

# Family Day Care Home and Large Family Child Care Home Handbook

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October 2021

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*This handbook is intended to be used in conjunction with Sections 402.26-402.319, Florida Statutes, and incorporated by reference in rule 65C-20.008, Florida Administrative Code.*

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# 1 General Information

To protect the health and welfare of children, it is the intent of the Legislature to develop a regulatory framework that promotes the growth and stability of the child care industry and facilitates the safe physical, intellectual, motor, and social development of the child. To that end, the Child Care Regulation Program is responsible for regulating programs that provide services that meet the statutory definition of “child care.” This is accomplished through the inspection of licensed child care programs to ensure the consistent statewide application of child care standards established in statute and rule, and the registration of child care providers not subject to inspection.

The Department regulates licensed child care facilities, licensed family day care homes, licensed large family child care homes, and licensed mildly ill facilities in 62 of the 67 counties in Florida. Five counties have decided - either by statute or by the adoption of a local ordinance or resolution - to designate a local licensing authority to regulate child care providers in their areas. The following counties have elected to exercise this option: Broward, Hillsborough, Palm Beach, Pinellas and Sarasota.

Local licensing agencies may use the same or different procedures to implement local licensing standards, which must have been determined by the state to meet or exceed the state’s minimum licensing standards. Three of the five local licensing agencies have designated the local county health department as the licensing authority. Broward and Hillsborough counties have designated other agencies as the local licensing authority.

All sections of the handbook are requirements for family day care homes and large family child care homes. Where there are specific requirements outlined under a Large Family Child Care heading, those requirements are specific to programs operating as a large family child care home only.

## 1.1 Child Care Programs Subject to Regulation

“Child care” is defined as “the care, protection, and supervision of a child, for a period of less than 24 hours a day on a regular basis, which supplements parental care, enrichment, and health supervision for the child, in accordance with his or her individual needs, and for which a payment, fee, or grant is made for care.” If a child care program meets this statutory definition of “child care,” it is subject to regulation by the Department/local licensing agencies, unless specifically excluded or exempted from regulation by statute.

Every program determined to be subject to licensing must meet the applicable licensing standards established by subsection 402.301-.319, Florida Statutes, and rules.

## 1.2 Definitions

**“Active”** is the status of a candidate’s awarded credential or certification which demonstrates that the credential requirements have been successfully met.

**“Age appropriate”** means of the right size, child sized, or adapted so that a child can use safely, and suitable to the chronological age range and developmental characteristics of a specific age group of children or child. This means the materials/equipment should interest and challenge children in terms of their age and abilities. Any materials/equipment with a specified age range by the manufacturer must be followed when being used by children.

**“Begin training”** refers to a candidate’s commencement of at least one of the child care training courses listed in section 402.305(2)(d)1, F.S. This may be accomplished by classroom attendance in a Department-approved training course, acquiring an

educational exemption from a Department-approved training course, beginning a Department-approved online child care training course, or by receiving results from a Department-approved competency examination within the first 90 days of employment in the child care industry in any licensed Florida family day care home or large family child care home. The large family child care home is responsible for obtaining documentation from child care personnel.

**“Birth Through Five Child Care Credential”** is equivalent to a child development associate credential, pursuant to 402.305(3)(a), F.S. and offered through one of the following programs: Florida Child Care Professional Credential (FCCPC), Florida Department of Education Child Care Apprenticeship Certificate (CCAC), and Florida Department of Education Early Childhood Professional Certificate (ECPC). Issuance of a Birth Through Five Child Care Credential certifies successful completion of a Department-approved training program that consists of a minimum of 120 hours of early childhood instruction, 480 contact hours with children ages birth through eight years, and a formal observation. Credentials must be documented on CF-FSP Form 5270, Florida Child Care Professional Credential Certificate, which is incorporated by reference in 65C-22.001(7)(j), F.A.C. A copy of CF-FSP 5270 may be obtained from the Department’s website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare). Active credentials are valid for five years from the date of issuance. A list of approved and recognized Birth Through Five Child Care Credential programs may be obtained from the Department’s website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).

**“College Degree”** means a degree obtained from an institution accredited by an agency that is recognized as an accrediting agency by the U.S. Department of Education. If a college degree is earned outside the U.S., it must be evaluated by a credential evaluation agency approved by the Bureau of Educators Certification or an accredited college/university and determined to be equivalent to a U.S. degree.

**“Continuing Education Unit (CEU)”** is a standard unit of measure of coursework used for training and credentialing purposes. The Department will accept CEUs for training offered by the Department, Office of Early Learning, from educational institutions accredited and recognized by the U.S. Department of Education, organizations accredited by the International Association of Continuing Education and Training (IACET), or from nationally affiliated member-based state professional organizations, see definition below. CEUs awarded for training and credential purposes will be calculated at a rate of 1 continuing education unit for every 10 hours of contact training.

**“Direct supervision”** means watching and directing children’s activities and responding to each child’s needs. During napping/sleeping times, direct supervision means being within sight and sound of a child with frequent visual checks.

**“Disposable”** means an article intended by the manufacturer to be used once and then thrown away.

**“Early childhood education”** refers to coursework, certification, a credential or degree specific to children ages birth through eight years.

**“Employee”** means one additional child care personnel at least 18 years of age, who is on the premises of a home operating as a large family child care home.

**“Evening child care”** means child care provided during the evening hours and may encompass the hours of 6:00 p.m. to 7:00 a.m. to accommodate parents who work evening hours and late-night shifts.

**“Field trip”** means any trip away from the home. Field trips commence when child care personnel and children leave the home’s property, whether by vehicle or by walking.

**“Foster Grandparents”** are directly supervised volunteers who participate in the federal program pursuant to 45 Code of Federal Regulations Part 2552. Foster grandparents work with one or more children with special or exceptional needs in child care programs.

**“Household member”** means members of the operator’s immediate or extended family who reside in the home and non-family members who reside in the home, including long-term visitors, live-in paramours, housemates, extended seasonal visitors, and those who are handicapped and/or elderly. A length of stay of four weeks or greater constitutes residing in the home for purposes of the screening requirement.

**“High School Diploma or GED”** means a diploma or GED or their equivalent as recognized and accredited by the U.S. Department of Education or its equivalent at the state level. If a high school diploma is earned outside the U.S., it must be translated and evaluated by someone who is a member of the American Translators Association, a credential evaluation agency approved by the Bureau of Educators Certification, or an accredited college/university and must be determined to be equivalent to a U.S. high school diploma or GED or their equivalent. High school diplomas issued by private schools that are registered with or recognized by the Florida Department of Education or its equivalent in other states will be accepted.

**“Hours of operation”** means the hours of the day or night that a family day care home or large family child care home has children in care.

**“Immediate”** means occurring, acting, or accomplished without loss or interval of time.

**“Inactive”** refers to the status of a candidate’s awarded credential or certification that is no longer active; however, remains eligible for renewal.

**“Initial screening”** means a full Level 2 screening which must include Federal Bureau of Investigation (FBI) and Florida Department of Law Enforcement (FDLE) checks, a search of the criminal history records, sexual predator and sexual offender registry, and child abuse and neglect registry of any state in which the applicant is currently residing or has resided in during the preceding five years.

**“International Association of Continuing Education and Training (IACET)”** is a non-profit organization that is recognized by the American National Standards Institute as a standard setting organization for continuing education and training.

**“Napping”** means a brief period of rest during daylight or early evening hours.

**“National Early Childhood Credential (NECC)”** pursuant to Section 402.305(3)(c), F.S., is an early childhood credential approved by the Department and recognized by licensing authorities in at least five states that incorporates 120 hours of early childhood instruction, 480 contact hours with children ages birth through eight years; and includes at least two methods of formal assessment. This includes the Child Development Associate (CDA) credential issued by the Council for Professional Recognition in Washington, DC. A National Early Childhood Credential renewal must meet or exceed the renewal requirements for the Florida Child Care Professional Credential. If the renewal requirements do not meet or exceed the FCCPC renewal requirements, individuals will be required to complete an FCCPC renewal. A list of approved and recognized NECC

programs may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).

**“Nationally Affiliated Member Based State Professional Organization”** means an organization that has the following characteristics: they are chapters or officially affiliated with a national child care advocacy organization that for over 20 years has provided members with opportunities to use and strengthen professional skills that benefit children, families, providers and members at the local and state level, offer advocacy opportunities to raise awareness of the importance of child care education through a unified organization voice, and offer professional development for members through opportunities to access local and state resources and to network with child care and education professionals. Examples of such organizations are the Florida Association for the Education of Young Children, Inc. and Florida Family Child Care Home Association, Inc. The term member-based state professional organization does not include an organization that provides primarily training opportunities.

**“Preparation of food”** includes the selection and portioning or combining of ingredients to create food (including bottle preparation) intended for consumption. This definition is not limited to cooking. Excluded from the definition are warming of pre-prepared bottles and pre-prepared food (such as catered food and food provided by a child's parent or guardian), assisting a child with food provided by the child's parent or guardian, distributing individually pre-packaged snacks, and learning activities provided by a child care program that may include raw or prepared food. A learning activity may not replace a regularly scheduled meal.

**“Re-screening”** is the background screening process that is conducted every five years after the date of the initial screening. Re-screening must include, national and statewide criminal records checks through the FDLE, a search of the sexual predator and sexual offender registry, and Florida's child abuse and neglect registry.

