

100 Homes and Centers

105 Residential Child Care Facilities and Day Treatment Programs

1.0 Legal Authority, Purpose, and Definitions

1.1 Legal Base

1.1.1 The legal authority for these licensing Requirements is in 31 **Del.C.** §§341-344.

1.2 Purpose

1.2.1 (These provisions shall be known as the Delacare: Requirements for Residential Child Care Facilities and Day Treatment Programs. These Requirements are designed to protect the health, safety and well-being of children who are placed in residential child care facilities or are enrolled in day treatment programs.

1.3 Definitions of Regulated Services

“Day Treatment Program” means any program that provides highly structured, intensive, non-residential services for fewer than 24 hours each day to children who have either:

Behavioral dysfunctions;

Developmental, emotional, mental or physical impairments; or

Chemical dependencies.

Licensed residential child care facilities operating an educational program for residents and day students shall be exempted from being a day treatment program when more than 50 percent of the students in that educational program are residents of the facility.

“Residential Child Care Facility” means any facility that provides out-of-home, 24-hour care, protection and supervision for children who have either: behavioral dysfunctions; developmental, emotional, mental or physical impairments; or chemical dependencies.

Residential Child Care Facility includes, but is not limited to, the following:

“Parenting Adolescent Facility” means a residential child care facility for adolescent parents caring for their own child(ren).

“Secure Residential Care Facility” means a residential child care facility that is authorized to use locked doors, both exterior and interior, as the means of preventing a child from leaving the building(s) without authorization.

“Shelter Care Facility” means a residential child care facility that provides temporary or emergency care for children for a period of time that does not exceed 30 consecutive calendar days, except as provided for in Requirement 6.4.1.

“Transitional Care Facility” means a residential child care facility that provides care for 12 or fewer adolescents for the purpose of preparing them to live as self-sufficient adults.

A Psychiatric hospital or a foster home in which children have been placed by a licensed or authorized child placing agency are not residential child care facilities.

1.4 Definition of Terms

“Adventure Activity Program” means a facility or program whose primary purpose is to engage the children in a course of activities of a hazardous or risk-laden nature. The activity may involve strenuous exercise or physical exertion. It includes high rope challenge courses, wilderness trekking, rock climbing and rappelling, as well as a travel camp of more than 120 consecutive hours’ duration involving traveling through more than one state.

“Aversive Conditioning” means the involuntary, time-limited and reasonable use of a technique or procedure that applies an undesirable, noxious or painful stimulus to a child in order to suppress the specific behavior that is potentially harmful to the child or others, for the purpose of behavior management.

“Behavior Management” means those principles and methods employed by a licensee:

To help a child achieve positive behavior; and

To address and correct a child’s inappropriate behavior in a constructive and safe manner, in accordance with written policies and procedures governing program expectations, treatment goals, child and staff safety and security and the child’s service plan.

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“Chemical Restraint” means the involuntary, unplanned and emergency application of a psychotropic drug to restrict the function or movement of a child for the purpose of behavior management. The planned and routine application of a prescribed psychotropic drug is not a chemical restraint.

“Chief Administrator” means the person designated by the licensee, or by its governing body, as having day-to-day responsibility for the overall administration and operation of a facility or program and for assuring the care, treatment, safety, and protection of children.

“Child” means any of the following:

A person who has not reached 18 years of age.

A person in a facility or program who becomes 18 years of age while residing in the facility or participating in the program, and who has not attained the age of 25.

“Department” means the Delaware Department of Services for Children, Youth and Their Families.

“Direct Care Supervisor” means a person who is assigned responsibility by a licensee for the supervision of one or more direct care workers.

“Direct Care Worker” means a person designated by a licensee to provide direct care of children.

“Division” means the Division of Family Services within the Department.

“Employee” means any person who is employed by a licensee or any person under contract with a licensee, excluding vendors that do not provide direct services to children.

“Exclusion” means the involuntary, time-limited removal of a child six years of age or older from his or her environment through the use of non-violent physical intervention and restricting that child in an unlocked room under continuous monitoring and preventing his or her egress, for the purpose of behavior management.

“Facility” means a residential child care facility.

“Governing Body” means the person or group of persons with ultimate responsibility for and authority over the operation of a facility or program.

“Immediately” means an action that is or must be taken without any considerable loss of time.

“Least Restrictive Treatment” means an intervention method that is the least intrusive into, and least disruptive of, the child’s life, and that represents the least departure from normal patterns of living that can be effective in meeting the child’s needs.

“License” means the Division’s granting of authority through a written provisional or regular certification to a facility or a program to operate under applicable State law (s).

“Licensee” means the legally responsible entity for a licensed facility or program.

“Living Unit” means a designated area or space in which a group of children reside or receive care.

“Locked Isolation” means the involuntary and time-limited confinement of a child in a locked room for the purpose of behavior management.

“Mechanical Restraint” means the involuntary, time-limited and reasonable use of any device in order to restrict a child’s movement or functions or the ability to use his or her hands, arms, or legs, for the purpose of behavior management.

“Medical Consultant” means a person licensed as a Registered Nurse or Physician in Delaware and assigned responsibility for overseeing the assistance with medication.

“Non-violent physical intervention strategies” means the non-punitive, age- appropriate, time-limited and reasonable application of physical holding or other physical interventions that are required:

To restrict the movement or function of a child for the purpose of preventing harm to the child or to others; or,

To prevent the destruction of property when the child fails to respond to non-physical intervention techniques.

“Parent” means a birth or adoptive parent, legal guardian or any other person having responsibility for, or legal custody of, a child.

“**Placing Agency**” means an organization, either publicly or privately operated, that is legally authorized to place a child in a facility or to refer a child to a program.

“**Positive Reinforcement**” means an action that, when systematically and regularly applied following the desired behavior of a child, makes it more likely that the desired behavior will recur.

“**Program**” means a Day Treatment Program when it is used alone without an adjective.

“**Psychotropic Drug**” means a drug or substance that alters the chemical balance of neurotransmitters in the central nervous system.

“**Record**” means the individual file established and maintained for a child.

“**Requirements**” means the Delacare: Requirements for Residential Child Care Facilities and Day Treatment Programs or a portion thereof.

“**Restrictive Procedure**” means the involuntary, non-punitive, age-appropriate, time-limited and reasonable use of any action, device, drug or technique that is designed to restrain or restrict a child’s movement, function or mobility for the purpose of:

- Reducing serious maladaptive behavior of a child;
 - Preventing a child from harming either himself or herself, or others;
 - Preventing the destruction of property; or
 - Controlling maladaptive behavior when the child has failed to respond to other less restrictive means of behavior management.
- Restrictive procedures are aversive conditioning, chemical restraint, exclusion, locked isolation, and mechanical restraint. Non-violent physical intervention strategies and time-out techniques are not restrictive procedures.

“**Service Plan**” means a written, prescribed plan that specifies the basis for a child’s admission to a facility or program, the techniques to be used to address his or her treatment needs, or goals for family reunification and permanency planning. The plan shall identify the persons responsible for developing and implementing the plan, and the time frames for carrying out the plan while the child is residing in a facility or participating in a program.

“**Service Supervisor**” means a person who is assigned responsibility by a licensee for the supervision of one or more service workers.

“**Service Worker**” means a person designated by a licensee to coordinate, develop and implement the service plan for a child.

“**Teacher**” means a person designated by the licensee to directly provide education services to children.

“**Time-Out Technique**” means the time-limited removal of a child from his or her immediate environment or the time-limited prohibition of a child to participate in an activity, as specified in Requirements 3.3.11.1, 3.3.11.2 and 3.3.11.3.

“**Treatment**” means the various services that are designed, developed, and implemented by a licensee to ameliorate the various educational, health care, medical, psychological, social or other needs of a child.

“**Volunteer**” means any person who provides an unpaid service or support to a facility or program for more than 40 hours in a calendar year, and whose primary role or function involves having direct contact with children. The term “volunteer” shall include student interns.

2.0 Licensing Process and Procedures

2.1 License Required to Operate

2.1.1 An agency, corporation, partnership or individual shall not operate or maintain a residential child care facility or day treatment program unless issued a license to do so by the Division.

2.2 Authority to Inspect

2.2.1 An applicant or licensee shall allow access to the premises by any authorized representative of the Division, of another state agency, or any local building, fire or health agency for the purpose of determining compliance with applicable provisions of these requirements. On-site inspections may be conducted without prior notice.

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- 2.2.2 An applicant or licensee shall permit any authorized representative of the Division access to information, files and records relevant to determining compliance with applicable provisions of these requirements and to interview any employee, volunteer, and child.
- 2.3 Issuance of License
- 2.3.1 To qualify for a license, an applicant or licensee shall demonstrate to the satisfaction of the Division that it is in full or substantial compliance with applicable provisions of these requirements.
- 2.3.2 A license shall be issued only to a facility or program for which application is made and for the address shown on the application. A license shall state the maximum number who may be served in a facility or program at any time.
- 2.4 Posting of License
- 2.4.1 A licensee shall post its current license to operate a facility or program in a place conspicuous to the public.
- 2.5 License for Each Separate Facility or Program
- 2.5.1 A facility or program that operates in two or more buildings at the same site shall have the option of applying for a single license for all buildings at the site, or for a separate license for each building at the site.
- 2.5.2 A license shall not be transferable, assignable or subject to sale.
- 2.6 Nullification of License
- 2.6.1 When a facility or program is sold, leased, or discontinued, or the operation has moved to a new location, or when the license has been revoked, the current license immediately shall become null and void.
- 2.7 Annual License
- 2.7.1 An annual license is issued when the Division determines that an applicant or licensee is in full compliance with applicable provisions of these requirements.
- 2.7.2 An annual license is effective for one year from the date of issuance, unless it is:
- 2.7.2.1 Modified to a provisional license;
- 2.7.2.2 Is revoked; or
- 2.7.2.3 Surrendered prior to the expiration date.
- 2.8 Provisional License
- 2.8.1 A provisional license may be issued for a period of time not to exceed six months from the date of issuance when the Division determines that an applicant or licensee is in substantial, but not full, compliance with applicable provisions of these requirements, provided that:
- 2.8.1.1 There is no serious risk to the health, safety, or well-being of children; and
- 2.8.1.2 An applicant or licensee has submitted to the Division and the Division has approved a written corrective action plan.
- 2.8.2 The Division may issue as many consecutive provisional licenses as it deems necessary. However, an applicant or licensee shall not operate pursuant to provisional licenses for more than 12 consecutive months.
- 2.9 Replacing a Provisional License with a Regular License
- 2.9.1 A provisional license may be replaced with an annual license when the Division determines that an applicant or licensee has corrected all violations in advance of the expiration date of the provisional license and has come into full compliance with applicable provisions of these requirements.
- 2.10 Procedures for Initial Licensure
- 2.10.1 An applicant shall apply for an initial license on a form provided and in a manner prescribed by the Division.
- 2.10.2 Upon receipt of a completed application, a Division representative shall:
- 2.10.2.1 Provide assistance to aid the applicant in complying with applicable provisions of these requirements;

- 2.10.2.2 Review the application, confer with the applicant, and inspect the facility or program to determine whether the applicant has fully complied with applicable provisions of these requirements;
 - 2.10.2.3 Make a recommendation to the Division regarding the issuance of a license. If a license is granted, the applicant shall initially be issued a provisional license for six months. An annual license shall be issued when the facility or program fully meets applicable provisions of these requirements; or
 - 2.10.2.4 If a license is denied, notify the applicant in writing of the reason(s) for denial and set forth the applicant's rights to an appeal from the decision.
- 2.10.3 The expiration date of the first regular license and each subsequent renewal of an annual license shall be at one year intervals from the initial date of issuance.
- 2.11 Procedures for License Renewal
- 2.11.1 A licensee shall submit a written request to the Division to seek a license renewal application form at least 90 calendar days before the expiration date of the facility's or program's license.
 - 2.11.2 A licensee shall submit a completed application for a license renewal to the Division at least 60 calendar days before expiration of its current license.
 - 2.11.3 When a licensee makes timely and sufficient application for renewal of a regular license, the existing license shall not expire until a decision on the renewal application is made by the Division.
 - 2.11.4 A provisional license may be renewed when the Division determines that a licensee has demonstrated good faith efforts to achieve compliance but requires additional time to achieve full compliance with applicable provisions of these requirements.
- 2.12 Terms of a License
- 2.12.1 The license shall contain the following:
 - 2.12.1.1 Status of the license: annual, provisional or extension;
 - 2.12.1.2 Effective date of the license;
 - 2.12.1.3 Expiration date of the license;
 - 2.12.1.4 The maximum number of children who may be served at one time; and
 - 2.12.1.5 The applicable type of regulated service for which authorization to operate has been granted.
 - 2.12.2 A licensee shall operate a facility or program within the terms of its license.
- 2.13 Changes Affecting License
- 2.13.1 The Division shall determine whether to modify a current license or to require the licensee to submit an application for a new license when any of the following changes occur:
 - 2.13.1.1 A change of ownership or sponsorship;
 - 2.13.1.2 A change of location;
 - 2.13.1.3 A change in the name of the facility or program;
 - 2.13.1.4 A change in the applicable type of regulated service authorized; or
 - 2.13.1.5 A change in child population capacity.
- 2.14 Denial, Revocation or Refusing to Renew a License
- 2.14.1 (The Division may deny, revoke or refuse to renew a license for good cause, including but not limited to the following:
 - 2.14.1.1 Substantial or willful failure to comply with applicable provisions of State law(s) or of these requirements;
 - 2.14.1.2 Violation of the terms or conditions of its license;
 - 2.14.1.3 Fraud or misrepresentation of facts in obtaining a license; or
 - 2.14.1.4 Engaging in any activity, policy, practice or employee conduct that adversely affects or is deemed by the Division to be detrimental to the education, health, safety, treatment needs or well-being of children, or that otherwise demonstrates unfitness by the chief administrator or by any employees to operate a facility or program.

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2.15 Appeal

- 2.15.1 If the Division denies, revokes, or refuses to renew a license, the Division shall notify the applicant or licensee in writing at least 10 working days prior to taking such action, and shall specify the applicant's or licensee's entitlement to appeal from the decision and to request an administrative hearing.
- 2.15.2 The Division shall notify the applicant or licensee in writing of the findings of its investigation and of the reasons for the denial, revocation or refusal to renew a license, before taking such action.
- 2.15.3 If a written or verbal request for a hearing is received by the Division within the 10 working days, the Division shall ensure that a hearing is held within 30 working days from the date the request is received.
- 2.15.4 (The hearing officer shall have had no previous involvement in the matter prompting the hearing.
- 2.15.5 If a licensee files an appeal in a timely manner, its existing license shall remain in effect until an official written decision has been rendered subsequent to the hearing, except that the Division shall have the authority to suspend the license immediately whenever the health, safety or well-being of children in care is in imminent danger or jeopardy.
- 2.15.6 If an applicant or licensee does not file an appeal from the decision and does not request a hearing, the action to revoke, deny or refuse to renew a license shall take effect 30 working days after the receipt of the notice. However, if the health or safety of children in care is in jeopardy, revocation, denial or refusal to renew shall be effective immediately upon the issuance of a written notice by the Division.

2.16 Order to Suspend a License

- 2.16.1 If the health, safety or well-being of children in care is in jeopardy or imminent danger, the Division may immediately suspend the license upon issuance of a written suspension order. The order shall state the reason(s) for the suspension. Within 10 working days of the issuance of the suspension order the Division Director, or his or her designee shall hold an informal hearing with the licensee or his or her representative(s).

2.17 Rule Variance

- 2.17.1 Upon the written request of an applicant or a licensee, the Division may grant a variance from any of these requirements if the licensee has documented to the satisfaction of the Division that the intent of the specific requirement will be satisfactorily achieved in a manner other than that prescribed by the requirement.
- 2.17.2 The Division shall render its decision on the request in writing, including the conditions for which the variance is granted, and shall send a signed copy of the decision to the applicant or licensee. A copy of the decision shall be maintained on file by the Division and the licensee.
- 2.17.3 The variance may be time-limited or may remain in effect for as long as the licensee continues to maintain the health, care, safety, protection, supervision, and needed services of children.
- 2.17.4 The Division shall monitor the licensee's compliance with the variance. If the licensee fails to comply with the variance, the Division shall initiate necessary enforcement action.

