping shall remain open.
8. Infants & toddlers shall be visually monitored at all times and physically checked regularly for breathing.
9. Swaddling of infants is not recommended and shall require a note from the child's physician if continued past the age of three months. ~~shall not be practiced except as directed in writing by the child's physician.~~
10. Bibs, necklaces, and garments with ties or hoods shall be removed from infants prior to rest/naptime to reduce the risk of entanglement and strangulation while sleeping.
11. Children shall not nap on waterbeds, beanbags, or thick rugs.
12. Playpens or cribs shall not be placed near dangling cords.

## **1100 HEALTH**

### **1101 General Health Requirements**

**It is recommended that all caregivers and household members who have direct contact with children should be immunized against Whooping Cough, Chicken Pox, and the Flu.**

1. The Registered Home shall have an adequate supply of water that meets the standards for drinking water of the Arkansas Health Department. Bottled water is also acceptable. Water shall always be available to the children.
2. The Registered Home shall follow any health or medical care plans and/or medical documentation as provided by the child's physician, parent, or guardian.
3. Garbage shall be kept in a closed container out of children's reach.

4. All garbage, soiled diapers and trash shall be removed from the home daily and from the grounds at least once a week.
5. The home shall be free of insects and rodents.
6. Waste and sewage disposal and toilets facilities shall be safe and sanitary. The Health Department may be consulted for its recommendation.
7. Registered Homes shall comply with the Clean Indoor Air Act of 2006. Smoking (including e-cigarettes) in a child care family home is prohibited at all times. This includes:
  - a. All areas of the home, regardless of whether children are in care (includes time periods such as nights, weekends, holidays, etc., also includes office areas or other areas of the facility that share the same ventilation systems)
  - b. Outdoor play area
  - c. Other outdoor areas when children are present on those areas
  - d. In any vehicle used to transport children, whether children are present in the vehicle or not
8. First-aid materials are required and shall be kept out of reach of children. A first aid kit containing medications shall be locked. The first-aid materials shall include:
  - a. Adhesive Band-Aids (various sizes)
  - b. Scissors
  - c. Sterile gauze squares
  - d. Roll of gauze bandages
  - e. Adhesive tape
  - f. Antiseptic
  - g. Thermometer
  - h. Tweezers
  - i. Disposable gloves
9. There shall be no adult in the home who poses a health risk to children in care.

### **1102 Children's Health**

- ~~1. No child shall be admitted who has a contagious or infectious disease. Parents and guardians shall be notified to pick up if the child exhibits any of the symptoms listed below:
 
  - a. ~~**Fever:** A body temperature of 101 or greater. (Recommendation: Infants, six months of age or under, who have a temperature of 100 or greater, should be excluded from care.)~~
  - b. ~~**Diarrhea:** three (3) or more watery stools in a 24 hour period.~~
  - c. ~~**Vomiting:** Vomiting on two or more occasions within the past 24 hour period~~
  - d. ~~**Rash:** Body rashes, not obviously associated with diapering, heat or allergic reactions to medications~~
  - e. ~~**Sore Throat:** if associated with fever or swollen glands in the neck~~
  - f. ~~**Severe Coughing:** episodes of coughing which may lead to repeated gagging, vomiting~~~~

- or difficulty breathing
- g. ~~**Pink Eye:** pink or red eye(s), which may be swollen with white or yellow discharge; until on antibiotics for 24 hours~~
- h. ~~**Untreated Scabies, Head Lice or the presence of nits:** (Note: may return after the first treatment and removal of nits.)~~
- i. ~~**Multiple sores inside mouth with drooling:** unless health care provider determines the condition is non-infectious~~
- j. ~~**Ring Worm:** of the scalp or skin, may return after evaluation and under treatment by a health care provider~~
- k. ~~**Impetigo:** May return 24 hours after treatment is initiated~~

1. No child or staff shall be admitted who has a contagious or infectious disease.
2. The parent or legal guardian shall be notified as soon as possible when a child has any symptom that requires exclusion from the facility. The child shall be separated from other children and closely monitored until the parent arrives to pick the child up.
3. It is recommended that the caregiver ~~should~~ determine if the illness prevents the child from participating comfortably in activities, results in a greater need for care than the child care staff can provide without compromising the health and safety of the other children, or poses a risk of spread of harmful diseases to others.

Temporarily exclude from child care if child has:

- a. Sudden change in behavior, such as:
  - lethargy or lack of responsiveness
  - unexplained irritability or persistent crying
  - difficult breathing
  - a quickly-spreading rash
- b. Fever over 101 degrees/oral, 100/axillary (or equivalent method) in a child who also has pain, behavior changes, or other symptoms of illness.
  - An infant younger than 2 months with any increased temperature shall get urgent medical attention, within an hour
  - An infant younger than 6 months with any increased temperature shall be medically evaluated
- c. Diarrhea, defined as watery/runny stools, if frequency exceeds 2 or more stools above normal for that child, and is not related to a change in diet or medication. Exclusion from child care is required if diarrhea cannot be contained in the diaper or if diarrhea is causing soiled clothing in toilet-trained children
- d. Blood or mucus in stools (unless caused by hard stools)
- e. Vomiting illness (2 or more episodes of vomiting in the previous 24 hours)
- f. Abdominal pain which lasts more than 2 hours
- g. Mouth sores with drooling
- h. Rash with fever or behavior change

