

# DEPARTMENT OF EDUCATION

## OFFICE OF THE SECRETARY

Statutory Authority: 14 Delaware Code, Section 3003A and 29 Delaware Code, Section 10119 (14

**Del.C. §3003A & 29 Del.C. §10119)**

**14 DE Admin. Code 934**

### EMERGENCY

#### EMERGENCY ORDER

#### 934 Regulations for Family and Large Family Child Care Homes

#### AUTHORITY

Pursuant to 14 **Del. C. §3003A** and 29 **Del. C. §10119**, the Department of Education ("Department") is adopting emergency regulatory amendments to 14 **DE Admin Code 934 DELACARE: Regulations for Family and Large Family Child Care Homes**. Additionally, 29 **Del. C. §10119** authorizes the Department to adopt emergency regulations where an agency determines that an imminent peril to the public health, safety or welfare requires the amendment of a regulation with less than the notice required by 29 **Del. C. § 10115**. Moreover, 14 **Del. C. §122(b)(2)** authorizes the Department to prescribe rules and regulations governing the physical inspection of and the protection of the health and physical welfare of public school students in the State. Also, 14 **Del. C. §3003A(c)**, authorizes the Department's Office of Child Care Licensing to prescribe, by regulation or otherwise, any reasonable standards for the conduct of child care as defined in 14 **Del. C. §3002A(1)**.

#### REASON FOR THE EMERGENCY ORDER

Evidence has shown that children do better when they are able to attend school full time, in person. While the youngest students in Delaware are unable to get vaccinated against COVID-19, the best way to mitigate the spread of the virus is through a tiered strategy that combines encouraging vaccination with additional steps including continued mask usage.

Delaware's tiered approach is a comprehensive infection control and prevention program based upon guidance from the Centers for Disease Controls and Prevention. Effective implementation of multiple strategies is imperative to prevent or significantly decrease transmission of COVID-19 and other infections within schools and child care facilities. The Centers for Disease Control and Prevention have recently issued guidance that mask usage should be universal in K-12 schools, for all students, staff, and visitors. The Centers for Disease Control and Prevention have recently issued guidance for operating early care and education programs, or child care programs, which states in part masks should be worn indoors by all individuals (ages 2 and older) who are not fully vaccinated.

While the availability of COVID-19 vaccines has helped to mitigate some of the risk, health and safety protocols must continue, especially for those who are unable to be vaccinated. The addition of mask use and other steps, while continuing to work towards increasing the vaccinated population in Delaware is imperative to mitigate this public health risk.

The August 12, 2021 Emergency Order contained language that was inadvertently broad and resulted in requirements that were not intended. For that reason, the Emergency Order dated August 12, 2021 is hereby repealed in its entirety and replaced with this Emergency Order.

#### EFFECTIVE DATE OF ORDER

Accordingly, it is hereby ordered, that 14 **DE Admin Code 934 DELACARE: Regulations for Family and Large Family Child Care Homes** amended by adding Section 5.3 which requires certain facilities to recommend or require masks. The regulation is temporarily modified by making deletions as shown by strike through and insertions as shown by underline as follows:

#### **5.0 Authority to Inspect and COVID-19 Mitigation and Prevention**

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#### 5.3 COVID-19 Mitigation and Prevention in Family and Large Family Child Care Homes

##### 5.3.1 Family and Large Family Child Care Homes

5.3.1.1. All persons or associations conducting child care as defined in 14 **Del.C. §3002A(1)** shall recommend mask use by children ages 2 through pre-kindergarten and shall require mask use by children in kindergarten through twelfth grade, staff, family members, and visitors inside the child care facility, regardless of vaccination status.

5.3.1.2 Persons who have a medical condition or disability that prevents that person from wearing a mask can request a reasonable accommodation from the child care facility.

5.3.1.3 Masks are not required in child care facilities:

5.3.1.3.1 When seated at a table to eat or drink.

5.3.1.3.2 When asleep.

5.3.1.3.3 When engaged in any activity that makes wearing a mask not feasible, such as swimming.

5.3.1.3.4 When a person is in a personal space (i.e., single office) and others outside of that person's household are not present.

5.3.1.3.5 When outdoors.

5.3.1.3.6 When children are not in the building.

5.3.1.4. All child care facilities that provide bus service to and from the child care facility shall recommend mask use by children ages 2 through pre-kindergarten and shall require mask use by children in kindergarten through twelfth grade, faculty, staff, and visitors riding school buses, regardless of vaccination status.

This Emergency Order shall take effect on August 15, 2021 and shall remain in effect for 120 days. At the expiration of 120 days, the Department may choose to renew this Emergency Order once for a period not exceeding 60 days, consistent with 29 **Del.C.** § 10119(3).

## **PETITION FOR RECOMMENDATIONS**

In accordance with 29 **Del. C.** §10119(4), the Department of Education will receive, consider, and respond to petitions by any interested persons for reconsideration or revision of the amendments to the Emergency Regulation by addressing the petitions to the Department of Education, Office of the Secretary, Attn: Regulation Review, 401 Federal Street, Suite 2, Dover, Delaware 19901 or email to [DOEregulations.comment@doe.k12.de.us](mailto:DOEregulations.comment@doe.k12.de.us).

## **ORDER**

It is hereby ordered, this 13th day of August, 2021, that the above referenced amendment to 14 **DE Admin Code** 934 DELACARE: Regulations for Family and Large Family Child Care Homes, a copy of which is hereby attached, is adopted, pursuant to 14 **Del.C.** §3003A, and 29 **Del.C.** §10119, as referenced above, and supported by the evidence contained herein.

**IT IS SO ORDERED** the 13th day of August, 2021.

**Department of Education**

Susan S. Bunting, Ed.D., Secretary of Education

### **934 Regulations for Family and Large Family Child Care Homes**

#### **1.0 Legal Base**

The legal base for these licensing regulations is in 14 **Del.C.** §§3001A-3005A and 29 **Del.C.** §9003(a)(7).  
**24 DE Reg. 272 (09/01/20)**

#### **2.0 Purpose**

The purpose of these regulations is to protect and support the health, safety, well-being, and positive development of children who receive care in family and large family child care homes. These regulations establish minimum standards that licensed family and large family child care homes are required to follow. A licensee may exceed these regulations set by the Office of Child Care Licensing (OCCL) by joining Delaware Stars for Early Success or by the licensee's own efforts.

## **PART I GENERAL PROVISIONS**

#### **3.0 Definition of Terms**

The following words and terms, when used in these regulations, have the following meaning unless the context clearly indicates otherwise:

**"Administration of medication certificate"** means a document issued by OCCL that gives permission for a staff member to administer medication to children in care as described in the Administration of Medication Self-Study Guide.

**"Adult volunteer"** means a person at least 18 years old who provides an unpaid service or support to a family or large family home.

**"Agreement of understanding"** means a document that is part of a corrective action plan or used when necessary to ensure regulation compliance. This document contains requirements the licensee must follow to maintain licensure.

**"Applicant"** means the individual or entity, such as a company, corporation, business, or agency, seeking a license to operate a family or large family home.

**"Associate caregiver"** means a staff member who works under the supervision of a caregiver and provides child care at a large family child care home licensed before January 1, 2009. The associate caregiver is renamed large family assistant in these regulations.

**"Business day"** means a weekday Monday through Friday not including State of Delaware legal holidays that fall on a weekday.

**"Capacity"** means the total number of children, excluding school-age household members who are attending public or private school, that may be present at one time.

**"Caregiver"** means the staff member responsible for the total program including providing child care at a large family child care home that was licensed before January 1, 2009. The caregiver is renamed large family provider in these regulations.

**"Child abuse"** means to cause or inflict sexual abuse on a child; or an act by a person that has care, custody, or control of a child that causes or inflicts physical injury through unjustified force, emotional abuse, torture, exploitation, maltreatment or mistreatment as defined in 10 **Del.C.** §901.

**"Child care"** means providing care, education, protection, supervision, or guidance of children in a family or large family child care home.

**"Child neglect"** means the failure to provide, by those responsible for the care, custody, and control of the child, the proper or necessary education as required by law; nutrition; or medical, surgical, or any other care necessary for the child's well-being as defined in 10 **Del.C.** §901.

**"Child with disabilities"** means a child diagnosed by a qualified professional as having a physical, intellectual, emotional, or developmental disability, or chronic medical condition.

**"CHU"** means the Criminal History Unit in the Department of Services for Children, Youth and Their Families.

**"Clock hours"** means the actual number of hours a person spends attending the instructional portion of a training designed to develop or enhance child care skills.

**"Complaint investigation"** means the process followed by OCCL to investigate accusations that a licensee is not complying with these regulations or applicable laws.

**"Compliance review"** means an inspection of the home, grounds, and files to determine compliance with these regulations.

**"Comprehensive background check"** means a State of Delaware and federal (national) fingerprinted report of a person's entire criminal history including a search of the National Crime Information Center's National Sex Offender Registry; and a search of state criminal, sex offender, and child abuse and neglect registries, repositories, or databases in the state where the person resides, and in each state in which the person resided during the past five years.

**"Conference"** means a meeting between OCCL and a licensee to discuss serious non-compliance as defined in these regulations or to discuss the denial of a variance request.

**"Corrective action plan"** means a document listing non-compliance a licensee must correct, how to correct it, and the date OCCL requires the corrections to be completed. This document serves as written notice of non-compliance with these regulations.

**"CPSC"** means the U.S. Consumer Product Safety Commission.

**"Denial"** means the process of refusing to grant a license after OCCL receives an application. This constitutes refusal of permission to operate.

**"Department"** means the Delaware Department of Education.

**"Division"** means the Division of Family Services within the Department of Services for Children, Youth and Their Families.

**"DPH"** means the Delaware Division of Public Health.

**"Enforcement action"** means an action taken by OCCL to promote compliance such as warning of probation, probation, suspension, revocation, or denial.

**"Family child care home"** or **"family home"** means a private home in which a licensee lives and provides licensed child care.

**"Family child care license"** means a document issued by OCCL allowing a person or entity to operate a family home after demonstrating compliance with these regulations and other applicable codes, regulations, and laws.

**"Family provider"** means the person responsible for the total program including providing child care and managing the administrative aspects of a family child care home.

**"Hazardous material"** means any item or agent (biological, chemical, radiological, or physical), that has the potential to cause harm to humans, animals, or the environment, by itself or through interaction with other factors.

**"Health care provider"** means a professional who practices medicine with or without supervision and is sanctioned by an established licensing body. The most common types of health care providers include physicians, advance practice nurses or nurse practitioners, and physician assistants.

**"Hearing"** means the hearing provided to a licensee or applicant when requesting an appeal of OCCL's decision to place the facility on an enforcement action such as warning of probation, probation, suspension, revocation, or denial. A licensee or applicant may provide evidence to contest the action.

**"Home"** means both family and large family child care homes.

**"Household member"** means a person living in or spending the night in a family or large family home for more than 30 days within a year or a person who has a current driver's license or state-issued identification card showing the address listed on the license application.

**"Individualized educational program"** or **"IEP"** means a document written at least yearly which describes the services and supports needed for a child identified for special education usually for a child age three years and older.

**"Individualized family service plan"** or **"IFSP"** means a document written at least yearly about the required services for an infant or toddler (ages birth-two years) with an identified disability.

**"Infant"** means a child less than 12 months old.

**"Large family aide"** means the staff member who works under the direct supervision of the large family provider, large family assistant, or substitute and provides child care at a large family home. This staff member may not be alone with children, unless trained in administration of medication and CPR and first aid.

**"Large family assistant"** means the staff member who works under the supervision of the large family provider and provides child care at a large family home. This staff member may provide direct supervision of a large family aide and meets the qualifications listed in these regulations.

**"Large family child care home"** or **"large family home"** means a private home where the licensee resides and provides licensed child care or a non-residential property where a licensee offers licensed child care.

**"Large family child care license"** means a document issued by OCCL allowing a person or entity to operate a large family home after demonstrating compliance with these regulations and other applicable codes, regulations, and laws.

**"Large family provider"** means the staff member responsible for the total program including providing child care and, when applicable, managing the administrative aspects of a large family child care home. This staff member may supervise large family assistants, large family aides, and substitutes and meets the qualifications listed in these regulations.

**"License"** means the document issued by OCCL granting authority to a licensee at the home's location to operate under applicable State laws.

**"Licensee"** means the individual or entity, such as a company, corporation, business, or agency, legally responsible for a family or large family home.

**"Licensing specialist"** means an OCCL employee who is responsible for performing regulatory activities including monitoring child care facilities, investigating complaints, monitoring the need for enforcement actions, and making recommendations for licensure as set forth in Delaware Code and these regulations.

**"Licensing supervisor"** means an OCCL employee who is responsible for supervising licensing specialists. This person may perform regulatory actions and ensures licensing specialists are performing regulatory activities. This person approves complaint investigations, enforcement actions, and licenses.

**"Licensure"** means the status of a licensee when OCCL issued a child care license when the applicant demonstrated compliance with these regulations and applicable codes, regulations, and laws.

**"Office of Child Care Licensing" or "OCCL"** means the agency within the department authorized under 14 Del.C. §§3001A-3005A to promulgate and enforce regulations for child care, to license child care facilities, and to develop and implement policies and procedures.

**"Parent/guardian"** means a birth or adoptive parent, legal guardian, or other person having responsibility for, or legal custody of, a child.

**"Preschool-age child"** means a child age three through five not yet attending kindergarten or a higher grade. If a child is older than age five and not attending kindergarten or a higher grade, OCCL considers that child in the preschool-age group.

**"Private home"** means a non-public residence, such as a house, duplex, townhouse, apartment, or mobile home, where a licensee lives and has control over the furnishings and use of space.

**"Probation"** means an enforcement action initiated by OCCL due to the home being cited for serious non-compliance with these regulations.

**"Provisional license"** means a license issued for a maximum period of three months when a licensee is temporarily unable to comply with DELACARE Regulations and there is no serious risk to the health, safety, or well-being of children.

**"Regulation"** means the minimum standard established by OCCL that is required for a particular aspect of child care.

**"Revocation"** means the process of rescinding a license during the license's effective dates withdrawing permission to operate.

**"School-age child"** means a child who attends or has attended kindergarten or a higher grade out of the home.

**"Secretary"** means the Secretary of the Department of Education.

**"Section 504 Plan"** means a document describing accommodations provided to a child with a disability to ensure full participation at the home.

**"Serious injury"** means any impact or injury to a child's face or head, or any physical injury that creates a substantial risk of death or causes serious and prolonged disfigurement, prolonged impairment of health, or prolonged loss or impairment of the function of a body part.

**"Serious non-compliance"** means an action or actions that violate the terms of a license and presents a significant risk to children. Serious non-compliance includes, but is not limited to the following: child abuse or neglect, excessive non-compliance, failing to admit authorized people into the facility, failing to cooperate with an investigation, failing to disclose household members, failing to report abuse or neglect, improper discipline, improper release of children, improper staff-to-child ratios, inappropriate adult behavior, lack of supervision, medication errors, having no administrator or curriculum coordinator, being over-capacity, participating in fraud or making false statements, safe sleep violations, being sanctioned by another agency, providing transportation in an unsafe manner, being under the influence of drugs or alcohol, leaving unqualified staff alone with children, failing to complete comprehensive background checks as required, having an unsafe home/environment, violating an agreement of understanding, or refusing to sign an agreement of understanding.

**"Staff member"** means a licensee, a family provider, a large family provider, a large family assistant, a large family aide, or a substitute. Although substitutes are considered staff members, a licensee is not required to provide a complete staff file for a substitute in a large family home.

**"Substitute"** means an adult staff member selected by a licensee to provide child care in a family or large family home. The substitute may provide care when a licensee, large family provider, large family assistant, or large

family aide is not present due to an emergency or non-emergency situation. The substitute may be present when a licensee or staff member is present but a licensee wants another person to help provide care. OCCL must approve substitutes.

**"Supervision"** or **"direct supervision"** (of children or staff members) means a licensee or staff member is physically present in the same room or area, including outside, with children or staff. Supervision of children includes providing watchful oversight and timely attention to children's actions and needs.

**"Suspension order"** means a notice issued by OCCL directing a licensee to stop providing child care as of a specific date. While the license is suspended, a licensee may not provide child care.

**"Toddler"** means a child at least 12 months old and less than 36 months old.

**"Training"** means an organized professional development activity that is accepted by OCCL as designed to develop or enhance the staff member's skills in providing care to children.

**"Variance"** means OCCL's approval for a licensee to meet the intent of a specific licensing regulation in a way that is different from the way the regulation specifies. OCCL will only give this approval when the change will not endanger the health, safety, or well-being of children in care.

**"Youth volunteer"** means a person at least 13 years old who provides an unpaid service or support to a family or large family home. OCCL must approve youth volunteers before they begin volunteering.

**"Warning of probation"** means an enforcement action initiated by OCCL because the home was cited for serious non-compliance.

**24 DE Reg. 272 (09/01/20)**

#### **4.0 Definition of Regulated Services**

4.1 An individual or entity, such as a company, corporation, business, or agency, may not operate or provide child care services as defined in these regulations unless OCCL issues a family or large family child care license. Anyone who operates a home without a license violates 14 **Del.C.** §§3001A-3005A, The Delaware Child Care Act, and shall be fined not more than \$100 or imprisoned not more than three months, or both.

4.2 A licensee must designate a qualified, natural person, not an entity, to function as the large family provider at a large family home.

4.3 Family child care is a licensed child care service offered by a person or corporate entity. A licensee provides this service for less than 24 hours per day and children attend without a parent/guardian. A licensee receives payment for services provided. There are two types of family child care; a Level I may have a maximum of five or six children depending on their ages and a Level II may have a maximum of nine children depending on their ages. Children living in the home who do not attend kindergarten or a higher grade count in these numbers. These regulations describe the ages of children allowed to be present in each type. A licensee provides care, education, protection, supervision, or guidance to children in the licensee's private home. Child care provided only to a person's own children, grandchildren, nieces, nephews, or stepchildren does not require a family child care license even if payment is received.

4.4 Large family child care is a licensed child care service offered by a person or corporate entity. A licensee provides this service for less than 24 hours per day and children attend without a parent/guardian. A licensee receives payment for services provided. A licensee may have a maximum of 12 children. The ages of the children will determine the number of staff needed. Children living in the home who do not attend kindergarten or a higher grade count in these numbers. A licensee provides care, education, protection, supervision, or guidance to children in a private home or non-residential setting. Child care provided only to a person's own children, grandchildren, nieces, nephews, or stepchildren does not require a large family child care license even if payment is received.

**24 DE Reg. 272 (09/01/20)**

**24 DE Reg. 677 (01/01/21)**

#### **5.0 Authority to Inspect and COVID-19 Mitigation and Prevention**

5.1 Applicants, licensees, household members, and staff members, if applicable, shall allow access to the home during the hours of operation. This includes access to information, files, documents, and video recordings needed to determine compliance. If there is a question of regulatory compliance, access to unlicensed space must be granted. Access must be granted to officials from OCCL and other State and local agencies to

determine compliance with applicable codes, regulations, or laws. A licensee shall ensure agencies providing payment for child care services are also granted access.