3.0 General Provisions**3.1 Administration****3.1.1 Notification of Division**

- 3.1.1.1 A licensee shall notify the Division in writing at least 90 consecutive calendar days before any of the following changes occur:
 - 3.1.1.1.1 A change of ownership or sponsorship;
 - 3.1.1.1.2 A change of location;
 - 3.1.1.1.3 A change in the name of the facility or program;
 - 3.1.1.1.4 A change in the applicable type of regulated service being provided;
 - 3.1.1.1.5 A change in child population capacity; or

- 3.1.1.1.6 The anticipated closing of the facility or program.
- 3.1.1.2 A licensee shall notify the Division within one working day of any of the following occur:
 - 3.1.1.2.1 A fire requiring the services of a fire company;
 - 3.1.1.2.2 Death of a child;
 - 3.1.1.2.3 Injury of a child requiring either in-patient or out-patient treatment.
- 3.1.2 Governing Body
 - 3.1.2.1 A licensee shall have an identifiable functioning governing body. The governing body shall designate a person to function as the chief administrator of the facility or program.
- 3.1.3 Chief Administrator Responsibilities
 - 3.1.3.1 A licensee shall delineate in writing the job responsibilities and functions of the chief administrator. The chief administrator shall adopt and implement a chain of command that ensures the proper and effective supervision and monitoring of employees and volunteers.
- 3.1.4 Facility or Program Description of Services
 - 3.1.4.1 A licensee shall develop, adopt, follow and maintain on file a current written description of the facility's or program's:
 - 3.1.4.1.1 Admission policies governing the age, specific characteristics, and treatment or service needs of children accepted for care; and
 - 3.1.4.1.2 Services provided to children and their families, including those provided directly by the licensee or arranged through another source.
 - 3.1.4.2 A licensee shall make available to the public a brochure or other generic written description of its mission, policies and the types of services offered by the facility or program.
- 3.1.5 Maintenance of Children's Records
 - 3.1.5.1 A licensee shall develop, adopt, follow and maintain on file on the premises written procedures governing the maintenance and security of records of children in care. These procedures shall:
 - 3.1.5.1.1 Assure that records are stored in a secure manner; and
 - 3.1.5.1.2 Assure confidentiality of and prevent unauthorized access to such records.
- 3.1.6 Administrative Records
 - 3.1.6.1 A licensee shall develop, adopt, follow and maintain on file on the premises up-to-date administrative records containing the following:
 - 3.1.6.1.1 Organizational chart;
 - 3.1.6.1.2 Name and position of persons authorized to sign agreements and to submit official documentation to the appropriate government agency; and
 - 3.1.6.1.3 Written standard operating procedures.
- 3.1.7 Insurance Coverage
 - 3.1.7.1 A licensee shall secure and maintain on file written documentation of appropriate motor vehicle, fire and comprehensive general liability insurance, as required by State law(s).
- 3.1.8 Fund Raising and Publicity
 - 3.1.8.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the use of children in fund raising or publicity activities. Such policies shall ensure that any involvement of a child in such activities respects the child's dignity, preserves his or her confidentiality and has been authorized by the child's parent(s) or legal guardian in a signed parental consent statement.
- 3.1.9 Research

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- 3.1.9.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the participation of children in bona fide research projects, which shall embrace the following criteria:
- 3.1.9.1.1 The goal(s) of the research are sound, achievable, and feasible;
 - 3.1.9.1.2 The research design is scientifically valid and appropriate to the goal(s) of the research; and
 - 3.1.9.1.3 The results of the proposed research will contribute significantly to the body of existing information on the subject.
- 3.1.9.2 The policies and procedures governing approved research projects shall:
- 3.1.9.2.1 Safeguard the privacy and protect the identity of and confidential information about children participating in research or follow-up studies;
 - 3.1.9.2.2 Preserve the confidentiality of children and their families;
 - 3.1.9.2.3 Ensure that the child's participation in the approved research project is voluntary; and
 - 3.1.9.2.4 Ensure that the parent(s) or legal guardian of a child participating in the research project has signed an informed consent statement, which the licensee shall maintain on file.

3.2 Personnel**3.2.1 Personnel Policies and Procedures**

- 3.2.1.1 A licensee shall develop, adopt, follow and maintain on file written personnel policies and procedures governing the recruitment, screening, hiring, supervision, training, evaluation, promotion, and disciplining of employees and volunteers.

3.2.2 Personnel; Qualifications

- 3.2.2.1 A licensee shall employ only those persons who:
- 3.2.2.1.1 Have an understanding of and respect for children and their needs and have an understanding of and respect for a child's family and culture; and
 - 3.2.2.1.2 Are physically and emotionally capable of performing activities related to providing child care, which include the ability to supervise children's activities, to support children's physical, intellectual, social and emotional growth, to deal with emergencies in a calm manner, and to carry out methods of behavior management, as stipulated in these requirements.
- 3.2.2.2 An employee who was approved in accordance with personnel qualification requirements in existence prior to the date on which these requirements became effective shall be deemed qualified for the same position at that facility or program.

3.2.3 Chief Administrator Qualifications

- 3.2.3.1 A chief administrator, at the time of appointment, shall be at least 21 years of age and shall possess one of the following:
- 3.2.3.1.1 A master's degree in social work, sociology, psychology, guidance and counseling, education, business administration, criminal justice, a human behavioral science, public administration or a related field, and three years of full-time work experience in child welfare, human services or a related field, at least two years of which shall have been in an administrative or supervisory capacity; or
 - 3.2.3.1.2 A bachelor's degree in social work, sociology, psychology, guidance and counseling, education, business administration, criminal justice, a human behavioral science, public administration or a related field, and four years of post-bachelor's degree full-time work experience in child welfare, human services or a related field, at least two years of which shall have been in an administrative or supervisory capacity.

3.2.4 Direct Care Supervisor Qualifications

- 3.2.4.1 A direct care supervisor, at the time of appointment, shall be at least 21 years of age and shall possess at least one of the following:

- 3.2.4.1.1 A bachelor's degree from an accredited college and one year of full-time work experience in a child care facility or program;
 - 3.2.4.1.2 An associate degree or a minimum of 48 credit hours from an accredited college and two years of full-time work experience in a child care facility or program; or
 - 3.2.4.1.3 A high school diploma or equivalent and three years of full-time work experience in a child care facility or program.
- 3.2.5 Direct Care Worker Qualifications
- 3.2.5.1 A direct care worker, at the time of appointment, shall be at least 21 years of age and shall possess a high school diploma or an equivalent.
- 3.2.6 Service Supervisor Qualifications
- 3.2.6.1 A service supervisor, at the time of appointment, shall be at least 21 years of age and shall possess at least one of the following:
 - 3.2.6.1.1 A master's degree in social work, sociology, psychology, criminal justice, education, guidance and counseling, human behavioral science or a related field and at least two years of full-time work experience in child welfare, social work, human services, teaching, counseling or a related field, at least one year of which shall have been in a supervisory capacity; or
 - 3.2.6.1.2 A bachelor's degree in social work, sociology, psychology, criminal justice, education, guidance and counseling, human behavioral science or a related field and at least four years of full-time work experience in child welfare, social work, human services, teaching, counseling or a related field, at least two years of which shall have been in a supervisory capacity.
- 3.2.7 Service Worker Qualifications
- 3.2.7.1 A service worker, at the time of appointment, shall be at least 21 years of age and shall possess a bachelor's degree in social work, sociology, psychology, criminal justice, education, guidance and counseling, a human behavioral science or a related field and at least two years of full-time work experience in child welfare, human services, teaching, counseling or a related field.
- 3.2.8 Administrative Oversight and Supervisor-to-Staff Ratios
- 3.2.8.1 The chief administrator shall ensure that there are a sufficient number of administrative, supervisory, social service, educational, recreational, direct care, and support employees or volunteers to perform the functions prescribed by these requirements and to provide for the care, needs, protection and supervision of children. The ratio of direct care workers to children during off-grounds activities or excursions shall be the same as the ratios of direct care workers to children that are required during on-grounds activities.
 - 3.2.8.2 A licensee shall have either:
 - 3.2.8.2.1 A full-time chief administrator; or
 - 3.2.8.2.2 If its licensed capacity is fewer than 13 children, a part-time chief administrator and a full-time service supervisor.
 - 3.2.8.3 A licensee shall ensure that a designated employee is in charge on the premises at all times when children are present.
 - 3.2.8.4 A licensee shall have a ratio of one service supervisor for every ten service workers or fraction thereof. A full-time chief administrator may also serve as the service supervisor when there are three or fewer service workers.
 - 3.2.8.5 A licensee shall have a ratio of one direct care supervisor for every ten direct care workers or fraction thereof. A full-time chief administrator may also serve as the direct care supervisor when there are three or fewer direct care workers.
- 3.2.9 Orientation and Training of Employees and Volunteers
- 3.2.9.1 A licensee shall ensure that all new employees and volunteers participate in an orientation that includes the purpose, policies and procedures of the facility or

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- program, the employee's role and responsibilities and the requirements to report allegations of child abuse or neglect.
- 3.2.9.2 A licensee shall ensure that each new employee, volunteer, or any current employee or volunteer whose job function changes, and whose primary role or function requires interaction with children, receives at least 15 hours of planned training preceding the assumption of his or her work assignment on an independent basis. The training shall include instruction in:
- 3.2.9.2.1 Carrying out job responsibilities;
 - 3.2.9.2.2 The licensee's purpose, policies and procedures, including those governing behavior management, crisis management and safety;
 - 3.2.9.2.3 Emergency procedures and the location of emergency exits and emergency equipment, including first aid kits;
 - 3.2.9.2.4 The role of employees and volunteers in client service delivery and the protection of children;
 - 3.2.9.2.5 The Delaware child abuse and neglect law(s) and regulations; and
 - 3.2.9.2.6 The provisions of these licensing requirements.
- This requirement shall not apply to licensed professionals under contract with the licensee.
- 3.2.9.3 A licensee shall ensure that each employee and volunteer whose primary role or function requires interaction with children and who works 24 or more hours a week receives at least 40 hours of training annually, including the 15 hours of training provided pursuant to subsection 3.2.9.2. This training shall cover subject matters designed to maintain, improve or enhance the employee's knowledge of or skills in carrying out his or her job responsibilities, including:
- 3.2.9.3.1 Instruction in administering cardiopulmonary resuscitation (CPR) and first aid, including the location of first aid kits. A licensee providing care to children below six years of age shall include training in pediatric first aid and pediatric CPR;
 - 3.2.9.3.2 Cultural sensitivity; and
 - 3.2.9.3.3 Behavior management policies and procedures.
- 3.2.9.4 A licensee shall ensure that any employee or volunteer whose primary role or function requires interaction with children and who works fewer than 24 hours a week receives at least 20 hours of training annually, including the 15 hours of training provided pursuant to Requirement 3.2.9.2. The five hours of training not related to Requirement 3.2.9.2 shall be in subject matters identified in Requirement 3.2.9.3.
- 3.2.9.5 The licensee shall permit licensed professional employees, including but not limited to physicians, psychologists, and nurses, to apply hours of continuing education units (CEUs) earned each year towards the hourly requirements specified in Requirements 3.2.9.3 and 3.2.9.4. A licensee shall maintain on file written documentation of compliance with this requirement.
- 3.2.9.6 A licensee shall maintain on file written materials documenting the delivery of orientation and training for all employees and volunteers.
- 3.2.10 Personnel Records
- 3.2.10.1 A licensee shall develop, adopt and maintain on file a personnel record for every employee and volunteer.
- 3.2.10.2 The personnel record shall contain the following:
- 3.2.10.2.1 Employment application;
 - 3.2.10.2.2 Name, current address and phone number of the employee;
 - 3.2.10.2.3 Verification of education where specified by these requirements;
 - 3.2.10.2.4 Documentation of training received prior to and during employment at the facility or program;
 - 3.2.10.2.5 Work history;

- 3.2.10.2.6 Three references from persons who are unrelated to the employee or volunteer, one of which shall be from any previous employer;
- 3.2.10.2.7 For job applicants who have worked with an agency that provides care or services to children, one of the three references required in Requirement 3.2.10.2.6 shall be from the prior child care employer;
- 3.2.10.2.8 Any health verification, as specified in Requirements 3.5.1.1 and 3.5.1.2;
- 3.2.10.2.9 Verification of completed criminal history record information check and child abuse registry information check;
- 3.2.10.2.10 Verification of receipt by the employee or volunteer of his or her current job description;
- 3.2.10.2.11 An annual employee performance evaluation; and
- 3.2.10.2.12 Employee disciplinary actions and history.
- 3.2.11 Job Descriptions for Employees
 - 3.2.11.1 A licensee shall maintain on file a current written job description for every employee and for every volunteer who works more than 24 hours a week.
 - 3.2.11.2 A licensee shall ensure that an employee's and volunteer's permanent or temporary assignment and functions shall be consistent with his or her respective current written job description.
- 3.2.12 Use of Volunteers
 - 3.2.12.1 A licensee shall develop, adopt, follow and maintain on file policies and procedures governing the qualifications and use of volunteers. The qualifications shall be appropriate to the duties they perform.
 - 3.2.12.2 A licensee shall assign designated employees to supervise volunteers.
- 3.2.13 Child Abuse and Neglect
 - 3.2.13.1 A licensee shall provide each employee or volunteer who has contact with children written information governing the reporting provisions of the Delaware child abuse and neglect law(s) and regulations, and shall maintain on file written documentation of their receipt of this information.
 - 3.2.13.2 A licensee shall not discourage, inhibit, penalize or otherwise impede any employee or volunteer from reporting any suspected or alleged incident of child abuse or neglect.
 - 3.2.13.3 A licensee shall develop, adopt, follow and maintain on file written policies and procedures for handling any incident of suspected child abuse or neglect. The policies and procedures shall contain provisions specifying that:
 - 3.2.13.3.1 The licensee immediately shall take appropriate remedial action to protect children from harm;
 - 3.2.13.3.2 The licensee shall take appropriate long-term corrective action to eliminate the factors or circumstances that may have caused or may have otherwise resulted in a continuing risk of abuse or neglect to children;
 - 3.2.13.3.3 Any employee or volunteer involved in an incident of alleged child abuse or neglect shall be removed or suspended from having direct contact with any child, or shall be reassigned to other duties that do not involve having contact with children until the investigation of the incident has been completed;
 - 3.2.13.3.4 The licensee shall take appropriate disciplinary action against any employee or volunteer who committed an act of child abuse or neglect.
- 3.3 Children Services and Activities
 - 3.3.1 Admission
 - 3.3.1.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing a child's admission to a facility or program. The policies and procedures shall be made available to those persons considering admission of a child to a facility or program and shall include:
 - 3.3.1.1.1 Age range of children served;
 - 3.3.1.1.2 Gender of children served;

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- 3.3.1.1.3 Presenting problems and treatment needs of children served;
- 3.3.1.1.4 Materials, documents and reports required, including a child's social, education, medical evaluation and histories;
- 3.3.1.1.5 A description of the types of treatment services provided; and
- 3.3.1.1.6 The identifying information about a child to be recorded at the time of admission or as a part of the pre-admission process. Such information shall include the child's name, birth date, gender, religious preferences, race or ethnicity, names, addresses, telephone numbers of parent(s) or legal guardian, other service workers or contact persons, the referring agency, if applicable, known medical history and allergies, date of admission, and a brief social history, including the presenting problems.
- 3.3.1.2 When a licensee refuses the admission of a child, the licensee shall provide the child's parent(s), legal guardian and the referring agency with a written explanation of the reasons for refusal, if requested.
- 3.3.1.3 A licensee shall ensure that the child, his or her parent(s), legal guardian, and the referring agency and any other appropriate party, are provided a reasonable opportunity to participate in the facility's or program's admission process.
- 3.3.1.4 Where involvement of the child's parent in the admission process is neither possible nor desirable, the licensee shall record the reasons for exclusion in the admission records.
- 3.3.1.5 A licensee shall not admit a child into care until an admission evaluation has been completed.
- 3.3.1.6 In an emergency admission, a licensee shall complete Requirements 3.3.1.3, 3.3.1.4 and 3.3.1.5 within five consecutive business days.
- 3.3.1.7 A licensee shall develop, adopt, follow and maintain on file a written admission agreement with the parent(s), legal guardian or the referring agency. The admission agreement shall be signed by all parties and include:
 - 3.3.1.7.1 The basis for admission;
 - 3.3.1.7.2 The service or treatment goals;
 - 3.3.1.7.3 The specific services or treatment to be provided;
 - 3.3.1.7.4 The religious orientation and practices of the child;
 - 3.3.1.7.5 The roles and responsibilities of the licensee and all persons and agencies involved with the child and his or her family;
 - 3.3.1.7.6 Authorization to provide services to the child;
 - 3.3.1.7.7 Authorization to provide or obtain routine medical care for the child;
 - 3.3.1.7.8 Authorization to provide emergency medical or surgical care for the child; and
 - 3.3.1.7.9 Authorization to enable the child to participate in recreational and out-of-state activities.
- 3.3.2 Information Provided to Children and Their Parents
 - 3.3.2.1 A licensee shall provide to children and their parent(s) or legal guardian, or upon request to the referring agency the following:
 - 3.3.2.1.1 Operational rules of the facility or program;
 - 3.3.2.1.2 Policies governing visiting, telephone use, and other forms of communication with family, friends, and other persons important to the child;
 - 3.3.2.1.3 Religious orientation and practices observed by the licensee;
 - 3.3.2.1.4 A description of services and activities provided;
 - 3.3.2.1.5 A description of the licensee's behavior management policies and procedures;
 - 3.3.2.1.6 Grievance policies and procedures;
 - 3.3.2.1.7 Name of the child's service worker;
 - 3.3.2.1.8 Information on how to obtain a copy of these requirements, and on reporting any suspected violations of these requirements; and

3.3.2.1.9 The child's service plan.

3.3.3 Service Plan

3.3.3.1 A licensee shall develop, adopt, follow and maintain on file a written service plan for each child admitted into a facility or program.

3.3.3.2 A licensee shall complete the service plan within 30 consecutive calendar days of a child's admission and shall update the plan at least every 90 consecutive calendar days thereafter.

3.3.3.3 A licensee shall afford the child, his or her parent(s) or legal guardian, and the referring agency an opportunity to be involved in the development of the service plan unless there is written documentation justifying the non-participation of any such parties.

3.3.4 Permission to Have Contact with Designated Persons

3.3.4.1 A licensee shall allow a child's parent(s) or legal guardian, attorney, clergy, authorized representative of the referring agency, or a Division representative, to be permitted to have telephone, mail and in-person contact and to confer in private with any child.

3.3.5 Education

3.3.5.1 A licensee shall ensure that each school-age child receives an appropriate education, in accordance with applicable federal and State law(s) and regulations. Education shall be provided either in a public or private school, or in an approved on-grounds school operated by the licensee.

3.3.5.2 A licensee shall ensure that every school-age child attends either an on-grounds or community-based educational program that has been approved by the appropriate Delaware authorities.