**“Reside”** refers to any person that lives at a family day care home or large family child care home. Factors for determining residency include: use of the home address as a permanent address for personal identification or mail delivery; use of the home to store personal belongings such as furniture, clothing, and toiletry items; and names listed on official documents such as lease agreements or property taxes.

**“Sanitize”** means the process of destroying or reducing organisms to a safe level which includes properly cleaned equipment and surfaces, such as sinks and sleep mats. Sanitation shall be accomplished with the application of a chemical sanitizer or the use of hot water or steam. Sanitizing agents must be used according to the manufacturer label. Sanitizing agents used on food contact surfaces must be labeled by the manufacturer safe for use on food contact surfaces and have specific instructions designed for use on food contact surfaces. The manufacturer's directions must be followed.

**“School-age child”** refers to any child who is at least five years old by September 1<sup>st</sup> of the beginning of the school year and who is enrolled in and attending a kindergarten program or grades one through five during a school district's calendar year.

**“Serious injury”** is any injury/incident resulting in death or serious physical or emotional harm to a child that prudently calls for medical attention, including medication errors that present a risk of ineffectiveness or adverse reaction.

**“Sleeping”** means the normal night time sleep cycle.



**“Substitute”** means a competent adult, at least 18 years of age, who is available to substitute for the operator or employee on a temporary or emergency basis. A substitute is considered to be child care personnel and must comply with screening and training requirements.

**“Training Transcript”** is the electronic documentation of statutorily mandated training and staff credential qualifications for child care personnel. Training Transcripts may be obtained from the Department’s website at [www.myflfamilies/childcare.com](http://www.myflfamilies/childcare.com).

**“Weighted score”** means a scaled score, rather than a percentage score, based on the difficulty of the exam and determined by competency exam professionals in consultation with subject matter experts.

**“Year of experience”** means a minimum of 1040 hours of paid and/or nonpaid documented work experience, or its equivalent.

## 2 General Requirements

### 2.1 License Application or Renewal

- A. All fines imposed through the administrative process or an administrative hearing against an applicant must be paid before a license can be issued. If, at the time of a license renewal application, there is a pending administrative hearing resulting only from a proposed fine, it shall not affect the renewal of the license. If, at the time of a license renewal application, there is a pending revocation proceeding, a satisfactory inspection is required, and the issuance of a license is dependent upon the final order.
- B. In such a case as noted above, the provider will not be issued a renewal license until the final order is entered and any fine imposed has been paid. If the provider has filed a timely and sufficient application for the renewal of a license, the provider will be able to continue to operate as long as provisions are in place to ensure the continued health and safety of the children in care during the application determination and any subsequent administrative hearing. This provision does not limit the Department’s authority to issue an emergency suspension order.
- C. For the purpose of issuing a license, any out-of-state criminal offense, which if committed in Florida would constitute a disqualifying offense, shall be treated as a disqualifying offense for screening purposes.
- D. The provider is responsible for confirming with the county/city zoning authority that the property can be used for the operation of child care prior to operation. The “land use” must be applied correctly to avoid noncompliance with county/city zoning and potential fines or closure.
- E. The family day care home or large family child care home must not be used for any business or other purpose unrelated to providing child care that would interfere with compliance with child care standards or permit the unsupervised presence of individuals who do not meet screening and training requirements (with the exception of parents or legal guardians of children in care) when children are present.
- F. A copy of the annual license shall be posted in a conspicuous location within the home.

#### **Large Family Child Care Home License Requirements**

In addition to the requirements above:

- G. A large family child care home must first have operated as a licensed family day care home for two consecutive years, with an operator who has had a child development associate credential or its equivalent, verified on the Department's training transcript, for one year. The two consecutive years of operation as a licensed family day care home must have been within five years of the date of the application to operate a large family child care home.

## **2.2 Licensed Capacity**

### **2.2.1 Family Day Care Home**

A family day care home may provide care for one of the following groups of children, which shall include household children under 13 years of age:

- A. A maximum of four children from birth to 12 months of age.
- B. A maximum of three children from birth to 12 months of age, and other children, for a maximum total of six children.
- C. A maximum of six preschool children if all are older than 12 months of age.
- D. A maximum of 10 children if no more than 5 are preschool age and, of those 5, no more than 2 are under 12 months of age.

### **2.2.2 Large Family Child Care Home**

A large family child care home may provide care for one of the following groups of children, including household children under 13 years of age:

- A. A maximum of 8 children from birth to 24 months of age.
- B. A maximum of 12 children, with no more than 4 children under 24 months of age.

## **2.3 Child Discipline**

- A. Operators shall adopt a discipline policy consistent with Section 402.305(12), F.S., including standards that prohibit children from being subjected to discipline which is severe, humiliating, frightening, or associated with food, rest, or toileting. Spanking or any other form of physical punishment is prohibited.
- B. All home operators, employees, substitutes, and volunteers must comply with the home's written disciplinary and expulsion policies.
- C. Verification that the home has provided the parent or guardian a written copy of the disciplinary and expulsion policies used by the home must be documented on the enrollment form with the signature of the custodial parent or legal guardian.
- D. Active play, both indoor and outdoor, must not be completely withheld from children who misbehave. For example, a child being placed in time-out the entire time the rest of the children go outside to play would be unacceptable. Time-outs may be used during indoor or outdoor play provided an age appropriate time limit has been established.
- E. A copy of the written disciplinary and expulsion policies must be available for review by the parents or legal guardian and the licensing authority. Providers must have a comprehensive discipline policy that includes developmentally appropriate social-emotional and behavioral health promotion practices, as well as discipline and intervention procedures that provide specific guidance on what child care personnel should do to prevent and respond to challenging behaviors. Preventive and discipline practices should be used as learning opportunities to guide children's appropriate behavioral development.
- F. The following discipline techniques shall be prohibited in the home:

1. The use of corporal punishment, including but not limited to:
    - × Hitting, spanking, shaking, slapping, twisting, pulling, squeezing, or biting;
    - × Demanding excessive physical exercise, excessive rest, or strenuous or bizarre postures;
    - × Compelling a child to eat or have in his/her mouth soap, food, spices, or foreign substances;
    - × Exposing a child to extreme temperatures;
    - × Rough or harsh handling of children, including but not limited to: lifting or jerking by one or both arms; pushing; forcing or restricting movement; lifting or moving by grasping clothing; covering a child's head.
  2. Isolating a child in an adjacent room, hallway, closet, darkened area, play area, or any other area where the child cannot be seen or supervised.
  3. Binding, tying or restricting movement, or taping the mouth;
  4. Using or withholding food or beverages as a punishment;
  5. Toilet learning/training methods that punish, demean, or humiliate a child;
  6. Any form of emotional abuse, including rejecting, terrorizing, extended ignoring, isolating, or corrupting a child;
  7. Any abuse or maltreatment of a child;
  8. Abusive, profane, or sarcastic language or verbal abuse, threats, or derogatory remarks in front of the child or about the child or child's family;
  9. Placing a child in a crib/portable crib for a time-out or for disciplinary reasons.
- G. Providers that care for infants must have a written policy and procedure to identify and prevent shaken baby syndrome and abusive head trauma. The policy and procedures must require completion of the safe sleep training by child care personnel, as outlined in section 5.2.1.

## 2.4 Transportation

Child care providers must comply with minimum health and safety standards to ensure the well-being of children in their care being transported. For the purposes of this section, transportation pertains to travel by foot or in a vehicle that is owned, operated or regularly used by the child care home, and vehicles used to provide transportation through a contract or agreement with an outside entity or person. Prior to transporting children, the home must be approved by the Department to offer transportation services. Transportation services will be approved if the conditions set forth in parts 2.4.1, 2.4.4., and 2.4.5., of this Handbook are met. Pursuant to the Child Safety Alarm Act in 2021, all vehicles used to transport children by child care facilities and large family child care homes must be equipped with a reliable alarm system which prompts the driver to inspect the vehicle for children before exiting the vehicle.

### 2.4.1 Driver Requirements

The driver of any vehicle used by a child care program to provide transportation must have the following:

- A. A valid Florida driver's license including the proper endorsement; and
- B. An annual physical examination which grants medical approval to drive, and a valid certificate(s) of course completion for first aid training and pediatric cardiopulmonary resuscitation (CPR) procedures.

Documentation must be maintained at the home for licensing to review.

### 2.4.2 Transportation Log

A log must be maintained for all children being transported in the vehicle or on foot away from and/or to the premises of the home. The log must be retained for a minimum of 12 months. The log must include each child's name, date, time of departure, time of arrival and the signature of the driver verifying all children were accounted for during the visual sweep.

- A. Prior to transporting children, the transportation log must be recorded, and dated immediately, verifying that all children were accounted for and that the log is complete.
- B. Upon arrival at the destination, the driver of the vehicle must:
  - 1. Mark each child off the log as the child departs the vehicle;
  - 2. Conduct a physical inspection and visual sweep of the vehicle to ensure that no child is left in the vehicle; and
  - 3. Record, sign, and date the transportation log immediately, verifying that all children were accounted for, and that the visual sweep was conducted.
  - 4. If the provider contracts/agrees with an outside entity/person to provide transportation, then the provider must perform the duties of the driver outlined above in numbers 1-3.