5.2 Applicants, licensees, household members, and staff members, if applicable, shall allow and not hinder the interviewing of a licensee, staff member, household member, child in care, or child's parent/guardian by officials from OCCL or other State and local agencies. Interviews will occur to determine compliance with these regulations and other applicable codes, regulations, or laws. A licensee shall cooperate and have staff members cooperate with investigations regarding allegations of child abuse or neglect conducted by the Department of Services for Children, Youth and Their Families.

### 5.3 COVID-19 Mitigation and Prevention in Family and Large Family Child Care Homes

#### 5.3.1 Family and Large Family Child Care Homes

5.3.1.1 All persons or associations conducting child care as defined in 14 Del.C. §3002A(1) shall recommend mask use by children ages 2 through pre-kindergarten and shall require mask use by children in kindergarten through twelfth grade, staff, family members, and visitors inside the child care facility, regardless of vaccination status.

5.3.1.2 Persons who have a medical condition or disability that prevents that person from wearing a mask can request a reasonable accommodation from the child care facility.

5.3.1.3 Masks are not required in child care facilities:

5.3.1.3.1 When seated at a table to eat or drink.

5.3.1.3.2 When asleep.

5.3.1.3.3 When engaged in any activity that makes wearing a mask not feasible, such as swimming.

5.3.1.3.4 When a person is in a personal space (i.e., single office) and others outside of that person's household are not present.

5.3.1.3.5 When outdoors.

5.3.1.3.6 When children are not in the building.

5.3.1.4 All child care facilities that provide bus service to and from the child care facility shall recommend mask use by children ages 2 through pre-kindergarten and shall require mask use by children in kindergarten through twelfth grade, faculty, staff, and visitors riding school buses, regardless of vaccination status.

### **24 DE Reg. 272 (09/01/20)**

## **6.0 License Requirements**

6.1 A family home licensee must live in and provide care in the licensee's private residence.

6.2 A large family home licensee may provide care in either the licensee's private residence or a commercial property, if permitted by zoning.

6.3 A license remains the property of OCCL and is not transferable or subject to sale.

6.4 A licensee shall post the license where it is visible to the public.

6.5 When a family or large family child care home is sold, closes, or relocates; or when the license has been suspended or revoked; or the licensee dies; the license immediately becomes not valid.

6.6 OCCL shall issue only one license to a single address.

### **24 DE Reg. 272 (09/01/20)**

### **24 DE Reg. 677 (01/01/21)**

## **PART II LICENSING PROCESS AND PROCEDURES**

## **7.0 Procedures for Initial Licensure**

7.1 An applicant shall complete the following steps and submit the following information to OCCL when seeking a license:

7.1.1 Attend OCCL's information session and orientation to learn the application process and regulations;

7.1.2 Submit a completed Family Child Care Home Initial License Application (see Appendix I) or a Large Family Child Care Home Initial License Application (see Appendix II), as applicable, which includes:

7.1.2.1 Applicant's name, address, email, and phone numbers;

- 7.1.2.2 Applicant's references: for corporations contact information for officers; for LLCs contact information for managing member;
- 7.1.2.3 Previous licensure information, if applicable;
- 7.1.2.4 Program information (including ages of children to be served);
- 7.1.2.5 Household members; and
- 7.1.2.6 Certifications that include:
  - 7.1.2.6.1 Agreement to comply with federal and State laws and regulations including, but not limited to, the Americans with Disabilities Act and Delaware Equal Accommodations Law;
  - 7.1.2.6.2 Statement that information supplied is true and correct; and
  - 7.1.2.6.3 Acknowledgment that OCCL is required to make a thorough investigation of the applicant.
- 7.1.3 Submit the following items to OCCL:
  - 7.1.3.1 Proof of compliance with zoning codes, and, if applicable, other codes, regulations, guidelines, or laws, such as those from Division of Revenue, Department of Natural Resources and Environmental Control for septic systems, and Office of Drinking Water for well water;
  - 7.1.3.2 Documentation that the home is free of lead-based paint hazards. Homes constructed in or after 1978 are exempt from lead-paint risk assessments and testing:
    - 7.1.3.2.1 If the home were constructed before 1978, an applicant or licensee shall provide a lead-paint risk assessment performed by an environmental testing firm certified by DPH showing the home to be free of lead-paint hazards.
    - 7.1.3.2.2 If lead paint is identified but intact (i.e. not chipping, flaking, or peeling), the licensee shall monitor the identified areas at least every six months and document that the lead-based paint is intact (in good repair and not deteriorated). Lead-based paint is not regarded as a hazard if it is intact or not present in an accessible surface, a friction surface, or an impact surface that could result in an adverse human health effect.
  - 7.1.3.3 If lead-paint hazards are identified in the risk assessment, the applicant or licensee shall remedy the hazards by hiring a lead-safe contractor (lead abatement or renovation firm) certified by DPH to make the repairs.
    - 7.1.3.3.1 Once the repairs are made, a lead-dust clearance inspection must be performed by an environmental testing firm certified by DPH to confirm the home is free of lead-based paint hazards.
    - 7.1.3.3.2 An applicant or licensee shall provide the lead-dust clearance testing results to OCCL within five business days to confirm the home is free of lead-based paint hazards.
    - 7.1.3.3.3 Children may not be present during repairs and the home must stay closed until the results of the dust clearance test are at appropriate levels and the lead-safe contractor states it is safe for the home to be open.
  - 7.1.3.4 If any lead-based paint identified in a risk assessment becomes deteriorated or if lead-based paint is located in an area to be remodeled, a licensee shall retain a contractor certified by DPH to work using lead-safe work practices (lead abatement/lead renovator) to perform any renovation/repair in a pre-1978 child-occupied facility:
    - 7.1.3.4.1 Records of any renovation or repair work must be forwarded to OCCL within five business days.
    - 7.1.3.4.2 Children may not be present during repairs or renovation until a lead dust clearance test is obtained and the lead-safe contractor states it is safe for the home to be open.
  - 7.1.3.5 Evidence showing each room used for child care to be free of radon hazards using the Environmental Protection Agency's guidelines:
    - 7.1.3.5.1 Testing may be performed by the property owner or an inspector certified by the American Association of Radon Scientists, the National Radon Safety Board, or any organization recognized by the EPA or State of Delaware Radon Program.
    - 7.1.3.5.2 If testing indicates a radon level over 4.0 pCi/l, radon mitigation according to industry standards must occur or a long-term radon test (90-120 days) must indicate a level less than 4.0 pCi/l.



- 7.1.3.6 Fire marshal approval for the plans and inspection of the home from a State fire marshal or designated fire marshal when located within the city limits of Wilmington, Newark, New Castle, or Dover;
- 7.1.3.7 Electrical inspection of the home conducted by a State fire marshal recognized electrical inspection agency;
- 7.1.3.8 Current certifications in CPR including a skills demonstration and first aid for the ages of the children in care. Applicants for large family homes are exempt from this requirement if not serving as a staff member;
- 7.1.3.9 The names, addresses, phone numbers, and email addresses for three references who are familiar with, but not related to, the applicant and can describe the applicant's interactions with children;
- 7.1.3.10 Release of employment form that allows OCCL to collect service letters as per 19 **Del.C.** §708. The form will list the applicant's current or most recent employer and all health care and child care facilities where the applicant worked within the past five years. If an applicant has no former employer, the applicant shall provide information for two more references;
- 7.1.3.11 Comprehensive background checks for the applicant, adult household members, substitutes, staff members, and adult volunteers including State and federal fingerprint checks;
  - 7.1.3.11.1 In addition to the Delaware fingerprinting, applicants, adult household members, substitutes, staff members, and adult volunteers who currently reside outside of Delaware must contact their state of residence and complete a fingerprinted state criminal history search and a name-based child abuse and neglect search.
  - 7.1.3.11.2 Applicants, adult household members, substitutes, staff members, and adult volunteers who have resided outside of Delaware in the last five years must contact each state of residence, and request a criminal history search and a child abuse and neglect search.
  - 7.1.3.11.3 After the out-of-state searches are completed, the applicant must submit the results immediately to CHU.
  - 7.1.3.11.4 The person may not be alone with children until CHU notifies the licensee of the person's eligibility after completing the comprehensive background check.
  - 7.1.3.11.5 When OCCL has a reason to believe the health, safety, or welfare of a child in care may be at risk, OCCL may request parent/guardian permission for a comprehensive background check on a child household member and other medical, psychological, counseling, school, and probation records. OCCL may obtain information from the Department of Services for Children, Youth and Their Families;
- 7.1.3.12 Documentation of any case where the applicant gave up or lost custody of a child, if applicable;
- 7.1.3.13 Health appraisals for the applicant, all adult household members, and the substitute completed within one year before the application date that includes a tuberculosis "TB" test or medical professional risk assessment that verifies the person does not pose a threat of transmitting tuberculosis to children or others. The TB test or medical professional risk assessment must be completed within one year before the application date. This appraisal must confirm the person's health and document medical or physical conditions that pose a direct threat to the health and safety of children or others and any reasonable accommodations that may be required. This documentation shall be provided to OCCL for the purposes of determining whether the health condition creates a significant risk to children;
- 7.1.3.14 Health appraisals for child household members;
- 7.1.3.15 State business license;
- 7.1.3.16 Sample two-week menu, if providing meals or snacks (if using a catering service, a copy of the caterer's food establishment permit); and
- 7.1.3.17 Documentation of completion of pre-service training in the following topics, if the applicant will work with children:
  - 7.1.3.17.1 Six hours of quality-assured child development;
  - 7.1.3.17.2 Three hours of quality-assured positive behavior management/social-emotional development;

- 7.1.3.17.3 Prevention and control of infectious diseases, including immunization;
- 7.1.3.17.4 Safe sleep practices, including prevention of sudden infant death syndrome;
- 7.1.3.17.5 Prevention of shaken baby syndrome and abusive head trauma;
- 7.1.3.17.6 Prevention of and response to food allergies;
- 7.1.3.17.7 Building and physical grounds safety;
- 7.1.3.17.8 Emergency preparedness and response planning;
- 7.1.3.17.9 Child abuse recognition and reporting requirements;
- 7.1.3.17.10 Storage of hazardous materials and biocontaminants;
- 7.1.3.17.11 Administration of medication; and
- 7.1.3.17.12 Safety measures in transporting children, if applicable.

7.1.3.18 Large family applicants shall complete the additional requirements for large family homes as listed in Sections 60.0 through 70.0.

7.2 Upon receipt of the completed application and required information, a licensing specialist shall:

- 7.2.1 Review the application and information, and inspect the premises to determine whether the applicant complies with these regulations;
- 7.2.2 Make a recommendation for licensure. If a license is granted, it will be a six-month initial provisional license; and
- 7.2.3 Notify the applicant as stated in subsection 12.4.2 if an initial provisional license to operate is denied.

7.3 A licensing specialist shall conduct a compliance review at the home before the expiration of the initial provisional license. Once this review is completed, OCCL will issue a provisional or annual license depending upon whether full compliance is obtained. This license will be valid for six months.

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**8.0 License Renewal**

8.1 A licensee shall submit a completed Family Child Care Home Renewal License Application (see Appendix III) or a Large Family Child Care Home Renewal License Application (see Appendix IV), as applicable, to OCCL at least 60 days before the current license expires that includes the following unless previously submitted:

- 8.1.1 Health appraisals completed within one year before the application including a TB test or medical professional risk assessment that was also completed within one year before the application date and verifies the person does not pose a threat of transmitting tuberculosis to children or other staff. A TB test or medical professional risk assessment must be completed for new substitutes, new household members, and household members who turned 18 during the previous licensing year. Written evidence of follow-up of any known health conditions for the licensee, substitutes, or household members that pose a direct threat to the health and safety of children or others and any reasonable accommodations that may be required. This documentation shall be provided to OCCL for the purposes of determining whether the health condition creates a significant risk to children;
- 8.1.2 Fingerprinting receipts for any new substitute, new adult household members, and household members who turned 18 during the previous licensing year;
- 8.1.3 12 hours of annual training submitted before the license expires, if a family child care provider;
- 8.1.4 Current first aid and CPR cards;
- 8.1.5 Electrical inspection by an approved inspector conducted within the last three years;
- 8.1.6 A sample two-week menu of meals or snacks, if meal service has changed;
- 8.1.7 Certificate of property and comprehensive general liability insurance, if a large family home; and
- 8.1.8 A copy of the current State business license.

8.2 Applications received less than 60 days before the license expiration will be cited as late on the compliance review.

8.3 When a licensee applies on time, the existing license will not expire until OCCL makes a decision on the renewal application.

8.4 When a licensee applies after the license expires, if approved, the new license will start the date OCCL received the application. A license will not be backdated.

- 8.5 A licensing specialist or licensing supervisor shall verify during an unannounced annual compliance review that the licensee complies with these regulations.
- 8.5.1 A licensee found to be noncompliant with the regulations will be cited and given a corrective action plan.
- 8.5.2 Within five days of the citation, a licensee may dispute citations by contacting a licensing supervisor to request a conference or by discussing the citations over the phone.
- 8.5.2.1 A licensee may provide evidence that the home was wrongly cited.
- 8.5.2.2 After the conference or phone conversation, the supervisor will then discuss the information with the licensing specialist and determine whether to remove the non-compliance from the corrective action plan.
- 8.6 OCCL will issue one of the following types of licenses:
- 8.6.1 An annual license for 12 months when the licensee is in full compliance with the regulations;
- 8.6.2 A provisional license when the licensee is unable to achieve full compliance before the current license expires and the licensee agrees to comply with the corrective action plan; or
- 8.6.3 A license extension when compliance has not been determined through no fault of the licensee.

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## **9.0 Relocation**

- 9.1 When possible, a licensee planning to relocate shall notify OCCL at least 60 days before a planned relocation of a home. A licensee shall submit a completed Family Child Care Home Relocation License Application (see Appendix V) or a Large Family Child Care Home Relocation License Application (see Appendix VI), as applicable. A licensee shall complete the appropriate relocation application and submit the following information on the new location to OCCL before a licensing specialist conducts a compliance review:
- 9.1.1 If renting the home, landlord approval for the home to be used for child care;
- 9.1.2 Fire marshal approval for the plans and inspection of the home;
- 9.1.3 Proof of an electrical inspection of the home conducted by a State fire marshal recognized electrical inspection agency;
- 9.1.4 Lead-paint risk assessment and requirements of subsections 7.1.3.2 through 7.1.3.4, if the home were built before 1978;
- 9.1.5 Proof of compliance, if applicable, from the appropriate regulatory bodies governing zoning, building construction, plumbing, Department of Natural Resources and Environmental Control for septic systems, and Office of Drinking Water for well water;
- 9.1.6 Emergency plan; and
- 9.1.7 Radon testing and mitigation, if necessary, as described in subsection 7.1.3.5.
- 9.2 A licensee may not provide child care at the new location until OCCL issues a license at the new address.

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## **10.0 Regulation Variance**

- 10.1 An applicant or licensee shall comply with all regulations unless the applicant or licensee requests a variance from OCCL and receives approval.
- 10.2 The applicant or licensee shall describe on a written variance request form, (see Appendix VII), how the applicant or licensee will meet the intent of a specific regulation in a different way from the way the regulation states.
- 10.2.1 The change may not endanger the health, safety, or well-being of children in care.
- 10.2.2 The licensee shall keep the variance approval and make it available on request. A variance is valid only for this licensee. If the licensee fails to comply with the variance, OCCL will cancel the variance and require the licensee to comply as the regulation states.
- 10.2.3 A variance denial may be appealed by requesting a conference with OCCL.

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## **11.0 Complaints**

- 11.1 OCCL shall investigate when a complaint is received regarding a possible violation of these regulations.
- 11.2 OCCL shall notify the licensee or a staff member that a complaint is being investigated at an unannounced visit.
- 11.3 OCCL shall report the results of the investigation in writing.
- 11.4 If the complaint is substantiated or if other violations are found during the investigation, a licensee shall correct the violations and come into compliance with these regulations.
  - 11.4.1 Within five days of receiving the complaint investigation report, a licensee may dispute citations or findings by contacting a licensing supervisor to request a conference or by discussing the citations over the phone.
  - 11.4.2 A licensee may provide evidence that the home was wrongly cited.
  - 11.4.3 After the conference or phone conversation, the supervisor will then discuss the information with the licensing specialist and determine whether to remove the non-compliance from the corrective action plan.
- 11.5 Complaints relating specifically to laws, rules, or regulations of other governmental entities (including but not limited to the Americans with Disabilities Act and Delaware Equal Accommodations Law) will be referred to the appropriate entity, charged with enforcement authority, for investigation. At the time of the referral, OCCL shall request a report of the findings. OCCL shall assist the complaining party with the referral process or make the referral itself, as appropriate. OCCL shall request a report of the findings at the conclusion of the investigation. These findings may be used as the basis for an OCCL enforcement action.
- 11.6 An investigation by the Department of Services for Children, Youth, and Their Families' Institutional Abuse Unit will be made if a complaint is received regarding the abuse or neglect of a child at the home by a staff member or household member.

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**12.0 Enforcement Actions**

- 12.1 To maintain licensure, a licensee shall follow these regulations and applicable federal, State, and local laws and regulations. Failure to do so will result in a corrective action plan or an enforcement action.
  - 12.1.1 An enforcement action, such as warning of probation, probation, suspension, revocation, or denial of a license application, may be initiated by OCCL when a licensee fails to comply with a corrective action plan or agreement of understanding, or has been cited for serious non-compliance.
  - 12.1.2 A licensee may appeal a pending enforcement action by requesting a hearing within 10 business days of notification of OCCL's decision to impose the action.
    - 12.1.2.1 This appeal request may be written or verbal for warning of probation or probation. All other appeal requests must be provided by the applicant or licensee in writing.
    - 12.1.2.2 A licensee may provide evidence that the home was wrongly cited.
- 12.2 License Suspension
  - 12.2.1 OCCL may immediately suspend a license if the health, safety, or well-being of children in care is in serious or imminent danger.
    - 12.2.1.1 A suspension order requires the licensee to immediately stop providing child care. Absent extenuating circumstances, a suspension order shall be in writing.
    - 12.2.1.2 If a verbal suspension order is provided, it will be followed by a hand-delivered written suspension order by 11AM the following business day.
    - 12.2.1.3 A written suspension order must state the reason or reasons for the enforcement action.
  - 12.2.2 Within 10 business days of OCCL issuing the written order, the licensee may choose to close permanently, remain suspended until the reason for the suspension has been corrected, or remain suspended and request a hearing in writing.
  - 12.2.3 A hearing must be scheduled and held within 10 business days of the licensee's written request for a hearing.
    - 12.2.3.1 A hearing officer with no previous involvement in the matter must be assigned by the associate secretary of early childhood support.
    - 12.2.3.2 The hearing officer may allow delays in the hearing only for good cause.
    - 12.2.3.3 After a hearing officer makes a recommendation, the Secretary determines whether to adopt the recommendation and issues a final decision.