3.3.5.3 If a licensee chooses to provide an educational program directly, the licensee shall ensure that such education programs comply with the following:

3.3.5.3.1 One teacher for every 20 children or fraction thereof shall be responsible for implementing the educational program;

3.3.5.3.2 Teachers shall be at least 21 years of age and shall possess a bachelor degree in the subject area of instruction or a bachelor degree in education appropriate to age and educational needs of the children in the program;

3.3.5.3.3 Employees meeting at a minimum the qualifications of Direct Care Worker may assist in the on-grounds educational program provided that they work under the supervision of an employee meeting the qualifications for Teacher;

3.3.5.3.4 The educational program operates on at least as many calendar days and clock hours as are required by State law(s) and regulations;

3.3.5.3.5 A core curriculum that is appropriate to the population to be served is followed;

3.3.5.3.6 Special education services are provided or arranged by the licensee for each child whose special education needs have been identified and as appropriate in collaboration with the child's school district; and

3.3.5.3.7 Appropriate written records shall be maintained on file for each child that reflect the use of a uniform grading system and a process for transfer and release of these records to and from other schools or facilities.

3.3.5.4 If a licensee chooses not to provide an educational program directly, the licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the assignment of any child to an educational program.

3.3.5.5 A licensee shall provide appropriate space and supervision for quiet study after school hours.

3.3.5.6 A licensee shall ensure that each child has access to necessary educational references and other resource materials.

3.3.5.7 A licensee shall ensure that adolescent children receive career preparation services, life skills training, and employment counseling unless such services,

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training and counseling are being provided in their regular or special education school program. Such services, training and counseling shall be appropriate to the age and capabilities of the child.

3.3.6 Work and Employment

3.3.6.1 A licensee shall not engage a child in any work assignment unless the assignment offers the child a constructive experience, in accordance with the child's age, capabilities and service plan.

3.3.6.2 For any adolescent who is legally not obliged to attend school, a licensee shall ensure that the child is either gainfully employed or enrolled in a training program geared to the acquisition of suitable employment or necessary life skills appropriate to the child's level of functioning.

3.3.7 Children's Recreation, Physical Exercise and Leisure Time Activities

3.3.7.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures ensuring developmentally appropriate recreation, physical exercise and leisure time activities both on and off the premises, including planned trips and excursions. The policies and procedures shall contain provisions requiring:

3.3.7.1.1 A list of the types of activities to be offered to children both on and off the premises;

3.3.7.1.2 A balanced mixture of planned recreation, physical exercise and leisure time activities, so that children have a reasonable choice of alternatives in which to participate;

3.3.7.1.3 Opportunities for both individual and group activities; and

3.3.7.1.4 A written schedule of monthly planned recreation, physical exercise and leisure time activities be developed and posted monthly in a conspicuous and readily accessible location on the premises, and be maintained on file for at least 90 consecutive calendar days.

3.3.7.2 A licensee shall ensure that reasonable precautions and safeguards are utilized to prevent or minimize the risk of serious injury or harm to children.

3.3.7.3 A licensee shall ensure that children utilize only bathing, biking, boating, camping, canoeing, hiking, kayaking, sailing, swimming, water skiing, white water rafting or other sporting or recreation areas or facilities that are in compliance with applicable provisions of federal, state, county and municipal law(s), regulations and ordinances.

3.3.7.4 A licensee shall not threaten, coerce or intimidate a child to participate or engage in any recreation, physical exercise or leisure time activity, but may require a child to attend while not participating in the activity.

3.3.7.5 A licensee shall ensure that staff provide adequate and appropriate supervision of children engaging in recreation, physical exercise or leisure time activities and shall offer instruction, guidance and support to assist a child in learning to do so in a safe manner.

3.3.7.6 A licensee shall not permit children to engage or participate in high-risk activities unless:

3.3.7.6.1 the licensee complies with applicable provisions governing such activities, as specified in Chapter 10; or

3.3.7.6.2 The licensee utilizes an existing high adventure activity provider that is certified or approved by an appropriate governmental or private accrediting agency and that assumes responsibility for safety precautions and risk reductions.

3.3.7.7 A licensee shall prohibit children from participating in bungee jumping, hang gliding, parachute jumping, parasailing, and riding in airborne gliders.

3.3.8 Religion and Culture

3.3.8.1 A licensee shall respect the religious preference of the child and his or her parent(s) or legal guardian.

- 3.3.8.2 A licensee shall ensure that each child is afforded opportunities to attend religious services or activities in his or her religious faith of choice. A licensee shall directly arrange for or ensure that other reasonable means are provided for the transportation of a child to services or activities that are off site.
 - 3.3.8.3 A licensee that has a particular religious or denominational orientation shall provide a written description of its orientation or beliefs to the child and to the child's parent(s) or legal guardian prior to the child's admission, or within seven consecutive calendar days following the admission of the child.
 - 3.3.8.4 A licensee shall not require or coerce children to participate in religious services or activities, shall not discipline, discriminate against, or deny privileges to any child who chooses not to participate, and shall not reward any child who chooses to participate.
 - 3.3.8.5 A licensee shall recognize and take into account the racial, cultural, ethnic and religious backgrounds of children when planning various activities or religious services.
- 3.3.9 Behavior Management
- 3.3.9.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the behavior management of children. The policies and procedures shall delineate the approved methods of behavior management techniques that are to be used to assist children in developing self control, self direction, self esteem, and acceptable patterns of social behavior. The policies and procedures shall include the concepts and application of least restrictive effective treatment and positive reinforcements. The policies and procedures shall prohibit:
 - 3.3.9.1.1 The delegation of responsibility for the control or supervision of children to other children;
 - 3.3.9.1.2 The use of corporal punishment or the threat of corporal punishment inflicted in any way on a child's body, including but not limited to shaking, biting, pinching, slapping, hitting or spanking;
 - 3.3.9.1.3 The use of any form of forced physical exercise or activity or work assignment that produces pain or discomfort;
 - 3.3.9.1.4 The use of verbal abuse, including humiliation, profanity, ridicule, or other forms of degradation;
 - 3.3.9.1.5 The withholding of any meal;
 - 3.3.9.1.6 The use of group punishments for misbehaviors of a child or a group of children unless the policies and procedures clearly prescribe the specific circumstances and safeguards under which such would be authorized;
 - 3.3.9.1.7 The denial of essential services, including medical or dental care;
 - 3.3.9.1.8 The denial of visits or communications with family;
 - 3.3.9.1.9 The denial of shelter, appropriate clothing, bedding, or any other essential personal needs;
 - 3.3.9.1.10 The denial of access to a toilet or bathing accommodations;
 - 3.3.9.1.11 The denial of access to a telephone to contact individuals defined in 3.3.4.1;
 - 3.3.9.1.12 The use of excessive force or inappropriate physical force;
 - 3.3.9.1.13 The use of restrictive procedures unless authorized by the Division and in compliance with the requirements of Chapter 9;
 - 3.3.9.1.14 The exploitation of a child; and
 - 3.3.9.1.15 The denial of sleep or needed rest.
 - 3.3.9.2 A licensee shall disseminate copies of the behavior management policies and procedures to all employees and children within 10 consecutive calendar days of employment or admission, respectively, and shall make copies available to the parent(s), legal guardian or the referring agency.

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- 3.3.9.3 A licensee shall ensure that all employees and volunteers who have regular contact with children receive a copy of the policies and procedures.
- 3.3.10 Documentation Requirements
- 3.3.10.1 A licensee shall develop, adopt, follow and maintain on written file policies and procedures governing the accurate and timely recording of each incident in which a time-out technique or a non-violent physical intervention strategy is used. Such policies and procedures shall ensure that the identity of the child, the date, time, place, and circumstances of, and the name of the employee or volunteer who administered the time-out technique or the non-violent physical intervention strategy is recorded. The nature of the technique or strategy and the elapsed time used shall also be recorded.
- 3.3.10.2 A licensee shall ensure that the chief administrator or his or her designee reviews the documentation on a weekly basis.
- 3.3.11 Time-Out Techniques
- 3.3.11.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the use of appropriate time-out techniques. The policies and procedures shall require that appropriate time-out techniques may be used only:
- 3.3.11.1.1 For a child six years of age or older, except as noted in Requirement 3.3.11.3;
- 3.3.11.1.2 When a child's behavior is judged by the employee to be disruptive to the child's ability to learn from the activity, to participate appropriately in the activity, or to function appropriately with other children engaged in an activity; and
- 3.3.11.1.3 For a duration of time that shall not exceed 60 consecutive minutes. If there are more than 25 time-outs for an individual child or a cumulative total of four hours spent in time-out within any consecutive 24-hour period, a licensee shall ensure that:
- 3.3.11.1.3.1 A review is conducted by the chief administrator or his or her designee to determine the suitability of the child to remain in placement in the facility or program, or whether modifications to the child's service plan are warranted; and
- 3.3.11.1.3.2 Appropriate action is taken in response to the findings of the review.
- 3.3.11.2 A licensee shall ensure that:
- 3.3.11.2.1 At least one employee has been designated to be responsible for making visual contact with the child no less frequently than every 30 minutes;
- 3.3.11.2.2 The child does not spend the time-out period in a closet, a bathroom or an unfinished basement or attic; and
- 3.3.11.2.3 The child is reintroduced to the group in a sensitive and non-punitive manner as soon as he or she has re-gained control.
- 3.3.11.3 A licensee shall ensure that any use of a Time-Out Technique for a child below six years of age is:
- 3.3.11.3.1 Limited to a period of time not to exceed one minute for each year of the child's age; and
- 3.3.11.3.2 Employed as a supplement to, not a substitute for, other developmentally appropriate, positive methods of behavior management.
- 3.3.12 Non-Violent Physical Intervention Strategies
- 3.3.12.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the appropriate use of non-violent physical intervention strategies. These policies and procedures shall require that non-violent physical intervention strategies may be used only:
- 3.3.12.1.1 When a child is out of control and could physically harm himself or herself or others;

- 3.3.12.1.2 To prevent the destruction of property when the child fails to respond to non-physical behavior management interventions;
- 3.3.12.1.3 For a duration of time that shall not exceed 15 consecutive minutes, without written documentation on attempts made to release the child from the hold if more than 15 minutes is required. A licensee shall ensure that a child is released from a physical intervention strategy as soon as he or she gains control, or before 15 consecutive minutes have elapsed, whichever occurs first; and
- 3.3.12.1.4 By employees or volunteers who have been specifically trained in its use and authorized to apply such strategies.
- 3.3.12.2 A licensee shall not permit the application of a non-violent physical intervention strategy if a child has a documented physical condition that would contraindicate its use, unless a licensed physician has previously and specifically authorized its use in writing. Such documentation shall be maintained on file.
- 3.3.12.3 Whenever the provisions of Requirement 3.3.12.1 have been exceeded, a licensee shall ensure that:
 - 3.3.12.3.1 A review is conducted by the chief administrator or his or her designee to determine the suitability of the child to remain in placement in the facility or program, or whether modifications to the child's service plan are warranted;
 - 3.3.12.3.2 Written documentation of the review is forwarded to the Division; and
 - 3.3.12.3.3 Appropriate action is taken in response to the findings of the review.
- 3.3.12.4 A licensee shall prohibit employees from intentionally utilizing any of the following practices:
 - 3.3.12.4.1 Pulling a child's hair;
 - 3.3.12.4.2 Pinching a child's skin;
 - 3.3.12.4.3 Twisting a child's arm or leg in a way that would cause pain or injury to the child;
 - 3.3.12.4.4 Kneeling or sitting on the chest of a child;
 - 3.3.12.4.5 Placing a choke hold on a child;
 - 3.3.12.4.6 Bending back a child's finger(s);
 - 3.3.12.4.7 Shoving or pushing a child into the wall, floor or other stationary object; or
 - 3.3.12.4.8 Allowing another child or other children to assist in the application of a physical intervention strategy.
- 3.3.13 Children's Grievance Procedure
 - 3.3.13.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the handling of grievances by children. The policies and procedures shall:
 - 3.3.13.1.1 Be written in clear and simple language;
 - 3.3.13.1.2 Be communicated to children in an age or developmentally appropriate manner;
 - 3.3.13.1.3 Be posted in an area easily accessible to children and their parent(s) and legal guardian;
 - 3.3.13.1.4 Ensure that any grievance shall be investigated by an objective employee who is not the subject of the grievance; and
 - 3.3.13.1.5 Require continuous monitoring by the licensee of any grievance to assure there is no retaliation against the child.
 - 3.3.13.2 A licensee shall not take or threaten to take any punitive or other retaliatory action against a child who utilizes the grievance procedure.
- 3.4 Physical Plant
 - 3.4.1 Premises and Equipment

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- 3.4.1.1 A licensee shall ensure that the facility's or program's premises and equipment accessible to or used by children are free from any danger to their health, safety and well-being.
 - 3.4.1.2 A licensee shall maintain on file written documentation that the buildings and premises of the facility or program conform to all applicable State and local fire, health and construction laws, ordinances and regulations.
 - 3.4.1.3 A licensee shall ensure that porches, elevated walkways and elevated play areas of more than two feet in height shall have barriers to prevent falls.
 - 3.4.1.4 A licensee shall ensure that all indoor and outdoor areas, toilets, wash basins, tubs, sinks, and showers are maintained in an operable, safe and sanitary manner.
 - 3.4.1.5 A licensee shall utilize approved products and procedures in accordance with labeled instructions to ensure that the premises are protected from insect infestation.
 - 3.4.1.6 A licensee shall ensure that all premises used by children are rodent free.
- 3.4.2 Kitchen and Food Storage
- 3.4.2.1 A licensee shall ensure that kitchens are provided with the necessary operable equipment for the preparation, storage, serving and clean-up of all meals for all of the children and employees regularly served by such kitchens. A licensee that does not prepare food on the premises and that utilizes single-service (disposable) dishes, pots, pans and utensils shall not be governed by this Requirement and Requirements 3.4.2.2, 3.4.2.3, 3.4.2.6, 3.4.2.8 and 3.4.2.10.
 - 3.4.2.2 A licensee shall ensure that a kitchen or food preparation area has a hand washing sink within the food preparation area and separate from the sink used for food preparation and dish washing.
 - 3.4.2.3 A licensee with a licensed capacity of 12 or fewer children shall ensure that:
 - 3.4.2.3.1 A mechanical dishwasher is used for the cleaning and sanitizing of all dishes, pots, pans and utensils after each meal; or
 - 3.4.2.3.2 Dishes, pots, pans and utensils are manually washed and rinsed after each meal in a sanitary manner using a two-compartment sink. When dishes, pots, pans and utensils are manually washed, a chlorinated detergent is used; and dishes, pots, pans and utensils, are immersed in warm water for a duration of time that is at least one minute. The water is to contain a sanitizing solution that is self-made, consisting of one teaspoon of household bleach to one gallon of water, or an appropriate commercial sanitizing solution that is used in accordance with labeled instructions.
 - 3.4.2.3.3 All dishes, pots, pans and utensils are air dried.
 - 3.4.2.4 A licensee with a licensed capacity of 13 or more children shall ensure that:
 - 3.4.2.4.1 A mechanical dishwasher is used for the cleaning and sanitizing of all dishes, pots, pans and utensils after each meal; and
 - 3.4.2.4.2 The dishwasher is capable of sanitizing at the proper time, temperature and pressure ratio, and that dishes, pots, pans and utensils are washed in accordance with manufacturer's instructions.
 - 3.4.2.5 A licensee shall ensure that all food service equipment and utensils are constructed of material that is nontoxic, easily cleanable and maintained in good repair.
 - 3.4.2.6 A licensee shall ensure that all food services equipment, eating and drinking utensils, counter-tops and other food contact areas are thoroughly cleaned and sanitized after each use.
 - 3.4.2.7 A licensee shall ensure that the floor, walls and counter-top surfaces of the kitchen are made of cleanable materials and impervious to water to the level of splash.
 - 3.4.2.8 A licensee shall ensure that the kitchen has a cook stove and oven with an appropriately vented hood that is maintained in a safe and operable condition.