#### **Large Family Child Care Home**

In addition to the transportation log requirements above, the home employee or person(s) authorized by the large family child care home operator must:

- C. Conduct a second physical inspection and visual sweep of the vehicle to ensure that no child is left in the vehicle; and
- D. Sign, date and record the transportation log immediately, verifying that all children were accounted for, and that the log is complete.

### 2.4.3 Emergency Care Plans

Child care personnel must have possession of emergency medical consent and contact information for the parent or legal guardian of each child being transported by vehicle or on foot while away from the home.

- A. When transporting children with chronic medical conditions (such as asthma, diabetes or seizures), their emergency care plans and supplies or medication must be in the possession of child care personnel and inaccessible to the children. A designated child care personnel in the vehicle or on the field trip must be trained to recognize and respond appropriately to a medical emergency per medication training requirements in section 7.24, J.
- B. Each child with an allergy should have a written emergency care plan that includes:
  - 1. Instructions regarding the allergen to which the child is allergic and steps to be taken to avoid that allergen;
  - 2. A detailed treatment plan to be implemented in the event of an allergic reaction, including the names, doses, and methods of prompt administration of any medications.
  - 3. Specific symptoms that would indicate the need to administer one or more medications.
- C. Based on the child's emergency care plan, provided by the parent/legal guardian or physician, and prior to caring for the child, child care personnel should implement measures for preventing exposure to specific allergen(s) to which the child is allergic and recognizing the symptoms of an allergic reaction.

- D. Child care personnel shall notify parents/guardians immediately of any suspected allergic reactions, as well as the ingestion of or contact with the problem allergen even if a reaction did not occur. Child care personnel shall contact 911 immediately whenever epinephrine has been administered.

#### 2.4.4 Vehicle Requirements

For the purpose of this section, vehicles refer to those owned, operated or regularly used by the child care home, and vehicles that provide transportation through a contract or agreement with an outside entity. Parents'/guardians' personal vehicles used for transporting during field trips are excluded from meeting the requirements of this sub-section.

- A. All vehicles regularly used to transport children must be inspected annually by a mechanic to ensure that they are in proper working order. Documentation by the mechanic must be maintained in the vehicle.
- B. The maximum number of individuals transported in a vehicle may not exceed the manufacturer's designated seating capacity or the number of factory-installed seat belts that are operational.
- C. When transporting children, staff-to-child ratios must be maintained at all times.
- D. An adult must remain within sight and hearing of children being transported in a vehicle, so as to be able to respond to the needs of the children at all times.
- E. All home operators must maintain documentation of current insurance coverage on all vehicles used to transport children in care.
- F. Smoking, including e-cigarettes and vaping, is prohibited in all vehicles while being used to transport children.
- G. Emergency medical consent forms or copies of the consent forms signed by the custodial parent or legal guardian and emergency contact numbers must be in the vehicle during transport of children, including field trips.
- H. A permission and transportation release form signed by the custodial parent or legal guardian of the children in care must be on file for planned and unplanned activities. Written permission may be in the form of a general permission slip. Documentation of parental permission must be maintained for a minimum of 12 months from the date of planned and unplanned activities.
- I. The interior of vehicles, when being used to transport children, should be maintained at a temperature comfortable to children (between 65- and 82-degrees Fahrenheit). The vehicle can be ventilated either by mechanical or natural means to maintain the temperature.
- J. When applicable, any vehicle used for transporting children must accommodate the placement of wheelchairs with four tie-downs affixed according to the manufactures' instructions in a forward-facing direction and the wheelchair occupant must be secured by a three-point tie restraint during transport; or the child must be placed in a federally approved child safety restraint or factory installed seatbelt when transported, in accordance to the child's needs. Manufacturers' specifications must be followed to assure that safety requirements are met.

#### Large Family Child Care Home License Requirements

In addition to the requirements above:

- K. By January 1, 2022, all vehicles used by child care facilities to transport children must be equipped with a reliable alarm system approved by the Department which prompts the driver to inspect the vehicle for children before exiting the vehicle.

**1. Approved alarm systems must meet the following criteria:**

- a. The alarm system must be armed or activated automatically when the vehicle's ignition is turned on.
- b. The alarm system must be designed and installed so that the vehicle horn, siren or other type of audio alarm will sound if the driver/staff member does not walk to the rear or, in the case of a passenger van, the side entry point of the vehicle, to manually shut off or deactivate the alarm.
- c. The time delay from the time the ignition is turned off after activation of the alarm system until the alarm sounds shall be no longer than one minute.
- d. The alarm must be audible from the distance of 500 feet from the vehicle.
- e. The alarm system must be installed so that the driver must walk to the back of the vehicle to reach the deactivation mechanism. Deactivation mechanisms installed in locations that do not require the driver to walk to the back of the vehicle and view all seating areas will not be acceptable.

**2. List of approved alarm manufacturers may be found on the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).**

**3. Alarms must be installed and maintained according to the manufacturer's recommendations.**

**4. Alarm systems installed according to the manufacturer's instructions prior to October 1, 2021, will be deemed to satisfy this requirement if they meet the criteria set forth in 2.4.4.K.1. above. Under this allowance, the existing alarm system must always be properly maintained in working order. Should at any time the alarm system require replacement, the new system must be selected from the Department's approved list referenced in 2.4.4 K.2. above.**

#### **2.4.5 Seat Belt/Child Restraints**

Each child, when transported, must be seated in a back seat in an individual factory installed seat belt or federally approved child safety restraint. The child safety restraint must be installed, secured and used in accordance with the manufacturer's instructions and a copy of such instructions must be maintained (in the vehicle and/or on file). Car safety seats must be replaced if they have been recalled, are past the manufacturer's "date of use" expiration date or have been involved in a crash that meets the U.S. Department of Transportation crash severity criteria or the manufacturer's criteria for replacement of seats after a crash.

- A. Children aged birth to one year old must be secured in a rear-facing car safety seat.
- B. Children aged one through 3 years, such restraint device must be a separate carrier or a vehicle built-in child seat.
- C. Children aged 4 years, a separate carrier, a vehicle built-in child seat, or a child booster seat must be used with appropriate seat belt.
- D. Children aged 5 years and older must be in seat belts.

#### **Large Family Child Care Home Transportation Requirements**

In addition to the transportation requirements above a large family child care home must comply with the following:

- E. When one child care personnel takes some children on a field trip and one child care personnel remains on the premises with the remainder of the



children in care, the operator or employee transporting children is totally responsible for the care and supervision of those children and shall follow the transportation guidelines specified above.

## 2.5 Planned/Unplanned Activities

### **Large Family Child Care Homes**

Each age group or class must have a written and followed plan of scheduled activities posted in a conspicuous location accessible to the custodial parents or legal guardian. The written plan shall include a variety of activities that range from structured to unstructured activities that encourage a child's developmental growth. The written plan must meet the needs of the children being served and include scheduled activities that:

- A. Promote emotional, social, intellectual and physical growth;
- B. Include quiet and active play, both indoors and outdoors; and
- C. Include meals, snacks, and nap times, if appropriate for the age and the times the children are in care.
- D. Do not include the use of electronic media for children under two years of age. Electronic media may only be used for educational purposes or physical activity for children 2 years of age and older for no more than 1 to 2 hours per day.
- E. Providers must implement program practices that promote consistency and continuity of care for infants and toddlers. Early care and education programs should provide opportunities for each child to build emotionally secure relationships with a limited number of child care personnel. Efforts to promote consistency and continuity of care are shown through following daily routines and communicating consistently with parents/guardians.
- F. Provide adequate time and space for infants, birth to 12 months, in care to engage in activities that promote development of movement skills (tummy time, crawling, turning over, sitting, etc.). Infant seats (swings, bouncers, etc.) must be used only for short periods of time, no more than 15 to 30 minute intervals per infant and no more than two times per day that the child is in care. Infants in care shall be provided opportunities for outdoor time each day that weather permits.
- G. The program must make reasonable accommodations as required by the American Disabilities Act (42 U.S.C. 12101) to the environment, planned activities and schedule so that children with special needs may participate.

Providers are encouraged to advise parents or legal guardians of their child's activities on a daily basis and to encourage parental participation in the program's activities.

## 3 Staffing Requirements

### 3.1 Operator

- A. The operator must be at least 18 years of age.
- B. The operator must reside at the location of the home where the care is provided. In the event of rental or leased property, the operator shall be the individual who occupies the residence. Proof of residency must include tax records with homestead exemption, driver's license, and/or a copy of the lease. Operator must comply with local ordinances and/or Home Owners Association rules and requirements.
- C. The operator may not work outside of the home during the hours the family day care home or large family child care home is operating.

### **Large Family Child Care Home**

In addition to the requirements above:

- D. The operator must be at least 21 years of age and responsible for the overall operation of the home.

### **3.2 Substitute**

The operator must have a written plan to provide at least one substitute, 18 years of age or older, to be available on a temporary/emergency basis.