- 12.2.3.4 The licensee will be notified in writing of the decision of the Secretary. The decision will become final ten (10) business days after it is mailed or delivered to the licensee.
- 12.2.4 A licensee dissatisfied with the department's decision for suspension may file an appeal within 30 business days of the mailing or delivery of the decision notice.
  - 12.2.4.1 A licensee appeals to the Delaware Superior Court in the county where the home is located, by filing the appeal in the Office of the Prothonotary for the Superior Court.
  - 12.2.4.2 A licensee shall supply a copy of the appeal to the department.
  - 12.2.4.3 The licensee pays any costs for this appeal that Superior Court rules require to be paid by the filing party.
  - 12.2.4.4 The final decision of the Secretary will remain in place during the appeal process unless otherwise ordered by the court pursuant to 29 **Del.C.** §10144.
- 12.3 Warning of Probation or Probation
  - 12.3.1 OCCL may place a home on warning of probation or probation when serious non-compliance is cited.
    - 12.3.1.1 OCCL shall notify the licensee in writing of the reasons it intends to place the home on warning of probation or probation.
    - 12.3.1.2 This letter will describe how a licensee may appeal the decision by requesting a hearing to present information that the cited violations are not valid.
    - 12.3.1.3 Warning of probation may initially last up to six months and may be renewed. Probation may initially last up to one year and may be renewed.
  - 12.3.2 Within 10 business days of receiving the written notice, the licensee shall request a hearing or accept the enforcement action.
  - 12.3.3 A hearing must be held within 30 calendar days of the hearing request.
    - 12.3.3.1 The department will assign a hearing officer with no previous involvement in the matter.
    - 12.3.3.2 A hearing officer may allow delays in the hearing only for good cause.
  - 12.3.4 After a hearing officer makes a recommendation regarding warning of probation, OCCL's director determines whether to adopt the recommendation and makes a final decision. After a hearing officer makes a recommendation regarding probation, the associate secretary of early childhood support determines whether to adopt the recommendation and makes a final decision. OCCL shall notify the licensee in writing of the decision.
  - 12.3.5 A licensing specialist shall conduct unannounced visits during the enforcement period to ensure compliance with these regulations is maintained.
    - 12.3.5.1 The findings will be reported to the licensee in writing.
    - 12.3.5.2 A licensee found to be noncompliant with the regulations will be cited and given a corrective action plan.
      - 12.3.5.2.1 Within five days of the citation, a licensee may dispute citations by contacting a licensing supervisor to request a conference or by discussing the citations over the phone.
      - 12.3.5.2.2 A licensee may provide evidence that the facility was wrongly cited.
      - 12.3.5.2.3 After the conference or phone conversation, the supervisor will then discuss the information with the licensing specialist and determine whether to remove the non-compliance from the corrective action plan.
  - 12.3.6 Failure to comply with licensing regulations while on warning of probation or probation may result in having the enforcement action extended or heightened.
  - 12.3.7 A licensee may not increase the licensed capacity or receive a new license at an additional site while on an enforcement action or when issued a notice regarding OCCL's intent to place the home on an enforcement action.
- 12.4 Denial of a License Application or Revocation
  - 12.4.1 OCCL may deny a license application or revoke a license for good cause, including but not limited to the following:
    - 12.4.1.1 Failure to comply with applicable provisions of federal, State, or local laws or of these regulations;
    - 12.4.1.2 Violation of the terms or conditions of its license;

- 12.4.1.3 Fraud or misrepresentation in obtaining a license or in the subsequent operation of the home;
  - 12.4.1.4 Refusal to furnish OCCL with files, reports, or records as required by the law;
  - 12.4.1.5 Refusal to permit an authorized representative of OCCL to gain admission to the home during operating hours;
  - 12.4.1.6 Engaging in any activity, policy, practice, or conduct by the licensee, staff member, or household member that adversely affects or is deemed by OCCL to be detrimental to the education, health, safety, or well-being of children; or
  - 12.4.1.7 Conduct that otherwise demonstrates unfitness by the licensee, staff member, or household member to operate or reside in a home.
- 12.4.2 OCCL shall notify the applicant or licensee in writing of the reasons it intends to deny a license application or revoke a license. This letter will describe how an applicant or licensee may appeal the decision by requesting a hearing to present information that the cited violations or reasons for the denial are not valid.
- 12.4.2.1 Within 10 business days of receiving the written notice, the applicant or licensee shall request a hearing in writing or accept the denial or revocation and close within the time stated in the notice.
  - 12.4.2.2 If an applicant or licensee does not make a timely request for a hearing as stated in subsection 12.4.2.1, the denial or revocation will take effect 30 business days after receiving the written notice from OCCL.
- 12.4.3 A hearing must be held within 30 calendar days of the hearing request.
- 12.4.3.1 The department will assign a hearing officer with no previous involvement in the matter.
  - 12.4.3.2 A hearing officer may allow delays in the hearing only for good cause.
- 12.4.4 If an applicant or licensee requests a hearing in a timely manner, its existing license will be valid until the department provides a written decision after the hearing. However, OCCL may suspend a license immediately whenever the health, safety, or well-being of children in care is in serious or imminent danger.
- 12.4.5 After a hearing officer makes a recommendation, the secretary determines whether to adopt the recommendation and issues a final decision. The applicant or licensee will be notified in writing of the decision. The decision will become final 10 business days after it is mailed or delivered to the applicant or licensee.
- 12.4.6 An applicant or licensee who is dissatisfied with the department's decision regarding revocation or denial may file an appeal within 30 business days after the mailing or delivery of decision notice.
- 12.4.6.1 The applicant or licensee appeals to the Delaware Superior Court in the county where the home is located, by filing the appeal in the Office of the Prothonotary for the Superior Court.
  - 12.4.6.2 The applicant or licensee shall supply a copy of the appeal to the department.
  - 12.4.6.3 The applicant or licensee pays any costs for this appeal that Superior Court rules require to be paid by the filing party.
  - 12.4.6.4 The final decision of the secretary will remain in place during the appeal process unless otherwise ordered by the court pursuant to 29 **Del.C.** §10144.
- 12.4.7 When a license has been revoked or an application has been denied, the licensee, applicant, household member, large family provider, or large family assistant may not apply for a license from OCCL for three years from the date that the revocation or denial was upheld. In addition, a household member or large family provider will not be issued a license during this three-year period.

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**24 DE Reg. 677 (01/01/21)**

### **PART III REQUIREMENTS FOR FAMILY AND LARGE FAMILY CHILD CARE HOMES**

#### **13.0 General Requirements**

- 13.1 A licensee and staff members shall be able to read, understand, and follow these regulations.
- 13.2 A licensee, household and staff members, may not have convictions, current indictments, outstanding warrants, or substantial evidence of involvement in an activity involving violence against a person; child abuse or neglect; possession, sale, or distribution of illegal drugs; sexual offense; gross irresponsibility or disregard for the safety of others; or serious violations of accepted standards of honesty or ethical behavior. OCCL may

at its own discretion, make exceptions when it is documented that the health and safety of children would not be endangered except as prohibited by the Child Protection Registry law as defined by 16 **Del.C.** §923.

- 13.3 An applicant may not be licensed and a licensee may not own a child care home if the applicant or licensee is prohibited by law from working in child care or is determined ineligible under the DELACARE Regulations - Background Checks For Child-Serving Entities. Applicants and licensees who have a child or children currently or permanently removed from their custody because of abuse, neglect, or dependency are prohibited from providing child care.
  - 13.3.1 In addition, a licensee may not employ or keep in any capacity a household member or other person with direct access to children if:
    - 13.3.1.1 Convicted of a prohibited offense, for the time listed in 31 **Del.C.** §309;
    - 13.3.1.2 Determined ineligible under the DELACARE Regulations - Background Checks For Child-Serving Entities;
    - 13.3.1.3 Active on the Delaware Child Protection Registry for a Level III or Level IV substantiation of abuse or neglect; or
    - 13.3.1.4 Convicted of a prohibited offense, as defined in the federal Child Care Development Block Grant Act.
- 13.4 When known, a licensee may not employ or keep in any capacity a person with direct access to children whose child or children are currently or were permanently removed from the person's custody because of abuse, neglect, or dependency.
  - 13.4.1 A person who has given up or otherwise lost custody of the person's children for reasons other than abuse, neglect, or dependency shall present documentation to OCCL regarding the circumstances of this event.
  - 13.4.2 OCCL will determine whether this individual may work or be present at the home.
  - 13.4.3 After receiving an eligibility determination, a person who is determined ineligible or prohibited under the DELACARE Regulations - Background Checks for Child Serving Entities, is entitled to an administrative review for reconsideration. If the person requests an administrative review, the licensee and the person shall be bound by the final decision of the administrative review.
- 13.5 A licensee shall ensure before a person becomes a household member, staff member, or adult volunteer or within five days of a household member turning 18 years old, the person is fingerprinted by the Delaware State police for a Delaware SBI and FBI check.
  - 13.5.1 Staff members shall provide the fingerprint verification form to the licensee before working with children.
  - 13.5.2 In addition to the Delaware fingerprinting, staff members and adult volunteers who currently reside outside of Delaware must contact their state of residence and complete a fingerprinted state criminal history search and a name-based child abuse and neglect search.
  - 13.5.3 Staff members, household members, and adult volunteers who have resided outside of Delaware in the last five years shall contact each state of residence, and request a criminal history search and a child abuse and neglect search.
  - 13.5.4 After the out-of-state searches are completed, the licensee shall submit the results immediately to the CHU.
  - 13.5.5 Until CHU determines a person eligible and sends an approval notice, a staff member or household member must be supervised at all times by a person who has completed the background check process and been determined eligible.
  - 13.5.6 A staff member or adult household member may not be alone with children until CHU reviews the comprehensive background check and determines eligibility.
- 13.6 Within 30 days of becoming a household or staff member or a household member turning 18 years old, a licensee must provide documentation of a health appraisal conducted within the past year including a TB test or medical professional risk assessment that verifies the person does not pose a threat of transmitting tuberculosis to children or other staff to OCCL. The TB test or medical professional risk assessment must be completed within the past year.
- 13.7 A licensee shall ensure adult volunteers who are present for more than five days or 40 hours per year provide to the licensee a health appraisal including a TB test or medical professional risk assessment that verifies the person does not pose a threat of transmitting tuberculosis to children or other staff.

- 13.7.1 The health appraisal and TB test or medical professional risk assessment must be completed within one year before the adult volunteer's start date.
- 13.7.2 This appraisal must confirm the person's health and document medical or physical conditions that pose a direct threat to the health and safety of children or others and any reasonable accommodations that may be required. This documentation shall be provided to OCCL for the purposes of determining whether the health condition creates a significant risk to children.
- 13.7.3 A licensee shall keep this appraisal on file at the home.
- 13.8 A licensee shall ensure an adult or youth volunteer is not alone with children.
- 13.9 When a concern arises, a licensee shall ensure a staff or household member provides or allows the release of information to OCCL to determine that the person does not pose a direct threat to the health, safety, or welfare of a child. OCCL may request medical, psychological, counseling, school, and probation records. OCCL may obtain information from the Department of Services for Children, Youth and Their Families.
- 13.10 A licensee shall ensure a staff member or household member with known health concerns that pose a direct threat to the health and safety of children provides documentation to OCCL from a health care provider. This documentation must state that the person may have direct access to or work with children and any reasonable accommodations that may be required.
- 13.11 A licensee shall ensure a staff or household member diagnosed or treated for a mental illness that poses a direct threat to the health and safety of children provides documentation to OCCL from a health care provider. This documentation must state that the person may have direct access to or work with children and any reasonable accommodations that may be required.
- 13.12 Any person present in the home may not drink alcohol or be under the influence of alcohol or illegal drugs when children are in care. Illegal drugs or substances, or non-prescribed controlled substances are prohibited from being in the home. A licensee shall ensure that the use of drugs that could adversely affect the ability to care for children is prohibited in the home.
- 13.13 A licensee who is working as a staff member shall have no other job during child care hours.
- 13.14 A licensee shall ensure providing care is the focus during the hours of care. A licensee may not take part in or allow the staff members to take part in activities that distract from providing care during that time. Examples of distracting activities include, but are not limited to, socializing or entertaining; using or watching electronics; except for communicating for business reasons; doing intensive housework, chores, home repairs, or remodeling tasks; or working on hobbies or crafts.
- 13.15 A family or large family provider may not provide direct care for a person recovering from a long-term illness or surgery requiring nursing care at the home during the hours children are in care.
- 13.16 A licensee may not provide foster care or kinship care for children or adults without OCCL's prior written approval.
  - 13.16.1 This approval must be updated annually.
  - 13.16.2 OCCL shall count preschool-age or younger foster care or kinship care children in the capacity of the home even if they attend care somewhere else.
- 13.17 A licensee or staff member shall supervise a child in care at all times.
- 13.18 A licensee shall ensure children are not responsible for child care duties.
- 13.19 The maximum number of children allowed to be present at any given time will be determined by the family licensee's or large family provider's experience and qualifications, the ages of the children living in the home, the amount of usable child care space, and fire marshal and zoning limitations.
- 13.20 A licensee shall ensure parents/guardians can enter areas of the home used for care when their children are in care.
- 13.21 A licensee and staff members shall be able to do the following:
  - 13.21.1 Understand and respect children and their families and cultures;
  - 13.21.2 Meet the needs of children;
  - 13.21.3 Supervise children to ensure their safety during all activities;
  - 13.21.4 Support children's physical, intellectual, social, and emotional growth;
  - 13.21.5 Deal with emergencies in a calm manner; and
  - 13.21.6 Use positive behavior management.



13.22 A licensee shall be truthful when providing information and shall direct all staff members to do the same.

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#### **14.0 General Capacity**

- 14.1 Preschool-age or younger household members count toward the capacity even if they attend care somewhere else.
- 14.2 Any child preschool-age or younger present at the home counts toward the capacity.
- 14.3 School-age household members, ages five to 12 years of age, not attending school outside of the home count toward the capacity as preschool-age children.
- 14.4 School-age household members attending school outside of the home do not count toward the capacity.
- 14.5 Each school-age household member may have no more than two school-age friends visit during child care hours.
  - 14.5.1 These friends do not count toward capacity unless present with the children in care.
  - 14.5.2 The licensee may not be paid for the care of these friends.
- 14.6 School-age children not living in the home and present at the home count toward the capacity unless visiting a school-age household member in an area or space separate from the children in care.
- 14.7 School-age children may only attend before school, after school, during school holidays, and during school vacations.

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#### **15.0 Use of a Substitute**

- 15.1 A licensee shall arrange for a substitute who is at least 18 years old.
  - 15.1.1 This substitute may be available to assist in non-emergency situations but must be available in case of an emergency. OCCL defines an emergency as an unplanned event, such as a serious or sudden illness, accident, or situation, requiring the immediate attention of a licensee.
  - 15.1.2 The substitute and licensee may both be present at the home; however, a licensee shall provide the majority of the child care duties.
- 15.2 A licensee shall post the substitute's name and phone number in the home and provide this information to OCCL.
- 15.3 A licensee shall document on the form provided by OCCL that substitutes used only for emergencies receive training in the following topics before working with children:
  - 15.3.1 DELACARE Regulations;
  - 15.3.2 Policies and procedures of the home including special health care concerns of the children in care, such as allergies;
  - 15.3.3 Emergency preparedness and disaster and evacuation plans;
  - 15.3.4 Safe sleep practices, including prevention of sudden infant death syndrome, if caring for infants;
  - 15.3.5 Recognition of the symptoms of child abuse and neglect; and
  - 15.3.6 Child abuse and neglect laws and reporting requirements.
- 15.4 A licensee shall document on the form provided by OCCL that substitutes used for non-emergency situations receive training in the following topics before working with children:
  - 15.4.1 DELACARE Regulations;
  - 15.4.2 Policies and procedures of the home;
  - 15.4.3 Emergency preparedness and disaster and evacuation plans;
  - 15.4.4 Safe sleep practices including prevention of sudden infant death syndrome, if caring for infants;
  - 15.4.5 Prevention of shaken baby syndrome and abusive head trauma, if caring for infants;
  - 15.4.6 Prevention of and response to food allergies;
  - 15.4.7 Prevention and control of infectious diseases, including immunization;
  - 15.4.8 Building and physical grounds safety;

- 15.4.9 Storage of hazardous materials and biocontaminants;
  - 15.4.10 Recognition of the symptoms of child abuse and neglect;
  - 15.4.11 Child abuse and neglect laws and reporting requirements (certificate required);
  - 15.4.12 CPR and first aid;
  - 15.4.13 Administration of medication; and
  - 15.4.14 Safety measures in transporting children, if applicable.
- 15.5 A licensee shall keep a copy of the substitute's health appraisal, comprehensive background check results showing eligibility, and orientation record on file at the home. Also, a licensee shall ensure substitutes used for non-emergency situations have an administration of medication certificate, CPR certification including a skills demonstration, and first aid certification on file at the home.
  - 15.6 A licensee shall ensure the substitute has access to each child's file, knows special or emergency information about each child, and keeps all children's information private.
  - 15.7 The substitute may provide care in the home in the absence of a licensee, or if applicable, the large family provider or large family assistant. A licensee does not need to inform OCCL or receive approval to use a substitute in the following situations:
    - 15.7.1 Emergencies as defined in subsection 15.1;
    - 15.7.2 Medical appointments;
    - 15.7.3 School appointments; or
    - 15.7.4 Time off for less than five days in a row.
  - 15.8 The substitute may provide care in the home in the absence of a licensee, large family provider, or large family assistant. A licensee shall inform OCCL and receive approval to use a substitute in the following situations:
    - 15.8.1 Training/classes held for three or more sessions;
    - 15.8.2 Student teaching;
    - 15.8.3 Internship or practicum to meet qualifications or annual training; or
    - 15.8.4 Time off for five or more days in a row.
  - 15.9 Before using a substitute, a licensee shall tell the parent/guardian who the substitute is and when the substitute will be caring for the children, unless it is an emergency.
  - 15.10 A licensee shall record the date and times a substitute is present and is helping with the children or providing care. A licensee shall maintain this record for at least three months.