- 3.4.2.9 A licensee shall ensure that the kitchen is so constructed or supervised as to limit access by children when necessary.
- 3.4.2.10 A licensee shall ensure that food preparation areas and appliances, dishes, pots, pans, and utensils in which food was prepared or served are cleaned following each meal.
- 3.4.2.11 A licensee shall ensure that all foods subject to spoilage are stored at temperatures that will protect against spoilage. This means that:
 - 3.4.2.11.1 All refrigerated foods are to be kept cold at 41 degrees Fahrenheit or below.
 - 3.4.2.11.2 All frozen foods are to be kept at 0 degrees Fahrenheit or below.
 - 3.4.2.11.3 All hot foods are to be kept at 140 degrees Fahrenheit or above, except during periods that are necessary for preparation and serving.
 - 3.4.2.11.4 Refrigerators and freezers shall be equipped with accurate, easily readable thermometers located in the warmest part of the refrigerator or freezer.
- 3.4.2.12 A licensee shall ensure that:
 - 3.4.2.12.1 All food storage areas are clean, dry and free of food particles, dust and dirt;
 - 3.4.2.12.2 All packaged food items and can goods are stored at least six inches above the floor in sealed or closed containers that are labeled;
 - 3.4.2.12.3 All dishes, pots, pans and utensils are stored in a clean and dry place; and
 - 3.4.2.12.4 All paper goods are stored at least six inches above the floor.
- 3.4.3 Water Supply and Sewage Disposal
 - 3.4.3.1 A licensee shall maintain on file written documentation that the building's water supply and sewage disposal system are in compliance with applicable State laws and regulations of the Delaware Division of Public Health and the Delaware Department of Natural Resources and Environmental Control, respectively.
 - 3.4.3.2 A licensee shall ensure that hot tap water does not exceed 120 degrees Fahrenheit at all outlets accessible to children, and that cold or tempered water are also provided.
- 3.4.4 Garbage and Refuse
 - 3.4.4.1 A licensee shall ensure that:
 - 3.4.4.1.1 Garbage is stored outside in watertight containers with tight-fitting covers that are insect and rodent proof;
 - 3.4.4.1.2 Garbage and refuse are removed from the premises at intervals of at least once a week; and
 - 3.4.4.1.3 Garbage and refuse are contained in an area that is separate from any outdoor recreation areas.
- 3.4.5 Lighting
 - 3.4.5.1 A licensee shall ensure that kitchens and all rooms used by children, including bedrooms, dining rooms, recreation rooms and classrooms, are suitably lighted for safety and comfort, with a minimum of 30 foot candles of light. All other areas shall have a minimum of 10 foot candles of light.
 - 3.4.5.2 A licensee shall ensure that all lights located over, by or within food preparation, serving and storage areas shall have safety shields or light covers.
 - 3.4.5.3 A licensee shall ensure that all corridors are illuminated during night-time hours.
 - 3.4.5.4 During night-time hours, a licensee shall provide for exterior lighting of the building(s), parking areas, pedestrian walkways or other premises subject to use by children, employees and volunteers.
- 3.4.6 Heating
 - 3.4.6.1 A licensee shall ensure that a minimum temperature of 68 degrees Fahrenheit is maintained at floor level in all rooms occupied by children.
 - 3.4.6.2 A licensee shall ensure that all working fireplaces, pipes, and electric space heaters accessible to children are protected by screens, guards, insulation or any other suitable, non-combustible protective device. All radiators accessible to

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- children below six years of age shall be protected by screens, guards, insulation or any other suitable, non-combustible protective device.
- 3.4.6.3 Portable fuel burning or wood burning heating appliance shall be prohibited.
- 3.4.7 Lead Paint and Asbestos
- 3.4.7.1 A licensee shall not use lead paint on the interior or exterior surfaces of any building used by children or on any furniture, toys or other equipment used by children.
- 3.4.7.2 A licensee that accepts children who are under six years of age, mentally retarded or severely emotionally disturbed shall ensure that the premises are free of lead paint hazards and shall maintain on file documentation that the premises have been tested and found to be free from lead paint hazards.
- 3.4.7.3 A licensee shall not use spray coatings containing asbestos on any interior or exterior portion of buildings or on any equipment used therein.
- 3.4.8 Toilet and Bathing
- 3.4.8.1 A licensee shall ensure that toilets, showers, sinks, and bathing facilities and other toilet accessories are provided for children and:
- 3.4.8.1.1 Allow for individual privacy unless this privacy is in conflict with toilet training or needed supervision; and
- 3.4.8.1.2 Are maintained in a safe and sanitary manner.
- 3.4.8.2 A licensee shall ensure that bathroom surfaces subject to splash shall be cleanable and impervious to water.
- 3.4.8.3 A licensee shall ensure that bathroom floors, showers, and bathtubs have slip-proof surfaces. Glass shower doors shall be marked for safety.
- 3.4.8.4 A licensee shall ensure that bathrooms are equipped with openable windows or mechanical ventilation systems to the outside.
- 3.4.9 Ventilation
- 3.4.9.1 A licensee shall ensure that each habitable room has direct outside ventilation by means of windows, louvers, air conditioning or mechanical ventilation.
- 3.4.9.2 A licensee shall ensure that:
- 3.4.9.2.1 Each door, operable window and other opening to the outside is equipped with insect screening in good repair and not less than 16 mesh to the inch, unless the facility is air conditioned and provided that it does not conflict with applicable fire safety requirements; and
- 3.4.9.2.2 This screening can be readily removed in emergencies.
- 3.4.9.3 A licensee shall ensure that ventilation outlets are maintained in a clean and sanitary manner, and kept free from obstructions.
- 3.4.9.4 A licensee shall ensure that all floor or window fans accessible to children have a protective grill, screen or other protective covering.
- 3.4.10 Storage
- 3.4.10.1 A licensee shall provide areas with sufficient space for storing all supplies and equipment in a safe and sanitary manner.
- 3.4.10.2 A licensee shall ensure that all poisonous and toxic materials are stored in accordance with the following:
- 3.4.10.2.1 All poisonous and toxic materials shall be prominently and distinctly labeled for easy identification as to contents;
- 3.4.10.2.2 All poisonous and toxic materials shall be stored so as to not contaminate food or constitute a hazard to children, employees and volunteers;
- 3.4.10.2.3 All poisonous and toxic materials shall be stored in a secure and locked room with access only by authorized employees, except those products that are required for routine cleaning and maintenance; and

3.4.10.2.4 All flammable liquids, gasoline, or kerosene shall not be stored on the premises except in a manner and place that has been authorized in writing by the Office of the Fire Marshal.

3.4.11 Furnishings and Maintenance

3.4.11.1 A licensee shall ensure that buildings are furnished with comfortable, clean furniture in good repair and appropriate to the age, size and capabilities of children.

3.4.11.2 A licensee shall ensure that the premises are maintained and cleaned in a scheduled or routine manner.

3.4.11.3 A licensee shall ensure that all cleaning equipment, including mops and buckets, are cleaned and stored in an area separate and distinct from the kitchen and food preparation, serving and storage areas. Kitchen and bathroom sinks shall not be utilized for cleaning mops, emptying mop buckets, or for any other purpose not connected with food preparation or the cleaning of dishes, pots, pans and utensils.

3.4.11.4 A facility licensed to care for 13 or more children shall have a service sink.

3.4.12 Outdoor Recreation Area

3.4.12.1 A licensee shall maintain or have access to an outdoor recreation area with at least 50 square feet for each child for the maximum number of children who will use the outdoor recreation area at one time.

3.4.12.2 When a licensee is not able to comply with Requirement 3.4.12.1, the licensee shall provide a minimum of 700 square feet of open, accessible indoor play space suitable for large muscle activity, group and individual sports conducive to indoor facilities and other forms of recreation activities.

3.4.12.3 A licensee shall ensure that all outdoor recreation areas are free from hazards and have adequate drainage.

3.4.12.4 A licensee shall ensure that all areas determined to be unsafe including steep grades, cliffs, open pits, swimming pools, high voltage boosters, or high speed roads or highways shall be fenced off or have a natural barrier to protect children.

3.4.12.5 A licensee shall ensure that its outdoor recreation program area has age-appropriate equipment for vigorous play, large muscle activity, physical exercise and group sports. Such equipment shall be maintained in a clean, safe, and operable condition and shall be free of hazards.

3.4.13 Swimming

3.4.13.1 A licensee that operates and utilizes an above-ground or in-ground swimming pool on its premises for use by children shall ensure that:

3.4.13.1.1 The pool fully complies with applicable swimming pool construction, sanitation, water quality standards, water temperature, recreational bathing and life saving provisions of federal, state, county and municipal law(s), regulations and ordinances;

3.4.13.1.2 The pool is maintained in a clean, safe, and sanitary manner;

3.4.13.1.3 The pool water shall be sufficiently clear to allow that all areas of the pool including the drain and bottom markings are clearly visible.

3.4.13.1.4 At least one employee who has secured a valid lifesaving or life-guard certificate issued by an appropriate governmental or private certifying agency is assigned to monitor the pool whenever children are present;

3.4.13.1.5 The employee(s) assigned to monitor bathers and swimmers using the pool is located in a position out of the water where he or she can clearly observe all bathers and swimmers; and

3.4.13.1.6 The pool is secured when not utilized by children.

3.4.13.2 A licensee shall ensure that the following lifesaving equipment is provided:

3.4.13.2.1 A whistle;

3.4.13.2.2 An assist pole or other appropriate reaching device

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- 3.4.13.2.3 A ring buoy or other appropriate throwing assist device that has a rope attached to it;
- 3.4.13.2.4 A backboard that has appropriate rigid cervical collars and a minimum of six straps;
- 3.4.13.2.5 A first aid kit; and a rescue tube.
- 3.4.14 Access to Telephone
 - 3.4.14.1 A licensee shall ensure that each building used by children has at least one working telephone that is directly available for immediate access or that is connected to an operating central telephone system.
 - 3.4.14.2 A licensee shall ensure that the licensee's telephone number is clearly posted and available to children, their parent(s) or legal guardian, and the general public.
 - 3.4.14.3 A licensee shall provide children reasonable access to a pay or free telephone.
 - 3.4.14.4 A licensee shall provide children reasonable privacy for telephone use.
 - 3.4.14.5 A licensee shall not charge children for telephone calls to their Division case manager or the Department rights representative.
- 3.4.15 Emergency Procedures
 - 3.4.15.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the handling of emergencies, including:
 - 3.4.15.1.1 Accident;
 - 3.4.15.1.2 Bomb threat;
 - 3.4.15.1.3 Fire;
 - 3.4.15.1.4 Flooding;
 - 3.4.15.1.5 Medical;
 - 3.4.15.1.6 Missing child;
 - 3.4.15.1.7 Power outage; or
 - 3.4.15.1.8 Severe weather conditions.
 - 3.4.15.2 The policies and procedures shall include:
 - 3.4.15.2.1 An emergency evacuation plan;
 - 3.4.15.2.2 Instructions and telephone numbers for contacting ambulance, emergency medical response team, fire, hospital, poison control center, police, and other emergency services;
 - 3.4.15.2.3 Location and use of first aid kits; and
 - 3.4.15.2.4 Roster and telephone numbers of employees to be contacted during an emergency.
 - 3.4.15.3 A licensee shall post its emergency evacuation plan and diagram depicting all exits in a conspicuous location on each floor of a building.
 - 3.4.15.4 A licensee shall ensure that each newly admitted child is provided an orientation regarding emergency procedures and the location of all exits within 48 hours of admission.
- 3.4.16 Emergency Evacuation Drills
 - 3.4.16.1 A licensee shall conduct at least four emergency evacuation drills annually and maintain on file a record of each drill. Two of these drills shall include evacuations, unless the Division, in writing, has determined that an evacuation is clinically contraindicated. Where a licensee utilizes two or more employee shifts, there shall be at least four emergency evacuation drills conducted annually for each shift.
 - 3.4.16.2 Emergency evacuation drills shall include all persons on the premises, including employees, volunteers, children and visitors.
- 3.4.17 Firearms and Other Weapons

- 3.4.17.1 A licensee shall prohibit the storage or use of any firearms or other weapons on the grounds of the facility or program or in any building used by children.
- 3.4.18 Power Equipment
 - 3.4.18.1 A licensee shall ensure that power-driven equipment shall be appropriately shielded and maintained in good repair. Children shall be permitted to use such equipment only when it is age appropriate and only under the direct supervision of an employee.
- 3.5 Health
 - 3.5.1 Employee and Volunteer Health
 - 3.5.1.1 Prior to employing any person or accepting any volunteer, a licensee shall secure and maintain on file written documentation certifying and verifying that the prospective employee and volunteer has had a general physical examination within 12 months prior to the date of employment. The examination shall include a medically accepted procedure for screening for tuberculosis.
 - 3.5.1.2 To be eligible to work in the facility or program, an employee or volunteer shall be:
 - 3.5.1.2.1 Free from tuberculosis; and
 - 3.5.1.2.2 Verified every three years thereafter as being free from tuberculosis.
 - 3.5.1.3 If a licensee determines that the prospective employee or volunteer has not had a general physical examination within 12 consecutive calendar months prior to the anticipated date of employment or volunteer work, or if a licensee is unable to document that such an examination was completed, a licensee shall require the prospective employee or volunteer, as a condition of employment, to have such a general physical examination, as specified in Requirements 3.5.1.1 and 3.5.1.2, within three consecutive calendar months of the date of employment or volunteer work.
 - 3.5.2 Child Health
 - 3.5.2.1 A licensee shall secure from and maintain on file written documentation of each child's current immunizations, as required by the Delaware Division of Public Health.
 - 3.5.2.2 If a licensee cannot obtain written documentation of immunization for a child, the licensee shall:
 - 3.5.2.2.1 Coordinate with the child's parent(s), legal guardian, or referring agency for the provision of required immunizations; and
 - 3.5.2.2.2 Ensure that the child is immunized within 30 consecutive calendar days of admission, unless a statement from a physician indicating that immunizations are contraindicated is included in the child's health record.
 - 3.5.3 Child's Health Records
 - 3.5.3.1 A licensee shall maintain on file a written health record for each child that includes information on:
 - 3.5.3.1.1 All available past medical history;
 - 3.5.3.1.2 Inventory and assessment of medications in use at the time of admission;
 - 3.5.3.1.3 All immunizations;
 - 3.5.3.1.4 All medications dispensed;
 - 3.5.3.1.5 Medical consents and releases of the child's parent(s) or legal guardian;
 - 3.5.3.1.6 All medical, dental, psychological or psychiatric examinations; and
 - 3.5.3.1.7 All medical treatment currently being provided.
 - 3.5.3.2 A licensee shall ensure that child health records are available to employees for emergency use.
 - 3.5.4 Administration or Assistance With Self-Administration of Medication
 - 3.5.4.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the use, administration or assistance with the self-

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administration of medications, prescription and non-prescription, to children. The policies and procedures shall:

- 3.5.4.1.1 Identify those employees who may administer or assist with the self-administration of medications, in accordance with applicable State law(s) and regulations;
- 3.5.4.1.2 Prohibit the administration of psychotropic medications unless a physician determines that such medication is clinically indicated;
- 3.5.4.1.3 Prohibit the administration of psychotropic medications for disciplinary purposes, for the convenience of an employee, or as a substitute for appropriate treatment services;
- 3.5.4.1.4 Require that an informed, written consent of the child's parent(s) or legal guardian is secured and maintained on file prior to the administration of any psychotropic medication;
- 3.5.4.1.5 Provide for a means of recording in writing the administration of all medications. Such records shall include the identity of the child, the date and time the medication was administered, and the identity of the employee who administered or assisted in the self-administration of the medication; and
- 3.5.4.1.6 Ensure that any known prescribed medication previously taken by a child is not changed, altered or failed to be dispensed without first consulting with a physician.
- 3.5.4.2 A licensee shall develop, adopt, follow and maintain on file a written schedule for each child receiving prescribed medications.
- 3.5.4.3 A licensee shall ensure that all medications are contained in the original container, properly labeled and stored in a secure locked area or as needed, in a locked refrigerated area. Keys to the secure area shall be safeguarded and kept out of the reach of children.
- 3.5.4.4 Effective one year following the adoption of these requirements, a licensee admitting children prescribed psychotropic medication and/or children prescribed medication for chronic illness, such as diabetes or asthma, shall ensure that each of these children receive a minimum of one hour per month of Medical Consultant services. The Medical Consultant services shall include:
 - 3.5.4.4.1 Review of administration of the child's medication, including determination of problems in adherence or administration and development of corrective action plans.
 - 3.5.4.4.2 Assessment and monitoring of the child with regard to the impact of their medication, including whether the medication is having its desired effects and whether the child is suffering from undesired side-effects.
 - 3.5.4.4.3 Provide liaison between the licensee and the child's physician(s).
 - 3.5.4.4.4 Provide employees with instruction in the expected outcomes from each child's medication regime and the possible side-effects of that medication regime.
- 3.5.5 Handwashing
 - 3.5.5.1 A licensee shall ensure that handwashing procedures follow the recommendations of the US Centers for Disease Control and Prevention to prevent the spread of illness. Hands shall be scrubbed for a minimum of 10 seconds using soap and warm running water.
 - 3.5.5.2 A licensee shall ensure that employees and children wash their hands at least at the following times and whenever hands are contaminated with body fluids:
 - 3.5.5.2.1 Before any food service activity including food preparation, food serving, table setting and tableware handling;
 - 3.5.5.2.2 After toileting;
 - 3.5.5.2.3 After changing diapers;

- 3.5.5.2.4 After assisting a child with toileting or nose wiping, or after cleaning from a child's having vomited;
- 3.5.5.2.5 Before eating meals or snacks; or
- 3.5.5.2.6 After handling pets or other animals.
- 3.5.5.3 A licensee shall ensure that soap and toilet paper are available at all times. Paper towels or individual clean cloth towels shall be available for each child. If cloth towels are used, a licensee shall ensure that they are washed or replaced daily.
- 3.5.5.4 A licensee shall ensure that rest equipment, cribs, beds, mats and bedding are age-appropriate and assigned to one individual child for his or her exclusive use. All bedding shall be cleaned weekly or when soiled or wet, and shall not be assigned to another child until it has been cleaned and sanitized.
- 3.5.6 Universal Precautions
 - 3.5.6.1 A licensee shall employ universal precautions for protection from disease and infection. Spills of body fluids (i.e., blood, eye discharge, feces, injury or tissue discharges, nasal discharge, saliva, or urine) shall be cleaned up immediately, as follows:
 - 3.5.6.1.1 Spills of vomit, urine, or feces on any surface including floors, walls, bathroom fixtures, table tops, furniture, diaper-changing tables, the area shall be cleaned and disinfected;
 - 3.5.6.1.2 Spills of blood or blood-containing body fluids and injury and tissue discharges, the area shall be cleaned and disinfected. Nonporous disposable gloves shall be used in these situations unless the amount of blood or body fluids is so small that it can easily be contained by the material used for cleaning without coming into contact with the person doing the cleaning;
 - 3.5.6.1.3 Persons involved in cleaning contaminated surfaces shall avoid exposure of open skin sores or mucous membranes to blood or blood-containing body fluids and injury or tissue discharges by using nonporous disposable gloves to protect hands when cleaning contaminated surfaces;
 - 3.5.6.1.4 Blood-contaminated material and diapers shall be disposed of in a plastic bag with a secure tie; and
 - 3.5.6.1.5 Mops shall be cleaned, rinsed, disinfected, wrung dry and hung to dry.
- 3.5.7 Disinfectant Solution
 - 3.5.7.1 A licensee shall use a disinfectant solution for disinfecting areas that have been contaminated by body fluids. The disinfectant solution shall be a commercially prepared spill kit or self-made consisting of one-fourth cup of household bleach to each gallon of water, which shall be prepared daily, labeled, and placed in a bottle or a plastic container that is sealed with a cap and stored out of reach of children.
- 3.5.8 Diapering and Sanitation
 - 3.5.8.1 A licensee shall ensure that a diaper-changing area is:
 - 3.5.8.1.1 Separate from food preparation and serving areas;
 - 3.5.8.1.2 Easily accessible to a handwashing sink; and
 - 3.5.8.1.3 Surfaces used for diaper-changing are non-absorbent and washable, and are disinfected between use by different children or protected by a disposable covering discarded after each use.
 - 3.5.8.2 A licensee shall:
 - 3.5.8.2.1 Use cloth diapers or disposable diapers;
 - 3.5.8.2.2 Place non-disposable soiled diapers and training pants without rinsing into a separate leakproof plastic bag, labeled with the child's name, before transporting to a laundry or laundering;
 - 3.5.8.2.3 Place soiled disposable diapers into a cleanable, covered container with a leakproof liner;
 - 3.5.8.2.4 Use disposable towels, disposable wipes, or clean, reusable towels laundered between use for different children;