- i. Conjunctivitis or "pink eye" – with white, yellow, or green eye discharge and red ("bloodshot") eyes, exclude only if child has:
    - fever,
    - eye pain
    - redness and/or swelling of the skin around the eyes, or
    - if more than one child in the program has symptoms
  - j. Pediculosis (head lice), from the end of the day until after the first treatment.
  - k. Active tuberculosis, until a health care provider or health official states that the child is on appropriate therapy and can attend child care.
  - l. Impetigo, until treatment has been started;
  - m. Strep throat, until 24 hours after antibiotic treatment has been started
  - n. Chicken pox, until all lesions have crusted (usually 6 days after the rash appears)
  - o. Rubella, until 6 days after onset of rash
  - p. Pertussis (whooping cough); until 5 days of antibiotic treatment
  - q. Mumps, until 5 days after onset of gland swelling
  - r. Measles, until 4 days after onset of rash
  - s. Hepatitis A, until 1 week after onset of illness or as directed by the health department
4. Illness in the Registered Home shall be handled to protect all children in care.
5. In case of critical illness or injury, and if the parents cannot be reached, the physician named by the parent shall be called. If necessary, the child shall be taken to the nearest emergency room. Injuries that require the attention of medical personnel shall be reported the parent immediately.
6. In case of critical illness or serious injury that requires the attention of medical personnel, the Child Care Licensing Specialist shall be notified within one business day.
7. The caregiver shall notify the child's parent of significant events that affect the children. This shall include, but not be limited to:
- a. Cases of serious contagious disease shall be reported to the parents of all the children in care
  - b. Any injury incurred by a child
8. The communicable diseases listed in Appendix C, whether suspected in a child or adult, shall be reported within 24 hours to either the local County Health Unit or the toll free Reporting System (800-482-8888). Immediate notification is recommended for the following:
- a. Hepatitis
  - b. Rash illness (including MEASLES & RUBELLA)
  - c. WHOOPING COUGH (Pertussis)
  - d. MENINGITIS
  - e. MUMPS
  - f. Tuberculosis
  - g. Salmonellas (including typhoid)
  - h. E-Coli

9. Reporting data shall include:

- a. The reporter's name, location and phone number
- b. The name of the disease reported and the onset date
- c. The patient's name, address, phone number, age, sex, and the race (Please spell the patient's name)
- d. The attending physician's name, location, and phone number
- e. Any pertinent clinical and laboratory information used in the diagnosis (Please give the laboratory name)
- f. Any treatment information, if known

10. It is recommended that universal precautions shall be used when handling and disposing of materials containing bodily secretions. ~~Example:~~ such as wet or soiled diapers, fecal matter, etc. Universal precautions shall be used when handling ~~of~~ items contaminated by blood. These items shall be disposed of separately and by using rubber gloves that shall be properly disposed of after each use. (Note: hands must be washed even after gloves are used.)

11. Within 15 days of enrollment of a child, the Registration Home provider shall verify that the child has been immunized as required by Arkansas Department of Health or the child cannot remain in care. (Arkansas code 20-78-206 as amended by Act 870 of 1997—a current immunization schedule is provided as an insert in this publication)

12. Children shall be protected from overexposure to the sun. Sunscreen shall be used if needed and as directed by the parent. Suntan lotions and/or sunscreens used for infant/toddlers and preschool children shall be kept out of the children's reach and shall be administered only with written parental permission. School age children may apply sunscreen to themselves with supervision. A Blanket permission may be obtained annually.

13. It is recommended that the facility ~~should~~ have an automated external defibrillator on site.

### **1103 Toilet Arrangements**

1. At least one (1) commode and one (1) sink shall be made available for the children's use. Potty chairs may be used by the younger children if emptied, cleaned and disinfected after each use. Potty chairs shall be located in the bathroom only.
2. Toilet tissue shall be located within reach of the children when toileting.
3. Individual cloth towels or paper towels shall be available for each child.
4. Caregiver's and children's hands shall be washed with liquid soap before meals, after toileting, after each diaper change, and as needed.
5. ~~The registered family home shall use a diaper changing surface that is sanitized after each use.~~ There shall be a safe diaper changing table that meets the following requirements:



- a. Impervious (non-absorbant) smooth surfaces that do not trap soil and are easily disinfected
  - b. There shall be a changing pad capable of being sanitized used as a cushion between the child and the changing table surface.
  - c. The table shall be sturdy and stable to prevent tipping over.
  - d. The table shall be a convenient height for use by caregivers (between 28-32 inches high)
  - e. The table shall be equipped with a raised edge or other provision to help reduce the risk of a child rolling off of the table. ~~solid barriers that extend at least 6 inches above the changing surface.~~
6. Children shall always be attended during diapering.
  7. Soiled or wet diapers shall be removed, disposed of properly, and replaced with clean, dry diapers. The caregiver shall insure that children are properly cleaned and dried.
  8. The caregiver shall assist children in toilet routine and hygiene practices.
  9. The following methods shall not be used in toilet learning:
    - a. Placing the child on toilet or potty chair for prolonged time periods
    - b. Using harsh language
    - c. Punishing or berating in any way for soiling clothing
    - d. Using physical force to place child on a toilet or potty chair against their will
    - e. Leaving child unsupervised on toilet