- A. The substitute's information (including name, date of birth, telephone number, address, anticipated number of hours worked and whether or not this person substitutes for another home) must be provided on the CF-FSP Form 5133, Application for a License to Operate a Family Day Care Home, which is incorporated by reference in 65C-20.008(1), F.A.C.
- B. The written plan must be kept current and include the name, address, and telephone number of the substitute.
- C. Any changes to the plan must be reported to the licensing office within 5 working days. All hours worked by the substitute must be documented in writing and maintained for 12 months.
- D. Substitutes may not work for the operator more than 40 hours per month on average over a 6-month period in any single home for which they have been identified as the designated substitute.
- E. The operator must document the hours worked on a monthly basis. The operator must sign a statement attesting to the number of hours that the substitute works in the operator's home. The statement must be placed in the substitute's file.

### **3.3 Large Family Child Care Home Employee**

Employees in a large family child care home shall be at least 18 years of age.

Large family child care homes must meet and comply with all standards in s. 402.3131, Florida Statutes and with all requirements in this handbook at all times unless there are insufficient numbers of children in care to meet the definition of a large family child care home, in which case an additional employee is not required.

## **4 Background Screening**

### **4.1 Initial Screening**

Operators, household members (adults and children 12 to 17 years of age), substitutes, volunteers and Large Family Child Care Home employees must have a level 2 background screening clearance from the Department prior to obtaining a license, residing in the home, employment, or volunteering unsupervised with children. The employer/owner/operator must review each employment application to assess the relevancy of any issue uncovered by the complete background screening, including any arrest, pending criminal charge, or conviction, and must use this information in employment decisions in accordance with state laws.

- A. Level 2 screening as outlined in s 435.04, F.S., is required for all child care personnel and includes a criminal records check (both national and statewide), a sexual predator and sexual offender registry search, and child abuse and neglect history of any state in which an individual resided during the preceding 5 years. All fingerprints must be submitted and processed through the Background Screening Clearinghouse and



therefore a LiveScan vendor that is Clearinghouse compatible must be used for submission of fingerprints. Household members aged 12 to 17 years must complete a Juvenile Records Check with FDLE. Providers may use the public portal to request certified State of Florida criminal history juvenile record checks from this link: <https://shield.fdle.state.fl.us/shield/app/orisearch>.

- B. The fingerprint results from the Federal Bureau of Investigation will be returned to DCF via the Florida Department of Law Enforcement. DCF will review both the federal and state criminal history results, along with state criminal records, national sex offender registry, Florida sex offender registry, and the Florida child abuse and neglect registry.
- C. DCF will issue an eligible or non-eligible result for employment through the Clearinghouse upon completion of searches and results from other states, if applicable.
- D. The operator must submit to licensing a five-year employment history. Licensing staff will conduct employment history checks for the operator, including documented attempts to contact each employer that employed the individual within the preceding five years and documentation of the findings. Documentation must include the applicant's job title and description of his/her regular duties, confirmation of employment dates, and level of job performance.
- E. The employer/owner/operator must conduct employment history checks for substitutes, including documented attempts to contact each employer that employed the individual within the preceding five years and documentation of the findings. Documentation must include the applicant's job title and description of his/her regular duties, confirmation of employment dates, and level of job performance. The employer/owner/operator must make at least three attempts to obtain employment history information. Failed attempts to obtain employment history must be documented in the personnel file and include date, time, and the reason the information was not obtained.
- F. The employer/owner/operator must send a request for criminal history records for each state the individual lived, if the individual has lived outside the state of Florida in the preceding five years. Visit [www.myflfamilies.com/backgroundscreening](http://www.myflfamilies.com/backgroundscreening), click on the National Records Request link to obtain the instructions and forms to complete to submit a request for a search. Once the results are received, the information must be sent to the DCF Background Screening unit. If awaiting Out-of-State criminal history results, a copy of the DCF email informing of the individual's eligibility for a provisional hire status must be in the personnel file. If the previous state of residence participates in the National Fingerprint File Program, then a request for criminal history records will not be required. A list of states participating in the NFF may be found at this link: <https://www.fbi.gov/services/cjis/compact-council/interstate-identification-index-iii-national-fingerprint-file-nff>
- G. The employer/owner/operator must send a request for a search of each state's child abuse and neglect registry if the individual has lived outside the state of Florida in the preceding five years. Visit [www.myflfamilies.com/backgroundscreening](http://www.myflfamilies.com/backgroundscreening), click on the National Records Request link to obtain the instructions and forms to complete to submit a request for a search. Documentation of the date the search was requested, and the date the results were received, must be maintained in the employee's file for review by the licensing authority.
- H. The employer/owner/operator must conduct a search of the sexual offender/predator registry of any state the individual has lived in outside the state of Florida in the preceding five years. Visit [www.myflfamilies.com/backgroundscreening](http://www.myflfamilies.com/backgroundscreening), click on the National Records Request link to obtain the instructions and forms to complete to submit the request for a search. Documentation of the search date, and findings from

each state, must be documented in the employee's file for review by the licensing authority.

- I. The employer/owner/operator must maintain on-site at the program copies/documentation of completion of all applicable elements in the screening process for an individual in the personnel file for review by the licensing authority.
- J. An individual may be hired under one of these circumstances:
  - 1. If all components are complete with an eligible screening and documented in the employee's file.
  - 2. 'Provisional hire' status upon notification email from the Department allowing the individual to be hired for a 45-day period while out of state records are being requested and awaiting clearance. During those 45 days the individual must be under the supervision of screened and trained child care personnel when in contact with the children.
  - 3. Screening requests have been initiated, but before results have been received, the individual may be hired for training and orientation purposes only in accordance with s. 435.06(2)(d), Florida Statutes. Until screening is complete showing good moral character, the employee may not be in contact with the children as specified in this statute.
- K. The employer/owner/operator must **initiate the screening** through the Clearinghouse prior to fingerprinting. Failure to initiate the screening may result in an invalid screening and the individual will have to be re-fingerprinted and pay the fees again.
- L. The employer/owner/operator must add substitutes, employees and household members to their Employee/Contractor Roster within ten days of when the individual has received a child care eligible result. Employer/owner/operator must add an end date within ten days of termination for individuals on the Employee/Contractor Roster in the Clearinghouse when employment terminates, or a household member is no longer residing in the home.
- M. The employer/owner/operator will receive an email notification if any individual on the Employee/Contractor Roster is arrested for a disqualifying offense. The employer/owner/operator is required to take appropriate action if an individual becomes disqualified pursuant to s. 435.06, Florida Statutes.

### **Large Family Child Care Home**

In addition to the requirements above:

- N. For the purpose of issuing a license, any out-of-state criminal offense, which if committed in Florida would constitute a disqualifying felony offense, shall be treated as a disqualifying felony offense for licensing and screening purposes under this rule.
- O. Background screening fingerprint submission must comply with s. 435.12, F.S.
- P. Documentation/clearance for the initial screening must be included in the Department's licensing file. Screening information for the employee and household members must be documented on CF-FSP Form 5131, Background Screening and Personnel File Requirements, which is incorporated by reference in 65C-22.001(7)(b), F.A.C. A copy of CF-FSP 5131 may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).
- Q. The Large Family Child Care Home operator must conduct employment history checks for home employees, including documented attempts to contact each employer that employed the individual within the preceding five years and documentation of the findings. Documentation must include the applicant's job title and description of his/her regular duties, confirmation of employment dates, and level of job performance. The employer/owner/operator must make at least three attempts to obtain employment

history information. Failed attempts to obtain employment history must be documented in the personnel file and include date, time, and the reason the information was not obtained.

- R. CF Form 1649A, Child Care Attestation of Good Moral Character, which is incorporated by reference in 65C-22.001(7)(a), F.A.C., must be completed at the time of initial screening or upon change in employers, or in accordance with the local licensing agency compliance and must be maintained in the Department's licensing file. A copy of the CF Form 1649A may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).

## 4.2 Re-Screening

A screening conducted under this rule is valid for five years, at which time a re-screen must be conducted in the same manner as the initial screening.

- A. The five-year re-screen is required for the operator, household members, substitutes, and volunteers.
- B. The five-year re-screen must include, at a minimum, a criminal records check (both national and statewide), a sexual predator and sexual offender registry search, and child abuse and neglect history of any state in which an individual resided during the preceding 5 years.
- C. An operator, substitute, employee, volunteer and all household members must be re-screened as outlined in sections 402.313 and 402.3131, F.S., following a break in operation/employment in the child care industry or from residing in the home, that exceeds 90 days. Child care personnel/individual with a break in service that exceeds 90 days are considered unscreened child care personnel/individuals until completion of re-screening. These child care personnel/individuals shall not have unsupervised contact with children in care.
- D. If child care personnel take a leave of absence, such as maternity leave, extended sick leave, migrant child care programs, etc. re-screening is not required unless the five-year re-screen comes due during the leave of absence.

**All screening and rescreening must be processed using the Background Screening Clearinghouse.** [go to -

<http://www.dcf.state.fl.us/programs/backgroundscreening/index.shtml> and <https://apps.ahca.myflorida.com/SingleSignOnPortal/Login.aspx?ReturnUrl=%2fSingleSignOnPortal%2f>]

## 4.3 Background Screening Documents

- A. Each personnel record must have a completed CF-FSP Form 5131, Background Screening and Personnel File Requirements, which is incorporated by reference in rule 65C-22.001, F.A.C.
- B. CF-FSP Form 1649A, Child Care Attestation of Good Moral Character, incorporated by reference in 65C-22.001(7)(a), F.A.C., must be completed for all child care personnel at the time of initial screening or upon change in employers. CF Form 1649A may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).
- C. A copy of the eligible results generated from the Clearinghouse must be on record for each personnel. If awaiting Out-of-State criminal history results, a copy of the DCF email informing of the individual's eligibility for a provisional hire status must be in the personnel file.