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- 3.5.8.2.5 Immediately wash his or her hands after diapering or helping a child with toileting; and
- 3.5.8.2.6 Immediately wash the hands of a child after toileting.
- 3.5.8.3 A licensee shall use toilet training chairs only in an area separate from food preparation areas and in an area that ensures a child's privacy while permitting supervision.
- 3.5.8.4 A licensee shall disinfect toilet training equipment after each use.
- 3.5.9 Infant Care
 - 3.5.9.1 A licensee shall ensure that feeding bottles, nipples, and pacifiers are cleaned and disinfected after each use or when dropped on the floor or ground.
 - 3.5.9.2 A licensee shall ensure that toys that are mouthed by infants or children are cleaned and disinfected after each use and stored between use in a clean container.
- 3.5.10 Emergency Medical Services
 - 3.5.10.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing medical emergencies. These policies and procedures shall require that at least:
 - 3.5.10.1.1 One employee is on duty who is qualified to administer first aid and cardiopulmonary resuscitation; and
 - 3.5.10.1.2 One fully equipped first aid kit is placed in each building used by children, and in any indoor recreation area.
- 3.5.11 First Aid Kit
 - 3.5.11.1 A licensee shall ensure that first aid kits are readily available and contain the following:
 - 3.5.11.1.1 Nonporous disposable gloves;
 - 3.5.11.1.2 Scissors;
 - 3.5.11.1.3 Tweezers;
 - 3.5.11.1.4 Safety pins;
 - 3.5.11.1.5 Thermometer;
 - 3.5.11.1.6 Current American Academy of Pediatrics or American Red Cross first aid book or an equivalent first aid guide;
 - 3.5.11.1.7 Emergency telephone numbers;
 - 3.5.11.1.8 Self-adhesive bandages of various sizes;
 - 3.5.11.1.9 Bandage tape;
 - 3.5.11.1.10 Sterile gauze pads;
 - 3.5.11.1.11 Flexible roller gauze;
 - 3.5.11.1.12 Triangular bandages; and
 - 3.5.11.1.13 Antiseptic wipes.
- 3.5.12 Illness, Injury or Death
 - 3.5.12.1 A licensee shall notify the child's parent(s) or legal guardian and the referring agency of any serious illness incident involving serious bodily injury or any severe psychiatric episode of a child requiring either in or out patient hospitalization.
 - 3.5.12.2 A licensee shall immediately notify the child's parent(s) or legal guardian and the referring agency, the Division and the medical examiner in the event of the death of a child.
- 3.5.13 Nutrition
 - 3.5.13.1 A licensee shall ensure that all children are provided nutritionally balanced meals and snacks, and portions suitable to the size and age of the child in care, in accordance with the Recommended Dietary Allowances of the National Research Council or its equivalent.
 - 3.5.13.2 A licensee shall ensure that a written menu is posted on a daily basis in a conspicuous location on the premises. Any change or substitution to the menu

shall be noted and considered as part of the original menu. Menus shall be maintained on file and made accessible for review for at least six months.

- 3.5.13.3 A licensee shall ensure that meals and snacks are served in accordance with the following schedule based upon the number of hours that a child is present at the facility or program:
 - 3.5.13.3.1 Two to four hours - one snack;
 - 3.5.13.3.2 Four to six hours - one meal and one snack;
 - 3.5.13.3.3 Six to 10 hours - two meals and one snack, or one meal and two snacks, based upon the arrival of the child; or
 - 3.5.13.3.4 Ten hours or more - three meals and two snacks.
- 3.5.13.4 A licensee shall ensure that alternate meals and snacks are provided for children on special diets when prescribed by a physician or required by religious beliefs.
- 3.5.14 Pets
 - 3.5.14.1 A licensee shall ensure that animals or household pets are free from disease and cared for in a safe and sanitary manner.
 - 3.5.14.2 A licensee shall secure and maintain on file written documentation of rabies and other vaccinations of pets, as required by State law(s), regulations or local ordinances.
- 3.5.15 Use of Alcohol, Tobacco and Illegal Drugs
 - 3.5.15.1 A licensee shall prohibit the use of tobacco by children.
 - 3.5.15.2 A licensee shall prohibit all use of tobacco by employees, volunteers and visitors in any building used by children and in the presence of children.
 - 3.5.15.3 A licensee shall prohibit all use of alcohol and illegal drugs by employees, volunteers, children and visitors in any building or on the premises used by children and in the presence of children.
 - 3.5.15.4 A licensee shall prohibit all use of alcohol, tobacco and illegal drugs by employees, volunteers, children and visitors in any vehicle owned, leased or provided by the licensee and utilized for transporting children.
 - 3.5.15.5 In vehicles owned by employees or volunteers, a licensee shall prohibit all use of alcohol, tobacco and illegal drugs by employees, volunteers, children and visitors while transporting children.
 - 3.5.15.6 A licensee shall prohibit the purchase of alcohol, tobacco and illegal drugs for children by employees and volunteers.
- 3.6 Transportation
 - 3.6.1 A licensee that chooses to provide for the transportation of children to or from the premises, or in connection with an authorized activity, shall ensure that transportation is provided, in accordance with the provisions of these requirements.
 - 3.6.2 A licensee shall maintain on file a photocopy or other written record of the following documents for every motor vehicle used by the licensee to transport children and every driver who transports children:
 - 3.6.2.1 A valid motor vehicle license;
 - 3.6.2.2 A current motor vehicle registration; and
 - 3.6.2.3 A current motor vehicle insurance coverage contract.
 - 3.6.3 A licensee shall ensure that the driver of any motor vehicle used to transport children enrolled in a facility or program has a valid driver's license to operate the specific type of motor vehicle used to transport children.
 - 3.6.4 A licensee that chooses to transport non-ambulatory children with disabilities shall ensure that the following additional equipment is provided for all vehicles except automobiles used for transporting children:
 - 3.6.4.1 A ramp device to permit entry and exit of a child;
 - 3.6.4.2 A fastening system for wheelchairs that secures the chair to the vehicle floor; and
 - 3.6.4.3 Adequate aisle space that does not impede access to the exit door.

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- 3.6.5 A licensee shall ensure that all vehicles used to transport children:
- 3.6.5.1 Are maintained in a clean and safe condition;
 - 3.6.5.2 Are equipped with a triangular red portable reflector device;
 - 3.6.5.3 Are equipped with a fully stocked first aid kit located on the inside of the vehicle;
 - 3.6.5.4 Have seats and back rests that are securely fastened;
 - 3.6.5.5 Have all seats facing sideways or backward securely locked in place; and
 - 3.6.5.6 Have an operable heater capable of maintaining a temperature of 60 degrees Fahrenheit.
- 3.6.6 A licensee shall ensure that the following safety procedures are followed:
- 3.6.6.1 An employee or volunteer is always present when a child is in the vehicle;
 - 3.6.6.2 All children are secured in a car seat that is appropriate for their age and that complies with applicable provisions of federal and state law(s) or regulations;
 - 3.6.6.3 Children who are not in a car seat are using individual seat belts; and
 - 3.6.6.4 When transporting more than four children below six years of age, that there is one adult, in addition to the driver, in the vehicle.

4.0 Residential Child Care Facility

4.1 Administration

4.1.1 Authorization to Operate a Facility

- 4.1.1.1 As a condition for being authorized by the Division to operate a facility, a licensee shall make application to and have been determined by the Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of Chapters 1 through 3.

4.2 Personnel

4.2.1 Staff-to-Child Ratios During Hours When Children are Awake

- 4.2.1.1 During hours when children are awake, a building with a licensed capacity of 12 or fewer children shall have no fewer than one direct care worker on duty on the premises when children are present. When no children are present, there shall be one employee who can be reached by telephone.
- 4.2.1.2 During hours when children are awake, a building with a licensed capacity of 13 children or more, shall have one direct care worker on duty on the premises for every 10 children or fraction thereof when children are present. When no children are present, there shall be one employee who can be reached by telephone.

4.2.2 Staff-to-Child Ratios During Hours When Children are Sleeping

- 4.2.2.1 During hours when children are sleeping, a building with a licensed capacity of 12 or fewer children, all of whom are of the same gender, shall have one direct care worker on duty on the premises when children are present. The direct care worker shall be in the area where children sleep or in any area within close proximity to the area(s) where children sleep. The direct care worker shall not be required to be awake. An additional employee shall be on call and available to reach the building, when called, within 30 consecutive minutes. If the building is co-educational, the direct care worker shall be on duty and awake.
- 4.2.2.2 During hours when children are sleeping, a building with a licensed capacity of 13 children or more, shall have one direct care worker on duty on the premises and awake for each 16 children or fraction thereof, when children are present. The direct care worker shall be in the area where children sleep or in any area within close proximity to the area(s) where children sleep. An additional employee shall be on call and available to reach the facility, when called, within 30 consecutive minutes.

4.2.3 Recreation

- 4.2.3.1 A facility with a licensed capacity of 13 children or more shall designate one full-time employee to plan, coordinate and lead recreational, physical exercise and leisure time activities for children.

4.3 Children's Services and Activities

4.3.1 Visitation with Children

- 4.3.1.1 A facility shall develop, adopt, follow and maintain on file written policies and procedures governing visits between children and their parent(s), legal guardian, relatives and friends, both at the facility, at the children's own homes and at other suitable locations. These policies and procedures shall address the days and hours of visits, frequency of visits permitted, any exceptions governing whom the child may visit, and whom to contact to arrange for special accommodations in the event of hardship or emergencies and shall be consistent with applicable State law(s), regulations or court orders.
- 4.3.1.2 A facility shall explain the policies and guidelines to the child and his or her parent(s) or legal guardian.
- 4.3.1.3 A facility shall provide accommodations within the buildings to enable visits with children to be conducted in reasonable privacy, except where the service plan indicates that visits are to be directly supervised, or when the facility has reason to believe that a particular visitor would not be in the best interest of the child.
- 4.3.1.4 A facility shall not deny or restrict children's visits in the facility with their parent(s), legal guardian, relatives or friends based upon a child's behavior or infraction of these requirements, unless specified in the child's service plan.

4.3.2 Facility Visits or Tours

- 4.3.2.1 A facility shall develop, adopt, follow and maintain on file written policies and procedures governing visits to or tours within the facility by volunteers, advisory committees or councils, public officials, the media and members of the public-at-large who are not related to children in care. The policies and procedures shall address:
 - 4.3.2.1.1 The process by which such persons shall be required to seek and secure prior written approval to visit or tour the facility;
 - 4.3.2.1.2 The purpose and extent of such visits or tours;
 - 4.3.2.1.3 The days, hours, frequency and duration of any such visits or tours;
 - 4.3.2.1.4 The circumstances and conditions under which such persons may visit or tour, including a requirement that such visits or tours be supervised by employees;
 - 4.3.2.1.5 Precautions to protect the health, safety and well-being and to prevent risk or harm to children in care;
 - 4.3.2.1.6 Requirements designed to protect the privacy rights of children in care; and
 - 4.3.2.1.7 Conditions to ensure that such visits or tours do not:
 - 4.3.2.1.7.1 Cause a major or serious disruption of services or treatment to children;
 - 4.3.2.1.7.2 Interfere with the implementation of the child's service plan;
 - 4.3.2.1.7.3 Intimidate or embarrass children or employees; or
 - 4.3.2.1.7.4 Seriously interfere with or disrupt program operations.

4.3.3 Overnight Visits Away from Facility

- 4.3.3.1 A facility shall include in the visitation policies and procedures provisions for verifying the identity of any visitor(s) not known to the facility and for securing prior to the visit pertinent information about the location of the overnight visit and the adult(s) responsible for the child's care during the visit.

4.3.4 Sending and Receiving Mail

- 4.3.4.1 A facility shall not deny or restrict a child's right to send and receive mail without censorship and without limiting the amount of mail a child sends or receives, except when:
 - 4.3.4.1.1 The facility has reason to believe that a child's mail may contain unauthorized, injurious or illegal materials;
 - 4.3.4.1.2 A court order restricts this right; or

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- 4.3.4.1.3 A facility has reason to believe that a particular child's mail may present a security risk.
- 4.3.4.2 A facility shall ensure that each child has reasonable access to writing materials and postage.
- 4.3.5 Children's Money
 - 4.3.5.1 A facility shall develop, adopt, follow and maintain on file written policies and procedures governing the handling and management of children's money. These policies and procedures shall include provisions on:
 - 4.3.5.1.1 The conditions under which a child may possess his or her own money;
 - 4.3.5.1.2 The management of individual monetary accounts, ensuring that there is an accurate, individual accounting of all monies belonging to a child, including the receipting and disbursing of all monies;
 - 4.3.5.1.3 Prohibiting a facility from requiring a child to assume responsibility for the cost of his or her own care and treatment, except for the reasonable reimbursement of costs required to pay for purposeful damage to the facility or to the property of another person by a child; and
 - 4.3.5.1.4 Allowing or facilitating opportunities for a child to earn an allowance or to earn money through work assignments.
- 4.3.6 Sleep
 - 4.3.6.1 A facility shall develop, adopt, follow and maintain on file written policies and procedures governing the time to be set aside for uninterrupted daily sleep for each child. The policies and procedures shall ensure that each child is given the opportunity for at least eight hours of uninterrupted rest on a daily basis, unless the service plan or health needs of the child indicate otherwise.
- 4.3.7 Clothing and Other Personal Belongings
 - 4.3.7.1 A facility shall ensure that each child has adequate, clean, and seasonally appropriate clothing.
 - 4.3.7.2 A facility shall permit a child to bring clothing and other personal belongings to the facility, unless prohibited by the facility's policies and procedures.
 - 4.3.7.3 A facility shall make adequate provisions for storing a child's clothing and other personal belongings while the child is enrolled, so that clothing used by a child does not come into contact with clothing used by another child.
 - 4.3.7.4 A facility shall permit a child to take with him or her all clothing and other personal belongings identified as his or hers at the time of discharge.
- 4.3.8 Nutrition
 - 4.3.8.1 A facility shall provide at least three nutritiously balanced meals for each child on a daily basis at regular times, with not more than 14 hours between the evening meal and breakfast.
- 4.3.9 Discharge and Aftercare Plans
 - 4.3.9.1 A facility shall develop, adopt, follow and maintain on file written policies and procedures governing discharge and aftercare planning. The policies and procedures shall include:
 - 4.3.9.1.1 The roles and responsibilities of the child's parent(s) or legal guardian, the referring agency, and the facility;
 - 4.3.9.1.2 The handling of an emergency discharge of a child that ensures the immediate notification of his or her parent(s) or legal guardian, or the referring agency;
 - 4.3.9.1.3 The involvement of the child in developing the discharge and aftercare plan, consistent with the child's ability to understand the plan and process; and
 - 4.3.9.1.4 The contents of the discharge report, which shall include the name, address, telephone number of the person or agency to whom the child was discharged. In addition, the report shall include a summary of the services provided to the child while in care, goals specified within the service plan that have been

achieved, service needs that remain to be addressed, and recommendations for appropriate follow-up services.

The discharge report shall be completed within 30 consecutive calendar days of the child's discharge.

- 4.3.9.2 A facility that discharges a child under circumstances that are not consistent with the child's service plan shall also document in writing the following in the discharge report:
 - 4.3.9.2.1 The circumstances leading to the unplanned discharge;
 - 4.3.9.2.2 The actions taken by the facility and other parties; and
 - 4.3.9.2.3 The reason for the actions taken.

4.4 Physical Plant

4.4.1 Living Unit Space

- 4.4.1.1 A facility shall ensure that the living unit(s) have designated space for daily living activities, including dining, recreation, indoor activities and areas where children may visit with their parent(s), legal guardian, relatives and friends.
- 4.4.1.2 A facility shall ensure that a dining area is provided which shall be maintained in a clean manner, be well-lighted and ventilated. The licensee shall ensure that dining room tables and chairs or benches are sturdy and appropriate for the sizes and ages of the children in care.