## **16.0 Notification to OCCL**

- 16.1 The licensee shall immediately call the 24-Hour Child Abuse Report Line (currently listed as 1-800-292-9582) when a child in care dies. After this call, a licensee shall immediately notify OCCL.
- 16.2 A licensee shall call OCCL and speak to someone within one business day during business hours (leaving a message is not acceptable) in the event of:
  - 16.2.1 A fire, flood, or other disaster causes damage that affects the home's ability to operate safely;
  - 16.2.2 Injury of a child while in the care of the home, when the licensee is informed the child required medical/dental treatment other than any first aid provided at the home. A licensee shall follow this call with a written report within three business days;
  - 16.2.3 The phone number of the home changes (must also notify each child's parent/guardian and staff members);
  - 16.2.4 Suspected abuse or neglect of a child while in care (after reporting the suspicion to the 24-Hour Child Abuse Report Line, currently listed as 1-800-292-9582);
  - 16.2.5 Suspected child abuse or neglect involving the licensee, household member, or staff member being investigated by the division or Department of Services for Children, Youth and Their Families;
  - 16.2.6 A youth volunteer needing OCCL's approval to begin volunteering;
  - 16.2.7 Any known new charges, arrests, or convictions of the licensee, household member, or staff member;
  - 16.2.8 A child is abducted from the home or is missing while in the licensee's care;
  - 16.2.9 A child had a reaction to medication requiring medical treatment or received medical treatment because of a medication error such as giving the wrong medication, giving the wrong dose, failing to give the

medication, giving medication to the wrong child, or giving the medication by the wrong route. The licensee shall follow this call with a written report within three business days; or

16.2.10 An equipment breakdown that threatens the health and safety of children in care, including but not limited to lack of working toilets, interruption of running water, loss of phone service or power, smoke/fire alarm system failure, and heating or air-conditioning failure.

16.3 A licensee shall call OCCL and speak to someone within five business days (and send follow-up documentation to the assigned licensing specialist within 10 business days) when the following changes:

16.3.1 Hours of child care provided;

16.3.2 Household members;

16.3.3 Household member turns 18 years old;

16.3.4 Substitute;

16.3.5 Licensee, household member, or staff member develops a serious health condition or is diagnosed with a mental illness that poses a direct threat to the health and safety of children. Documentation from a health care provider is required that states the person may have direct access to or work with children and any reasonable accommodations that may be required; or

16.3.6 Intended use of a substitute as listed in subsection 15.1.

16.4 A licensee shall notify and receive OCCL and fire marshal approvals before changing the rooms used for care or providing care in the new space.

16.5 When possible, a licensee shall notify OCCL in writing or by calling OCCL at least 60 days before moving the home to a new address and complete the relocation process as stated in Section 9.0. A new license is required at the new address before providing care there.

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### **17.0 Telephones**

17.1 A licensee shall ensure the home has a working phone with a working voicemail.

17.2 A licensee shall post emergency phone numbers for ambulance or emergency medical services, police, fire departments (911); the Poison Control Center; and the 24-Hour Child Abuse Report Line (currently 1-800-292-9582).

### **18.0 Positive Behavior Management**

18.1 A licensee shall have and follow an easy-to-understand written children's behavior management statement. This statement must be given to a parent/guardian at enrollment and staff members.

18.2 A licensee shall ensure that all staff use prevention strategies, appropriate redirection rather than restraint, and positive developmentally-appropriate methods of behavior management of children, which encourage self-control, self-direction, positive self-esteem, social responsibility, and cooperation.

18.2.1 Staff shall give directions and guidance in a clear, non-threatening manner.

18.2.2 In addition, staff members shall intervene quickly to ensure the safety of the child and others; redirect children by suggesting other acceptable behaviors; escort the child to a different setting when necessary and speak so children understand their feelings are important and acceptable, but their disruptive behavior is not.

18.2.3 As children develop, these methods must be modified to encourage them to control their own behavior, cooperate with others, and solve problems by developing ideas about the best possible solution.

18.3 A licensee shall consult with a child's parent/guardian and professionals, if necessary, to design effective positive behavioral interventions and to adapt behavior management practices for a child who has a special need, including a behavioral or emotional disability.

18.4 A licensee and staff members shall teach by example by always being respectful when speaking with children and others.

18.5 A licensee shall ensure that if "time-out", is used, it is used only as necessary to help the child gain control of behavior and feelings. It must be used as a supplement to, not a substitute for, other developmentally-appropriate methods of behavior management.

18.5.1 "Time-out" must be limited to brief periods of no more than one minute for each year of a child's age.

- 18.5.2 "Time-out" may not be used for infants.
- 18.5.3 Before using "time-out", the staff member shall discuss the reason for the "time-out" in language appropriate to the child's level of development and understanding.
- 18.5.4 A child removed from the group or room during a "time-out" must be supervised. Before rejoining the group or at another time, a staff member must talk to the child in ways that encourages the child to make better decisions in the future.
- 18.6 A licensee shall ensure the following actions are prohibited:
  - 18.6.1 Roughly handling a child or physical punishment inflicted on a child's body, including, but not limited to the following: shaking, grabbing, striking, hair-pulling, biting, pinching, plucking, slapping, hitting, kicking, or spanking;
  - 18.6.2 Yelling at, humiliating, or frightening children;
  - 18.6.3 Physically or sexually abusing a child;
  - 18.6.4 Making negative comments about a child's looks, ability, ethnicity, family, or other personal traits;
  - 18.6.5 Denying children food, water, or toilet use because of inappropriate behavior;
  - 18.6.6 Tying, taping, chaining, caging, or restraining a child by a means other than holding. The child may be held only as long as necessary for the child to regain control;
    - 18.6.6.1 If the child or others are in imminent danger or a risk to themselves or others, physical holding for as brief as possible to remedy the risk or removing the child to a safer location is permissible. Supervision is required.
    - 18.6.6.2 In the event physical holding is used, documentation must occur by the staff to ensure safety for all (child and staff member).
  - 18.6.7 Punishing children for a toileting accident, or for failing to fall asleep, eat food, or complete an activity;
  - 18.6.8 Withholding physical activity as punishment; or
  - 18.6.9 Encouraging or allowing children to hit, punish, or discipline each other.

## **19.0 Breast Feeding**

A licensee shall have and follow a policy to address the needs of a child who is breastfed. This policy must include allowing a mother to breastfeed her child at a designated place at the home that is clean, removed from public view, and not located in a bathroom or kitchen.

## **20.0 Parent/Guardian Communication**

- 20.1 A licensee shall discuss the following information with a parent/guardian during the enrollment process and as needed:
  - 20.1.1 Explain that parent/guardian visits are welcomed;
  - 20.1.2 Ask about each child's culture and community, show respect for each family and culture, and discuss how to support these child care practices, especially concerning infants and toddlers;
  - 20.1.3 State that parents/guardians are most important in children's development;
  - 20.1.4 Identify the ongoing needs of the child and learn parent/guardian preferences, goals, concerns, or special circumstances that may influence the child's development, behavior, and learning;
  - 20.1.5 Explain how infant activities, such as feeding or sleeping, will be shared at the end of each day;
  - 20.1.6 Explain safety procedures for indoors and outdoors, fires, pets, first aid, and emergencies;
  - 20.1.7 Explain cleaning procedures, such as disinfecting, Standard Precautions as stated in Section 39.0, diapering, and toileting; and
  - 20.1.8 Explain the program, including routine activities, equipment, and sleeping accommodations.
- 20.2 A licensee shall have and follow written policies in a handbook. The handbook must be given to a parent/guardian at enrollment. The handbook must include the following information:
  - 20.2.1 A typical daily schedule;
  - 20.2.2 Positive behavior management policy;
  - 20.2.3 Health policy, including the following:

- 20.2.3.1 Emergency health care that states how the parent/guardian will be notified, how the child will be transported, and what will happen if a parent/guardian cannot be reached;
- 20.2.3.2 Health exclusions listing when children are not allowed to be admitted or remain in care and what will happen when a child becomes ill and a parent/guardian cannot be reached; and
- 20.2.3.3 Notification and prevention of an outbreak of a communicable disease, including a list of reportable communicable diseases, and how parents/guardians will be informed if their children were exposed to a communicable disease or condition;
- 20.2.4 Food and nutrition policy, including a statement that children are encouraged but not forced to eat; approximate times of snacks and meals; how food allergies and other dietary requirements are handled; and whether a licensee or parent/guardian will provide food;
- 20.2.5 Release of children policy, including the following:
  - 20.2.5.1 Procedures to release children only to people approved by a parent/guardian including a process for the emergency release of a child;
  - 20.2.5.2 Allowing school-age children to walk to their home or from the school bus stop to the family or large family home each with written parent/guardian permission;
  - 20.2.5.3 Checking the identity of an unknown approved person before releasing the child and keeping documentation of this verification;
  - 20.2.5.4 Procedures for handling situations in which a non-custodial parent attempts to claim the child without custodial parent/guardian permission; and
  - 20.2.5.5 Procedures to be followed when an unapproved person wants to pick up a child, or a person who seems to be intoxicated or unable to bring the child home safely requests the release of a child;
- 20.2.6 Reporting procedures for accidents, injuries, or serious incidents;
- 20.2.7 Mandatory reporting of child abuse and neglect policy;
- 20.2.8 Administration of medication policy including reasonable accommodations for a child with disabilities;
- 20.2.9 Safe sleep practices for infants, if applicable;
- 20.2.10 Description of animals or pets regardless of the location within the home;
- 20.2.11 Suspension and expulsion policies such as the “Best Practice Statement for the Prevention of Expulsion and Suspension in Delaware Early Childhood Programs,” found on the “My Child DE” website;
- 20.2.12 Non-discrimination policy assuring the child or family will not be discriminated against based on race, color, national origin, gender, age, sex, pregnancy, marital status, sexual orientation, gender identity or expression, religion, creed, disability, veteran’s status, or any other category protected by state and federal laws; and
- 20.2.13 Transportation policy, if applicable.

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**21.0 Parents Right to Know Act**

- 21.1 A licensee shall provide a parent/guardian with information about the right to review the home's licensing record, as stated in 31 **Del.C.** §398.
  - 21.1.1 As a part of the enrollment inquiry process, a licensee shall require the parent/guardian to read and sign The Parents Right to Know Form and keep the form on file.
  - 21.1.2 A licensee shall give a copy of the form to the parent/guardian.
  - 21.1.3 A licensee shall keep a log that documents the printed names of the child and parents/guardians and the date the Parents Right to Know Form was provided. This information shall be included for children who do not become enrolled, are currently enrolled, and are no longer enrolled.
    - 21.1.3.1 This log shall be signed by the parent/guardian.
    - 21.1.3.2 This log shall be provided to OCCL at each annual compliance review. Once a log is provided to OCCL, a licensee is not required to keep that log on file at the home.

**22.0 Children's Files**

- 22.1 A licensee shall have an on-site private file for each child by the time care begins. The file must contain the following information, unless otherwise stated:
- 22.1.1 Child's first and last names, date of birth, address, and parents/guardians' home and cell phone numbers, if applicable;
  - 22.1.2 Parents/guardians' names, places and hours of employment, and work phone numbers, if applicable;
  - 22.1.3 Names and emergency phone numbers for at least two people approved to pick up the child;
  - 22.1.4 First and last names of all people approved to pick up the child;
  - 22.1.5 Name and phone number of the child's health care provider;
  - 22.1.6 Health appraisal and immunization record (or notarized religious or medical exemption from immunization) on file at the home within 30 days of enrollment;
  - 22.1.7 Date child began care, hours/days child is to attend, and date child left care, if applicable;
  - 22.1.8 If provided by the parent/guardian, a statement of the child's medical, developmental, or educational special needs including but not limited to: copies of an IEP, IFSP, and Section 504 plan, and information on allergies, current illnesses or injuries, previous serious illnesses or injuries, and needed medications;
  - 22.1.9 Written approvals from parent/guardian for: emergency medical treatment and, if applicable, special dietary needs, swimming, administration of medication, use of electronics/screen time as described in subsection 52.10, sleeping on a mat as described in subsection 35.3.2, sleeping in another area as described in subsection 35.10, and transporting the child;
  - 22.1.10 If applicable, copies of court orders on custody and visitation arrangements provided by the parent/guardian;
  - 22.1.11 If applicable, administration of medication records and accident and injury reports; and
  - 22.1.12 The Parents Right to Know Form signed by the child's parent/guardian.
- 22.2 A licensee may not give out or allow the use of a child's/family's information without written parent/guardian permission to do so, unless required by officials from OCCL, the division, or other agencies responsible for issues relating to the health, safety, and well-being of children.
- 22.3 A licensee shall update information provided by a parent/guardian as it changes. The file must be available to staff members. This file must be available for three months after a child has left care.

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**23.0 Children's Health Appraisal**

- 23.1 A licensee shall ensure that within one month of starting care, each child's file contains a health appraisal that includes an immunization record. A health care provider shall have conducted this appraisal within the last 12 months. A licensee does not need a child's health appraisal if other federal or State laws require the home to admit a child without an appraisal. Health appraisals must be updated every 13 months. A licensee shall keep the most recent appraisal on file and it must include:
- 23.1.1 A health history;
  - 23.1.2 Physical examination;
  - 23.1.3 Growth and development;
  - 23.1.4 Age-appropriate immunizations as described in Appendix VIII;
  - 23.1.5 Proof of blood lead test for children ages 12 months and older;
  - 23.1.6 Medical information for treatment in case of emergency; and
  - 23.1.7 Recommendations regarding required medication, allergies, restrictions or modifications of the child's activities, diet, or care, if applicable.
- 23.2 A licensee is not required to update health appraisals for children in grades kindergarten or higher after receiving one completed after the child began kindergarten or a higher grade.
- 23.3 A licensee shall ensure a child whose parent/guardian objects to immunizations on a religious basis or whose health care provider certifies that immunizations may be harmful to the child's health will be exempt from the immunization requirement.
- 23.3.1 A notarized statement or documentation from a health care provider is required for this exemption.
  - 23.3.2 A licensee shall place this documentation in the child's file.

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### **24.0 Daily Attendance of Children**

A licensee shall have daily attendance records for children that state the exact time each child arrives and departs from the home, and be documented at the time of the arrival and departure of the child. A licensee shall keep these records for at least three months.

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### **25.0 Infants' Records**

- 25.1 A licensee shall have daily records of an infant's feeding, sleeping, diapering, and other routine activities.
- 25.2 A licensee shall share these records with the infant's parent/guardian at the end of each day.
- 25.3 The record shall include documentation of checking the infant every 30 minutes when the infant is sleeping, or every 15 minutes for infants and children under age two as described in subsection 35.10. These sleep checks are to make sure the infant is breathing normally and not showing signs of distress.

### **26.0 Health Observations**

- 26.1 A licensee shall ensure each child is observed on arrival for signs of communicable disease, injury, signs of ill health as listed in Section 41.0, and signs of child abuse or neglect.
- 26.2 A licensee shall document concerns and steps taken to assist the child.
  - 26.2.1 A licensee shall keep documented concerns in the child's file.
  - 26.2.2 A person who suspects child abuse or neglect shall make a report to the Child Abuse Report Line.

### **27.0 Hazardous Materials**

- 27.1 Before license renewal, unless previously submitted to OCCL, a licensee shall provide a lead-paint risk assessment performed by an environmental testing firm certified by DPH showing the home to be free of lead-based paint hazards if the home were built before 1978.
  - 27.1.1 If lead paint is identified but intact (i.e. not chipping, flaking, or peeling), a licensee shall monitor the areas as described in subsection 7.1.3.2.2.
  - 27.1.2 If lead-paint hazards are identified in the risk assessment, a licensee shall remedy these hazards as described in subsections 7.1.3.3 and 7.1.3.4.
- 27.2 A licensee shall ensure radon testing is performed in each room used for child care once every five years between the months of October and March and within six months after any remodeling, renovation, or construction.
  - 27.2.1 This testing may be performed by the property owner or an inspector certified by the American Association of Radon Scientists, the National Radon Safety Board, or any organization recognized by the EPA or State of Delaware Radon Program.
  - 27.2.2 If testing indicates a radon level over 4.0 pCi/l, a licensee shall ensure acceptable radon mitigation occurs or a long-term radon test (90-120 days) indicates a level less than 4.0 pCi/l.
  - 27.2.3 Copies of radon testing results shall be sent to OCCL within five business days of receiving the results.
- 27.3 A licensee shall ensure matches, lighters, medicines, drugs, alcohol, cleaning products, detergents, aerosol cans, plastic bags, cords and strings from window blinds, firearms, ammunition, and other similar items are stored safely in areas out of children's reach.
- 27.4 A licensee shall ensure containers of poisonous, toxic, or hazardous materials are:
  - 27.4.1 Labeled with the contents;
  - 27.4.2 Used only in the manner and under the conditions that will not contaminate food or constitute a hazard to children or to staff; and
  - 27.4.3 Stored in a locked storage space accessible only to staff.
- 27.5 Materials required for routine cleaning and maintenance must be stored out of children's reach and used in a safe manner.

**28.0 Heating and Cooling**

- 28.1 A licensee shall ensure screens are in good repair on all windows, doors, or openings to the outside used for venting the home.
- 28.2 A licensee shall ensure that temperatures in rooms used by the children are kept at a minimum temperature of 68°F and a maximum of 82°F unless there is a conflict with federal and State energy laws.
  - 28.2.1 OCCL allows an exception if a room temperature drops within the range of 60° F- 67° F or rises within the range of 83° F- 90° F and a licensee can return that room to the proper temperature within the next four hours.
    - 28.2.1.1 If the room temperature cannot be restored within four hours or the temperature is below 60°F or above 90°F, the home must close.
    - 28.2.1.2 The home must remain closed until the heating or cooling problem is resolved and the correct temperature is maintained.
  - 28.2.2 A licensee shall inform OCCL when closing is necessary.
- 28.3 For a home licensed after January 1, 2009, a licensee shall use air conditioning during hot weather to keep rooms used by children within the required temperature range.
- 28.4 A licensee shall ensure all floor or window fans and cords are out of children's reach and have a safety certification mark from a nationally recognized testing laboratory such as Underwriters Laboratories or Electro-Technical Laboratory.
- 28.5 The licensee shall ensure heating and cooling equipment prevents injury to children by having safety shielding.
  - 28.5.1 Fire code prohibits the use of unvented, fuel-fired heating equipment such as portable kerosene heaters.
  - 28.5.2 Hot water pipes, steam radiators, electric space heaters, and wood-burning stoves must be out of children's reach to protect children against burns.
  - 28.5.3 Electric space heaters must be stable and have a safety certification mark from a nationally recognized testing laboratory.
  - 28.5.4 A licensee shall securely screen or equip fireplaces with protective guards while in use.
- 28.6 Heating, cooling, and plumbing equipment must be properly installed, cleaned, and maintained to operate safely.

**29.0 Indoor space**

- 29.1 A licensee shall ensure there are no health and safety hazards in the home.
- 29.2 A licensee shall keep the home and its furnishings in a clean and safe condition. Floors, walls, counter surfaces, toilets, and surfaces or finishes must be cleanable and in good repair.
- 29.3 A licensee shall ensure stairways over four steps used by children, indoors and outdoors, have handrails at a maximum height of 38 inches.
- 29.4 A licensee shall use securely installed safety gates, such as those approved by the American Society for Testing and Materials (ASTM), at the top, bottom, or both locations of stairways where infants and toddlers are in care to prevent falls and access to the stairs.
  - 29.4.1 Gates must have latching devices that adults, but not children, can open easily.
  - 29.4.2 Pressure or accordion gates may not be used.
  - 29.4.3 If a licensee cannot set up a safety gate as stated in the manufacturer's instructions because of the home's design, then a licensee shall safely prevent infants and toddlers from accessing stairways in another way.
- 29.5 A licensee shall ensure that raised areas at the home other than stairways, over two feet, such as porches, elevated walkways, and elevated play areas, have walls or barriers to prevent falls over the open side. The walls or barriers must be at least 36 inches tall.
- 29.6 A licensee shall ensure door locks or latches in rooms used by children can open from either side of the door and the opening device or key is available to a licensee and staff members.