### **1104 Medications**

1. Prescription medicine shall be in the original container with a child resistant cap, and labeled with the child's name, not have an expired date ~~a recent date~~, instructions, and the physician's name.
2. All non-prescription medicine (except aspirin substitutes, such as ibuprofen and acetaminophen) shall be labeled with the child's name and dated.
3. All medicines shall be given to a child only with the written permission of the child's parent(s) or guardian which includes date, type, drug name, time and dosage, length of time to give medication, and what the medication is being given for.
4. Children with special health care needs (ex. asthma, seizures, diabetes, etc.) who require scheduled daily medications or medications to be given on an emergent basis (Benadryl, EpiPen, rescue asthma medication, etc.) shall have a care plan. Care plans shall have clearly stated parameters, directions, and symptoms for giving the medications. Care plans shall be updated as needed, but at least yearly.
5. The facility shall share information with families regarding medical homes for children.
6. Medicines shall be kept in a locked area. Medicine shall be kept out of the reach of the children when dispensing.

7. Rescue medications such as inhalers or EpiPens shall be inaccessible to children (kept in an accessible cabinet with a child proof type safety latch or carried by the caregiver.)
8. Medication shall be returned to the parent or disposed of properly when a child withdraws from care or when the medication is out of date.
9. Medicine shall be stored at the proper temperature, separately from food at all times.

### **1105 Phone Numbers Required**

1. The following numbers shall be available in the immediate area of the telephone:
  - a. Ambulance service or emergency medical services
  - b. Police or sheriff's department
  - c. Fire department
  - d. Poison Control Center 1-800-376-4766
  - e. Child Abuse Hotline Number 1-800-482-5964
  - f. The physicians named by the parents
  - g. The Child Care Licensing Central Office number: 501-682-8590 or toll free 1-800-445-3316
  - h. Home and business numbers of parents

### **1106 Pets**

1. Pets with which children have contact shall receive vaccinations as required by law. Verification of vaccinations administered by a licensed veterinarian shall be maintained. Any pet that constitutes a threat to the welfare and safety of the children shall be kept in a confined area, which prevents any contact with the children.

### **1200 SAFETY**

**It is suggested that the home have an evacuation crib or equivalent that could be used for the safe evacuation of infants.**

### **1201 Safety Requirements**

1. Within 30 days of registration and within 30 days of any change or modification of the floor plan the facility shall file a copy of their floor plan with the local Office of Emergency Management including the following (§ 20-78-228 Act 1159 of 2013):
  - a. A schematic drawing of the facility and property used by the child care facility including the configuration of rooms, spaces, and other physical features of the building
  - b. The location or locations where children enrolled in child care spend time regularly
  - c. The escape routes approved by the local fire department for the child care facility
  - d. The licensed capacity and ages of children per room at the facility
  - e. The contact information for at least two emergency contacts for the facility
  - f. An aerial view of the child care facility and property used by the child care facility shall be

included with the floor plan if available

Homes already registered on the effective date of this regulation shall have 30 days to comply.

2. The registered child care family home shall have a written plan detailing the procedures to follow in the event of emergencies (fires, floods, tornadoes, utility disruptions, bomb threats, etc.) (Act 801 of 2009). The plan and procedures are required for emergencies that could cause structural damage to the facility, be identified as a threat by the Arkansas Department of Emergency Management or pose a health and/or safety hazard to the children and staff.
3. The written plan shall include the following information:
  - a. Designated relocation site and evacuation route
  - b. Procedures for notifying parents of relocation
  - c. Procedures for ensuring family reunification
  - d. Procedures to address the needs of individual children, including children with special needs
  - e. Procedures and documentation for annual training of staff regarding the plan and possible reassignment of staff duties in an emergency
  - f. Plans to ensure that all caregivers and volunteers are familiar with the components of the plan
4. The registered child care family home shall coordinate with local emergency management officials to plan for emergencies.
5. Written procedures and evacuation diagrams for emergency drills shall be posted in each room used for childcare.
6. Fire and tornado drills shall be practiced ~~each month~~ as follows:
  - a. Monthly
  - b. Fire and tornado drills shall be practiced on separate days and at different times of the day.
  - c. During all hours when children are in care (evenings, nights, weekends, etc.)
  - d. Everyone in the home at the time of the drill shall participate in the drill
  - e. Caregivers, including volunteers, shall be trained in safety drill procedures
7. The registered child care family home shall maintain a record of emergency drills. This record shall include:
  - a. Date of drill
  - b. Type of drill
  - c. Time of day
  - d. Number of children participating in the drill
  - e. Length of time taken to reach safety
  - f. Notes regarding things that need improved upon
8. The registered child care family home shall maintain an evacuation pack that shall be taken on

all drills and during real emergencies evacuations. The pack shall be easily accessible in an emergency and all caregivers shall know the location of the pack. The evacuation pack shall include, but is not limited to the following:

- a. List of emergency numbers
  - b. List of all emergency and contact information for children
  - c. List of all emergency and contact information for staff
  - d. First aid kit (requirement 1101.8) with extra gloves
  - e. Kleenex
  - f. Battery powered flashlight and extra batteries
  - g. Battery powered radio and extra batteries
  - h. Hand sanitizer
  - i. Notepad and pens/pencils
  - j. Whistle
  - k. Disposable cups
  - l. Wet wipes
  - m. Emergency survival blanket
9. The Registrant shall immediately notify the Licensing Unit of any damage to the building and/or grounds. If phone service is not available, notification shall be as soon as service is restored or available.
10. Registered homes shall maintain a log of all child product recall and safety notices issued by CPSC or distributed the Attorney General's Office and shall post or otherwise make these notices available for parents to review. The holder of the registration shall certify, on an annual basis that these notices have been maintained, reviewed and that any identified items have been removed from the home. Forms for self-certification will be provided by the Licensing Specialist and shall be submitted annually. (Act 1313 of 2001)
11. Electrical outlets shall be guarded. Protective caps, if used, shall be large enough to prevent swallowing.
12. Indoor or outdoor cooling or heating units shall have guards or barriers when necessary. All outdoor electrical boxes, gas lines, and exposed electrical cords shall be enclosed.
13. Stairways shall be well lighted and guarded as needed.
14. Dangerous equipment and/or objects shall be stored away from areas used by the children.
15. All detergent and cleaning supplies shall be kept out of the reach of children. (This does not include hand soap in children's or staff bathroom.) Supplies used for children's activities shall be carefully supervised.
16. All poisonous substances shall be kept in a locked area.
17. Guns shall be unloaded. Guns, other weapons, and ammunition shall be stored in a locked area in the home.

18. Illegal drugs/paraphernalia shall not be in any part of the facility or on the premises, regardless if children are present or not.
19. Tanks, ponds, swimming pools, open wells, drainage ditches and sewage drainpipes shall be fenced if located within the play area.
20. Home swimming pools shall not be used by children in care unless permission is obtained from Child Care Licensing through an alternative compliance request. This request must include written approval from the Arkansas Department of Health for the use of the pool by children in care. (Home swimming pools used by children in care are considered semi-private pools by the Department of Health and approval for these pools requires inspection during the construction phase. Obtaining approval for existing pools is usually not possible.)
21. Wading pools shall not be used by children under two years of age. Water sprinklers are acceptable.
22. Alcoholic beverages shall be kept out of reach of children.

### **1202 Fire Requirements**

**The ~~National Fire Safety Code 101~~ currently adopted Arkansas Fire Prevention Code does not allow the use of basements or floors above ground level by children, first grade and younger, unless there is a ground level exit.**

1. A fire extinguisher with a minimum of 5 lb. ABC rating shall be installed in the kitchen area of the home and shall be properly maintained. Caregivers shall know how to operate the extinguisher. (**Clarification:** These fire extinguishers are required by State Code to be inspected annually and have the approval verification tag attached. An alternative to the inspection is the purchase of a new fire extinguisher annually and retention of the receipt verifying the purchase.)
2. A working smoke detector shall be installed near the kitchen area and in children's sleeping areas.
3. The home shall be maintained to be free from fire hazards at all times. The Child Care Licensing Specialist shall consult with the local Fire Department or the State Fire Marshal when it appears hazards exist.
4. The structure and use of the home shall permit easy entry and exit and shall comply with the following:
  - a. A Registered Home with more than one level shall have second exits on all levels used by children
  - b. A Registered Home shall have at least two exits to the outside located on different sides of the home
  - c. Doors opening to the outdoors shall be constructed so the children can open them easily

from the inside

- d. Doors between rooms in the exit route shall not be locked while children are in the home.
  - e. Doors and pathways shall be clear of equipment that blocks the movement of children and caregiver(s)
5. Wood burning stoves, or gas logs, fireplaces, open flame space heaters, water heaters, floor furnaces or other sources of heat shall be guarded and/or vented when necessary for the protection of the children. Portable fuel heaters shall not be used.
  6. Cooking stoves or ovens shall not be used as a heating source in the home.
  7. Portable heaters shall not be placed within reach of children and shall be approved UL listed products.
  8. The providers shall notify the Child Care Licensing Specialist of any fires causing damage to the home. This notification shall be made no later than the end of the following working day.

## **1300 TRANSPORTATION**

### **1301 Transportation Requirements**

1. The requirement in this section apply to all transportation provided by the registrant, including transportation provided by any person on behalf of the licensee, regardless of whether the person is employed by the licensee. The requirements in this section are not limited to routinely scheduled transportation. Periodic transportation, such as a parent requesting that their child be picked up at school due to the parent's work schedule or other conflicts, is also covered by these requirements, whether a fee is charged for this service or not.
2. When children are transported emergency contact information shall be maintained on the vehicle at all times.
3. Caregivers transporting children shall meet the following requirements:
  - a. Be at least twenty-one (21) years old or the minimum age required by the Licensee's commercial auto insurance
  - b. Hold a current valid driver's license or commercial driver's license as required by state law, and a readable copy shall be maintained in the employee's record
  - c. Successfully completed the training course in Driver Safety that is offered by the Division prior to transporting children. Verification of the completed course in Driver Safety shall be maintained in the employee's record.
  - d. Be certified in CPR and First Aid.
4. The vehicle(s) used for the transportation of children shall be in compliance with Arkansas state laws on transportation of children.
5. Vehicles shall be licensed and maintained in proper working condition including air conditioning and heating systems.

