Overview of New Regulations for Family Child Care Homes

Effective April 2, 2018

Enclosed are the Licensing Regulations Governing Pinellas County Family Child Care Homes and Large Family Child Care Homes, April 2018. Please take the time to read them. The new regulations reflect the state standards set forth in Chapter 65C-20, and the Family Day Care Home/Large Child Care Home Handbook, October 2017, and were approved by the Pinellas County License Board for incorporation in Licensing Regulations Governing Pinellas County Family Child Care Homes and Large Family Child Care Homes.

Some of the significant regulation additions/changes are detailed below. Please review the enclosed regulations for complete changes.

Background Screening:

Puts into Rule the Clearinghouse and 5-year employment history check requirements that have been in place since July 1, 2016. Also, changes the Affidavit of Good Moral Character to an <u>Attestation</u> of Good Moral Character which does not need to be notarized. Begin using the Attestation on 4/2/18 for new substitutes, household members or employees. (Form can be found on <u>www.pclb.org</u>)

The provider must add substitutes, employees and household members to their Employee/Contractor Roster when the individual has received a child care eligible result. The provider must immediately add an end date for individuals when employment ends or a household member no longer resides in the home. The importance of keeping the roster is because you will be notified by email of any individual that is arrested for a disqualifying offense, you can then take appropriate action.

Five year rescreen date – look at the <u>retention date</u> on the clearance letter. If not done by the retention date you must be fingerprinted again and pay the higher price.

Substitutes:

The substitute's information (including name, date of birth, telephone number, address, anticipated number of hours worked and whether this person substitutes for another home) must be provided on the Application to License a Family Child Care Home. (new/renewal)

Training:

All licensed providers, substitutes and volunteers who work in a home must have training regarding guidance on safe sleep practices, preventing shaken baby syndrome and abusive head trauma, within 30 days of hire at the home.

To satisfy this requirement the training must be accomplished through one of the following methods: the DCF Health Safety and Nutrition course, Safe Sleep course or the Early Learning Florida's Safe Sleep Practices.

Fire Extinguisher Training: All licensed providers, substitutes, employees and volunteers must be trained in the operation of a fire extinguisher. On line training, available at <u>www.fireextinguishertraining.com</u>. Be sure to right in the date of the training on certificate.

In two years, beginning 4/2/20, large family child care home employees must also have current first aid and infant CPR training.

Supervision

A safety strap or harness should not be used on the diaper changing table/surface.

Children must be supervised appropriately for their ages and developmental abilities to monitor the size of food and that children are eating accordingly.

Daily attendance of children must be taken and recorded by the operator, documenting the time when each child enters, and departs the home.

If a child does not arrive to the home or the agreed upon designated pick-up location, the operator must communicate as early as possible (within one hour of the child's scheduled arrival) with the custodial parent/legal guardian; if there was no prior communication from the custodial parent/legal guardian, guardian of the child' absence. If the operator is unable to reach the child's parent/guardian, emergency contacts must be notified.

Children may only be released to <u>adults</u> authorized by parents or legal guardians.

Enrollment Information

Enrollment information shall include parent/guardian consent for child care personnel to have access to child's records. Have a signed statement by the parent in child's file. This statement has been added to the CCLP Child ID Form found at <u>www.pclb.org</u>.

Any child who has or is at an increased risk for chronic physical, developmental, behavioral or emotional condition and requires additional services must have an <u>Emergency Care Plan</u> included in the child's file and readily accessible for those caring for the child. Child care personnel caring for a child with an Emergency Care Plan must be trained to recognize and respond appropriately to a medical emergency.

If a child who has not received the age-appropriate immunizations prior to enrollment and who does not have documented medical, religious, or philosophical exemptions from routine childhood immunizations, the parent/guardian should provide documentation of a scheduled appointment or arrangement to receive immunizations.

Medication

Prescription and non-prescription medications that are used on an "as needed" basis require the parent/legal guardian to provide additional documentation on the authorization form to describe the symptoms that would require the medication to be given.

Prior to administering medication to children, the employee in a **large family child care home** must have completed training.

Any know allergies to medication or special restrictions must be posted with stored medications.

Use of diaper creams and insect repellant may only be utilized with written permission from parent/guardians. Manufacturer instructions should be followed.

The provider should ensure sun safety for themselves and children under their supervision by keeping younger infants than six months out of direct sunlight, limiting sun exposure when ultraviolet rays are strongest and applying sunscreen with written permission.

Daily Schedules

Large Family Child Care Home: Do not include the use of electronic media for children under two years of age. Electronic media may only be used for educational purpose or physical activity for children 2 years of age and older for no more than 1 to 2 hours per day.

First Aid Kit

The first aid kit must be clearly labeled "First Aid" and must, at a minimum include:

- Liquid soap and/or hand sanitizer (to be used with supervision if hands are visibly soiled and if no water is present)
- Adhesive bandages
- Disposable non-porous gloves
- Cotton balls or applicators
- Sterile gauze <u>or</u> rolls
- Adhesive tape
- <u>Digital</u> thermometer
- Tweezers
- Pre-moistened wipes
- Scissors
- <u>Bottled water</u> (for cleaning wounds or eyes)
- A current resource guide on first aid and CPR procedures

Emergency Procedures and Notification

The operator shall have a procedure for responding when an immediate emergency medical response is required.