- 29.7 A licensee shall have a bathroom with a working toilet and sink. A licensee shall ensure toilet paper is available for children to use in the bathroom at all times. The sink must have hot and cold running water. Children may use a bathroom that is not on the child care level if it is the only bathroom in the house.
- 29.8 A licensee may not allow children to use rooms or spaces reachable only by ladder, folding stairs, or through a trap door.
- 29.9 A licensee shall keep the home free from rodent and insect infestation. If pesticides are used, they must be used according to the instructions listed on the label.
- 29.10 A licensee shall ensure a working flashlight is available in the home.
- 29.11 A licensee shall cover all electrical outlets that children can reach, including unused power strips.
- 29.12 A licensee shall ensure glass doors and windows within 36 inches of the floor have a vision strip or decal at children's eye level.
- 29.13 A licensee shall ensure a State fire marshal recognized electrical inspection agency conducts an electrical inspection of the home and approves the home every three years.
- 29.14 A licensee shall keep any guns and ammunition stored in the home in a locked container or locked closet. A licensee shall store ammunition separate from guns.
- 29.15 A licensee shall keep trash in covered trashcans.
  - 29.15.1 Recyclable paper may be in uncovered containers.
  - 29.15.2 Trash must be removed daily from rooms used by children and weekly from the home.
- 29.16 A licensee shall prohibit smoking, vaping, and burning candles and incense in the home during child care hours and in the presence of children.
- 29.17 A licensee shall ensure the water temperature does not exceed 120° F from faucets and other sources accessible to children in care.
- 29.18 A licensee shall ensure all sinks supply hot and cold water under pressure at all times and all plumbing complies with State and local plumbing codes. Portable sinks are prohibited.

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**30.0 Fire Safety**

- 30.1 A licensee shall ensure that all paths of egress, including stairways, hallways, windows, and doorways are functional and not blocked.
- 30.2 A licensee shall care for children on the ground level of the home or use another level only after meeting the conditions of the designated fire marshal.
- 30.3 A licensee shall ensure each exit door is at least 28 inches wide.
- 30.4 A licensee shall at least have a properly installed, battery-operated working smoke alarm.
  - 30.4.1 This alarm must have a safety certification mark from a nationally recognized testing laboratory.
  - 30.4.2 A licensee shall place smoke alarms on the ceiling or six to 12 inches below the ceiling on each level of the home, basement, and all enclosed sleeping areas.
    - 30.4.2.1 A licensee shall test these alarms monthly and document these tests in a log.
    - 30.4.2.2 A licensee shall replace the batteries at least yearly.
- 30.5 A licensee shall ensure fire safety codes and on-going procedures as required by the designated fire marshal are followed.
- 30.6 A licensee shall ensure a working carbon monoxide alarm is near any sleeping area used by children when the home has an attached garage or equipment using fuels such as gas, oil, propane, wood, or kerosene. This includes an oven, furnace, water heater, or fireplace.
  - 30.6.1 The alarm must have a safety certification mark from a nationally recognized testing laboratory.
  - 30.6.2 The alarm must be installed as stated in the manufacturer's instructions.
    - 30.6.2.1 A licensee shall test these alarms monthly and document these tests in a log.
    - 30.6.2.2 A licensee shall replace the batteries at least yearly.
- 30.7 A licensee shall complete a monthly fire prevention inspection and post the current report in a visible space.
- 30.8 When a family home changes from Level I to Level II or a child care home moves to a new address, a licensee shall submit plans to the designated fire marshal for review and approval.

- 30.8.1 The licensee shall follow the fire safety codes of the designated fire marshal.
- 30.8.2 A licensee shall receive fire marshal and OCCL approval before offering services.
- 30.9 A licensee shall provide a clearly visible, readily accessible, charged, portable dry chemical fire extinguisher rated 2A-10BC or greater.
  - 30.9.1 Fire extinguishers must not be mounted in a closet or cabinet except when using a wall mounted fire extinguisher cabinet that was manufactured specifically for that purpose.
  - 30.9.2 Fire extinguishers must be mounted at least 4 inches above the finished floor.
    - 30.9.2.1 Fire extinguishers weighing 40 pounds or less must be mounted so that the top of the extinguisher is not more than 60 inches above the finished floor.
    - 30.9.2.2 Fire extinguishers weighing more than 40 pounds must be mounted so that the top of the extinguisher is not more than 42 inches above the finished floor.
  - 30.9.3 A fire extinguisher contractor licensed by the Office of the State Fire Marshal shall inspect the fire extinguisher annually.

### **31.0 Kitchen and Food Preparation**

- 31.1 A licensee shall keep the kitchen, food preparation, storage, serving areas, appliances, and utensils clean and sanitary.
- 31.2 A licensee shall ensure the kitchen has at least one sink with hot and cold running water. Large family homes need an additional hand-washing sink.
- 31.3 A licensee shall ensure the home has a refrigerator to keep perishable food cold at 40°F or colder, and food stored in a freezer frozen at 0°F or colder. A licensee shall have a working thermometer in refrigerators and freezers used to store children's food.
- 31.4 A licensee shall ensure food provided and prepared by the home complies with the home's written policy on food and nutrition quality.
- 31.5 A licensee shall ensure the food is clean, wholesome, free from spoilage and contamination, and safe to eat.
  - 31.5.1 Prepared food items must be correctly labeled with contents and date of preparation.
  - 31.5.2 Prepared food that is served to a child and not eaten must be thrown away and not given to another child.
- 31.6 Food storage areas and appliances must be cleanable and free of food particles, dust, and dirt.
  - 31.6.1 All food items must be stored off the floor.
  - 31.6.2 Food must be stored separate from cleaning materials.
  - 31.6.3 Food must be stored in closed or sealed containers that are labeled with the contents and expiration date.
- 31.7 A licensee shall ensure that children are supervised during meal preparation to prevent injuries.
- 31.8 A licensee shall ensure dishes and utensils are air-dried unless sanitized and dried in a dishwasher.
- 31.9 A licensee shall ensure no dishes, cups, or glasses used by children are broken or defective.
- 31.10 A licensee shall ensure age-appropriate utensils, dishes, cups, glasses, or bottles are available for each child and not shared with another child during feeding.

### **32.0 Outdoor Area**

- 32.1 A licensee shall ensure there are no hazards on the grounds of the home.
- 32.2 A licensee shall provide active play and large muscle activities that consider the children's needs and whether they are able to participate. A licensee shall provide these activities either on the grounds or within safe walking distance of the home.
- 32.3 A licensee shall remove hazards before children begin to play outside. These hazards may include animal feces, toxic plants, broken or non-secure outdoor play equipment, building supplies and equipment, glass, sharp rocks, cigarette butts, beehives and wasp nests, a lawn mower, or debris.
  - 32.3.1 A licensee shall securely lock tool sheds, garages, and other outdoor buildings to prevent children from entering.
  - 32.3.2 Children must be supervised while outdoors.

- 32.4 For a home licensed before January 1, 2009, the existing fencing of the on-site outdoor play area is acceptable as long as it is hazard-free and in good repair. When replacing the fencing, the new fencing must fully comply with Section 59.0 for a family home and Section 64.0 for a large family home.
- 32.5 A licensee shall ensure outdoor play equipment is sturdy, safe, clean, and free from rough edges, sharp corners, pinch and crush points, splinters, and exposed bolts.
- 32.6 A licensee shall anchor large outdoor play equipment. A licensee cannot place stationary equipment on concrete or asphalt.
- 32.7 A licensee shall use materials in the outdoor play area that do not present a safety or choking hazard. These materials must be free of unsafe contaminants such as steel wires and unhealthy residue from deterioration.
- 32.8 If using gravel or stone as a ground cover for the outdoor play area, only pea gravel is acceptable. For homes licensed before January 1, 2009, the existing gravel or stone ground cover is acceptable.
- 32.9 A licensee shall keep outdoor sandboxes or play areas containing sand safe, sanitary, and covered when not in use.
- 32.10 The use of trampolines by children in care on-site is prohibited.

### **33.0 Pools and Swimming**

- 33.1 A licensee shall ensure all children are under direct supervision while wading or swimming. During a swimming activity involving infants or toddlers, these children must be within arm's reach of a licensee or staff member.
  - 33.1.1 Swimming pools and large wading pools that remain filled when not in use must be inaccessible to children.
  - 33.1.2 The water in swimming pools used by children must be treated, cleaned, and maintained according to DPH regulations.
  - 33.1.3 The pool and equipment must be kept in a safe manner and be hazard-free.
  - 33.1.4 Small portable wading pools must be cleaned and disinfected after each use.

### **34.0 Riding Toys**

- 34.1 A licensee shall ensure bicycles, tricycles, scooters, and other riding toys are the size appropriate for a child.
- 34.2 A licensee shall ensure these riding toys are in good condition, free of sharp edges or protrusions that may injure a child, and not motorized.
- 34.3 Children over one year of age must wear approved safety helmets while riding toys with wheels of 20 or more inches in diameter.
  - 34.3.1 Riding bicycles and using wheeled equipment (roller blades, skateboards, scooters, etc.) require children to wear helmets.
  - 34.3.2 A licensee shall ensure helmets are not shared unless cleaned between users by wiping the lining with a damp cloth.
  - 34.3.3 A licensee shall ensure helmets are removed as soon as children stop riding helmet-required equipment.

### **35.0 Sleeping Accommodations and Safe Sleep Environments**

- 35.1 A licensee shall ensure the program includes times for rest or sleep appropriate to each child's individual physical needs.
  - 35.1.1 A quiet activity must be provided for children who have rested for 30 minutes and do not seem to need or want more rest.
  - 35.1.2 Preschool children not needing to rest/sleep must have at least 30 minutes of quiet play daily.
- 35.2 Rest or sleep equipment must meet the safety standards required by CPSC or other recognized authority approved by OCCL and kept in a safe condition.
- 35.3 A licensee shall ensure each child, except children who do not sleep at the home, has clean, safe, age-appropriate sleep equipment. This may be a crib, playpen, pack-and-play (without ripped mesh), cot, bed, or mat.
  - 35.3.1 Each child under 18 months old who does not walk must sleep in a crib, playpen, or pack-and-play.

- 35.3.2 A child between 12 and 18 months old who walks may sleep on a cot, mat, or bed with written parent/guardian permission.
- 35.3.3 Preschool-age and school-age children who do not nap at the home do not need sleep equipment.
- 35.4 A licensee shall ensure a child's rest equipment is labeled with the child's name or assigned chart number unless cleaned and disinfected after each use.
  - 35.4.1 A licensee shall document chart numbers and assignments and keep them current.
  - 35.4.2 Children must use only their assigned equipment while enrolled in the home.
- 35.5 Mattresses and sleep equipment must be non-absorbent and cleanable.
  - 35.5.1 Cots, mats, and crib mattresses must be cleaned with soap and water and then sanitized weekly and when soiled or wet.
  - 35.5.2 Mats must be stored so there is no contact with the sleep surface of another mat or cleaned and disinfected after each use.
  - 35.5.3 Sleep equipment and bedding must be cleaned and sanitized before being assigned to another child.
- 35.6 Children over age one must be provided with top and bottom covers.
  - 35.6.1 Sheets and blankets or other bedding must be cleaned at least weekly and when soiled or wet.
  - 35.6.2 Bedding must be stored so there is no contact with another child's bedding.
- 35.7 A licensee shall ensure sleep equipment is placed at least 1½ feet apart while in use.
- 35.8 The rest area must provide enough light to allow the children to be seen.
- 35.9 A licensee shall follow Safe Sleep Practices for Infants:
  - 35.9.1 A licensee shall ensure cribs meet the current standards of CPSC or other safety authority recognized by OCCL.
  - 35.9.2 Infants must sleep only in cribs, pack-and-plays, and playpens.
    - 35.9.2.1 The use of soft surfaces, such as soft mattresses, pillows, sofas, and waterbeds, are prohibited as infant sleep surfaces.
    - 35.9.2.2 A licensee shall ensure infants who fall asleep in car seats, swings, seats, or other equipment are immediately moved to cribs, pack-and-plays, or playpens.
  - 35.9.3 Cribs must not be stacked while in use.
  - 35.9.4 Cribs must not have gaps larger than 2 3/8 inches between the slats.
  - 35.9.5 Cribs, pack-and-plays, and playpens must have top rails at least 20 inches above the mattresses.
    - 35.9.5.1 The mattress must be set at its lowest position.
    - 35.9.5.2 Latches on cribs, pack-and-plays, or playpens must be safe, secured, and hazard-free.
  - 35.9.6 Crib mattresses must be firm and tight fitting to the frame and covered with a tight-fitting bottom sheet only.
  - 35.9.7 Pillows, bibs, blankets, bumper pads, cloth diapers other than those worn by an infant, comforters, top sheets, quilts, sheepskin, sleep positioning devices (except as described in subsection 35.9.9.1), stuffed toys, and other items are prohibited in a crib, pack-and-play, and playpen.
    - 35.9.7.1 Infants may use pacifiers in a crib.
    - 35.9.7.2 Toys or objects attached to cribs, pack-and-plays, or playpens are prohibited.
  - 35.9.8 Swaddling of infants requires written parent/guardian permission. Blankets are prohibited for swaddling when laying an infant down to sleep. However, swaddle-blanket sleepers may be used.
  - 35.9.9 Infants must be placed on their backs when laid down to sleep as recommended by the American Academy of Pediatrics.
    - 35.9.9.1 OCCL allows an exception if the infant's health care provider documents that a physical or medical condition requires a different sleeping position or use of a sleep-positioning device.
    - 35.9.9.2 The health care provider must document the new sleep position or the device and how to use it.
- 35.10 The licensee may allow a maximum of two children in care under age two to sleep in other areas with written parent permission and documented sleep checks every 15 minutes.
  - 35.10.1 The other area must be on the same level of the home where care is provided.
  - 35.10.2 If the area or room has a door, it must remain open when a child is using the area.

- 35.11 The licensee may allow children over age two to sleep alone in other areas as long as the area is on the same level of the home where care is provided. If the area or room has a door, it must remain open when a child is using the area.
- 35.12 Household children may sleep in their own bedroom as long as it is on the same level of the home where care is provided.

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**36.0 Equipment**

- 36.1 A licensee shall provide developmentally-appropriate equipment and materials for a variety of indoor and outdoor activities. Materials and equipment must help provide many experiences that support all children's social-emotional, language/literacy, intellectual, and physical development.
- 36.2 A licensee shall ensure enough materials and equipment are available for all children to use. They must include a wide variety of choices for play and learning.
- 36.3 A licensee shall ensure toys and equipment used by children are sturdy, safely assembled, hazard-free, and not recalled. Toys and equipment must not cause children to become trapped or have rough edges, sharp corners, pinch or crush points, splinters, exposed bolts, or small loose pieces. For information on the recall of children's toys and equipment, please refer to the U.S. Consumer Product Safety Commission's (CPSC's) website.
- 36.4 A licensee shall have infant seats with trays and use T-shaped safety straps for table play and mealtimes for children no longer held for feeding. If using a high chair to meet this requirement, it must also have a wide base.
- 36.5 A licensee shall prohibit the use of walkers unless prescribed by a health care provider for a specific child.
- 36.6 A licensee shall prohibit toys that explode or shoot things.
- 36.7 A licensee shall ensure children under three years old do not have access to empty plastic bags, Styrofoam objects/cups/bowls/toys, latex balloons, and objects less than one inch wide.

**37.0 Sanitation**

- 37.1 A licensee shall ensure areas and equipment listed in subsections 37.2 and 37.3 are washed with soap and water and then disinfected as required.
  - 37.1.1 For sanitizing and disinfecting, a licensee shall ensure one of the following is used: an EPA-registered product, a commercially prepared product, or a bleach and water solution.
  - 37.1.2 A licensee shall follow the manufacturer's instructions for use.
  - 37.1.3 These products must be labeled with the contents.
  - 37.1.4 Their instructions for use must be available at all times.
- 37.2 A licensee shall ensure the following items or surfaces are cleaned after each use with a soap and water solution and then disinfected:
  - 37.2.1 Potty-chairs, after being emptied into a toilet;
  - 37.2.2 Sinks and faucets used for hand washing after the sink was used for rinsing a potty-chair;
  - 37.2.3 Diapering surfaces, as required in subsection 40.6.5;
  - 37.2.4 Food preparation and eating surfaces, such as counters, tables, and high chair trays;
  - 37.2.5 Toys children put in their mouths;
  - 37.2.6 Mops used for cleaning must be rinsed, disinfected, wrung, and hung to dry;
  - 37.2.7 Plastic bibs (cloth bibs may only be used once before washing); and
  - 37.2.8 Thermometers (that make contact with skin or mouth).
- 37.3 A licensee shall ensure the following items or surfaces are cleaned at least daily with a soap and water solution and then disinfected:
  - 37.3.1 Toilets and toilet seats;
  - 37.3.2 Sinks and faucets;
  - 37.3.3 Diaper pails and lids;
  - 37.3.4 Drinking fountains;
  - 37.3.5 Water tables and equipment;

- 37.3.6 Play tables;
  - 37.3.7 Rest mats that are stored touching each other;
  - 37.3.8 Waterproof activity mats; and
  - 37.3.9 Smooth waterproof floors.
  - 37.4 A licensee shall limit germs and disease passing among children in the home by:
    - 37.4.1 Using washable toys with diapered children; and
    - 37.4.2 Washing items children lick or chew after they fall to the floor or ground.
  - 37.5 At least weekly, a licensee shall ensure non-porous toys and play equipment are washed with a soap and water solution and then disinfected.
  - 37.6 At least weekly, a licensee shall ensure stuffed animals are laundered.
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### **38.0 Hand Washing**

- 38.1 A licensee shall ensure staff and children's hands are washed with soap and running water, even if gloves were worn, and paper towels or a mechanical hand dryer are used, as follows:
  - 38.1.1 Before and after: eating or handling food, giving medications, caring for a child who may be sick, using a water-play or other sensory table/container with other children, and using shared play dough or clay; and
  - 38.1.2 After: toileting or diapering, touching blood, feces, urine, vomit, nasal or other body fluids, handling animals or their equipment, or after coming into contact with an animal's body fluids, playing in a sandbox, outdoor play, cleaning, and taking out the garbage.
- 38.2 A licensee shall ensure liquid soap, paper towels, and single-use towels or a mechanical hand dryer, are available at all times in the bathroom.