6. Commercial insurance coverage shall be maintained for any vehicle used for transportation by the facility. Verification of commercial insurance coverage shall be provided to the Licensing Specialist prior to transportation of children. (Facilities licensed prior to the effective date of these regulations shall obtain required coverage within ninety (90) days.) Required coverage amounts to be maintained are:
  - a. Minimum coverage of \$100,000 Combined Single Limit (CSL)
  - b. Minimum coverage of \$100,000 for both Uninsured Motorist (UM) and Under Insured Motorist (UIM)
  - c. Minimum coverage of \$5,000 Personal Injury Protection (PIP) for each passenger (based on the number of passengers the vehicle is manufactured to transport)
7. The vehicle shall be licensed, insured and maintained in proper working condition.
8. Any child transported in a passenger automobile, van or pick-up truck, who is less than six (6) years old or weighs less than sixty (60) pounds, shall be restrained in a child passenger safety seat. Any child who is at least six (6) years old, or weighs at least sixty (60) pounds, must be restrained by a safety belt or any other approved safety devices. (Act 470 of 2001) Child passenger safety seats shall be used in accordance with manufacturer's guidelines.
9. Loading and unloading of children from vehicles shall be conducted in a safe manner.
10. There shall be a seating space and an individual, appropriate restraint system provided for each child being transported.
11. Rosters listing the date, names and ages of all children being transported as well as the name of the driver and any other staff member on the vehicle shall be maintained. These rosters shall be used to check children on and off the vehicle when they are picked up and dropped off at home, school, etc. and when they arrive at and leave the registered home. Transportation rosters shall be kept by the Home and available for review for one (1) year.
12. To insure that no children are left on the vehicle, the driver or a staff member must walk through the vehicle and physically check each seat before leaving the vehicle. The transportation roster must be signed by the driver, or staff who conducted the walk through inspection, documenting that all children have exited the vehicle.
13. To insure that children have safely arrived in the home, the transportation roster shall be reviewed by the Registrant and compared with attendance records. The Registrant shall sign off on the transportation roster to verify that all children have safely transitioned from the vehicle to the classroom.
14. Any vehicles designed or used to transport more than seven (7) passengers and one (1) driver must have approved child safety alarm devices installed. These devices must be properly maintained in working order at all times.

Vehicles in service at licensed facilities prior to July 1, 2005, shall have the alarm installed by a

qualified technician or mechanic no later than December 31, 2005. On or after July 1, 2005, all vehicles at newly licensed facilities and newly acquired vehicles at existing facilities shall have a child safety alarm installed before placing the vehicle in service.

The Child Care Licensing Unit shall maintain a list of approved alarm systems.

#### **Clarification---**

- The alarm system shall be installed so that the driver must walk to the very back of the vehicle to reach the switch that deactivates the alarm. Alarm switches installed in locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.
- The alarm systems may be installed by any certified technician or mechanic employed by a recognized electronics or automotive business in accordance with the device manufacturer's recommendations.
- The time delay from activation of the alarm until the alarm sounds shall be no longer than one minute. **Any of the following three options are acceptable to meet the intent of Act 1979 when children are being delivered at the facility. Other options must be approved by the Licensing Unit.**

#### **Options:**

1. Unload all of the children, walk through the vehicle to ensure that no children remain on board and deactivate the alarm. (This option will only work if you are able to unload all children in less than one minute.)
2. Upon arrival, have one staff member immediately walk through the vehicle to deactivate the alarm system. That staff member will remain near the alarm switch at the back of the vehicle until all children have been unloaded to ensure that no child is left on board. (This option will require at least two staff members, one to supervise the children and one to remain inside the vehicle.)
3. Upon arrival, deactivate the alarm and unload the children. Immediately after unloading, start the vehicle and move it to a different location for final parking. (This will reactivate the alarm and require a final walk through.)

#### **1302 Infant & Toddler Transportation Requirements**

1. A vehicle transporting children under the age of thirty-six (36) months shall maintain a ratio of one (1) adult to three (3) children.

#### **1400 SPECIAL NEEDS**

Individuals with Disabilities Education Act (IDEA):

- It is a law ensuring services to children with disabilities throughout the nation. IDEA



governs how states and public agencies provide early intervention, special education and related services to eligible infants, toddlers, children and youth with disabilities.

- It defines a child with Special Needs as:
  - A child determined eligible for special services under the Individual with Disabilities Education Act (IDEA) for whom a current IFSP (Individual Family Service Plan) or IEP (Individual Education Plan) exists and/or
  - A child whose physical condition has lasted or is expected to last at least two (2) years as diagnosed by a licensed medical or psychological examiner
- It is specified in Public Law 108-466 §635.16 A-B (IDEA as reauthorized) as:
  - Children with disabilities including children in public or private institutions or other care facilities are educated to the maximum extent appropriate with children who are not disabled.
  - Special classes, separate schooling or other removal of children with disabilities from the regular educational environment occurs only when the nature or severity of the disability of the child is such that the child is not achieving a satisfactory education in a regular class that provides supplementary aids and services.