4.4.2 Toilet and Bathing

- 4.4.2.1 A facility shall ensure that there are toilet and bathing accommodations that meet the following specifications:
 - 4.4.2.1.1 For every eight residents, there shall be at least one flush toilet, wash basin, and bathtub or shower;
 - 4.4.2.1.2 These toileting and bathing facilities shall not be located more than one floor from any bedroom; and
 - 4.4.2.1.3 Bathrooms shall have at least one mirror fastened to the wall at an age appropriate height.

4.4.3 Bedroom Accommodations

- 4.4.3.1 A facility shall ensure that any bedroom used by children includes:
 - 4.4.3.1.1 A designated area for sleeping;
 - 4.4.3.1.2 A floor area of at least 70 square feet in a single-occupancy bedroom and at least 50 square feet in a multiple-occupancy bedroom, excluding closet space;
 - 4.4.3.1.3 Sufficient space for beds to be at least three feet apart at the head, foot, and sides. Bunk beds shall be at least five feet apart at the head, foot and sides;
 - 4.4.3.1.4 No more than four children for sleeping per room;
 - 4.4.3.1.5 A door that may be closed;
 - 4.4.3.1.6 A direct source of natural light;
 - 4.4.3.1.7 A window covering to ensure privacy; and
 - 4.4.3.1.8 Lights with safety covers or shields.
- 4.4.3.2 A facility shall ensure that each child is provided with:
 - 4.4.3.2.1 A bed;
 - 4.4.3.2.2 A cleanable, fire retarding mattress;
 - 4.4.3.2.3 Clean bed linens on at least (a weekly basis) every seven calendar days, or more often if needed;
 - 4.4.3.2.4 A pillow; and
 - 4.4.3.2.5 Blanket(s) appropriate for season and weather.
- 4.4.3.3 A facility shall use cots or portable beds in an emergency only and for no longer than a period of 72 hours.

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- 4.4.3.4 A facility shall ensure that there are no more than two tiers when bunk beds are used. In addition, the facility shall ensure that the distance between the top bunk mattress and ceiling is of sufficient height to enable the child to sit upright in bed without his or her head touching the ceiling.
 - 4.4.3.5 A facility shall provide and locate in the bedroom for each child a chest of drawers, a bureau, or other bedroom furniture for the storage of clothing and other personal belongings.
 - 4.4.3.6 A facility shall not permit a child to share the same bed with any other child.
 - 4.4.3.7 A facility shall ensure that a child of five years of age or older may occupy a bedroom only with members of the same sex.
- 4.5 Health
- 4.5.1 Personal Care and Hygiene
 - 4.5.1.1 A facility shall develop, adopt, follow and maintain on file written policies and procedures that ensure that:
 - 4.5.1.1.1 Children will receive guidance and instruction in personal care and hygiene appropriate to their age, gender, race and culture;
 - 4.5.1.1.2 Children follow personal care and good hygiene practices; and
 - 4.5.1.1.3 All necessary hygiene supplies, towels, washcloths and toiletries are provided to children in harmony with their age, gender, race and culture.
 - 4.5.1.2 A facility shall develop, adopt, follow and maintain on file written policies and procedures governing preventative, routine and emergency dental and medical care, including provisions for effective coordination of such dental and medical care with those responsible for the child's aftercare. The policies and procedures shall include:
 - 4.5.1.2.1 Periodic appraisal of the general health of each child;
 - 4.5.1.2.2 Initial and continuing health screening procedures;
 - 4.5.1.2.3 Emergency procedures;
 - 4.5.1.2.4 Maintenance of health records;
 - 4.5.1.2.5 Arrangements with a licensed physician(s) and dentist(s) to provide needed care; and
 - 4.5.1.2.6 Availability of medical care on a 24-hours-a-day, seven-days-a-week basis.
 - 4.5.1.3 A facility shall ensure that children receive timely, competent care when they are ill and continue to receive necessary follow-up care.
 - 4.5.2 Medical and Dental Care
 - 4.5.2.1 If a facility cannot document that each child has received a complete physical examination within 12 consecutive calendar months before admission to the facility, the facility shall arrange for the child to have a new physical examination, to be completed within 45 consecutive calendar days after admission.
 - 4.5.2.2 A facility shall ensure that every child receives a physical examination no later than 12 consecutive calendar months after his or her previous physical examination and once a year thereafter.
 - 4.5.2.3 A facility shall ensure that, upon admission, a child is asked if he or she has any physical illnesses or injuries. If a child shows symptoms of illness or injury, the facility shall arrange for the child to be examined immediately by a licensed physician or by a licensed nurse practitioner. The facility shall document the results of this procedure in writing and maintain them on file in the child's record.
 - 4.5.2.4 A facility shall ensure that a child receives necessary medical care throughout the year.
 - 4.5.2.5 A facility shall ensure that every child over three years of age receives a dental examination annually.
 - 4.5.2.6 A facility shall ensure that a child receives necessary, non-cosmetic dental care throughout the year.

- 4.5.2.7 A facility shall make provisions for a child to receive any needed eyeglasses, hearing aids, prosthetic devices or other corrective devices, as medically indicated by a licensed physician.
- 4.5.3 Prenatal Care for Pregnant Adolescents
 - 4.5.3.1 A facility caring for a pregnant adolescent shall ensure that:
 - 4.5.3.1.1 All pregnant adolescents receive comprehensive prenatal care, including:
 - 4.5.3.1.1.1 Monthly visits to an obstetrician or certified nurse mid-wife during the first 28 weeks of gestation;
 - 4.5.3.1.1.2 Biweekly visits to an obstetrician or certified nurse mid-wife from the 29th to the 36th week of gestation;
 - 4.5.3.1.1.3 Weekly visits to an obstetrician or certified nurse mid-wife from the 36th week of gestation until delivery; and
 - 4.5.3.1.1.4 Participation in a child birth class provided by a registered nurse or child birth educator.
 - 4.5.3.1.2 Arrangements for the delivery of the child are made by the end of the second trimester, or in situations wherein the adolescent is already pregnant beyond the second trimester upon admission to the facility, arrangements shall be made within 15 consecutive calendar days of the adolescent's admission to the facility;
 - 4.5.3.1.3 A system is established to provide background medical information on the pregnant adolescent to the hospital identified for delivery or at the birthing center identified for delivery;
 - 4.5.3.1.4 Delivery arrangements are clearly recorded in the adolescent's medical record to which employees are to have access in an emergency; and
 - 4.5.3.1.5 Pregnant adolescents receive a dental examination within three consecutive calendar months of admission, and that needed non-cosmetic dental care is provided.

5.0 Secure Residential Child Care Facility

- 5.1 Authorization to Operate a Secure Residential Care Facility
 - 5.1.1 As a condition for being authorized by the Division to operate a secure residential care facility, a licensee shall make application to and have been determined by the Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of 1.0, 2.0, 3.0 and 4.0.
- 5.2 Admission
 - 5.2.1 A facility shall only admit a child who has been adjudicated **delinquent** by a court of law or placed by the Delaware Division of Child Mental Health Services or any other in-state or out-of-state governmental agency.
- 5.3 Security Measures
 - 5.3.1 A facility shall develop, adopt, follow and maintain on file a written statement identifying the specific security measures employed at the facility, and the basis for using these measures.
- 5.4 Definition
 - 5.4.1 For purposes of this Chapter only, "automatic fail-safe system" means a combination of a mechanical and an electronic system that automatically unlocks all resident room doors and other doors required for building egress purposes in the event of either a power failure or a fire.
- 5.5 Staff-to-Child Ratios
 - 5.5.1 A facility that is equipped with an automatic fail-safe system that allows full and free egress from all individual rooms and buildings in the event of a power failure or fire shall have at least one direct care worker on duty and on the premises for every five children or fraction thereof, during hours when children are awake, and shall have at least one direct

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care worker awake and on duty on the premises for every 10 children or fraction thereof during hours when children are sleeping. There shall always be a minimum of two direct care workers awake and on duty when children are present during night-time hours.

5.5.2 A facility that is not equipped with an automatic fail-safe system shall have at least one direct care worker on duty on the premises for every four children or fraction thereof, when children are present during hours when children are awake, and shall have at least one direct care worker awake and on duty on the premises for every six children or fraction thereof when children are present during hours when children are sleeping. There shall always be a minimum of two direct care workers awake and on duty when children are present during hours when children are sleeping.

5.5.3 A facility shall assign direct care workers to cover no more than one living unit at the same time.

5.5.4 A facility shall have at least one additional employee immediately available at all times to assist on-duty employees in an emergency.

5.6 Outdoor Recreation Area

5.6.1 A facility shall ensure that the outdoor recreation area is enclosed with a suitable security fence.

5.7 Exemptions

5.7.1 A secure residential care facility shall be exempt from the following requirements:

5.7.1.1 That portion of Requirement 3.3.8.2 regarding participation in off-site religious services or activities.

5.7.1.2 Requirements 4.2.1.1 through 4.2.2.2 regarding staff-to-child ratios.

6.0 Shelter Care Facility

6.1 Authorization to Operate a Shelter Care Facility

6.1.1 As a condition for being authorized by the Division to operate a shelter care facility, a licensee shall make application to and have been determined by the Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of Chapters 1.0, 2.0, 3.0 and 4.0.

6.2 Staff-to-Child Ratios

6.2.1 During hours when the children are awake, a facility shall provide at least one direct care worker on duty on the premises for every five children, or fraction thereof, when children are present. During hours when the children are sleeping, a facility shall provide at least one direct care worker awake and on duty on the premises for every 10 children, or fraction thereof, when children are present.

6.3 Health Care

6.3.1 A facility shall either:

6.3.1.1 Secure written documentation that a child has received a complete physical examination within the 12 consecutive calendar months prior to his or her admission to the shelter care facility; or

6.3.1.2 Provide or arrange for the provision of a complete physical examination within seven consecutive calendar days of a child's admission to the shelter care facility.

6.4 Duration of Placement

6.4.1 A facility shall provide care to children for a period of time that is not to exceed 30 consecutive calendar days, unless:

6.4.1.1 There is documentation in the child's service plan that clearly justifies a longer placement; or

6.4.1.2 There is evidence that a strict adherence to the 30-day limit would require the child's release to another short-term placement, in which case the child may remain in the shelter care facility until a more permanent or long-term placement has been identified, or not later than 60 consecutive calendar days, whichever occurs first.

6.5 Exemptions

- 6.5.1 A shelter care facility shall be exempt from the following requirements:
- 6.5.1.1 Requirement 3.5.2.1 regarding written documentation of a child's current immunizations;
 - 6.5.1.2 Requirement 3.5.2.2 regarding obtaining necessary immunizations within 30 consecutive calendar days of admission; and
 - 6.5.1.3 Requirement 3.5.3.1 regarding the essential health records to be maintained on file. If the items listed in Requirement 3.5.3.1 are available, they shall be kept on file by the facility.

7.0 Transitional Care Facility

7.1 Authorization to Operate a Transitional Care Facility

- 7.1.1 As a condition for being authorized by the Division to operate a transitional care facility, a licensee shall make application to and have been determined by the Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of 1.0, 2.0, 3.0 and 4.0.

7.2 Admission

7.2.1 A facility shall admit children who:

- 7.2.1.1 Have reached the age of 16 or older;
- 7.2.1.2 Have demonstrated a level of maturity that will enable them to be involved in some community activities, including education or employment; and
- 7.2.1.3 Require minimum guidance or supervision.

- 7.2.2 A facility shall accept a child into care only after a current comprehensive admission evaluation has been completed in accordance with Requirement 3.3.1.1 and only when the evaluation indicates that preparation for self-sufficiency or independent living is the primary goal for the child.

- 7.2.3 At the time of admission, a facility shall enter into a written agreement with each child. The agreement shall include:

- 7.2.3.1 A delineation of the respective roles and responsibilities of the facility, the child, and other involved parties;
- 7.2.3.2 A description of the rules governing the conduct and consequences of inappropriate behavior of the child while in care;
- 7.2.3.3 A statement of any financial arrangements related to placement, in accordance with Requirement 4.3.5.1; and
- 7.2.3.4 The approval signature of the child and the signature of a representative of the facility.

7.3 Service Plan

- 7.3.1 In addition to the provisions of Requirements 3.3.3.1, 3.3.3.2 and 3.3.3.3, a facility shall ensure that the service plan includes:

- 7.3.1.1 The type and frequency of supervision needed;
- 7.3.1.2 The respective roles and responsibilities of the facility, the child and other involved parties;
- 7.3.1.3 The time-frames and methods to be used to gradually reduce dependency while appropriately increasing personal responsibility;
- 7.3.1.4 Identification of all persons responsible for the implementation of the plan;
- 7.3.1.5 The life skills the youth will need to acquire before discharge;
- 7.3.1.6 The criteria for achieving a successful discharge; and
- 7.3.1.7 The preliminary plan for discharge and aftercare, in accordance with Requirements 4.3.9.1 and 4.3.9.2.

7.4 Activity Schedule

- 7.4.1 A facility shall assist each child to develop and follow a written activity schedule that includes:

- 7.4.1.1 Life skills training and practice appropriate to achieving independent living;

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- 7.4.1.2 Household chores to be completed by children in care;
 - 7.4.1.3 Employment, job skill training or educational activities;
 - 7.4.1.4 Leisure-time or recreational activities; and
 - 7.4.1.5 Contacts with employees, volunteers or community people.
- 7.5 Staff Coverage
- 7.5.1 A facility shall develop, adopt and follow written policies and procedures governing the type and frequency of employee supervision provided for each child. The policies and procedures shall:
 - 7.5.1.1 Contain criteria for determining the type and frequency of employee supervision. The criteria shall be based on an assessment of each child's maturity, suitability and readiness for responsibly and safely handling various degrees of responsibility and independence; and
 - 7.5.1.2 Delineate a mechanism by which a child can communicate with a facility for information, assistance or guidance, or to express a concern or need that the child cannot resolve alone.
- 7.6 Exemptions
- 7.6.1 A transitional care facility shall be exempt from the following requirements:
 - 7.6.1.1 Requirements 3.4.12.1 through 3.4.12.5 regarding the outdoor recreation area.
 - 7.6.1.2 Requirements 3.5.2.1 and 3.5.2.2 regarding child immunizations.
 - 7.6.1.3 Requirements 4.2.1.1 through 4.2.2.2 regarding staff-to-child ratios.
 - 7.6.1.4 Requirement 4.3.5.1.3, regarding the prohibition that a child pay for his or her own care and treatment.
- 8.0 Day Treatment Programs**
- 8.1 Authorization to Operate a Day Treatment Program
- 8.1.1 As a condition for being authorized by the Division to operate a day treatment program, a licensee shall make application to and have been determined by the Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of 1.0, 2.0 and 3.0.
 - 8.1.2 If a day treatment program chooses to use any form of restrictive procedure as defined by Requirement 1.35, the day treatment program shall secure prior written authorization from the Division and shall comply with the Requirements of Chapter 9.0.
- 8.2 Health Appraisal
- 8.2.1 A program shall ensure that within one month following admission, there shall be on file an age-appropriate health appraisal conducted within 12 consecutive calendar months prior to admission for each child enrolled. Health appraisals shall be certified by a licensed physician or nurse practitioner and shall be updated annually. The health appraisal shall include:
 - 8.2.1.1 A health history;
 - 8.2.1.2 A physician's examination;
 - 8.2.1.3 Recommendations regarding restrictions or modifications of the child's activities, diet or care;
 - 8.2.1.4 Prescriptions for medication or recommendations regarding medications; and
 - 8.2.1.5 Documentation of the immunization status.
- 8.3 Activities
- 8.3.1 The program shall ensure that all children are provided activities and physical exercise or routines that are developmentally and age-appropriate.
 - 8.3.2 The program shall ensure that children under six years of age are provided with opportunities for rest after the noon meal. The rest area shall be adequately lighted to allow for visual supervision at all times.
- 8.4 Indoor Space

8.4.1 A program shall have at least 35 square feet of usable indoor space per child, exclusive of toilet rooms, kitchen areas, eating areas, isolation rooms, offices, storage spaces, hallways, closets and gymnasiums.

8.5 Sleeping Accommodations

8.5.1 A program shall ensure that each child under six years of age who is present during scheduled rest time possesses age-appropriate, clean rest equipment and bedding, and that equipment and bedding are safely maintained for the exclusive use of that child. Disposable bedding shall be acceptable as an alternative to maintaining rest equipment for the exclusive use of that child.

8.6 Toilet Facilities

8.6.1 A program shall have enclosed toilet rooms inside the building on the same floor that houses the recreation or play areas.

8.6.2 A program serving children between two and five years of age shall maintain a sink and toilet ratio in accordance with the following table:

No. of Children	Number of Toilets	Number of Sinks	Ratios
1-15	1	1	1/15
16 - 35	2	2	1/17.5
36 - 100	3-5	3-5	1/20
Over 100			1/25

8.6.3 A program serving children between six and 18 years of age shall have one sink and toilet for every 25 children, or fraction thereof, based upon licensed capacity. A urinal shall be counted as one-half of a toilet, provided that the population served includes a significant number of males and that at least two flush toilets are available and accessible to both males and females.

8.7 Staff-to-Child Ratios

8.7.1 A program shall maintain the following direct care worker to child ratios for each age group when children are present:

Age of child	Minimum direct care worker to child ratio
0-5	1:4
6-12	1:6
13+	1:10

8.7.2 A program shall ensure that at least two employees are present and on duty on the premises at all times when children are present, regardless of the number of children.