- D. A copy of the DCF letter/email informing of search conducted of the Florida's child abuse and neglect registry must be on record for each personnel screened between July 1<sup>st</sup> and December 15<sup>th</sup> of 2016.
- E. A copy of each request made to out of state child abuse and neglect registries for individuals that lived outside the state of Florida in the preceding five years.
- F. A copy of each search conducted for out of state sexual offender/predator registries for individuals that lived outside the state of Florida in the preceding five years.
- G. A copy of all background screening clearance documents for the operator, household members, substitutes, and Large Family Child Care Home employees must be provided to the Department for inclusion in the official licensing file or in accordance with the appropriate local licensing agency requirements.
- H. The operator, substitute, employee and/or volunteer must complete a CF-FSP 5337, Child Abuse and Neglect Reporting Requirements, incorporated by reference in 65C-22.001(7)(I), F.A.C., signed prior to initial licensure and annually thereafter.
- I. Volunteers must complete a CF-FSP 5217 Volunteer Acknowledgement, incorporated by reference in 65C-22.001(7)(e), F.A.C., prior to volunteering in the home. Written documentation of volunteer hours must be maintained at the home and available for review by the licensing authority.
- J. Household members aged 12 to 17 years must complete a Juvenile Records Check with FDLE.

## 5 Staff Training

### 5.1 Training Required Prior to Licensure/Caring for Children

#### 5.1.1 Operators and Substitutes

Prior to licensure and prior to caring for children, all home operators, substitutes for the operator, and **substitutes working more than 40 hours per month on average over a 6-month period** must:

- A. Successfully complete the Department's 30-clock-hour Family Child Care Home training, as evidenced by successful completion of a competency-based examination(s) offered by the Department or its designated representative with a weighted score of 70 or better. Operators who successfully completed the mandatory 30-clock-hour Family Child Care Home training prior to January 1, 2004, are not required to fulfill the competency examination requirement. Documentation of course completion may either be a single Family Child Care Home certificate or certificates for the five individual training courses which total 30-clock-hours of training: Family Child Care Home Rules and Regulations; Health, Safety and Nutrition; Identifying and Reporting Child Abuse and Neglect; Child Growth and Development; and Behavioral Observation and Screening. All certificates must be reflected on the training transcript.
- B. Complete a single course of training in early literacy and language development of children ages birth through five years that is a minimum of five clock-hours or .5 CEUs. Proof of completion will be documented on the certificate of course completion, classroom transcript, or diploma. Early literacy course documentation must be uploaded into the Florida Pathways (Registry), which may be accessed from the Department's website at

[www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare). In order to meet this requirement, individuals must complete one of the following:

1. One of the Department's online literacy courses available on the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare); or
  2. One of the Department's approved literacy training courses. A list of these courses may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare) (no additional courses will be approved by the Department); or
  3. One college level early literacy course (for credit or non-credit) if taken within the last five years.
- C. Have certificate(s) of course completion for pediatric cardiopulmonary resuscitation (CPR) procedures and first aid training, which must be current and valid at all times. Certificates of course completion are valid based on the time frames established by each first aid and CPR training program, not to exceed three years. CPR courses must include an on-site instructor-based skills assessment that shall be documented by the certified CPR instructor. Documentation of completion of the online course and on-site assessment must be maintained at the home and available for review by the licensing authority.

#### **5.1.2 Substitutes for the Large Family Child Care Home Employee Who Work Less Than 40 Hours/Month**

Substitutes **for the Large Family Child Care Employee** who work less than 40 hours a month **on average** must complete:

- A. The Department's six clock-hour Family Child Care Home Rules and Regulations training, as evidenced by successful completion of a competency-based examination offered by the Department or its designated training representative prior to licensure and caring for children.
- B. Substitutes who have successfully completed the three clock-hour Fundamentals of Child Care training or 30-clock-hour Family Child Care Home training are not required to complete the six clock-hour Family Child Care Home Rules and Regulations course.
- C. Have certificate(s) of course completion for pediatric cardiopulmonary resuscitation (CPR) procedures and first aid training, which must be current and valid at all times. Certificates of course completion are valid based on the time frames established by each first aid and CPR training program, not to exceed three years. CPR courses must include an on-site instructor-based skills assessment that shall be documented by the certified CPR instructor. Documentation of completion of the online course and on-site assessment must be maintained at the home and available for review by the licensing authority.

#### **5.1.3 Large Family Child Care Home Operators**

In addition to the training requirements identified above, large family child care home operators must:

- A. Possess an active Staff Credential Verification Confirmation, documented on the Training Transcript for at least one year prior to licensure.
  1. To apply for a staff credential verification, a candidate must complete CF-FSP Form 5211, Florida Child Care Staff Credential Verification Application, which is incorporated by reference in 65C-22.001(7)(d),



F.A.C., and may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).

2. Operators must meet one of the following credentials below for a minimum of one year prior to initial Large Family Child Care Home Licensure:
    - a) An active National Early Childhood Credential (NECC); or
    - b) An active Birth Through Five Child Care Credential awarded as a Florida Child Care Professional Credential (FCCPC), a Florida Department of Education Child Care Apprenticeship Certificate (CCAC), or Early Childhood Professional Certificate (ECPC); or
    - c) An active School-Age Child Care Credential awarded as a Florida Child Care Professional Credential (FCCPC) or School-Age Professional Certificate (SAPC). Graduates who successfully complete a school-age training program offered by a branch of the U.S. Military will be recognized as having met the School-Age FCCPC requirement; or
    - d) Formal Educational Qualifications.
  3. An Employment History Recognition Exemption will not be accepted to meet the minimum staff credential requirements for Large Family Child Care Homes.
  4. An Employment History Recognition Exemption and a School-Age FCCPC will not be accepted to meet the minimum staff credential requirements for Voluntary Pre-Kindergarten (VPK).
  5. Florida law requires that VPK instructional personnel possess an appropriate credential. If the Department identifies that a designated VPK teacher does not have an active credential, the Department will notify the local Early Learning Coalition or its designated representative.
- B. Maintain an active staff credential, documented on the individual's Training Transcript. Inactive staff credentials may not be used to operate a large family child care home.
1. To maintain an active National Early Childhood Credential, it must be renewed through the agency that awarded the original credential or renewed as a Florida Birth Through Five Child Care Credential. Once renewed, for licensing purposes, individuals must complete a CF-FSP Form 5211, Florida Child Care Staff Credential Verification Application to have the individual's Training Transcript updated with renewed credential information. An individual with an inactive National Early Childhood Credential may submit a renewal application, but while inactive the individual shall not be counted to meet the staff credential requirement. The application will be reviewed, and if approved, a certificate will be issued with a renewal date of five years from the date the completed renewal application was processed.
  2. A staff credential awarded for formal education qualifications is always active and does not need to be renewed.
  3. To maintain an active Birth Through Five or School-Age Child Care Credential, every five years a candidate must complete the renewal Section of the CF-FSP Form 5211; if all criteria are met, the individual's Training Transcript will be updated with renewed credential information. Renewal applications may be submitted by the candidate no earlier than one year prior to the end of the active period of the Birth Through Five or School-Age Child Care Credential. An individual with an inactive Birth Through Five or School-Age Child Care Credential may submit a renewal application, but

while inactive the individual shall not be counted to meet the staff credential requirement. The application will be reviewed, and if approved, a certificate will be issued with a renewal date of five years from the date the renewal requirements are met.

4. A staff credential awarded for Employment History Recognition Exemption is always active and does not need to be renewed.

## 5.2 Training Required Within 30 Days of Employment

### 5.2.1 Safe Sleep/ Shaken Baby Syndrome Training

All child care personnel who work in a home that offers care to infants must have training regarding guidance on safe sleep practices, preventing shaken baby syndrome and abusive head trauma; recognition of signs and symptoms of shaken baby syndrome and abusive head trauma; strategies for coping with crying, fussing, or distraught child and the development and vulnerabilities of the brain in infancy in early childhood within 30 days of hire at the home. For child care personnel to satisfy this requirement the training must be accomplished through one of following methods: the Department's Health Safety and Nutrition course, Department's Safe Sleep course, or the Early Learning Florida's Safe Sleep Practices course. Documentation of training must be maintained on the Department's training transcript in the child care personnel record.

### 5.2.2 Fire Extinguisher Training

All child care personnel shall be trained in the use and operation of a fire extinguisher, at each home they are employed, within 30 days of date of hire. Documentation of completed training must be maintained in the personnel record.

### 5.2.3 Foster Grandparent Training Requirements

Foster grandparents are required to have 100% attendance of the Department's following training courses: Family Child Care Home Rules and Regulations; Health, Safety, and Nutrition; Identifying and Reporting Child Abuse and Neglect; and Special Needs Appropriate Practices. This requirement can be met by either instructor-led or online training and does not require a competency exam. Foster grandparents must **begin training** within 30 days of working in the child care industry in any licensed Florida child care facility, family day care home or large family child care home. Training must be completed within one (1) year from the date of working in the child care industry in any licensed Florida child care facility or family child care home. Foster grandparents are not classified as child care personnel, and they may not be assigned the roles of teacher's aides, group leaders or other similar positions. Foster grandparents are not counted in the staff-to-child ratio.