**All child care facilities are required by IDEA to refer a child with any suspected delays or disabilities to the appropriate lead agency (as determined by the child's age).**

#### **1401 Special Needs Requirements**

1. All child care facilities shall comply with all applicable provisions as specified in IDEA:
  - a. The facility shall enroll children with special needs without regard to disability. **(Programs are required to provide space and care for a child who can be placed in their facility with existing services, as well as added supports from special educational services, and as long as the health and safety of the child can be met.)**
  - b. Staff shall provide care in the general classroom with children who are not disabled
  - c. The facility shall assist in facilitation of services required to meet the "special needs" of children in the center or in the classroom as specified on the individualized education/individual family service plan.
  - d. Facility staff (regular classroom staff) shall be a partner in the IFSP/IEP plan process
  - e. The facility shall allow service providers who are representatives of DHS, DDS or ADE access to the facility to provide special services as prescribed on the plan to enable the plan to be implemented in the classroom (natural/ least restrictive environment).
  - f. The facility shall not charge special service providers for space, accept "gratuities", or payment for allowing special service providers to provide services in their facility.
  - g. The facility is not required to "displace" children or staff to make space available to special service providers.
  - h. In order for a special service provider to provide special services in the facility, the IFSP/IEP planning team under the authority of the Arkansas Department of Education and/or the

Arkansas Department of Human Services, Developmental Disabilities Services, shall identify the needed special services on the IFSP/IEP.

- i. Classroom staff shall reinforce the specified goals and objectives as part of the daily routine of the classroom.

### **1402 Infant & Toddler Special Needs Requirements**

1. To the maximum extent appropriate, children ages 0 – 2 shall participate in early intervention services provided in “natural environments.”
2. When infants and toddlers cannot achieve satisfactory results from early intervention services in a natural environment, the provision of early intervention services shall occur in other appropriate settings as determined by the parent and the Individualized Family Service Team.

## APPENDIX A

### U.S. DEPARTMENT OF AGRICULTURE CHILD CARE MEAL PATTERN

Children age 12 and up may be served adult-size portions based on the greater food needs of older children, but shall be served not less than the minimum quantities specified in this section for children age 6 through 12 years. For purposes of the requirements outlined in this paragraph, a cup means a standard measuring cup. Bread, pasta or noodle products, and cereal grains shall be whole grain or enriched; cornbread, biscuits, rolls, muffins, etc. shall be made with whole grain or enriched meal or flour; cereal shall be whole grain or enriched or fortified.

<b>Breakfast</b>	<b>Children 1 and 2 years</b>	<b>Children 3 through 5 years</b>	<b>Children 6 through 12 years</b>
Milk, fluid Juice or fruit or vegetable Bread, bread alternate**** and/or cereal enriched or whole grain Bread or Cereal: Cold dry Hot cooked	1/2 cup (4 ounces) 1/4 cup  1/2 slice (1/2 ounces) 1/4 cup* 1/4 cup*	3/4 cup 1/2 cup  1/2 slice (1/2 ounce) 1/3 cup** 1/4 cup	1 cup (8 ounces) 1/2 cup  1 slice (1 ounce) 3/4 cup*** 1/2 cup
<b>AM or PM snack (supplement)</b>			
(select 2 of these 4 components) Milk, fluid Meat or meat alternate Juice or fruit or vegetable Bread, bread alternate**** and/or cereal enriched or whole grain Bread or Cereal: Cold dry hot cooked	1/2 cup (4 ounces) 1/2 ounce 1/2 cup  1/2 slice (1/2 ounces) 1/4 cup* 1/4 cup	1/2 cup 1/2 ounce 1/2 cup  1/2 slice (1/2 ounce) 1/3 cup** 1/4 cup	1 cup (8 ounces) 1 ounce 3/4 cup  1 slice (1 ounce) 3/4 cup*** 1/2 cup
<b>Lunch or Supper</b>			
Milk, fluid Meat or meat alternate (lean meat or poultry or Cheese Egg Cooked dry beans or peas Peanut butter Yogurt (plain or flavored) (Or an equivalent quantity of any combination of the above meat/meat alternates) Vegetable and/or fruit (total of two or more) Bread or bread alternate**** enriched or whole grain	1/2 cup (4 ounces)  1 ounce 1 ounce 1 large egg 1/4 cup 2 tbsp 1/2 cup  1/4 cup  1/2 slice (1/2 ounces)	3/4 cup (4 ounces)  1 ounce 1 ounce 1 large egg 3/8 cup 3 tbsp 3/4 cup  1/2 cup  1/2 slice (1/2 ounces)	1 cup (8 ounces)  2 ounces 2 ounces 1 large egg 1/2 cup 4 tbsp 1 cup  3/4 cup  1 slice (1 ounces)

\* 1/4 cup (volume) or 1/3 ounce (weight)

\*\* 1/3 cup (volume) or 1/2 ounce (weight)

\*\*\* 3/4 cup (volume) or 1 ounce (weight)

\*\*\*\* Refer to Food Buying Guide "Grains and Breads" for equivalent quantities

(CASA-1)

**APPENDIX B**  
**U. S. DEPARTMENT OF AGRICULTURE**  
**INFANT CARE MEAL PATTERN**

Meals served to infants ages birth through, 11 months must meet the requirements described in this meal pattern. Foods included in the infant meal must be of a texture and a consistency that are appropriate for the age of the infant being served. Either breast milk or iron-fortified infant formula must be served for the entire first year.