8.8 Day Treatment Agreement

8.8.1 A program shall develop, adopt, follow and maintain on file a written day treatment agreement. The agreement shall be completed prior to the child's admission and shall be signed by the licensee or his or her designee, the child, if appropriate, the child's parent(s) or legal guardian and the referring agency and shall include:

- 8.8.1.1 A description of the respective expectations, roles and responsibilities of the program, child, family and other involved parties;
- 8.8.1.2 Specification of the hours of operation, arrangements for service of meals, equipment to be provided by the family, transportation arrangements and visitation policies;
- 8.8.1.3 Specification of the behavior management policy, the release policy and the procedures for handling child and parent complaints; and
- 8.8.1.4 Specification of grounds for termination of enrollment.

8.9 Release of Children

8.9.1 A program shall develop, adopt, follow and maintain on file written policies and procedures governing the release of children. Such policies and procedures shall require that a copy is given to all parents, employees, volunteers and children and shall include provisions:

- 8.9.1.1 To ensure documentation of the release of the child to an authorized person, agency or public school bus service;

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- 8.9.1.2 For the emergency release of children. When a parent calls the program requesting emergency release of the child, the program shall verify the identity of the parent prior to releasing the child;
 - 8.9.1.3 Regarding the release of the child to a person not known to the licensee. A program shall verify the identity of any person not known to employees prior to the release of a child and shall retain verification for at least 24 hours;
 - 8.9.1.4 To be followed when a person not authorized to receive a child requests release of a child. A program shall ensure that a child is released only to his or her parent(s), legal guardian or other person authorized by the parent(s) to receive a child; and
 - 8.9.1.5 To be followed when a person showing clear signs of drug or alcohol impairment requests release of a child.
- 8.10 Handling of Sick Children
- 8.10.1 A program shall have a separate area where children who are exhibiting symptoms of illness that require isolation from the group may be cared for until they can be released to their parent(s) or legal guardian or are diagnosed by a licensed physician or nurse as posing no risk to themselves or others. The area shall not be located in the kitchen or toilet areas.
- 8.11 Child Accident and Injury
- 8.11.1 A licensee shall ensure that a child who is injured by an accident or fall is provided with necessary first aid treatment, or is taken to an emergency medical treatment center, and that the parent(s) or legal guardian is immediately notified.
- 9.0 Restrictive Procedures**
- 9.1 Authorization to Use Restrictive Procedures
- 9.1.1 As a condition for being authorized by the Division to implement restrictive procedures, a licensee shall make application to and have been determined by the Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of Chapters 1.0, 2.0, and 3.0.
 - 9.1.2 A licensee shall not utilize or administer a restrictive procedure on any child below six years of age.
- 9.2 Policies and Procedures Governing the Appropriate Use of Restrictive Procedures
- 9.2.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures governing the appropriate use of each type of restrictive procedure to be employed. The policies and procedures shall:
 - 9.2.1.1 Identify the types of behavior or conditions for which restrictive procedures are to be permitted;
 - 9.2.1.2 Document that the licensee's use of restrictive procedures are in accordance with established, accepted clinical practice and is age-appropriate;
 - 9.2.1.3 Delineate the name, position and qualifications of the employees who have direct responsibility for applying and for supervising the application of restrictive procedures;
 - 9.2.1.4 Restrict the use of these procedures only by designated and authorized employees who have been given prior training in how to administer and supervise the application of such procedures;
 - 9.2.1.5 Require that an application of a restrictive procedure is done in concert with the current service plan for that child, taking into account the child's developmental and medical needs;
 - 9.2.1.6 Require that a legal, informed written consent from the parent(s) or legal guardian of a child is obtained prior to the application of any restrictive procedure, except in emergency situations, in which case, the policies and procedures shall outline safeguards for the use of a restrictive procedure in such a circumstance;
 - 9.2.1.7 Require that these procedures may only be employed as ancillary techniques to accompany positive reinforcement techniques;

- 9.2.1.8 Require that a technique may only be employed when its use outweighs the risk of harm accompanying its use;
 - 9.2.1.9 Indicate time limitations and other restrictions on the use of each form of restrictive procedure;
 - 9.2.1.10 Require that a technique may only be employed when it is the least restrictive means to address the behavior that necessitated its use;
 - 9.2.1.11 Require that the chief administrator or his or her designee provides administrative oversight of each use of a restrictive procedure to ensure that these procedures are humanely and appropriately applied; and
 - 9.2.1.12 Require that a written record of each application of a restrictive procedure be maintained. The record shall contain: the name of the child; the identity of the employee(s) who administered the procedure; the date, time and duration of the procedure; the circumstances surrounding the use of the procedure; and a description of the child's demeanor.
- 9.3 Human Rights Committee
- 9.3.1 A licensee shall establish a Human Rights Committee of at least five adult individuals of known reputation, two of whom shall be professionally knowledgeable or experienced in the theory and ethical application of various treatment techniques used to address behavioral problems. The Human Rights Committee shall include members from the licensee and external to the licensee or its parent organization. A majority of Committee members shall be external to the licensee or its parent organization, and one member of the Committee shall be either a licensed mental health professional, a licensed physician, a licensed clinical psychologist, or a clinical social worker. The Committee shall meet at least on a quarterly basis.
 - 9.3.2 The Human Rights Committee shall be responsible for:
 - 9.3.2.1 Determining that children in care are receiving humane and proper treatment;
 - 9.3.2.2 Reviewing and making recommendations regarding the licensee's policies and procedures governing the use of restrictive procedures;
 - 9.3.2.3 Reviewing the restrictive procedures records and advising the Chief Administrator accordingly;
 - 9.3.2.4 Recording and maintaining on file written minutes of all of its meetings, and providing the Chief Administrator with a copy of these minutes;
 - 9.3.2.5 Making inquiries into any allegations of abusive techniques or the misuse of restrictive procedures. A report of the inquiry shall be provided by the Committee to the Chief Administrator and sent to the Division;
 - 9.3.2.6 Monitoring the qualifications and training of employees who have been given responsibility for administering restrictive procedures and to make recommendations to the Chief Administrator accordingly; and
 - 9.3.2.7 the application of some form of restrictive procedures.
 - 9.3.3 An emergency application of a restrictive procedure may occur for a specific child without the prior review of the Human Rights Committee, but only when the situation is deemed to be an emergency.
 - 9.3.4 Orientation and Training
 - 9.3.4.1 In addition to complying with Requirements 3.2.9.1 through 3.2.9.6, a licensee shall ensure that employees authorized to apply a restrictive procedure also receive orientation and training on:
 - 9.3.4.1.1 The various types of restrictive procedures;
 - 9.3.4.1.2 The acceptable way to administer and supervise the application of restrictive procedures;
 - 9.3.4.1.3 The possible side effects of psychotropic medications; and
 - 9.3.4.1.4 The policies and procedures governing the appropriate use of restrictive procedures.
- 9.4 Application of Restrictive Procedures

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- 9.4.1 A child who is having a restrictive procedure applied shall be under continuous monitoring and observation to prevent the child from harming himself or herself, or others. A child shall be given an opportunity for a minimum of 10 consecutive minutes of release within each two consecutive hours of the application of a restrictive procedure for the purpose of moving about or exercising, and shall be permitted to go to a toilet, when requested, or be given the opportunity to go to a toilet at least once every two consecutive hours.
- 9.4.2 A licensee shall not authorize or permit restrictive procedures to be used in a punitive, retributive, harsh or abusive manner, nor for the convenience of staff or as a substitute for other less restrictive, appropriate means of social treatment or intervention.
- 9.4.3 A licensee shall ensure that any allegation(s) of an inappropriate or abusive application of a restrictive procedure is brought to the attention of the Human Rights Committee promptly.
- 9.4.4 A licensee shall ensure that the Human Rights Committee initiates an investigation of any allegation(s) of an inappropriate or abusive application of a restrictive procedure within two consecutive business days of having received the allegation(s).
- 9.4.5 A licensee shall use the least restrictive effective form of restrictive procedure necessary to control a child's dangerous, violent, or seriously disruptive behavior.
- 9.4.6 A licensee shall ensure that employees immediately release a child from a prescribed restrictive procedure when the situation necessitating its need no longer exists or when the maximum time allowed for use of such a procedure has expired, whichever occurs first.
- 9.5 Exclusion
- 9.5.1 A licensee shall utilize exclusion only:
- 9.5.1.1 For a prescribed duration of time that shall not exceed 60 consecutive minutes; and
- 9.5.1.2 If there are more than 10 exclusions for an individual child or a cumulative total of six hours within any consecutive 24-hour period, a licensee shall ensure that:
- 9.5.1.2.1 A review is conducted by the chief administrator, or his or her designee, to determine the suitability of the child to remain in placement, or whether modifications to the child's service plan are warranted; and
- 9.5.1.2.2 Appropriate action is taken in response to the findings of the review.
- 9.5.2 A licensee shall ensure that:
- 9.5.2.1 At least one employee is responsible for providing continuous monitoring of the child;
- 9.5.2.2 The child is not excluded in a closet, bathroom or unfinished basement or attic; and
- 9.5.2.3 The child is reintroduced to the group in a sensitive and non-punitive manner as soon as he or she has re-gained control.
- 9.6 Locked Isolation
- 9.6.1 A licensee shall utilize locked isolation only:
- 9.6.1.1 When a child's behavior is so violent or disruptive as to present a high risk of physical or emotional harm to the child or others;
- 9.6.1.2 When other less restrictive and less punitive physical interventions have been applied without success; and
- 9.6.1.3 For a duration of time that does not exceed two consecutive hours or a total of six non-consecutive hours within any 24-hour period.
- 9.6.2 A licensee shall ensure that:
- 9.6.2.1 There is a maximum length of time for placement when a child is isolated in a locked room;
- 9.6.2.2 The application of locked isolation is prohibited for non-violent or non-assaultive offenses or behaviors or for practices designed to prevent children from running away, to seclude a child who is ill, to punish a child for stealing, cursing or failing

- to comply with house rules, or to facilitate supervision for the convenience of employees; and
- 9.6.2.3 The child is re-introduced to the group in a sensitive and non-punitive manner as soon as he or she has re-gained control.
- 9.6.3 A licensee shall ensure that a child placed in locked isolation is not in possession of belts, matches, weapons or any other potentially harmful object or material that could present a risk of harm to a child.
- 9.6.4 A licensee shall ensure that an employee who is assigned to monitor a child placed in locked isolation shall have no other immediate responsibility and shall:
 - 9.6.4.1 Be in visual and auditory contact with the child at all times;
 - 9.6.4.2 Ensure that all personal needs of the child are met;
 - 9.6.4.3 Ensure that a child has access to toilet facilities, as needed; and
 - 9.6.4.4 Ensure that the child receives the same number and frequency of meals and snacks provided to other children in the facility or program.
- 9.6.5 A licensee shall utilize locked isolation only:
 - 9.6.5.1 For a prescribed duration of time that shall not exceed 60 consecutive minutes unless authorized by the chief administrator, or his or her designee, and then the locked isolation shall not exceed 120 consecutive minutes; and
 - 9.6.5.2 If a child is in locked isolation for a cumulative total of six cumulative hours within a 24-hour period, the licensee shall ensure that:
 - 9.6.5.2.1 A review is conducted by the chief administrator or his or her designee to determine the suitability of the child to remain in placement, or whether modifications to the child's service plan are warranted; and
 - 9.6.5.2.2 Appropriate action is taken in response to the finding of the review.
- 9.6.6 A licensee shall ensure that the child is reintroduced to the group in a sensitive and non-punitive manner as soon as he or she has regained control.
- 9.6.7 A licensee shall ensure that any room to be used for locked isolation has:
 - 9.6.7.1 At least 75 square feet and a ceiling height of at least eight feet;
 - 9.6.7.2 A safety glass window, mirror or camera that allows for full observation of the locked isolation room;
 - 9.6.7.3 No hardware or furnishings that obstruct observing the child at all times;
 - 9.6.7.4 Installed hardware, equipment and furnishings that do not present a physical hazard or a suicide risk;
 - 9.6.7.5 Installed either the means for natural or mechanical ventilation to provide ventilation at a level deemed appropriate to maintain the child's health and well-being;
 - 9.6.7.6 The capacity to maintain a temperature of at least 68 degrees Fahrenheit; and
 - 9.6.7.7 A minimum of 10 foot-candles of light in all areas of the room.
- 9.7 Chemical Restraint
 - 9.7.1 A licensee shall ensure that each administration of chemical restraint is prescribed by a licensed physician who has personally reviewed the child's health records and has examined the child at the time of the episode.
 - 9.7.2 A licensee shall not allow the use of a physician's standing order (ProReNata) for purposes of authorizing the application of a chemical restraint.
 - 9.7.3 A licensee shall ensure that any application of a chemical restraint, whether administered orally or by intramuscular injection, is administered only by a licensed nurse or by a licensed physician.
 - 9.7.4 When a child requires chemical restraint on more than six occasions in any 30 consecutive calendar-day period, the chief administrator, or his or her designee, shall determine the appropriateness of the child's continued placement in the facility or program.

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9.7.5 A licensee shall not administer a chemical restraint as a punishment, for the convenience of employees, or as a substitute for a treatment program.

9.7.6 A licensee shall ensure that:

9.7.6.1 The initial administration of a chemical restraint does not exceed 24 consecutive hours in duration;

9.7.6.2 Only a licensed physician who has reviewed the child's health records and who has examined the child may authorize the application of an additional chemical restraint and then only for an additional consecutive 24-hour period and only upon determining that the continuance of chemical restraint on an emergency basis is clinically necessary and appropriate;

9.7.6.3 Employees regularly monitor the child under chemical restraint, observe the child's condition or state and immediately advise the prescribing physician of any observed side effects; and

9.7.6.4 A written record of the child's receipt of a chemical restraint and his or her condition, including any observed side effects, is maintained in the child's health records.

9.8 Mechanical Restraint

9.8.1 A licensee shall utilize a mechanical restraint only:

9.8.1.1 When a child's behavior is so violent or disruptive as to present a high risk of physical harm to the child or others;

9.8.1.2 Other less restrictive and less intrusive physical interventions have been applied without success;

9.8.1.3 When transporting a child to or from a court hearing or other circumstances requiring that truancy prevention be exercised and that no other means of prevention is appropriate;

9.8.1.4 For a duration of time that shall not exceed two consecutive hours or a total of four consecutive hours within any consecutive 24-hour period or that is utilized more than four times within a consecutive five-day period. An exception to this is allowed only for purposes of transporting a child to or from a court hearing or other off-premises location wherein truancy prevention is required; and

9.8.1.5 Employees utilizing the restraint have received training in properly applying it.

9.8.2 A licensee shall ensure that:

9.8.2.1 The child being mechanically restrained is protected and handled by an employee in a safe manner designed to avoid injury or pain in applying the restraint;

9.8.2.2 Only one child is mechanically restrained in the same room or area at the same time, unless being transported in a vehicle to and from a court hearing;

9.8.2.3 An employee maintains visual contact with the child at all times while the mechanical restraint is being applied;

9.8.2.4 An employee inspects the child's wrists, arms, or legs every 15 consecutive minutes to prevent injury or circulation problems from occurring, and attempts to release each limb every 60 consecutive minutes for a duration of 10 consecutive minutes; and

9.8.2.5 The restrained child has reasonable access to toilet facilities and to all scheduled meals while restraints are being applied.

9.8.3 A licensee shall prohibit the use of the following mechanical restraints:

9.8.3.1 Papoose boards.

9.8.3.2 Ropes.

10.0 Adventure Activity Program

10.1 Authorization To Provide Adventure Activity Program

10.1.1 As a condition for being authorized by the Division to involve children in an Adventure Activity Program, a licensee shall make application to and have been determined by the

Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of Chapters 1.0, 2.0, and 3.0.

10.2 Policies and Procedures

10.2.1 A licensee shall develop, adopt, follow and maintain on file written policies and procedures that contain:

- 10.2.1.1 A comprehensive description of the various types of adventure activities in which the licensee plans to involve children, including the specific destinations for each day, routes to be followed whether by highway, trail or waterway, and the modes of transportation to be used;
- 10.2.1.2 Safety rules that are to be used by employees, volunteers and children when engaged in each of the types of adventure activities that are described in this Chapter;
- 10.2.1.3 Recognized standards of safety pertaining to each of the specified adventure activities to be utilized;
- 10.2.1.4 Criteria based on recognized standards for employees and volunteers who are responsible for leading, instructing and supervising children engaged in any of the adventure activities to be utilized;
- 10.2.1.5 Descriptions of appropriate safety equipment and clothing, such as safety glasses or goggles, helmets, gloves, special shoes and outdoor clothing that are required to be used for adventure activities;
- 10.2.1.6 Procedures to be employed to ensure that the environment is protected and any waste materials or trash are appropriately disposed of;
- 10.2.1.7 Instructions for posting itineraries, preparing for emergency medical services, and notifying, at agreed upon times, the licensee's main office when the adventure activity takes place in a location or locations that are remote from the main premises of the licensee;
- 10.2.1.8 Guidelines to ensure that adventure activities include opportunities for problem-solving, developing a positive self-image, and developing an appreciation for the natural environment and conservation;
- 10.2.1.9 Guidelines to ensure that adventure activities are followed by opportunities for reflection and life application;
- 10.2.1.10 Guidelines to ensure that participation is conducted within the boundaries of the child's capabilities, dignity and respect for self-determination;
- 10.2.1.11 Procedures to ensure that necessary potable water, nutritious food, appropriate clothing, shelter, rest and other essentials are available and planned for;
- 10.2.1.12 Procedures for obtaining signed consent forms from a child's parent(s), legal guardian or referring agency; and
- 10.2.1.13 Procedures that ensure the reporting to the Division of any fatalities or any accidents resulting in the hospitalization of a child.