## 5.3 Training Required Within 90 Days of Employment

### 5.3.1 Large Family Child Care Home Employees

Within 90 days of employment in a Florida large family child care home, a large family child care home employee must:

- A. Begin the Department's 30-clock-hour Family Child Care Home training. The training shall be successfully completed within 12 months from the date on which the training began, as evidenced by the successful completion of a competency examination offered by the Department or its designated

representative with a weighted score of 70 or better. Training taken prior to employment in the child care industry does not constitute “begin training”. The “begin training” timeframe begins at the time of employment in the child care industry. Training completion may not exceed 15 months from the date of employment in a Florida large family child care home. Documentation of course completion may either be a single Family Child Care Home (30 HR) certificate or certificates for the five individual training courses which total 30-clock-hours of training: Family Child Care Home Rules and Regulations; Health, Safety and Nutrition; Identifying and Reporting Child Abuse and Neglect; Child Growth and Development; and Behavioral Observation and Screening.

- B. By June 12, 2021, large family child care home employees must also have current First Aid training and pediatric cardiopulmonary resuscitation (CPR) certification. Large family child care home employees hired on or after March 14, 2021 must have current first aid training and pediatric cardiopulmonary resuscitation (CPR) certification within 90 days of hire date at the home.

## 5.4 Training Required Within 6 Months of Licensure

### 5.4.1 Large Family Child Care Home Operators

Within six months of licensure, large family child care home operators must successfully complete 10-clock-hours of specialized training from the Department’s Part II training courses as evidenced by successful completion of a competency examination with a weighted score of 70 or better. These courses include:

- A. Special Needs Appropriate Practices (10 hours), or
- B. Understanding Developmentally Appropriate Practices (5 hours) and one of the following courses:
- C. Infant and Toddler Appropriate Practices (5 hours)
- D. Preschool Appropriate Practices (5 hours)
- E. School- Age Appropriate Practices (5 hours)

## 5.5 Training Required Within 12 Months of Employment

### 5.5.1 Large Family Child Care Home Employees

Within 12 months of date of employment in the Florida large family child care home, complete a single course of training in early literacy and language development of children ages birth through five years that is a minimum of five-(5)-clock-hours or .5 CEUs. Proof of completion will be documented on the certificate of course completion, classroom transcript, or diploma. Early literacy course documentation must be uploaded into the Florida Pathways (Registry). In order to meet this requirement, employees must complete one of the following:

- A. One of the Department’s online literacy courses available on the Department’s website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare); or
- B. One of the Department’s approved literacy training courses. A list of these courses may be obtained from the Department’s website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare) (no additional courses will be approved by the Department); or
- C. One college level early literacy course (for credit or non-credit) if taken within the last five years.



## 5.6 Annual In-Service Training

### 5.6.1 Operator In-Service Training

All operators must complete a minimum of 10-clock-hours or one CEU of in-service training concentrating on children ages birth through 12 years annually during the operator's 12-month licensing period. The annual 10-clock-hours or one CEU of in-service training must be completed in one or more of the following areas (college level courses will be accepted):

- A. Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, emergencies due to food and allergic reactions, and shaken baby syndrome; use of safe sleep practices; administration of medicine, emergency preparedness; handling of hazardous materials;
- B. Safe Sleep Practices- American Pediatrics Standards
- C. SIDS Sudden Infant Death Syndrome
- D. Pediatric CPR;
- E. First Aid (may only be taken to meet the in-service requirement once every two years);
- F. Nutrition;
- G. Child development – typical and atypical;
- H. Social and Emotional Development
- I. Child transportation and safety;
- J. Behavior management;
- K. Working with families;
- L. Design and use of child-oriented space;
- M. Community, health and social service resources;
- N. Child abuse;
- O. Child care for multilingual children;
- P. Working with children with disabilities in child care;
- Q. Safety in outdoor play;
- R. Literacy;
- S. Guidance and discipline;
- T. Computer technology;
- U. Leadership development/program management and child care personnel supervision;
- V. Age appropriate lesson planning;
- W. Homework assistance for school-age care;
- X. Developing special interest centers/spaces and environments;
- Y. Other course areas relating to child care or child care management; or
- Z. Any of the online courses offered through the Department's child care website.

Operators who do not complete the required annual in-service training during a given licensure year must complete the remaining in-service training hours within 30 days of the noncompliance finding by the licensing authority. These hours cannot be used to meet the current year's in-service training requirements.

### 5.6.2 Large Family Child Care Home Employee Annual In-Service Training

All large family child care employees must complete the annual in-service training requirements as outlined in 5.6.1.

- A. Large family child care home employees may apply the mandated 30-clock-hour Family Child Care Home training to meet the annual in-service training requirement during the first year of employment.
- B. All employees continuously employed or hired prior to the last month of the provider's licensure year must complete the annual in-service training requirement. This includes any changes in employment from one program to another.
- C. Employees continuously employed or hired prior to the last month of the provider's licensure year who do not complete the required annual in-service training during any given year must complete the remaining in-service training hours within 30 days of the noncompliance finding by the licensing authority. These hours cannot be used to meet the current year's in-service training requirements.

## 5.7 Training Exemptions

Child care personnel working in a family child care home or large family child care home have one opportunity, if they choose, to exempt from one or more of the Department's training courses prior to attending training by successful completion of corresponding competency examinations. The Department or its designated representative shall exempt individuals from one or more of the Department's training courses as follows:

- A. The Department or its designated representative will exempt from the Health, Safety and Nutrition; Child Growth and Development; and Behavioral Observation and Screening courses those child care personnel who meet one of the following

**There are no educational exemptions from the Family Child Care Home Rules and Regulations course or from the Identifying and Reporting Child Abuse and Neglect courses.**

educational qualifications:

- 1. Associates degree or higher with six college credit hours in the areas of early childhood education/child growth and development or degree in the area of elementary education with certification to teach any age birth through 6<sup>th</sup> grade.
- 2. An active National Early Childhood Credential (NECC) or an active Birth Through Five Florida Child Care Professional Credential (FCCPC).
- B. The Department or its designated representative shall exempt child care personnel with a bachelor's degree or higher in the areas of early childhood education/child growth and development from the Understanding Developmentally Appropriate Practices course, the Infant and Toddler Appropriate Practices course, and the Preschool Appropriate Practices course.
- C. The Department or its designated representative shall exempt child care personnel with a bachelor's degree or higher in the area of elementary education from the Understanding Developmentally Appropriate Practices course and the School-Age Appropriate Practices course.
- D. The Department or its designated representative shall exempt child care personnel with a bachelor's degree or higher in the area of exceptional student education from the Special Needs Appropriate Practices course.

## 5.8 Training Documentation

- A. The Department's Training Transcript is the only acceptable verification of successful completion of the Department's training. A copy of the Department's Training Transcript may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).
- B. Any course completion certificate not documented on the Training Transcript will be considered invalid, requiring that the course(s) be retaken. Until the coursework is retaken and completed, family day care homes will be out of compliance with the mandated training standard.
- C. Documentation of the in-service training requirement must be recorded on CF-FSP Form 5268A, In-Service Training Record, which is incorporated by reference in 65C-20.008(7)(a), F.A.C., and maintained at the home. CF-FSP Form 5268A may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare). A new in-service training record is required each licensing year.
- D. The in-service training records for the previous two licensing years must also be maintained at the home for review by the licensing authority.

## 5.9 Staff Credentials

Pursuant to Section 402.3131(1)(a), F.S. a licensed family day care home operator must have a child development associate credential or its equivalent for 1 year, before seeking licensure as a large family child care home.

- A. A credentialed staff member is defined as a child care professional who has been issued a Staff Credential Verification documented on the individual's Training Transcript.
- B. To apply for a staff credential verification, a candidate must complete CF-FSP Form 5211, Florida Child Care Staff Credential Verification Application, which is incorporated by reference in 65C-22.001(7)(d), F.A.C., and may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare). The candidate must meet one of the following five qualifications as cited on CF-FSP Form 5211:
  - 1. An active National Early Childhood Credential (NECC).
  - 2. Formal Educational Qualifications.
  - 3. An active Birth Through Five Child Care Credential awarded as a Florida Child Care Professional Credential (FCCPC); Florida Department of Education Child Care Apprenticeship Certificate (CCAC), or Early Childhood Professional Certificate (ECPC).
  - 4. An active School-Age Child Care Credential awarded as a Florida Child Care Professional Credential (FCCPC) or School-Age Professional Certificate (SAPC). Graduates who successfully complete a school-age training program offered by a branch of the U.S. Military will be recognized as having met the School-Age FCCPC requirement.
  - 5. Employment History Recognition Exemption. An Employment History Recognition Exemption shall not be accepted to meet the minimum staff credential requirements for Voluntary Pre-Kindergarten (VPK) or towards a Director Credential. Effective July 1, 2006 the Department discontinued issuing this exemption, however individuals that received the exemption prior were not affected by this change.
- C. To maintain an active National Early Childhood Credential, it must be renewed through the agency that awarded the original credential or renewed as a Florida Birth Through Five Child Care Credential. Once renewed, for licensing purposes, individuals must complete a CF-FSP Form 5211, Florida Child Care Staff Credential Verification

Application to have the individual's Training Transcript updated with renewed credential information. An individual with an inactive National Early Childhood Care Credential may submit a renewal application, but while inactive the individual shall not be counted to meet the staff credential requirement. The application will be reviewed, and if approved, a certificate will be issued with a renewal date of five years from the date the completed renewal application was processed.