<b>Age</b>	<b>Breakfast</b>	<b>Lunch or Supper</b>	<b>Snack</b>
Birth through 3 months	4-6 fluid ounces breast milk* or formula**	4-6 fluid ounces breast milk* or formula**	4-6 fluid ounces breast milk* or formula**
4 months through 7 months	4-8 fluid ounces breast milk* or formula**  0-3 tablespoons infant Cereal***	4-8 fluid ounces breast milk* or formula** and  0-3 tablespoons infant cereal*** and  0-3 tablespoons fruit Or vegetable or both	4-6 fluid ounces breast milk* or formula**
8 months up to first birthday	6-8 fluid ounces breast milk* or formula**  and  2-4 tablespoons infant cereal  and  1-4 tablespoons fruit and/or vegetable or both	6-8 fluid ounces breast milk* or formula** and  2-4 tablespoons infant cereal*** and/or  1-4 tablespoons meat, fish poultry, egg yolk, or cooked dry beans or peas, or ½ -2 ounces cheese, or 1-4 tablespoons cottage cheese, cheese food, or cheese spread and  1-4 tablespoons fruit or vegetable or both	2-4 fluid ounces breast milk or formula** or fruit juice****  and  0- 1/2 slice bread or 0-crackers*****

\* It is recommended that breast milk be served in place of formula from birth through 11 months. For some breastfed infants who regularly consume less than the minimum amount of breast milk per feeding, a serving of less than the minimum amount of breast milk may be offered, with additional breast milk offered if the infant is still hungry.

\*\* Iron-fortified infant formula

\*\*\* Iron-fortified dry infant cereal

\*\*\*\* Full-strength fruit juice

\*\*\*\*\* Made from whole-grain or enriched meal or flour

(CASA-1)

## APPENDIX C: LIST OF REPORTABLE DISEASES

The following are the more common reportable diseases, which occur with moderate frequency in Arkansas:

gonorrhea	salmonellosis (including typhoid)
hepatitis (A, B, Non-A, Non-B unspecified and results of serologies)	shigellosis
rash illnesses (including *MEASLES, & RUBELLA)	syphilis
*WHOOPING COUGH (pertussis)	MUMPS
	tuberculosis
	MENINGITIS

The following are less common reportable diseases that occur with low frequency in Arkansas

*AIDS (Acquired Immune Deficiency Syndrome)	* Leprosy
Amebiasis	* Leptospirosis
ANTHRAX	* Lyme Disease
*Aseptic Meningitis	Lymphogranuloma Venereum
Blastomycosis	* Malaria
BOTULISM	* Meningitis, <u>Hemophilus</u>
*Brucellosis	Influenza Type B
Campylobacter Interitis	* Meningococcal infection
Chancroid	Mumps
CHOLERA	Pesticide Poisoning
Coccidioidomycosis	PLAGUE
*Congenital Rubella Syndrome	* POLIOMYELITIS
DIPHTHERIA	* Psittacosis (Ornithosis)
Encephalitis (all types)	Q Fever
FOOD POISONINGS (all types)	RABIES
Giardiasis	* Relapsing Fever
Gonococcal Ophthalmia	* Reyes Syndrome
Granuloma Inguinale	Rheumatic Fever
*Guillain - Barré Syndrome	* Rocky Mountain Spotted Fever
Histoplasmosis	SMALL POX
HIV [Human Immuno Deficiency Virus by (name & address)]	* Tetanus
**Influenza	* Toxic Shock Syndrome
*Kawasaki Disease	Toxoplasmosis
*Legionellosis	* Trichinosis
	* Tularemia
	TYPHUS FEVER
	YELLOW FEVER

\*The reporting physician will be contacted for additional information.

\*\*Individual cases to be reported only when laboratory testing has determined the viral type.

**The diseases in capital letters are to be brought to the immediate attention of the State Epidemiologist when suspected.**

Reporting data shall include:

- a) Names & location of reporting person
- b) Disease or suspected disease and date of onset
- c) Name, age, sex, address and phone number of patient (please spell patient's name)
- d) Name of patient's physician

The following diseases are also of public health importance and it is recommended that these diseases ~~should~~ be reported whenever there is an unusual incidence or outbreak (including seasonal). It is necessary to report: (1) physician's name and location (2) the suspected disease (3) the number of cases and interval during which the cases were seen:

Acute respiratory disease	Hospital acquired infections
Chicken pox	Infectious Mononucleosis
Conjunctivitis	Influenza (estimate number)
Dermatophytosis (ringworm)	Pediculosis
Enteropathogenic E. Coli Diarrhea	Pleurodynia
Epidemic Diarrhea of unknown cause	Pneumonia (bacterial, Mycoplasma, viral)
Gastroenteritis	Staphylococcal-Infections
Herpangina	Streptococcal Infections

The following occupational disease also shall be reported:

Asbestosis	Mesothelioma
Silicosis	Coal Workers Pneumoconiosis
Byssinosis	

**FOR FURTHER ASSISTANCE CONTACT THE LOCAL COUNTY HEALTH UNIT.**

APPENDIX D: DISASTER/EMERGENCY PREPAREDNESS

<b>DISASTER/EMERGENCY NUMBERS</b>	<b>CONTACT/TOWN</b>	<b>TELEPHONE NUMBER</b>
<b>AMBULANCE</b>		
<b>APPLIANCE REPAIR</b>		
<b>BUILDING INSPECTOR</b>		
<b>CHILD ABUSE HOT LINE</b>		1-800-482-5964
<b>CHILD CARE LICENSING UNIT</b>	Little Rock	1-800-445-3316 or 501-682-
<b>CLEANING/MAINTENANCE</b>		
<b>ELECTRIC COMPANY</b>		
<b>ELECTRICIAN</b>		
<b>EMERGENCY CHILD LOCATOR</b>		1-866-908-9572
<b>FACILITY DIRECTOR</b>		
<b>FIRE DEPARTMENT</b>		
<b>FIRE DEPARTMENT (Non-Emergency)</b>		
<b>GAS COMPANY</b>		
<b>GLASS COMPANY</b>		
<b>HEALTH DEPARTMENT (Local)</b>		
<b>HEATING/AIR CONDITIONING</b>		
<b>INSURANCE AGENT AND POLICY</b>		
<b>LICENSING SPECIALIST</b>		
<b>LOCKS</b>		
<b>NATIONAL EMERGENCY FAMILY REGISTRY AND LOCATOR</b>		1-800-588-9822
<b>PLUMBER</b>		
<b>POISON CONTROL</b>		1-800-376-4766
<b>POLICE</b>		
<b>POLICE (Local Non-Emergency)</b>		
<b>RED CROSS (Local)</b>		
<b>SHERIFF</b>		
<b>TRASH REMOVAL</b>		
<b>WATER DEPARTMENT</b>		

## Child Care Immunization Requirements

Recommended by Arkansas Department of Health and  
Required by the Department of Human Services, Division of Child Care and Early Childhood, Licensing Division

AGE	DTaP DTP/DT	POLIO	Hib **	HEPATITIS B	MMR ****	VARICELLA ****	PNEUMOCOCCAL **
<b>1-2 Months</b>	None	None	None	None (1-2 doses possible)	None	None	None
<b>3-4 Months</b>	1 dose	1 dose	1 dose	1 dose (1-2 doses possible)	None	None	1 dose
<b>5-6 Months</b>	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks	None	None	2 doses <b>OR</b> 1 dose within last 8 weeks
<b>7-12 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None	None	2-3 doses <b>OR</b> 1 dose within last 8 weeks
<b>13-15 Months</b>	3 doses <b>OR</b> 1 dose within last 8 weeks	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)	2 doses <b>OR</b> 1 dose within last 8 weeks (3 doses possible)	None (1 dose possible)	None (1 dose possible)	2-3 doses <b>OR</b> 1 dose within last 8 weeks (4 doses possible)
<b>16-18 Months</b>	3 doses or 1 dose within last 8 weeks	2 doses or 1 dose within last 8 weeks (3 doses possible)	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	2 doses <b>OR</b> 1 dose within the last 8 weeks (3 doses possible)	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 2 doses on/after 1st birthday
<b>19-48 months</b>	4 doses <b>OR</b> 3rd dose within last 6 months <b>OR</b> 1 dose within last 8 weeks	3 doses <b>OR</b> 1 dose within last 8 weeks	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses	3 doses *** <b>OR</b> 1 dose within last 8 weeks	1 dose	1 dose	3-4 doses with last dose must be on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday
<b>49-72 Months</b>	5 doses * <b>OR</b> 4th dose within last 6 months <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 4 doses with last dose on/after 4th birthday	4 doses <b>OR</b> 1 dose within last 8 weeks <b>OR</b> 3 doses with last dose on/after 4th birthday	3-4 doses with last dose on/after 1st birthday <b>OR</b> 2 doses if first dose is administered at age 12 - 14 months and doses are at least 8 weeks apart <b>OR</b> 1 dose on/after 15 months of age if no prior doses <b>Not required on/after 5th birthday</b>	3 doses *** <b>OR</b> 1 dose within the last 8 weeks	1 dose	1 dose	3-4 doses with last dose on/after 1st birthday <b>OR</b> 1 dose on/after 24 months of age if no prior doses <b>OR</b> 2 doses on/after 1st birthday <b>Not required on/after 5th birthday</b>

\* **5th DTaP/DTP/DT** (Pre-school dose) must be given on/after the child's 4th birthday and may be given at any time from 49 to 72 months of age.

Interval between 4th DTaP/DTP/DT and 5th DTaP/DTP/DT should be at least 6 months.

\*\* **For Hib and Pneumococcal**, children receiving the first dose of vaccine at age 7 months or older require fewer doses to complete the series.

\*\*\* **3rd dose of hepatitis B** should be given at least 8 weeks after the 2nd dose, at least 16 weeks after the 1st dose, and it should not be administered before the child is 24 weeks of age.

\*\*\*\* **MMR and Varicella** vaccine must be given on/after the child's first birthday.