10.3 Safety/Risk Management Committee

10.3.1 A licensee shall establish a Safety/Risk Management Committee consisting of representatives of management, employees, and individuals with experience and expertise in adventure activities. This Committee shall review the licensee's policies and procedures governing adventure activities and monitor risk management and safety practices employed in the various adventure activities, and advise the licensee's chief administrator of any revisions, omissions or additions that are deemed necessary and appropriate. The Committee shall review any accident that may occur and the circumstances surrounding the accident and send written findings and recommendations to the licensee's chief administrator and to the Division.

10.4 Staff Qualifications

10.4.1 A licensee shall ensure that employees and volunteers who have responsibility for a particular adventure activity are qualified and experienced in the specific adventure activity. If certification is required, such as is for swimming and certain other aquatic activities, such employees or volunteers shall have current certification.

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- 10.4.2 An aquatic supervisor shall be an adult who has satisfactorily completed the training and certification requirements for a water safety instructor that are equivalent to those adopted by the American Red Cross for water safety.
- 10.5 Staff-to-Child Ratios
- 10.5.1 A licensee shall ensure that the ratio of employees and volunteers to children is in conformity with standards for the specified adventure activity being applied and that have been recognized by a national accrediting or other recognized organization.
- 10.5.2 A licensee shall ensure that an aquatic supervisor or water safety instructor is on duty at each aquatic activity. The aquatic supervisor shall be responsible for the enforcement of the licensee's safety rules, policies and procedures governing aquatic activities, including swimming, boating, canoeing, kayaking, water skiing and white water rafting.
- 10.6 Away From Campus Adventure Activities
- 10.6.1 A licensee shall maintain on file at the licensee's administrative office a list of all children, employees, and volunteers who participate in an adventure activity that occurs away from the premises of the licensee.
- 10.6.2 A licensee shall ensure that a fully stocked First Aid kit that is adventure activity-appropriate and readily available accompanies the employee who is the lead person for the away-from-campus adventure activity.
- 10.6.3 A licensee shall develop, adopt, follow and maintain on file:
- 10.6.3.1 A written copy of its itinerary and pre-established check-in times; and
- 10.6.3.2 The names of children, employees and volunteers participating in an adventure activity that involves out-of-state travel or within-state travel of more than 48 consecutive hours duration.
- The licensee shall send a copy of the itinerary to the Division at least 15 consecutive calendar days prior to departing on the adventure activity and shall provide the child's parent(s), legal guardian or referring agency with a copy of the itinerary.
- 10.7 Equipment
- 10.7.1 A licensee shall ensure that any equipment and gear that is to be used in connection with a specified adventure activity is appropriate to the activity, certified if required, in good repair, in operable condition, and age-and body-size appropriate.
- 10.7.2 A licensee shall ensure that all ropes and paraphernalia used in connection with rope rock climbing, rappelling, high and low ropes courses or other adventure activities in which ropes are used are approved by the Union of International Alpine Association (UIAA), or an equivalent certifying organization, and have been inspected by employees responsible for supervising the adventure activity before engaging children in the activity.
- 10.7.3 A licensee shall ensure that all participants are appropriately equipped, clothed, and wearing safety gear, such as a helmet, goggles, safety belt, life jacket or a flotation device, that is appropriate to the adventure activity in which a child is engaged.
- 10.8 Natural Swimming Area Life Saving Equipment
- 10.8.1 A licensee shall clearly delineate the areas for swimmers and non-swimmers in any natural swimming area used by children, such as a lake, river, bay, ocean or gulf.
- 10.8.2 A licensee shall ensure that lifesaving equipment is provided at each permanent swimming area and shall be placed so it is immediately available in case of an emergency. The following equipment shall be available:
- 10.8.2.1 A whistle or other audible signal device for each employee on duty;
- 10.8.2.2 An assist pole or other appropriate reaching device;
- 10.8.2.3 A ring buoy or other appropriate throwing assist device that has a rope attached to it which is of sufficient length for the area;
- 10.8.2.4 A backboard that has appropriate rigid cervical collars and a minimum of six straps;
- 10.8.2.5 A first aid kit; and
- 10.8.2.6 A rescue tube.

10.8.3 A licensee shall ensure that lifesaving equipment is provided for all other aquatic activities and is placed so that it is immediately available in case of an emergency. At a minimum, the equipment shall include:

- 10.8.3.1 A whistle or other audible signal device;
- 10.8.3.2 A throwing assist device; and
- 10.8.3.3 A first aid kit.

10.9 Aquatic Procedures

10.9.1 A licensee shall ensure that before engaging in any aquatic activity, each child shall be classified by the aquatic supervisor according to swimming ability in one of two classifications: swimmer and non-swimmer.

10.9.2 A licensee shall not permit a child to participate in an aquatic activity that requires higher skills than the child's swimming classification, except during formal instruction.

10.9.3 A licensee shall establish and enforce a method, such as the buddy system, for supervising children who are involved in an aquatic activity. The system used shall include procedures for check-in, check-out, and the periodic accounting for the whereabouts of each child by an employee of the licensee. A licensee shall ensure that an accounting of the number of swimmers is conducted at least once every 10 consecutive minutes.

10.9.4 A licensee shall develop, adopt, follow and maintain on file a written aquatic emergency plan, for each aquatic activity. The plan shall include:

- 10.9.4.1 Rescue procedures and frequency of drills;
- 10.9.4.2 Child accountability;
- 10.9.4.3 Prompt evacuation; and
- 10.9.4.4 Notification of outside emergency services.

10.9.5 A licensee shall ensure that swimming at sites other than a waterfront or pool that is on the premises of the licensee is supervised by an aquatic supervisor who shall be assisted by one aquatic observer for every 10 children, or fraction thereof, in the water.

10.9.6 A licensee shall ensure that the buddy system is used and that buddy checks are conducted every five minutes whenever swimming is permitted at non-permanent sites.

10.9.7 A licensee shall not conduct or permit swimming programs during periods of darkness. This provision does not prohibit the use of swimming pools that have underwater and deck lighting that provides unrestricted vision.

10.9.8 A licensee shall ensure that headfirst diving occurs only in designated areas and only in water that is five feet deep or more.

10.9.9 A licensee shall adhere to the following table to determine minimum diving area depths and distances from the end of the board or platform:

	Water Depth	Distance
Competitive Swim/Classes	5 feet	10 feet
Platform less than two feet above water	8 feet	10 feet
Board two feet or less above water	10 feet	15 feet
Board more than two feet above water	15 feet	20 feet

10.10 Watercraft and Water-Skiing Activities

10.10.1 A licensee shall conduct watercraft activities only during daylight hours.

10.10.2 A licensee shall provide an appropriately sized, coast guard-approved, personal flotation device for each occupant of a watercraft and ensure that such a device is worn by every occupant of a watercraft.

10.10.3 A licensee shall ensure that an appropriately sized, coast guard-approved, personal flotation device shall be worn by any water-skier, by any participant in a sailing activity, or by any participant of a white water adventure activity.

10.10.4 A licensee shall not use personal flotation devices of kapok construction.

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- 10.10.5 A licensee shall not permit a non-swimmer to board a sailboat unless accompanied by an adult swimmer.
- 10.10.6 A licensee shall ensure that the aquatic supervisor or an adult aquatic observer has immediate access to a watercraft with which to provide emergency assistance on the permanent swimming site.
- 10.10.7 A licensee shall ensure that a watercraft docking area is not adjacent to a swimming area, and that a swimming area is not used for the launching or dropping off of water-skiers.
- 10.10.8 A licensee shall ensure that, when a watercraft has a rated capacity, the capacity is observed and when a watercraft does not have a rated capacity, all occupants wear an appropriately sized, coast guard-approved personal flotation device. This provision does not apply when the non-rated watercraft is a canoe being used by one or two advanced swimmers during formal instruction.

11.0 Parenting Adolescent Facility

- 11.1 Authorization to Operate a Residential Facility for Parenting Adolescents
 - 11.1.1 As a condition for being authorized by the Division to operate a residential facility for parenting adolescents, a licensee shall make application to and have been determined by the Division to be in full compliance with the Requirements of this Chapter, in addition to the Requirements of Chapters 1, 2, 3 and 4.
- 11.2 Definition
 - 11.2.1 For purposes of this chapter only, "Adolescent" means a child who is parenting a child.
- 11.3 Direct Care Worker Qualifications for a Parenting Adolescent Facility
 - 11.3.1 A direct care worker, at the time of appointment, shall possess at least:
 - 11.3.1.1 One year of work experience in a child care facility or program; and
 - 11.3.1.2 Fifteen hours of training in early childhood development.
- 11.4 Staff-to-Child Ratios
 - 11.4.1 A facility shall maintain the following staff-to-child ratios when adolescents and their children are present:
 - 11.4.1.1 During hours when children are awake, one direct care worker on duty and awake on the premises for a combined total of every eight adolescents and their children below three years of age, or fraction thereof;
 - 11.4.1.2 During hours when children are sleeping, one direct care worker on duty on the premises for a combined total of every ten adolescents and their children below three years of age, or fraction thereof. The direct care worker shall not be required to be awake;
 - 11.4.1.3 When two direct care workers are required by the ratios during hours when children are sleeping, at least one direct care worker shall be required to be awake; and
 - 11.4.1.4 A facility shall not allow more than a combined total of 12 adolescents and their children below three years of age to reside in the facility at the same time.
- 11.5 One Adolescent Caring for another Adolescent's Child
 - 11.5.1 A facility may permit an adolescent in residence to care for the child of another adolescent in residence only if the following conditions are met:
 - 11.5.1.1 The adolescent who is assuming the care of another adolescent's child cares for no more than one other child in addition to her own at any time;
 - 11.5.1.2 The adolescents discuss the expectations of the caregiver, including duration of child care, the child's nutritional and toileting needs, and whether the mother will make arrangements for compensation or exchange of baby-sitting; and
 - 11.5.1.3 The arrangement is reviewed and approved by the chief administrator or his or her designee.
- 11.6 Service Plan

- 11.6.1 The service plan shall include:
 - 11.6.1.1 An assessment of the child's health, nutritional, medical, and developmental needs;
 - 11.6.1.2 An assessment of the interest of the child's father, and the role that he is to have with the child and with the child's mother;
 - 11.6.1.3 An assessment of the interests of the grandparents and the role that they are to have with the child and with the child's mother; and
 - 11.6.1.4 Self-sufficiency goals for the adolescent mother, including child care and level of understanding of her child's developmental needs, food preparation skills, budgeting and money management, and job readiness.
- 11.7 Adoption Counseling Services
 - 11.7.1 A facility shall provide adoption counseling if the adolescent expresses an interest in surrendering her child for adoption. The counseling shall include:
 - 11.7.1.1 An explanation of adoption;
 - 11.7.1.2 The types of adoptions available;
 - 11.7.1.3 The processes involved in surrendering a child for adoption; and
 - 11.7.1.4 The provision of a list of agencies licensed to provide these services.
- 11.8 Stimulation of Young Children
 - 11.8.1 A facility shall ensure that all infants are held and spoken to and placed in a position to observe activities when they are awake at some point during the day.
 - 11.8.2 A facility shall ensure that all infants under seven months of age are held throughout all bottle feedings, and older infants if they are incapable of holding a bottle on their own.
 - 11.8.3 A facility shall ensure that all infants have access to age-appropriate toys and are provided opportunity for visual and sound stimulation.
 - 11.8.4 A facility shall ensure that, when an adolescent mother is in school or is working, her infant is appropriately cared for, either in a licensed child care center or licensed family child care home, or in the facility.
 - 11.8.5 A facility shall ensure that all children under 18 months of age are engaged in at least four of the following activities with their mothers for at least a total of 45 cumulative minutes each day:
 - 11.8.5.1 Sensory activities, such as the use of crib mobiles, teething toys, busy boxes, baby mirrors, rattles, melody chimes, squeeze toys, or other comparable toys or equipment;
 - 11.8.5.2 Language activities, such as the use of picture books, toy telephones, audio equipment with age appropriate music or sounds, hand puppets, stuffed animals, soft washable dolls, photographs, or other comparable items;
 - 11.8.5.3 Manipulative activities, such as the use of squeeze toys, grip toys, sorting and stacking toys, three or four piece inlay type puzzles, puzzle blocks, simple threading toys, mobile pull toys, balls, or other comparable age appropriate play equipment;
 - 11.8.5.4 Building activities, such as the use of building blocks, toy cars, figures of animals and people, nesting toys, and other comparable toys or equipment;
 - 11.8.5.5 Large muscle activities, such as the use of low climbers, slides, riding or rocking toys, foam or plastic balls, gym mats, play tunnels, or other comparable play equipment; and
 - 11.8.5.6 Music activities such, as the use of rhythm instruments, record player and records, toys equipped with musical tones, musical mobiles, busy boxes, drums, xylophones, piano, or other comparable equipment or toys.
 - 11.8.6 A facility shall ensure that all children 18 months of age or older are engaged in at least four of the following activities with their mother for at least one cumulative hour each day:
 - 11.8.6.1 Language activities, such as being read to from a book, playing with flannel boards and telling a story or having the child tell the story, pictures, identification

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- or classification, puppets, audio-visual equipment, or other comparable equipment or toys;
- 11.8.6.2 Science and math related activities, such as planting or gardening, playing with sand or the use of a sand table, fish or small animal care, and other comparable activities;
- 11.8.6.3 Manipulative activities, such as the use of puzzles, pegs and a pegboard, lacing boards, table top building toys, dominoes, and other age appropriate comparable toys and equipment;
- 11.8.6.4 Building activities, such as the use of unit blocks, transportation toys, farm animals, play people, age appropriate, child size work bench or other household equipment;
- 11.8.6.5 Art activities, such as the use of crayons, tempera paint, large brushes and newsprint, finger paint, construction paper, past or glue, blunt scissors, collage materials, non-toxic felt-tip markers, clay or playdough, or other comparable play equipment or toys; and
- 11.8.6.6 Music activities, such as the use of rhythm sticks, drums, cymbals, bells, tape recorder, piano, or other comparable equipment.
- 11.9 Medical Care for Children of Parenting Adolescents
- 11.9.1 A facility shall ensure adolescents use only prescription and non-prescription medication that is authorized by a licensed physician or a licensed nurse practitioner for themselves and for their children.
- 11.9.2 A facility shall ensure that adolescents follow the advice of a licensed physician regarding the health care of the adolescent's child.
- 11.9.3 A facility shall ensure that an adolescent obtains for her infant:
- 11.9.3.1 A physical examination at the age of one month, and again by no later than the age of two-and-one-half months;
- 11.9.3.2 Immunizations as required by the Delaware Division of Public Health; and
- 11.9.3.3 Between three-and-one-half and four months of age, a physical examination and periodically thereafter as recommended by the infant's attending physician or medical clinic.
- 11.10 Discharge and Aftercare Plans
- 11.10.1 A facility shall include in the discharge and aftercare plan specific information regarding the status of the adolescent's child and health care, immunization, and medical needs that the child may require; and an assessment of the adolescent's ability to parent the child and to follow-up appropriately on the child's aftercare plan.
- 11.11 Toys and Equipment
- 11.11.1 A facility shall ensure that all toys and equipment to be used by children are sturdy, of safe construction, non-toxic and free of hazards. A facility shall use a choker tube to ensure that all parts of all toys used by children under three years of age are large enough so that they cannot be swallowed by the child.
- 11.11.2 A facility shall provide an age-appropriate-sized crib for each infant or child, but may allow an infant to sleep in a playpen or on a mat during daytime hours. A facility shall ensure that:
- 11.11.2.1 Crib and playpen slats are no more than 2.3 inches apart;
- 11.11.2.2 The top rails of the crib or playpen are at least 19 inches above the mattress;
- 11.11.2.3 Any locks or latches on the dropside of a crib are safe from accidental release;
- 11.11.2.4 The mattresses used in all cribs and playpens fit snugly;
- 11.11.2.5 Each infant has sheets, blankets and other coverings for his or her exclusive use;
- 11.11.2.6 Wet or soiled or damaged sheets, mattress, blankets or other coverings are immediately replaced;
- 11.11.2.7 All sheets and blankets are laundered at least once a week, or if soiled, are laundered before next use;
- 11.11.2.8 Cribs and playpens are free of hazards and an excessive number of toys; and

- 11.11.2.9 Beds or cribs not used solely for a specific infant shall have linens and blankets replaced with clean linens and blankets before each use by a different infant.
- 11.12 Premises
 - 11.12.1 A facility shall provide:
 - 11.12.1.1 A separate bedroom with at least 100 square feet for the adolescent and her child, and an additional 50 square feet for each additional child;
 - 11.12.1.2 Sufficient space to accommodate tables, high chairs, chairs for adolescents and their children, and on duty staff to eat meals together; and
 - 11.12.1.3 Sufficient locked or secure storage space that can accommodate the personal belongings of the adolescent and her child(ren) which is reasonably accessible to the adolescent.
 - 11.12.2 A facility shall ensure that all rooms used by children or infants are accessible to employees, including bedrooms.
 - 11.12.3 A facility shall ensure that all buildings and grounds are maintained in a safe and sanitary manner.
 - 11.12.4 A facility shall ensure that:
 - 11.12.4.1 There are no poisonous plants accessible to children;
 - 11.12.4.2 All corrosive agents, insecticides, bleach products, detergents, furniture polish, any products under pressure in an aerosol spray can, or any toxic substances are stored in a locked cabinet or closet and are not accessible to infants or young children;
 - 11.12.4.3 All furniture and equipment used by the adolescents or their children, whether used indoors or outdoors, are of sturdy and safe construction; and
 - 11.12.4.4 Non-permanent safety barriers, such as safety gates, are installed in a manner that will prevent infants and young children from falling down stairways, or ramps, or from gaining access to balconies or porches or elevated play areas.