### **39.0 Standard Precautions**

- 39.1 A licensee shall ensure Standard Precautions are used to protect against disease and infection. Spills of bodily fluids (i.e. urine, feces, blood, saliva, and discharges from the nose, eyes, an injury, or other tissue) must be cleaned up immediately, as follows:
  - 39.1.1 For vomit, urine, and feces on surfaces including floors, walls, bathrooms, tabletops, toys, kitchen counters, diaper-changing tables, and toilet training chairs, the area must be cleaned with soap and water and then disinfected.
  - 39.1.2 For blood, blood-containing fluids, and tissue discharges, a licensee shall ensure that open skin sores or mucous membranes are not touched, non-porous gloves are worn, and the area is cleaned with soap and water, and then disinfected.
  - 39.1.3 Bloody disposable diapers and material must be put in a plastic bag, tied securely, and thrown away. Bloody clothing and reusable diapers must be placed in a plastic bag, tied securely, and returned to the child's parent at pick up.
  - 39.1.4 Mops must be cleaned, rinsed, disinfected, wrung, and hung to dry.

### **40.0 Diapering and Soiled Clothing**

- 40.1 A licensee shall have and follow a procedure for checking diapers for wetness and feces at least hourly and whenever the child acts as though the diaper is wet or soiled.
  - 40.1.1 Diapers and other clothing must be changed when they are found to be wet or soiled.
  - 40.1.2 Diaper changes for infants must be written down.
- 40.2 A licensee shall keep a supply of clean diapers and extra clothing available for use by children if a parent/guardian does not provide them when required.
- 40.3 A licensee shall ensure soiled or wet clothing and reusable diapers are not emptied or rinsed.
  - 40.3.1 Each must be placed in a sealed plastic bag with clothing separated from reusable diapers.
  - 40.3.2 The bag must be labeled with the child's name and sent home with the child at the end of the day.
- 40.4 A licensee shall ensure a home has a diaper-changing area with a clean, washable, and non-porous surface. This area may not be located in the kitchen.

- 40.5 A licensee shall ensure used disposable diapers are placed in a foot-activated trashcan that is used only for diapers.
- 40.5.1 This trashcan must be within arm's reach of the changing area, lined with a plastic bag, and sanitized daily.
  - 40.5.2 Diapers must be removed from the home daily or more frequently to prevent odors and placed in a closed trashcan outside the home.
- 40.6 A licensee shall have and follow a procedure for changing diapers that includes the following:
- 40.6.1 Using a diaper-changing area when changing diapers;
  - 40.6.2 Disposing of diapers as stated in these regulations;
  - 40.6.3 Washing each child during each diaper change with a clean wipe or single-use washcloth;
  - 40.6.4 Hand washing for the person who changed the diaper and for the child with soap and water immediately after each diaper change; and
  - 40.6.5 Cleaning with soap and water and then disinfecting the diaper-changing area after each use.
- 40.7 If using potty-chairs for toilet training, a licensee shall ensure they are located in a bathroom. Potty-chairs must be made of a non-porous material. They must be cleaned with soap and water and then sanitized after each use.

#### **41.0 Child Health Exclusions**

- 41.1 A licensee may not permit a child who has symptoms listed below to enter or remain at the home. The child may only return when the symptoms are gone or with documentation from a health care provider stating the illness or symptoms pose no serious health risk to anyone. The documentation must be written, or include a written follow-up if communicated verbally. The symptoms for exclusion must include, but not be limited to, the following:
- 41.1.1 Temperature of 100°F or higher without medication even if there has not been a change in behavior for infants four months old and younger;
  - 41.1.2 Temperature of 101°F or higher without medication accompanied by behavior changes or symptoms of illness for children older than four months;
  - 41.1.3 Symptoms of possible severe illness, such as unusual tiredness, uncontrolled coughing, unexplained irritability, persistent crying, difficulty breathing, wheezing, or other unusual signs;
  - 41.1.4 Diarrhea; two or more times of loose stool during the past 24 hours, or if diarrhea is accompanied by fever, exclude for 48 hours after the symptoms end;
  - 41.1.5 Blood in stools not due to change in diet, medication, or hard stools;
  - 41.1.6 Vomiting; two or more times in the past 24 hours, or one time if accompanied by a fever until 48 hours after the symptoms end or until a health care provider determines the vomiting is not contagious and the child is not in danger of dehydration;
  - 41.1.7 Ongoing stomach pain (more than two hours) or off-and-on pain due to a fever or other symptom;
  - 41.1.8 Mouth sores with drooling;
  - 41.1.9 Rash with fever or behavior change;
  - 41.1.10 Purulent conjunctivitis "pink eye" (defined as pink or red conjunctiva with white or yellow eye discharge), until 24 hours after starting antibiotic treatment;
  - 41.1.11 Scabies, until 24 hours after starting treatment;
  - 41.1.12 Pediculosis "head lice" or nits, until 24 hours after starting treatment;
  - 41.1.13 Tuberculosis, as directed by DPH;
  - 41.1.14 Impetigo, until 24 hours after starting antibiotic treatment and sores are dry;
  - 41.1.15 Strep throat or other streptococcal infection, until 24 hours after starting antibiotic treatment;
  - 41.1.16 Varicella-Zoster "chicken pox," until all sores have crusted and are dry (usually six days);
  - 41.1.17 Shingles, only if sores cannot be covered by clothing or a bandage; if not, exclude until sores have crusted and are dry;
  - 41.1.18 Pertussis, until completing five days of antibiotic treatment;
  - 41.1.19 Mumps, until five days after onset of glandular swelling;
  - 41.1.20 Hepatitis A virus, until one week after onset of jaundice, or as directed by DPH;

- 41.1.21 Measles, until four days after arrival of rash;
  - 41.1.22 Rubella, until seven days after arrival of rash;
  - 41.1.23 Herpetic gingivostomatitis "cold sores," if the child is too young to have control of saliva; or
  - 41.1.24 Unspecified short-term illness, not chronic illness if the child is unable to participate in activities or the facility cannot provide care for this child and the other children.
- 41.2 A licensee shall ensure temperatures for children under three years old are taken with a non-glass thermometer under the arm or by forehead scan.
- 41.2.1 A digital oral thermometer may be used for children three years and older.
  - 41.2.2 Rectal and ear temperatures may not be taken.
- 41.3 A licensee shall ensure that if a child shows signs of ill health as listed above, the child's rest, comfort, food, drink, and activity needs are met until the child is picked up from the home.
- 41.4 A licensee shall notify parent/guardians when their child has been exposed to a contagious disease or condition.
- 41.5 A licensee shall report reportable communicable diseases to DPH. For information on these diseases, a licensee shall call DPH or refer to their website (currently listed as <http://www.dhss.delaware.gov/dhss/dph/dpc/rptdisease.html>).
- 41.6 A licensee may not allow a child with a reportable communicable disease to be admitted to or remain at the home unless a health care provider documents that the illness poses no serious health risk to anyone or DPH tells the licensee that the child is not a health risk to others. If the health care provider states the child may return and DPH says the child cannot return, follow DPH's instructions.
- 41.7 When a health care provider diagnosed a child with a reportable vaccine-preventable communicable disease, a licensee shall exclude all children who are not immunized against the disease following DPH's instructions.

## **42.0 Administration of Medication**

- 42.1 A licensee shall ensure a trained staff member, who has received a valid administration of medication certificate from OCCL is present at all times to provide both scheduled and emergency medications to children in care. A certified staff member shall be present during field trips and routine program outings to administer medication when needed. The administration of medication certificate must be on file at the home for each certified staff member.
- 42.1.1 OCCL only allows staff members who are at least 18 years old to be certified to give medication to children. This certification includes passing OCCL's designated test on the information in the Administration of Medication Self-Study Training Guide as described in Appendix IX. Health care providers, nurses, or other qualified medical health personnel may also give medication to children.
  - 42.1.2 The licensee has discretion to designate which staff members shall administer medication.
  - 42.1.3 Written parent/guardian permission for each needed medication is required.
  - 42.1.4 A licensee shall return medication to the parent/guardian when it is no longer needed.
- 42.2 A licensee shall ensure the parent/guardian provides the following information for each medication given:
- 42.2.1 The name and birth date of the child;
  - 42.2.2 Medication allergies;
  - 42.2.3 Doctor name and phone number;
  - 42.2.4 Pharmacy name and phone number;
  - 42.2.5 Name of medication;
  - 42.2.6 Dosage (amount given);
  - 42.2.7 Time or frequency (when given);
  - 42.2.8 Route of administration, such as oral, eye, nose, mouth, topical, inhalation, injection;
  - 42.2.9 Medication expiration date;
  - 42.2.10 End date (when to stop giving);
  - 42.2.11 Reason for medication; and
  - 42.2.12 Special directions.
- 42.3 A licensee shall ensure all prescription medication is given as prescribed. Prescription medication must be:
- 42.3.1 Stored securely and out of children's reach;



- 42.3.2 Refrigerated, if applicable, in a closed container separate from food;
  - 42.3.3 In its original container and labeled with directions on how to give or use it;
  - 42.3.4 Current and has not expired;
  - 42.3.5 Given only to the child who has been prescribed the medication, verified by the child's name on the container; and
  - 42.3.6 Given to the child according to the dosage and administration instructions on the medication container. If no dosage or administration information is listed on the container, such information must be provided in writing by the child's health care provider.
- 42.4 A licensee shall ensure the following requirements are followed when non-prescribed medication is given. Non-prescription medication must be:
- 42.4.1 Stored securely and out of children's reach;
  - 42.4.2 Refrigerated, if applicable, in a closed container separate from food;
  - 42.4.3 In its original container and properly labeled with directions on how to give or use it;
  - 42.4.4 Current and has not expired;
  - 42.4.5 Labeled with the child's name; and
  - 42.4.6 Given as written on the container's instructions, or as otherwise instructed in writing by the child's health care provider.
- 42.5 A licensee shall keep a written record of medication given to children on the Medication Administration Record "MAR" including each medication dosage, time given, who gave it, unwanted effects observed, and medication errors.
- 42.5.1 Medication errors include giving the wrong medication, giving the wrong dose, failing to give the medication, giving medication to the wrong child, or giving the medication by the wrong route, or accidental spills of medication.
  - 42.5.2 Unwanted effects or errors in administering must be immediately reported to the parent/guardian.
  - 42.5.3 When known, a licensee shall notify OCCL when unwanted effects or errors in administering medication result in death or medical treatment as described in Section 16.0.
  - 42.5.4 A licensee shall keep the MAR in the child's file.
- 42.6 A licensee may administer medication to a child who has a medical need during child care hours that requires the administration of medication by a non-intravenous injection. In addition to the requirements in subsection 42.2, the parent/guardian shall provide the licensee with the following information, when medication is administered by non-intravenous injection:
- 42.6.1 Written parent/guardian permission for the home to provide the requested medical care; and
  - 42.6.2 A written statement from the child's health care provider stating:
    - 42.6.2.1 The specific medication by injection needed by the child;
    - 42.6.2.2 That for the child's health, the requested medication by injection must be administered during the hours the child attends the home;
    - 42.6.2.3 That the requested medication by injection may be appropriately administered at the home by non-medical child care staff; and
    - 42.6.2.4 Whether any additional training is necessary for non-medical staff to administer the medication by injection appropriately. If additional training is required, the health care provider shall provide instructions including information about: the type of training, who may provide such training (which may include the child's parent/guardian), and any other instructions needed to provide the requested medication by injection.
      - 42.6.2.4.1 If additional training is required, the staff members who are certified to administer medication shall complete the additional training specified by the child's health care provider. Such training must be completed in a reasonable period of time based on the availability of such training.
      - 42.6.2.4.2 The licensee shall keep documentation of this training with the child's MAR and inform the parent/guardian in writing who is authorized and trained to perform the requested medication by injection. This information must be updated as needed.

42.6.2.4.3 The licensee shall ensure that at least one staff member who is trained as required by subsection 42.6.2.4.1 to provide the requested medication by injection, is present at the home at all times while the child is present.

42.6.2.5 A licensee shall ensure the requirements of subsection 42.6.2 are reviewed with the child's parent/guardian and health care provider yearly, and as needed. Reviews and changes must be written, dated, agreed upon by all parties, and kept with the MAR.

42.7 A school-age child may self-administer medical care, as described in subsections 42.2 through 42.6, with written parent/guardian permission and written health care provider permission. These permissions must indicate the child is able to safely self-administer the prescribed medical care, identify and select the correct medicine and dosage, if applicable, and administer the medical care at the correct time and frequency. The licensee shall keep documentation of these permissions with the child's MAR. A staff member with a current administration of medication certificate shall be present during the self-administration and document all information required on the MAR, including that the medication was self-administered by the child.

42.8 The administration of medication may be required under State and federal laws even though it is not mandated pursuant to these regulations. If an agency, administrative body, court, or other entity responsible for enforcing Federal, State, and local laws and regulations (including but not limited to the Americans with Disabilities Act and the Delaware Equal Accommodations Law) makes a finding that the refusal of a licensee to administer medication is a violation of the law, OCCL shall take appropriate enforcement action consistent with subsection 11.5, due to licensee's failure to comply with subsection 7.1.2.6.1.

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**43.0 Child Accident and Injury**

43.1 When known, a licensee shall ensure when a child in care has an accident or injury, a licensee or staff member gives assistance to protect the child from further harm.

43.1.1 For a serious or potentially serious injury, a licensee shall ensure the parent/guardian is notified immediately after staff members have assisted the child and contacted an ambulance, if needed.

43.1.1.1 Serious injuries are described in the definitions;

43.1.1.2 For these injuries, a licensee shall document when the parent/guardian was informed or when calls were made to the parent/guardian or emergency contact, but no one answered.

43.1.2 A less serious accident or injury requires a parent/guardian to be informed before the child leaves for the day.

43.2 A licensee shall complete and keep a report in the child's file for each accident or injury that includes the name of child, date of injury, description of injury, how it occurred, first aid and medical care given, and parent/guardian or other approved person's signature. The parent/guardian/approved person must be provided a copy of the report on the day of the injury or within one business day.

43.3 If a child has a medical event, such as a seizure, asthma attack, or severe allergic reaction, the parent/guardian must be called immediately after a licensee or staff member assists the child and contacts an ambulance if needed.

43.4 When known, a licensee shall notify OCCL, as described in Section 16.0, when an accident or injury results in death or medical/dental treatment, other than first aid provided at the home.

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**44.0 First Aid Kit**

44.1 A licensee shall have at least one complete first aid kit. A licensee or staff member, if applicable, shall take a kit on field trips/program outings. The kit must include:

44.1.1 Disposable non-porous gloves;

44.1.2 Scissors;

44.1.3 Tweezers;

44.1.4 A non-glass thermometer to measure a child's temperature;

44.1.5 Bandage tape;

44.1.6 Sterile gauze pads;

- 44.1.7 Flexible rolled gauze;
  - 44.1.8 Triangular bandage or sling;
  - 44.1.9 Safety pins;
  - 44.1.10 Eye patch or eye pad;
  - 44.1.11 Pen/pencil and note pad;
  - 44.1.12 Instant cold pack or frozen ice pack;
  - 44.1.13 Current American Academy of Pediatrics "AAP" standard first aid chart or equivalent first aid guide;
  - 44.1.14 Small plastic, metal, or wooden finger splints;
  - 44.1.15 Non-medicated adhesive strip bandages; and
  - 44.1.16 Plastic bags for gauze and other materials used in handling blood.
- 44.2 A licensee shall ensure first aid kits used for field trips/program outings have the following additional items:
- 44.2.1 Bottled water;
  - 44.2.2 Liquid soap;
  - 44.2.3 Emergency and other needed medications; and
  - 44.2.4 List of emergency phone numbers and the Poison Control Center phone number.
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#### **45.0 Emergency Planning**

- 45.1 A licensee shall have and follow a written emergency plan that describes what to do in case of a natural or man-made disaster. A licensee shall train staff members on the plan. The emergency plan must include information and procedures for the following areas:
- 45.1.1 Preparing for a disaster;
  - 45.1.2 Assigning specific responsibilities to a licensee and staff members, if applicable;
  - 45.1.3 Keeping track of children and staff, if applicable;
  - 45.1.4 Moving to a new location, if appropriate;
  - 45.1.5 Communicating with and returning children to families;
  - 45.1.6 Meeting the needs of infants, toddlers, and children with disabilities or medical conditions;
  - 45.1.7 Caring for children after the emergency;
  - 45.1.8 Contacting emergency response agencies and parents/guardians; and
  - 45.1.9 Locking down the home.
- 45.2 Monthly evacuation drills must be practiced from all exit locations during different times of the day, including nap time. A licensee shall post an evacuation route diagram or exit signs. Each drill must be documented and include:
- 45.2.1 Drill date and time;
  - 45.2.2 Numbers of children and adults who participated;
  - 45.2.3 Exits used; and
  - 45.2.4 Total time to evacuate the home.
- 45.3 A licensee shall develop and follow a written plan describing procedures to shelter-in-place for up to 24 hours due to a disaster. The plan must include a list of emergency supplies kept on-site, including enough food that will not spoil, bottled water, and supplies to serve or prepare foods for one day without the use of electricity.

#### **46.0 Transportation**

- 46.1 A licensee shall ensure the driver and vehicle used to transport children complies with all applicable federal, State and local laws. If transporting children in a vehicle that is owned or leased by the licensee, the licensee shall have documentation of motor vehicle insurance. A licensee may not use 12-15 passenger vans to transport children. Passenger includes the driver. Use of a vehicle, other than a school bus, with a rated capacity as defined by the manufacturer, to carry more than 10 passengers in addition to the driver to transport children is prohibited.

- 46.2 A licensee shall ensure the driver of a vehicle does not transport more children and adults than the vehicle's capacity determined by the manufacturer.
  - 46.3 A licensee shall ensure the vehicle is inspected for safety before transporting children.
  - 46.4 A licensee shall ensure each child is secured in an individual safety restraint system appropriate to the age, weight, and height of the child at all times while the vehicle, other than a school bus, is in motion.
    - 46.4.1 Safety restraints must be federally approved and labeled according to the applicable Federal Motor Vehicle Safety Standard.
    - 46.4.2 Child safety restraints must be installed and used as determined by the manufacturer and vehicle's instruction manual.
    - 46.4.3 Safety restraints must be kept in a safe working condition and free of recall.
  - 46.5 A child preschool-age or younger must only be transported on a school bus that is properly equipped with child safety restraints.
    - 46.5.1 With written parent/guardian permission, a child preschool-age or younger may be transported on a school bus unrestrained.
    - 46.5.2 A licensee shall explain to parents/guardians in writing that while child safety restraints on school buses for children preschool-age or younger are not currently required by State law, the National Highway Traffic Administration recommends that children in this age group always be transported using child safety restraints.
  - 46.6 A licensee shall ensure vehicles used to transport children, including parent/guardian vehicles used for field trips (unless only transporting parent/guardian's own children), have and use the following:
    - 46.6.1 A working heater capable of keeping an interior temperature of at least 50°F;
    - 46.6.2 Air-conditioning to reduce the interior temperature when it exceeds 82°F (school buses are exempt);
    - 46.6.3 A working phone;
    - 46.6.4 A traveling first aid kit including children's emergency contact information; and
    - 46.6.5 A dry chemical fire extinguisher approved by Underwriters Laboratory.
  - 46.7 A licensee shall ensure children are loaded and unloaded at the vehicle's curbside or in a protected parking area or driveway.
  - 46.8 A licensee shall ensure all doors are locked when the vehicle is moving.
  - 46.9 A licensee shall have written parent/guardian permission for transportation provided by the home. A licensee shall document arrangements with the parent/guardian including the pickup and drop off times when driving a child to and from the child's school. A licensee shall inform the parent/guardian of the person or transportation service who is driving the vehicle and ask about special needs the child may have during the ride.
  - 46.10 A licensee shall ensure children are never alone in the vehicle and that the vehicle is visually checked at the final location so that no child is left behind.
  - 46.11 A licensee may not transport children in the open back of a truck.
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#### **47.0 Field Trips and Outings**

- 47.1 A licensee shall ensure children are not permitted off-site unless accompanied by a licensee or a staff member, if applicable, qualified to be alone with children.
- 47.2 A licensee shall have written parent/guardian permission before taking a field trip. The permission slip must state the location and date of the trip and who will provide transportation.
- 47.3 A licensee shall have written parent permission for routine outings. The permission slip must state how often the outing occurs, the location of the outing, and how children will travel to the location.
- 47.4 A licensee shall have and follow a plan for field trips or routine outings that includes procedures for accounting for children at all times and transporting children in an emergency. Medical consent forms and emergency contact information for all children, a traveling first aid kit, and a working phone must be taken on trips or outings. The home's name and phone number must be on tags or another label on each child. A child's name or information that directly identifies the child may not be placed on the child.