Each provider shall develop a <u>written emergency preparedness plan</u> on file in the License Board office. The home must have a written plan for reporting and managing any incident or unusual occurrence that is threatening to the health, safety and welfare of the children, staff or volunteers by the licensing authority.

Monthly fire drills must be conducted utilizing the approved alarm system or smoke detectors. When the alarm is sounded, all adults and children must evacuate the home.

A current attendance record must accompany provider out of the home during the drill or actual evacuation.

Fire drill and emergency preparedness drills must be maintained for two years.

Health and Safety

All family child care home operators shall inform parents or legal guardian in writing, if someone living in the smokes, including <u>e-cigarettes</u>.

Indoor and outdoor play areas must be inspected daily for basic health and safety.

Outdoor play area must have two exits, one is the home itself the other should be a gate.

Tubs, buckets, and other open containers of water should be emptied immediately after use.

Wading pools are prohibited

During water play activities, the provider or substitute must be within arm's length providing "touch supervision".

Pools that are more than six feet in width, length or diameter must be have a ring buoy and rope, a rescue tube, or a throwing line, in addition to the shepherd's crook.

Providers must ensure that all pools have drain covers that are in compliance with the Virginia Graeme Baker Pool and Spa Safety Act. THIS APPLIES TO PUBLIC POOLS!

Situations or times that children and staff must perform hand hygiene should be posted in all food preparation, diapering and toileting areas. Handwashing guidelines are available from the CDC. Download from our website, <u>www.pclb.org</u> and post in all required areas.

Guardrails or protective barriers, such as baby gates, should be provided at open sides of stairs, ramps, and other walking surfaces from which there is more than a 30 inch vertical distance fall.

Napping

Operators must have a written plan for safe sleep practices.

The operator must prepare a written plan outlining the sleeping arrangements of the children in care.

Transportation

A log must be maintained for all children being transported in the vehicle or <u>on foot</u> away from the premises of the home. The log must be retained for 12 months.

When transporting children with chronic medical conditions (such as asthma, diabetes or seizures), their emergency care plans and supplies or medication must be available in the vehicle or with child care personnel on the field trip. The responsible adult in the vehicle or on the field trip must be trained to recognize and respond appropriately to the medical emergency.

All vehicles regularly used to transport children must be <u>inspected annually by a mechanic</u> to ensure that they are in proper working order.

The interior of vehicles used to transport children should be maintained at a temperature comfortable to children.

Seat Belt/Child Restraints – Each child when transported must be in a back seat, in an individual factory installed seat belt or federally approved properly installed child safety restraint. Regulations are very specific for each age group.

Food / Nutrition

Clean, sanitary drinking water shall be readily accessible in indoor and outdoor areas throughout the day for all children.

Foods that are associated with young children's choking incidents must not be served to children under 4 years of age.

Solid foods may not be fed to an infant younger than 4 months of age unless directed by a physician.

New regulations regarding breastmilk. (World Health Organization's Safe Preparation, Storage and Handling of Powdered Infant Formula Guidelines, as referenced in Caring for Our Children Basic Health and Safety Foundations for Early Care and Education).

Previously opened baby food jars must not be accepted. If food is fed directly from the jar by the caregiver, the jar can be used for only one feeding and remainder discarded.

Each child's food allergies shall be posted. Each child with a food allergy should have a written care plan.

To prevent bacteria growth, <u>accurate alcohol thermometers</u> designed to measure cold storage temps must be placed inside the refrigerator and freezer. Refrigerators must show a reading of 41 degrees Fahrenheit or below and thermometers in freezers must show a reading of 0 degrees Fahrenheit or below.

Poisonous / toxic chemicals or cleaning products must be stored separately from food. Products must not be stored on shelves above food preparation areas and/or food products, unless placed in bins that are impermeable.

Food containers such as cans, plastic containers, boxes and bags must be stored above the floor.

Opened packages of dried good and perishable or leftover food items must be properly covered/sealed in containers or bags and stored appropriately to prevent contamination.

A food preparation area shall be clean and free of dust, dirt, food particles and grease deposits.

Discipline

Verification that the home has provided the parent or guardian a written copy of the disciplinary and expulsion policies used by the home must be documented on the enrollment form with a signature of the custodial parent or legal guardian.

Active play, both indoor and outdoor, must not be completely withheld from children who misbehave.

There are very specific discipline techniques that are prohibited in the home, see page 48 of new regulations.

Child care personnel must appropriately interact with children to foster a healthy, safe environment that will encourage the child's physical, intellectual, motor, and social development. Interactions with children that are aggressive, demeaning or intimidating in nature are strictly prohibited.

Inspection

The provider or substitute must allow CCLP staff access to the entire premises of the family child care home to inspect for compliance. Access also includes access by the parent, legal guardian, and/or custodian, to their child(ren) while in care.

The provider or substitute must not interfere with or prevent the licensing authority from copying records, photographing or recording a location/activity on the premises as documentation for the inspection.