- D. A staff credential awarded for formal education qualifications is always active and does not need to be renewed.
- E. To maintain an active Birth Through Five or School-Age Child Care Credential, every five years a candidate must complete the renewal Section of the CF-FSP Form 5211; if all criteria are met, the individual's Training Transcript will be updated with renewed credential information. Renewal applications may be submitted by the candidate no earlier than one year prior to the end of the active period of the Birth Through Five or School-Age Child Care Credential. An individual with an inactive Birth Through Five or School-Age Child Care Credential may submit a renewal application, but while inactive the individual shall not be counted to meet the staff credential requirement. The application will be reviewed, and if approved, a certificate will be issued with a renewal date of five years from the date the renewal requirements are met.
- F. A staff credential awarded for Employment History Recognition Exemption is always active and does not need to be renewed.

## 5.10 Training Providers

### 5.10.1 Part I and Part II Training Providers

Child care professionals approved to teach the Department's Child Care Training courses must meet, at a minimum, the following qualifications:

- A. Be at least 21 years of age.
- B. Have completed the Department's six clock hour Train-the-Trainer course.
- C. Have one of the following educational and experiential credentials verified by the Department or its designated representative:
  - 1. Four-year college degree or higher with six college credit hours in the areas of early childhood education/child growth and development, and 480 hours experience in a child care setting serving children ages birth through eight years. A Florida teaching certificate may be substituted for the 480 hours experience in a child care setting.
  - 2. Associate degree in the areas of early childhood education/child growth and development, and 480 hours experience in a child care setting serving children ages birth through eight years.
  - 3. Associate degree with six college credit hours in the areas of early childhood education/child growth and development, and 960 hours experience in a child care setting serving children ages birth through eight years.
  - 4. Four-year college degree with a Florida teaching certificate and be currently employed by a school district in the state of Florida to teach Early Childhood Education in the Education and Training Cluster under the Department of Education Career and Technical Education Program. Trainers who meet this education and experience qualification are limited to teaching only in the Florida Department of Education Early Childhood Professional Certificate (ECPC) and Child Care Apprenticeship Certificate (CCAC) programs.

5. A high school diploma or GED; a National Early Childhood Credential or a Department-approved Birth Through Five FCCPC and three years of full-time experience in a licensed family child care home within the past five years. Trainers who meet this education and experience qualification are limited to teaching only the six-hour Family Child Care Home Rules and Regulations course.
  6. Four-year college degree or higher with six college credit hours in the area of elementary education, and 480 hours experience in a child care setting serving school-age children ages five through twelve years. A Florida teaching certificate may be substituted for the 480 hours experience in a child care setting. Trainers who meet this education and experience qualification are limited to teaching only the five-hour School-Age Appropriate Practices course and five hour Understanding Developmentally Appropriate Practices course.
- D. The Department or its designated representative may require a trainer to attend a specific child care training course prior to being approved.

#### **5.10.2 Florida Birth through Five and School-Age FCCPC Child Care Professional Credential Training Program Providers**

The Department is responsible for ensuring the approved Birth Through Five and School-Age FCCPC Training Providers meet the program requirements. A list of approved "Birth Through Five and School-Age FCCPC Training Providers" may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).

- A. The operational status of a training provider that has been approved provide the Birth Through Five and/or School-Age FCCPC Program and is currently accepting students will be referred to as "Compliant." A Compliant FCCPC Birth Through Five training provider shall submit the signed attestation page of CF-FSP 5191, which is incorporated by reference in paragraph 65C-22.001(7)(c), F.A.C., annually to the Department or its designated representative on or by September 30, and an open FCCPC School-Age training provider shall submit the signed attestation page of the CF-FSP 5257, which is incorporated by reference in paragraph 65C-22.001(7)(h), F.A.C annually to the Department or its designated representative on or by September 30. Compliant FCCPC training providers must ensure availability of all training program files to the Department upon request and be subject to both informal and formal audits/observations. Complaint FCCPC training providers who wish to change their program status to Compliant/Non-operational or Closed must notify the Department in writing of their intent and if they currently have enrolled students, they must provide a teach out plan to the Department for the students to ensure they have an opportunity to complete their credential work.
- B. The operational status of a training provider who has been approved to provide the Birth Through Five and/or School-Age FCCPC Program but is not currently accepting students shall be referred to as "Complaint/Non-operational." Compliant/Non-operational Birth Through Five and School-Age FCCPC training providers are required to maintain program accreditation or licensure during the time they are not accepting students. The signed attestation page of the CF-FSP 5191 (Birth Through Five Providers) and CF-FSP 5257 (School-Age Providers) is to be submitted annually to the Department or its designated representative. Prior to returning to Compliant status, the training provider must

notify the Department in writing of the intent to re-open the program and receive written approval from the Department before enrolling students.

- C. A training provider who has failed to maintain the requirements of the Birth Through Five and/or School-Age FCCPC program shall be deemed as “Non-compliant.” Non-complaint Birth Through Five and School-Age training providers may not teach the FCCPC program and will be removed from the approved list.
- D. The operational status of a training provider who has voluntarily decided to no longer accept students shall be referred to as “Closed.” Closed Birth Through Five and School-Age training providers may not teach the FCCPC program and will be removed from the approved list.

Training providers who offer the Birth Through Five and/or School-Age FCCPC training shall submit FCCPC training student completion documentation in the prescribed format to the Department for issuance of the FCCPC, and to update the graduate’s child care Training Transcript.

## 6 Supervision

- A. The operator shall remain responsible for the supervision of the children in care and capable of responding to emergencies and the needs of the children at all times. Child care personnel must directly supervise children, both indoors and outdoors, by sight and sound. Children must never be left without child care personnel supervision inside or outside the home, in a vehicle, or at a field trip location by themselves.
- B. Bedroom doors must remain open while children are napping or sleeping. When children are napping or sleeping, child care personnel must supervise by sound with frequent visual checks (every 10-15 minutes) to ensure the child’s head is uncovered and assess the infant’s breathing and color. Baby monitors are permissible however, they do not replace the frequent visual checks.
- C. No person shall be an operator, substitute, employee or volunteer in a home while using or under the influence of narcotics, alcohol, or other drugs that impair an individual’s ability to provide supervision and safe child care.
- D. A child who has been placed in an isolation area due to illness must be within sight and hearing of child care personnel.
- E. Children must be attended at all times when being diapered or when changing clothes. Children must receive supervision as required by their age or developmental needs when toileting or bathing. A safety strap or harness must not be used on the diaper changing table/surface.
- F. Infants must be held for bottle feedings until they are developmentally ready to sit in an age appropriate chair with good head control. There must not be any propped bottles. If a child cannot hold the bottle, child care personnel must hold the bottle during feeding.
- G. A child shall never be left unattended on a table or countertop.
- H. Constant and active supervision is required when any child is in or around water, including bathing and swimming activities. An adult should remain in direct physical contact with an infant at all times during swimming or water play. During wading and/or water play activities at a swimming pool on site or during a field trip that is more than three feet deep, or at beach or lake areas, children ages 1 year up to 5 years must be



within an arm's reach and in the sight of the supervising adult at all times. The following minimum staff-to-child ratios must apply while children are swimming or wading:

<b>Age of child(ren)</b>	<b>Staff: Child Ratio</b>
Infant (Birth up to 1 year)	1:1
Toddler (1 year up to 3 years)	1:1
Preschooler (3 years up to 5 years)	1:4
School-Age Children (5 years and up)	1:10
Mixed Age Groups	Ratio shall be based on age of the youngest child present

- I. If the home provides services to drop children off at different locations, the driver must ensure to drop the child off at the appropriate location. Each child transported must be dropped at the designated location and released to an authorized individual as agreed upon by the provider and the custodial parent/legal guardian.
- J. When transporting children in a vehicle or on foot, a telephone or other means of instant communication must be available to child care personnel. Cellular phones, two-way radio devices, citizen band radios, and other means of instant communications are acceptable.
- K. A program is responsible for the supervision of a child until an authorized individual retrieves the child from the program. A child shall not be released to any person other than the person(s) authorized or in the manner authorized in writing by the custodial parent or legal guardians. All individuals authorized to pick up a child must be identified in writing prior to release by the custodial parent or legal guardian to the program, and the program must verify the individual picking up the child is authorized by using a picture form of identification.
- L. During feeding times, children must be individually fed and provided their own tableware. Children must be supervised appropriately for their ages and developmental abilities, to monitor the size of food and that children are eating accordingly.

#### **Large Family Child Care Home Supervision Requirements**

In addition to the requirements above:

- M. In a large family child care home, *direct* supervision must be maintained at all times during the hours of operation.
- N. In addition to the number of child care personnel required to meet staff-to-child ratios, if there are more than six preschoolers participating on field trips away from the large family child care home, there must be one additional adult present per each six preschoolers, or any fraction thereof, to provide direct supervision to the children. If some children remain in the home, the adult supervision staff-to-child ratios as required in section 402.302(8), F.S., shall apply and must be maintained. In addition, one child care personnel on the field trip and one child care personnel remaining on the premises with children must have a valid and current certificate(s) of course completion for pediatric cardiopulmonary resuscitation (CPR) procedures and first aid training. At no time shall the total number of children exceed the capacity as defined in Section 402.302(8), F.S.