- 47.5 A licensee shall ensure children are under constant supervision whenever off-site to ensure safety.
- 47.6 Unless a parent/guardian was approved as eligible after having a comprehensive background check, parents/guardians volunteering for field trips must never be alone with children other than their own.

#### **48.0 Pets**

- 48.1 A licensee shall ensure pets kept by the home are cared for in a safe and sanitary manner.
- 48.2 A licensee shall keep proof of vaccinations as required by State law (currently this is rabies vaccinations for dogs and cats).
- 48.3 Animals known to be carriers of illnesses, such as ferrets, turtles, iguanas, lizards or other reptiles; birds of the parrot family; or animals sick with a disease that may be spread to humans may not be kept in rooms used by children unless children are not allowed to handle them. Poisonous or aggressive animals may not be kept in rooms used by children.
- 48.4 A licensee shall keep containers solely used for collecting animal feces or urine out of rooms used by children.
- 48.5 A licensee shall inform parents/guardians of animals or pets kept by the home.
- 48.6 Children may handle animals only with adult supervision.

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#### **49.0 Water**

A licensee shall ensure drinking water is always available to children indoors and outdoors and supplied to them on their request or available for self-service as appropriate.

#### **50.0 Meals and Snacks**

- 50.1 A licensee shall ensure meals and snacks are served on the following schedule depending on the number of hours the child is present:
  - 50.1.1 2 hours - 4 hours: 1 snack;
  - 50.1.2 4 hours - 6 hours: 1 meal and 1 snack;
  - 50.1.3 7 hours - 11 hours: 2 meals and 1 snack or 2 snacks and 1 meal based on time of child's arrival; and
  - 50.1.4 12 hours or more: 3 meals and 2 snacks.
- 50.2 A licensee shall encourage adults to eat healthy foods when eating with children. A child shall be encouraged but not forced to eat.
- 50.3 A licensee shall ensure nutritious food is prepared and served to children. Children must be supervised during food preparation.
- 50.4 A licensee shall ensure meals and snacks provided by the child care home:
  - 50.4.1 Follow the meal pattern requirements (see Appendix X and Appendix XI) appropriate to the child's age;
  - 50.4.2 May include 100% unsweetened juice, not a juice drink or cocktail;
  - 50.4.3 May include powdered milk used only for cooking and not instead of liquid milk for drinking; and
  - 50.4.4 Are planned on a menu, dated, and posted in a noticeable place.
    - 50.4.4.1 Menus listing foods served must be kept for 30 days.
    - 50.4.4.2 Changes to the food served on a certain date must be written on the menu on or before that date.
- 50.5 A licensee shall ensure when a parent/guardian requests a change of meal patterns due to a medical need, such as food intolerance or allergies, the parent/guardian provides the home with written health care provider permission for the change.
- 50.6 A licensee shall ensure when a parent/guardian requests a change of meal patterns due to a family's food preferences or religious belief, the parent/guardian provides the home with a list of the foods to remove and the foods to substitute.
- 50.7 Meal Components for Toddlers and Older Children:
  - 50.7.1 When foods are provided by the parent/guardian, a licensee shall ensure the foods are refrigerated as needed and not shared. There are no meal pattern requirements for foods provided by parents/guardians. A licensee shall have a plan for providing food to a child who has not brought foods to eat.

- 50.7.2 As described in Appendix X, a licensee shall ensure a breakfast provided and served by a home has at least one age-appropriate serving-size item each from the milk, fruit and vegetable, and grain food groups.
- 50.7.3 As described in Appendix X, a licensee shall ensure lunch or dinner provided and served by a home has one age-appropriate serving-size item from each of the milk, meat or meat alternate, and grain food groups and two items from the fruit and vegetable food group.
- 50.7.4 As described in Appendix X, a licensee shall ensure that a snack provided and served by a home has at least one age-appropriate serving-size item from two of the food groups. If milk or 100% juice is not included with a snack provided and served by the home, water must be served with that snack.
- 50.8 For foods prepared and served by the home, a licensee shall introduce a variety of food textures, finger foods, and a cup and utensils for self-feeding. If needed, a licensee shall ensure food is cut to prevent choking.
- 50.9 A licensee shall ensure each child has individual utensils, such as a fork, spoon, knife, dish, cup or bottle, as appropriate to the child's age. This equipment may not be shared with another child or adult during feeding.
- 50.10 All single-service dinnerware or utensils provided by the home for meals or snacks must be thrown away immediately after use.
- 50.11 Staff members shall encourage the use of a cup when a child is at least one year old and is developmentally able to drink from or hold a cup.

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**51.0 Feeding of Infants**

- 51.1 A licensee shall ensure an infant is given foods and drinks on demand or according to the infant's eating habits using the following guidelines:
  - 51.1.1 A parent/guardian provides a written feeding statement listing the foods and drinks, including specific formula or breast milk, an infant eats or drinks. This schedule must be updated monthly and as needed;
  - 51.1.2 Mixing prepared formula or breast milk in a bottle with anything else requires written permission from an infant's health care provider;
  - 51.1.3 A written record of each infant's food intake must be shared with the parent/guardian daily. Feeding problems must be discussed with the parent/guardian before the infant leaves that day;
  - 51.1.4 An infant must be held for bottle-feeding. When an infant is able to hold a bottle or does not want to be held while fed, the infant may be placed in a high chair or at a feeding table; and
  - 51.1.5 Introduction to all new foods and beverages must be made only with the parent/guardian's permission.
- 51.2 Infants are allowed to take breaks during feedings. Infants must be observed for signs of fullness and must be allowed to stop a feeding when full unless documentation from an infant's health care provider requires the feeding to continue;
- 51.3 Parent/guardian permission is needed to feed formula to an infant receiving only breast milk;
- 51.4 A staff member shall hold only one infant at a time while bottle feeding;
- 51.5 An infant must never be placed in sleeping or relaxing equipment with a bottle or have a bottle propped for feeding;
- 51.6 Bottles and infant foods must be warmed for no more than five minutes under running warm tap water or by placing them in a container of water that is no warmer than 120° F. They must not be warmed or thawed in a microwave oven;
- 51.7 For infants age four months or older, semi-solid foods may be fed as requested by the parent/guardian and must be required once an infant is eight months old unless the parent/guardian provides documentation from the infant's health care provider stating otherwise;
- 51.8 Foods for infants must be a texture and consistency that helps them eat safely. Puréed foods must be served from a dish unless serving the entire contents of the jar;
- 51.9 Cow's milk may not be served to infants;
- 51.10 Juice may not be fed to infants;
- 51.11 Bottles and nipples kept by the home must be washed and sanitized before each use;
- 51.12 When there is more than one infant in care, each infant's bottle must be labeled with the infant's name. All bottles must be refrigerated immediately after preparation or on arrival if prepared by a parent/guardian;

- 51.13 Unused bottles must also be dated as to when prepared if not returned to the parent/guardian at the end of each day;
- 51.14 Unused portions of formula must be thrown away after each feeding that exceeds one hour;
- 51.15 Formula must be prepared from a factory-sealed container;
- 51.16 Refrigerated, unused, prepared formula must be thrown away after 48 hours; and
- 51.17 Breast milk must be fed only to the infant it was intended for.
  - 51.17.1 Frozen breast milk must be thawed under running cold water or in the refrigerator and used within 24 hours.
  - 51.17.2 Expressed breast milk must be returned to the parent if it is in an unsanitary bottle, partially used, or if it has been unrefrigerated for more than four hours at room temperature.
  - 51.17.3 Refrigerated, unused, expressed breast milk that was never frozen must be returned to the parent after 48 hours.
  - 51.17.4 Breast milk that was frozen and stored in a freezer at 0° F must be thrown away after six months.
- 51.18 As described in Appendix XI, a licensee shall ensure a breakfast provided and served by a home has at least one age-appropriate serving-size item from each of the required food groups including breast milk or formula.
- 51.19 As described in Appendix XI, a licensee shall ensure lunch or dinner provided and served by a home has one age-appropriate serving-size item from each of the required food groups including breast milk or formula.
- 51.20 As described in Appendix XI, a licensee shall ensure that a snack provided and served by a home has at least one age-appropriate serving-size item from each of the required food groups, including the breast milk or formula, grain, and fruit and vegetable food groups.

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**52.0 Activities and Interactions**

- 52.1 A licensee shall interact with children at their eye level and sit on the floor with them whenever appropriate. A licensee shall offer age-appropriate activities to children throughout the day to help their development and school-readiness.
- 52.2 A licensee shall provide activities and materials that reflect children's cultures and communities, including both familiar and new materials, pictures, and experiences.
- 52.3 A licensee shall have and follow a schedule that is posted for easy viewing by parents/guardians and staff members. The schedule must list times for the following activities: learning opportunities, active or outdoor play, rest, meals, and snacks. This schedule may be flexible to meet the needs and interests of the children.
- 52.4 A licensee shall ensure activities and materials are adapted to support all children's learning, including a child with disabilities or other special needs, to benefit from the program.
  - 52.4.1 A licensee shall allow services to be provided at the home for a child with an IEP, IFSP, or Section 504 plan.
  - 52.4.2 At the request of a parent/guardian, a licensee shall permit qualified professionals to complete an observation or assessment of the child while at the home.
- 52.5 Weather permitting, a licensee shall ensure daily outdoor play is provided for infants, toddlers, and older children when the wind chill factor is 32° F or higher or the heat index is 89° F or lower.
  - 52.5.1 Outdoor play during periods outside this temperature range may be determined by the licensee.
  - 52.5.2 Children must be appropriately dressed for the weather.
  - 52.5.3 A licensee shall ensure the guidelines of the National Weather Service (currently [www.weather.gov](http://www.weather.gov)) are followed if an advisory regarding health or safety risks has been issued.
  - 52.5.4 For infants, this may include riding in a stroller or carriage, but must also include opportunities for gross motor development. This may occur on a blanket or other hazard-free space.
- 52.6 A licensee shall provide chances for physical activity for each child according to the child's ability. For every four hours the child is in care between 7AM and 7PM, 30 or more minutes of physical activity must be provided. Daily active play may be divided into one or more blocks of time. It may be indoors or outdoors.
- 52.7 A licensee and staff members shall interact with each child, giving attention and physical comfort.
- 52.8 A licensee shall ensure children are not in cribs, pack-and-plays, swings, high chairs, seats, or stationary activity centers for more than 30 minutes at a time while awake. Toddlers and infants, as appropriate, must be

provided with an activity during this time. After removing the child from the equipment, the child must be able to move freely on the floor.

- 52.9 A licensee shall offer activities that meet the needs and interests of school-age children by providing age-appropriate activities, materials, and equipment. These activities must include the following:
  - 52.9.1 Active physical play, such as games, sports, dancing, running, jumping, climbing, or exploring the environment;
  - 52.9.2 Outdoor activities or active indoor play in bad weather;
  - 52.9.3 Time to talk and interact with others; and
  - 52.9.4 Time to relax or quiet activities such as board or card games, reading, homework, and studying.
- 52.10 A licensee shall ensure activities, such as watching television or using a gaming device, tablet, phone, or computer, are supervised, age-appropriate, and educational. These screen time activities require written parent/guardian permission and are limited to one hour or less per day, unless a special event occurs. Assistive technology is not included in screen time restrictions.

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**53.0 Overnight Child Care**

- 53.1 A licensee providing overnight care shall ensure children are supervised at all times.
- 53.2 A licensee shall provide a program of activities for children before bedtime.
- 53.3 A licensee shall meet a child's needs for attention at bedtime and upon waking. A licensee shall discuss with the parent/guardian any special preferences or habits regarding bedtime and waking and share this information with the staff member, if applicable, in charge of the child.
- 53.4 A licensee shall separate sleeping children from children who are awake.
- 53.5 A licensee shall ensure school-age children do not share a dressing area with people of the opposite sex.
- 53.6 For children sleeping four or more hours at the home between the hours of 10:00 PM and 6:00 AM, the licensee shall provide the following:
  - 53.6.1 A crib, playpen, or pack-and-play for each infant;
  - 53.6.2 A child under 18 months old who does not walk must sleep in a crib, playpen, or pack-and-play;
  - 53.6.3 A child between 12 and 18 months old who walks may sleep on a bed with safety rails with written parent/guardian permission;
  - 53.6.4 Children 18 months old and older may sleep in a crib, playpen, or pack-and-play if the child fits comfortably or in an individual bed with a mattress that is covered with sheets and a blanket; and
  - 53.6.5 A pillow with a pillowcase for each child in a bed.
- 53.7 A licensee shall ensure each child has clean and comfortable clothes to sleep in.
- 53.8 A licensee shall follow the parents/guardian's wishes regarding bathing the child and note this request in the child's record.
  - 53.8.1 Each child must be bathed individually.
    - 53.8.1.1 Bathing equipment must be cleaned with soap and water and then sanitized before each use and equipped to prevent slipping.
    - 53.8.1.2 An infant must be bathed in age-appropriate bathing equipment.
    - 53.8.1.3 No child may be bathed in a sink used for cleaning dishes or utensils.
  - 53.8.2 Water temperature must be checked to prevent burns or scalding, or for water that is too cold.
  - 53.8.3 Individual towels and washcloths must be provided for each child.
- 53.9 A licensee shall ensure no child is unsupervised while in a bathtub or shower. A licensee shall allow a child capable of bathing alone to bathe in private with written parent/guardian permission. A licensee or staff member, if applicable, shall respect that child's privacy but be immediately available to ensure the child's safety and to offer help if requested.
- 53.10 A licensee shall ensure there is a night light in the bathroom, hallway, and sleep areas based on the individual needs of the children.
- 53.11 A licensee shall ensure combs, toothbrushes, brushes, and other such personal items are labeled with the child's name, stored separately, and used only by that child.



## PART IV ADDITIONAL PROVISIONS FOR FAMILY CHILD CARE HOMES

### 54.0 Care of Children

- 54.1 There is a maximum number of consecutive hours of care a licensee may provide. A licensee shall care for children no more than 17 hours within a day, with at least seven uninterrupted hours of rest. No other work may occur during the hours of rest.
- 54.2 A licensee shall be present and providing child care at all times except during the limited use of a substitute.

### 55.0 Qualifications

- 55.1 A licensee shall submit copies of training certificates, transcripts, and diplomas to OCCL as proof of meeting the qualifications for a particular level.
- 55.2 For programs licensed after January 1, 2009, a family provider shall be at least 18 years old and have at least a high school diploma or its equivalent to qualify as a Level I family home.
- 55.3 A licensee shall request approval from OCCL to move from a Level I to a Level II family home. A licensee may not operate a Level II family home until receiving written approval from OCCL.
- 55.4 A family provider shall have the following experience to qualify as a Level II:
  - 55.4.1 Twenty-four months of experience working with children; or
  - 55.4.2 Three months of supervised student teaching; or
  - 55.4.3 Twenty-four months of providing child care as a licensed Level I family home with no substantiated complaints for serious health and safety violations, or substantial non-compliance.
- 55.5 A family provider shall be at least 18 years old and have at least a high school diploma or its equivalent, and successfully complete one of the following to qualify as a Level II:
  - 55.5.1 Sixty clock hours of training with at least three clock hours in each of the following areas: child development; developmental curriculum planning/environment and curriculum; observation and assessment; positive behavior management/social-emotional development; health, safety, physical activity, and nutrition; family and community; professionalism; and management and administration related to running a child care; or
  - 55.5.2 Three college/university credits from a regionally approved college or university in courses related to any of the following areas: child development; developmental curriculum planning/environment and curriculum; observation and assessment; positive behavior management/social-emotional development; health, safety, physical activity, and nutrition; family and community; professionalism; and management and administration related to running a child care; or
  - 55.5.3 Qualified as at least an early childhood assistant teacher as per DELACARE: Regulations for Early Care and Education and School-Age Centers (2020).

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### 56.0 Training

- 56.1 A licensee and substitute used for planned, non-emergency situations as stated in Section 15.0 shall complete certifications in first aid and in CPR. The CPR certification must include a skills demonstration and be appropriate to the ages of the children in care. Certifications must be kept current.
- 56.2 A family provider shall successfully complete at least 12 clock hours of annual training including one hour of health or safety training as accepted by OCCL.
  - 56.2.1 Annual training must be in at least three of the following areas: child development; developmental curriculum planning/environment and curriculum; observation and assessment; positive behavior management/social-emotional development; health, safety, physical activity, and nutrition; family and community; professionalism; and management and administration related to running a child care facility.
  - 56.2.2 Annual training may be within one or two areas if a college/university course was successfully completed or a training was six or more clock hours in length.
- 56.3 A family provider shall complete annual training during the dates that appear on the annual license.

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## **57.0 Capacity**

- 57.1 A Level I family home is licensed to provide child care for up to four children preschool-age or younger and for up to two additional school-age children that do not live in the family home and attend only before school, after school, during school holidays, and during school vacation;
- 57.1.1 No more than two of the six children may be under the age of 12 months; and
- 57.1.2 No more than six children may be present at any time. School-age children may fill preschool-age or younger children's spaces.
- 57.2 Another option for a Level I family home is to provide child care for up to five children preschool-age and younger and no additional school-age children that do not live in the family home;
- 57.2.1 No more than two of the five children may be under the age of 12 months; and
- 57.2.2 No more than three of the five children may be under the age of 24 months.
- 57.3 A Level II family home is licensed to provide child care for up to six children preschool-age or younger and for up to three additional school-age children who do not live in the family home and attend only before school, after school, during school holidays, and during school vacation;
- 57.3.1 No more than two of the nine children may be under the age of 12 months; and
- 57.3.2 No more than four of the nine children may be under the age of 24 months; and
- 57.3.3 No more than nine children may be present at any time. School-age children may fill preschool-age or younger children's spaces.

## **58.0 Indoor Space**

- 58.1 For the family home licensed before January 1, 2009, a licensee shall ensure the family home provides each child with space for movement and active play. If the home moves from Level I to Level II, a licensee shall provide 25 square feet of indoor space for each child in care in one area, room, or adjoining rooms.
- 58.2 For the family home licensed after January 1, 2009, a licensee shall provide 25 square feet of indoor space for each child in care in one area, room, or adjoining rooms. Measurements will be from wall to wall with the licensing specialist subtracting areas where furniture restricts children's movement to determine the square footage. OCCL will not count bathrooms, storage spaces, hallways, furnace rooms, and other areas not used by children in the square footage.

## **59.0 Outdoor Fencing**

- 59.1 A licensee shall ensure the outdoor play area of the family home is fenced if hazards are near. Such hazards include, but are not limited to, high traffic roads, water in streams, rivers, ponds, lakes, pools, railroads, steep mounds or drop-offs, and high voltage wires or poles/towers.
- 59.1.1 Fencing must be sturdy, safe, reinforced at intervals to give support, constructed to discourage climbing, and allow for viewing the children by the licensee or substitute.
- 59.1.2 Fencing must be at least four feet in height with openings no larger than 3½ inches.
- 59.1.3 Gates must have a self-closing and self-latching closure device. The latch or closure device must be high enough or made so small children cannot open it. When opened, a licensee shall ensure the gate moves freely and is not hindered by scraping the ground.
- 59.1.4 Fenced areas must have at least two exits. At least one exit must be away from the building.
- 24 DE Reg. 272 (09/01/20)**

# **PART V ADDITIONAL PROVISIONS FOR LARGE FAMILY CHILD CARE HOMES**

## **60.0 Insurance**

The applicant shall show proof of property and comprehensive general liability insurance. This insurance must specifically cover the large family home business. A licensee shall keep proof of current insurance throughout licensure.

## **61.0 General and Fire Safety**

- 61.1 A licensee shall ensure a large family home is constructed, used, furnished, maintained, and equipped in compliance with all applicable requirements established by federal, State, local, and municipal regulatory bodies.
- 61.2 A licensee shall have written compliance certification from appropriate regulatory bodies governing zoning, building construction, and fire safety.
  - 61.2.1 The designated fire marshal shall conduct a fire inspection annually.
  - 61.2.2 A licensee or staff member shall conduct monthly fire prevention inspections. A licensee or staff member shall post a copy of the latest inspection report in a visible place at the large family home.
- 61.3 A licensee shall ensure the large family home is free of unacceptable exposure to hazardous materials.
- 61.4 Large family homes located in a commercially zoned building that previously contained or currently contains a dry cleaner, nail salon, or any other use that may result in an unacceptable indoor air quality, will not be licensed or have a license renewed, unless the applicant/licensee obtains indoor air sampling as required per 7 **DE Admin. Code** 1375 that shows there is no impact to the home.

## **62.0 Kitchen**

- 62.1 A licensee shall ensure the large family home has at least one separate sink used only for hand washing in the kitchen where food is prepared.
- 62.2 A licensee shall ensure in addition to the hand-washing sink listed in the above regulation, the large family home also has one of the following options:
  - 62.2.1 Two-compartment sink and sanitizing basin in the kitchen; or
  - 62.2.2 One other sink and a dishwasher.
- 62.3 A licensee shall ensure the large family home has an oven or microwave and a range or cooktop.
- 62.4 A licensee shall ensure the large family home kitchen has either a window that opens or an exhaust fan for the removal of smoke and odors.
- 62.5 A large family home is exempt from Section 62.0 when parents/guardians provide the food for meals and snacks or a licensee uses a caterer. The caterer's food establishment permit must be submitted to OCCL before the catering service begins. No food preparation may occur on-site when the large family home's kitchen does not meet the requirements in Section 62.0.

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## **63.0 Indoor Space**

- 63.1 A licensee shall ensure the large family home has 35 square feet of indoor space for each child that allows for movement and active play.
  - 63.1.1 Measurements will be from wall to wall with the licensing specialist subtracting areas where the furniture restricts children's movement to determine square footage.
  - 63.1.2 OCCL will not count bathrooms, kitchen areas, storage spaces, hallways, furnace rooms, and other areas not used by children in the square footage.

## **64.0 Outdoor Fencing and Space**

- 64.1 A licensee shall ensure the outdoor play area of the large family home is fenced.
- 64.2 Fencing must be sturdy, safe, reinforced at intervals to give support, constructed to discourage climbing, and allow for viewing the children by staff members.
- 64.3 Fencing must be at least four feet in height with openings no larger than 3½ inches.
- 64.4 Gates must have a self-closing and self-latching closure device. The latch or closure device must be high enough or made so small children cannot open it. When opened, a licensee shall ensure the gate moves freely and is not hindered by scraping the ground.
- 64.5 The fenced area must have at least two exits. At least one exit must be away from the building.

64.6 The outdoor play area must provide 50 square feet of play space for each child for the maximum number of children who will use the playground at one time.

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**65.0 Personnel Policies**

- 65.1 A licensee shall have written personnel policies and procedures available to staff members. These policies must include, as appropriate, procedures for hiring, discipline, dismissal, suspension, and lay-off of the staff member according to applicable laws. A statement signed by the staff member on the orientation form must confirm the review of these personnel policies and procedures and that the staff member was able to ask questions and receive clarification.
- 65.2 A licensee shall develop, follow, and keep on file written policies and procedures that comply with applicable laws for handling suspected child abuse or neglect that occurs while a child is in or out of the large family home's care.
- 65.3 A licensee shall ensure no one abuses or neglects children.
- 65.4 A licensee shall take corrective action to remove the conditions that may have caused or otherwise resulted in a risk of abuse or neglect to children, if the abuse or neglect happened at the home by a staff member.
- 65.5 A licensee shall ensure a licensee or staff member accused of child abuse or neglect is prohibited from working with children until the results of an investigation are completed and OCCL clears the individual to work with children.

**66.0 Qualifications**

- 66.1 A licensee and each staff member shall submit copies of training certificates, transcripts, and diplomas to OCCL as proof of meeting the qualifications of a particular position.
- 66.2 The owner (now licensee), caregiver (now large family provider), or associate caregiver (now large family assistant) of a large family home that was licensed before January 1, 2009, may continue to qualify for the former positions as stated in DELACARE: Requirements for Large Family Child Care Homes (1994) only if remaining at the same large family home. Staff members hired after January 1, 2009, are required to meet the qualifications of these regulations for those positions.
- 66.3 A licensee shall be considered a staff member if present at the large family home during the hours of operation for seven or more hours per week. A licensee is required to follow all regulations regarding a staff member.
- 66.4 A licensee shall serve as or hire a person to serve as the large family provider at the large family home. A licensee shall ensure the large family provider is at least 21 years old, has 24 months of experience working with children in a group, has a high school diploma or its equivalent, and has successfully completed one of the following:
  - 66.4.1 Training for Early Care and Education 1 and 2 or equivalent training as recognized by OCCL, such as within the Council for Professional Recognition's CDA Gold Standard<sup>SM</sup> Comprehensive certification;
  - 66.4.2 A Child Development Associate Credential (CDA) that is kept valid/current;
  - 66.4.3 Delaware Department of Labor's Early Childhood Apprenticeship Program;
  - 66.4.4 A high school diploma from a vocational/technical high school's three-year program in early childhood education accepted by the department;
  - 66.4.5 Nine college/university credits, including three in early childhood education, three in child development, and three in positive behavior management;
  - 66.4.6 One-year early childhood diploma program from a two-year college;
  - 66.4.7 An Associate degree from an accredited college or university and six college/university credits of child development or early childhood education; or
  - 66.4.8 Qualified as at least an early childhood teacher as per DELACARE: Regulations for Early Care and Education and School-Age Centers (2019).
- 66.5 A licensee shall ensure the large family assistant is at least 18 years old, has six months of experience working with children in a group, has a high school diploma or its equivalent, and has successfully completed one of the following:

- 66.5.1 Sixty clock hours of training with a minimum of three clock hours in each of the following areas: child development; developmental curriculum planning/environment and curriculum; observation and assessment; positive behavior management/social-emotional development; health, safety, physical activity, and nutrition; family and community; and professionalism; or
  - 66.5.2 Three college/university credits from a regionally accredited college or university in courses related to any of the following areas: child development; developmental curriculum planning/environment and curriculum; observation and assessment; positive behavior management/social-emotional development; health, safety, physical activity, and nutrition; family and community; professionalism, and management and administration related to operating a child care facility; or
  - 66.5.3 Qualified as at least an early childhood assistant teacher as per DELACARE: Regulations for Early Care and Education and School-Age Centers (2019).
- 66.6 A licensee shall ensure that the large family aide is at least 18 years old and has a high school diploma or its equivalent. Unless trained in the orientation topics, administration of medication, and CPR and first aid, the large family aide shall remain under the direct supervision of the large family provider, large family assistant, or substitute at all times.
- 66.7 A licensee shall ensure an adult or youth volunteer is always under the supervision of the large family provider and direct supervision of at least the large family assistant.

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## **67.0 Staffing**

- 67.1 A licensee shall ensure the large family home has at least one staff member qualified as a large family provider.
- 67.2 A licensee shall ensure the large family home has at least one staff member qualified as a large family assistant or large family aide unless operating as a Level II family child care home.
- 67.3 A licensee shall ensure the large family provider is present and providing child care at the large family home at least 75% of the hours of operation.
- 67.4 A licensee shall keep a written record of the daily schedule of staff members including their exact hours worked each day. A licensee shall keep this record for at least three months.
- 67.5 A licensee shall ensure every infant has an identified staff member who has the primary, but not the only, responsibility for feeding, comforting, and otherwise caring for the infant's needs.

## **68.0 Capacity and Staff/Child Ratios**

- 68.1 A licensee's own household members do not count in the capacity when care is provided at a commercial location unless the child is present.
- 68.2 OCCL shall license a large family home to provide care for up to 12 children.
- 68.3 A licensee shall ensure a large family provider or large family assistant in accordance with subsection 67.3 may alone care for six children preschool-age or younger and three additional school-age children who do not live in the large family home and attend only for before school, after school, during school holidays, and during school vacation:
  - 68.3.1 No more than two of the nine children are under the age of 12 months; and
  - 68.3.2 No more than four of the nine children are under the age of 24 months; and
  - 68.3.3 No more than nine children may be present at any time. School-age children may fill preschool-age or younger children's spaces.
- 68.4 A licensee shall ensure a large family provider and large family assistant or large family aide are present when there are seven or more preschool-age or younger children present.
  - 68.4.1 No more than four of the 12 children are under the age of 12 months; and
  - 68.4.2 No more than six of the 12 children are under the age of 24 months; and
  - 68.4.3 No more than 12 children may be present at any time. School-age children may fill preschool-age or younger children's spaces.
- 68.5 A licensee shall ensure a large family provider and two additional staff members are present when:

- 68.5.1 Five or six children 12 months or younger are present; no more than six children under the age of 12 months may be present at any time; or
- 68.5.2 Seven or more children under the age of 24 months are present; and
- 68.5.3 No more than 12 children may be present at any time. School-age children may fill preschool-age or younger children's spaces.

## **69.0 Personnel Files**

- 69.1 A licensee shall have a personnel file for each staff member. This file must be available upon request for three months after employment ends. Except as noted, all file contents are required at the start of employment and must include the following:
  - 69.1.1 Personal data sheet, completed application, or résumé containing the staff member's name, date of birth, home address, and phone number;
  - 69.1.2 Work start date, and end date, if applicable;
  - 69.1.3 Two references from adults not related to the person who can verify the person is of good character and can meet the needs of children. These references may be letters or written notes gathered by calling the reference. Phone references require the reference's name, phone number, date called, information about the staff member's character and if the reference has knowledge about how the person works with children, and the name of person receiving the reference;
  - 69.1.4 Release of employment history form and received Service Letters, or documentation showing two requests and follow-up for Service Letters has been made. If the person has not worked or if unable to get at least one completed Service Letter, two additional reference letters or phone references are required;
  - 69.1.5 Proof of qualifications, if applicable;
  - 69.1.6 Health appraisal on file within the first month of employment, conducted within one year before the start date. This appraisal must confirm the person's health and document medical or physical conditions that pose a direct threat to the health and safety of children or others. This documentation shall be provided to OCCL for the purposes of determining whether the health condition creates a significant risk to children. Written evidence of follow-up of any known health condition of the staff member affecting or potentially affecting the staff member's ability to care for children is required to be on file before the staff member returns to work;
  - 69.1.7 TB test or medical professional risk assessment that verifies the person does not pose a threat of transmitting tuberculosis to children or other staff on file within the first month of employment, conducted within one year before the start date;
  - 69.1.8 A statement signed by the staff member stating the staff member's status regarding all previous convictions, current indictment or involvement in criminal activity involving violence against a person; child abuse or neglect; possession, sale or distribution of illegal drugs; sexual offense; gross irresponsibility or disregard for the safety of others; serious violations of accepted standards of honesty or ethical behavior; or a case of child abuse or neglect substantiated by the division or the respective responsible entity in another state or country;
  - 69.1.9 Fingerprinting receipt before starting employment;
  - 69.1.10 Comprehensive background check results;
  - 69.1.11 Adult abuse registry check;
  - 69.1.12 Documentation acknowledging the person is aware that the use of alcohol or a drug that could negatively affect essential job functions, or unlawful possession, manufacture, or distribution of alcohol or drugs, or possession while working of a controlled substance other than by the person for whom it was prescribed is prohibited in the large family home;
  - 69.1.13 Documentation informing the person of the child abuse and neglect mandated reporting law and reporting procedures;
  - 69.1.14 If transporting children, a copy of the current driver's license;
  - 69.1.15 Copy of job description;
  - 69.1.16 Orientation form that includes documentation of training in the following topics before working with children, except as noted:

- 69.1.16.1 DELACARE Regulations;
  - 69.1.16.2 Policies and procedures of the home;
  - 69.1.16.3 Emergency preparedness and disaster and evacuation plans;
  - 69.1.16.4 Safe sleep practices including prevention of sudden infant death syndrome, if the home serves infants;
  - 69.1.16.5 Prevention of shaken baby syndrome and abusive head trauma, if the home serves infants;
  - 69.1.16.6 Prevention of and response to food allergies;
  - 69.1.16.7 Prevention and control of infectious diseases, including immunization;
  - 69.1.16.8 Building and physical grounds safety;
  - 69.1.16.9 Storage of hazardous materials and biocontaminants;
  - 69.1.16.10 Recognition of the symptoms of child abuse and neglect;
  - 69.1.16.11 Child abuse and neglect laws and reporting requirements (certificate required);
  - 69.1.16.12 Administration of medication, within two months of hire;
  - 69.1.16.13 Safety measures in transporting children, if applicable;
  - 69.1.17 Administration of medication certificate and record of annual training hours, if applicable; and
  - 69.1.18 Current first aid and CPR certifications within two months of hire.
- 24 DE Reg. 272 (09/01/20)**  
**24 DE Reg. 677 (01/01/21)**

## **70.0 Training**

- 70.1 A licensee shall ensure that within two months of hire, staff members and the non-emergency substitute have certifications in first aid and CPR. The CPR certification must include a skills demonstration and be appropriate to the ages of the children in care. A licensee shall ensure certifications are current. The large family provider must have these certifications to open a large family home.
- 70.2 A licensee, present at the large family home for seven hours or more per week, large family provider, large family assistant, and large family aide shall successfully complete 15 clock hours of annual training including one hour of health or safety training as accepted by OCCL. Annual training must be completed during the dates that appear on the license.
  - 70.2.1 Annual training must be within three of the following areas: child development; developmental curriculum planning/environment and curriculum; observation and assessment; positive behavior management/social-emotional development; health, safety, physical activity, and nutrition; family and community; professionalism; and management and administration related to operating a child care facility.
  - 70.2.2 Annual training may be within one or two areas, if a licensee or staff member completes a college/university course or if the training is six or more hours in length.

## **APPENDICES**

### **APPENDIX I**

#### **[FCCH Initial License Application](http://regulations.delaware.gov/AdminCode/title14/900/Appendix I FCCH Initial License Application.pdf)**

**<http://regulations.delaware.gov/AdminCode/title14/900/Appendix I FCCH Initial License Application.pdf>**

### **APPENDIX II**

#### **[LFCCH Initial License Application](http://regulations.delaware.gov/AdminCode/title14/900/Appendix II LFCCH Initial License Application.pdf)**

**<http://regulations.delaware.gov/AdminCode/title14/900/Appendix II LFCCH Initial License Application.pdf>**

### **APPENDIX III**

#### **[FCCH Renewal License Application](http://regulations.delaware.gov/AdminCode/title14/900/Appendix III FCCH Renewal License Application.pdf)**

**<http://regulations.delaware.gov/AdminCode/title14/900/Appendix III FCCH Renewal License Application.pdf>**

### **APPENDIX IV**

#### **[LFCCH Renewal License Application](http://regulations.delaware.gov/AdminCode/title14/900/Appendix IV LFCCH Renewal License Application.pdf)**

**<http://regulations.delaware.gov/AdminCode/title14/900/Appendix IV LFCCH Renewal License Application.pdf>**

**APPENDIX V**

**FCCH Relocation License Application**

<http://regulations.delaware.gov/AdminCode/title14/900/Appendix V FCCH Relocation License Application.pdf>

**APPENDIX VI**

**LFCCH Relocation License Application**

<http://regulations.delaware.gov/AdminCode/title14/900/Appendix VI LFCCH Relocation License Application.pdf>

**APPENDIX VII**

**Variance Request**

<http://regulations.delaware.gov/AdminCode/title14/900/Appendix VII Variance Request.pdf>

**APPENDIX VIII**

**Immunizations**

<http://regulations.delaware.gov/AdminCode/title14/900/Appendix VIII Immunizations.pdf>

**APPENDIX IX**

**Administration of Medication Self-Training Guide**

<http://regulations.delaware.gov/AdminCode/title14/900/Appendix IX Administration of Medication Self-Training Guide.pdf>

**APPENDIX X**

**Child Meal Patterns**

<http://regulations.delaware.gov/AdminCode/title14/900/Appendix X Child Meal Patterns.pdf>

**APPENDIX XI**

**Infant Meal Patterns**

<http://regulations.delaware.gov/AdminCode/title14/900/Appendix XI Infant Meal Patterns.pdf>

10 DE Reg. 1044 (12/01/06)

18 DE Reg. 974 (06/01/15)

22 DE Reg. 865 (04/01/19)

24 DE Reg. 272 (09/01/20)

24 DE Reg. 677 (01/01/21)

25 DE Reg. 239 (09/01/21) (Emer.)