## 7 Health and Safety Requirements

- A. Indoor and outdoor play areas must be inspected daily for basic health and safety and documented on a daily inspection log. Any problems noted must be corrected before the play area is used by children. Documentation must be maintained for 12 months.
- B. Guardrails or protective barriers, such as baby gates, should be provided at open sides of stairs, ramps, and other walking surfaces from which there is more than a 30 -inch vertical distance to fall.
- C. No electrical device or apparatus accessible to children shall be located in a place where it can be plugged into an electrical outlet while a person is in contact with a water source, such as a sink, tub, shower area, water table, or swimming pool.
- D. Carbon monoxide detector(s) must be installed as required by s.553.885(1), F.S., or local laws. Carbon monoxide detectors must be tested and maintained according to manufacturer's instructions. Documentation of testing and maintenance must be retained for a minimum of 12 months and available for licensing to review.
- E. All accessible electrical outlets must be "tamper-resistant electrical outlets" that contain internal shutter mechanisms to prevent children from sticking objects into receptacles. In settings that do not have "tamper-resistant electrical outlets," outlets shall have safety covers.

### 7.1 Animal Vaccinations

Animals, pets or fowl must be properly vaccinated, if vaccinations are available for the type of animal, pet or fowl; and be free from disease. Animals that are poisonous, aggressive, venomous, or pose a potential threat of harm to children in care are prohibited. Custodial parents or legal guardian must be informed in writing of all animals on the premises of the home. Such information may be provided by way of a parent flyer, a notification statement, or a statement included in the child's enrollment form. Documentation of current immunizations must be available for review upon request by the licensing authority.

### 7.2 Toxic Substances, Hazardous Materials and Poisonous Items

- A. All areas and surfaces accessible to children shall be free from toxic substances and hazardous materials/equipment/tools, including power tools, plastic bags, matches, candles, lighters, etc. These items, as well as knives, sharp tools, BB guns, pellet guns and other potentially dangerous hazards, shall either be stored in a locked area or must be inaccessible and out of a child's reach.
- B. All potentially harmful items including cleaning supplies, flammable products, poisonous, toxic, and hazardous materials must be labeled and used according to manufacturer's recommendation.
- C. Narcotics, alcohol, or other impairing drugs/paraphernalia must be kept inaccessible to children at all times.
- D. Cleaning must not take place while rooms are occupied by children except for general clean-up activities that are part of the daily routine. General cleaning refers to cleaning necessary to maintain a sanitary environment but that does not pose a hazard to children, such as wiping the table after lunch, soaking toys in a tub on the countertop, sweeping. This does not include cleaning with hazardous materials or any cleaning which poses a risk of slipping or falling.



### 7.3 Smoking on Premises

- A. All operators shall inform custodial parents or legal guardians in writing, if someone living in the home smokes, including e-cigarettes and vaping. Pursuant to Chapter 386.204, F.S., while children are in care, smoking is prohibited, within the home and in vehicles when transporting children. Tobacco and other smoking equipment/materials must be kept inaccessible to children at all times.
- B. Smoking is prohibited in all outdoor areas used by the children in care, including on field trips, while children are in care.

### 7.4 Fire Arms and Weapons

At all times when children are in care, all firearms and weapons, as defined in Section 790.001, F.S., must be stored in a location inaccessible to children and in accordance with Section 790.174, F.S. No firearms or weapons as defined in Section 790.001, F.S., shall be kept upon any person located on the premises, excluding federal, state or local law enforcement officers. It is recommended that parents/guardians be informed of this policy.

### 7.5 Indoor Play Areas

- A. Operators must promote developmentally appropriate active play for all children, including infants and toddlers, every day.
- B. All areas of the home including the play areas shall be in good repair, clean and free from litter, nails, glass, and other hazards.
- C. Strings and cords long enough to encircle a child's neck, such as those on toys and window coverings, shall not be accessible to children.
- D. Bathtubs, buckets, diaper pails, and other open containers of water must be emptied immediately after use.

#### **Large Family Child Care Home Indoor Floor Space**

In addition to meeting the requirements above, a large family child care home must have 35 square feet of usable indoor floor space per child that does not include bedrooms unless it can be demonstrated that these bedrooms are used as multipurpose activity rooms.

- E. Usable indoor floor space refers to that space available for indoor play and activities. Usable indoor floor space is calculated by measuring at floor level from interior walls and by deleting space for stairways, toilets and bath facilities, permanent fixtures and non-movable furniture. Kitchens, offices, laundry rooms, storage areas, hallways, and other areas not normally used or accessible to the children in daily operations are not included when calculating usable indoor floor space to determine total home capacity.
- F. Shelves or storage for toys and other materials shall be considered as usable indoor floor space if accessible to children.
- G. Where infants are in care, they shall have open indoor floor space outside of cribs and playpens.

### 7.6 Outdoor Time, Fencing and Play Area Requirements

- A. Outdoor Play areas shall be clean, in good repair and free from litter, nails, glass, and other hazards.
- B. Tubs, buckets, and other open containers of water should be emptied immediately after use.
- C. The outdoor play areas must be enclosed with fencing or walls a minimum of 4 feet in height. The fence must not prevent the supervision of children. The fence must be in

good condition and conform to applicable local building codes. These areas must have at least two exits, with at least one being remote from the home. If an outdoor play area was approved for usage by the Department prior to October 25, 2017, no new exits are required to be added to meet this standard. However, if outdoor play area fencing is changed then the standard would apply, and two exits must be provided.

- D. Homes caring only for infants under 12 months of age shall not be required to have an outdoor play area; however, infants in care shall be provided opportunities for outdoor time each day that weather permits.
- E. All homes in which the property borders a public road/street or laned road/street with public access with a speed limit of 25 miles per hour or greater, including those providing evening care, must maintain safe and adequate fencing or walls a minimum of four feet in height around the outdoor play area.
- F. Fencing, including gates, must be continuous, and shall not have opening or gaps larger than 3 1/2 inches that would allow children to exit the outdoor play area. The bottom or base of the fence must remain at ground level and free from erosion or buildup to prevent inside or outside access by children or animals.
- G. The fence, decking and gates must be constructed to discourage climbing.
- H. Outdoor play areas must be free from unsecured bodies of water. All water hazards must be inaccessible to children and enclosed with a fence that is 4 to 6 feet high or higher and the bottom or base of the fence must remain at ground level.
- I. All homes must provide and maintain enough usable equipment suitable to each child's age and development and of a quantity for each to be involved in activities. All playground equipment, if provided, shall be securely anchored, unless portable or stationary by design, in good repair, maintained in safe condition, and placed to ensure safe usage by the children.
- J. Maintenance shall include checks at least every month of all supports above and below the ground, all connectors, and moving parts. Documentation must be maintained for a 12-month period.
- K. Permanent or stationary playground equipment must have a ground cover or other protective surface under the equipment that provides resilience and is maintained to reduce the incidence of injuries to children in the event of falls. Equipment used for climbing must not be placed over, or immediately next to hard surfaces not intended for use as surfacing for climbing equipment. All permanent/anchored playground equipment must be placed over a shock absorbing material that is either the unitary or the loose fill type extending beyond the perimeter of the stationary equipment.
- L. All equipment, fences, and objects on the home's premises shall be free from sharp, broken and jagged edges and properly placed to prevent overcrowding or safety hazards in any one area.
- M. All equipment used in the outdoor play area shall be constructed and maintained according to manufacturer's recommendations and allow for water drainage and maintained in a safe and sanitary condition. Any open containers with water must be emptied immediately after use (i.e. pots, toys, or other equipment that collects water).
- N. The outdoor play areas and equipment shall be inspected prior to usage daily for basic health and safety, including, but not limited to:
  - 1. Missing or broken parts;
  - 2. Protrusion of nuts and bolts;
  - 3. Rust and chipping or peeling paint;
  - 4. Sharp edges, splinters, and rough surfaces;
  - 5. Stability of handholds;
  - 6. Visible cracks;
  - 7. Stability of non-anchored large play equipment (e.g. playhouses);

- 8. Wear and deterioration;
- 9. Vandalism or trash

Any problems noted must be corrected before the play area is to be used by children.

### **Large Family Child Care Home Outdoor Play Area and Outdoor Equipment**

In addition to meeting the requirements above:

- O. All large family child care homes must have a minimum of 270 square feet of usable outdoor play area located on their property and which is used for the children attending or residing at the large family child care home, during operating hours.

## **7.7 Swimming Pools**

- A. All in-ground swimming pools and above-ground swimming pools more than one-foot deep shall have either a fence or barrier on all four sides, at a minimum of four feet in height, separating the home from the swimming pool, or a pool alarm that is operable at all times when children are in care. The fence or barrier shall not have any gaps or openings that would allow a young child to crawl under, squeeze through, or climb up the barrier.
- B. All spas and hot tubs must meet the same barrier requirements for in-ground and above-ground swimming pools, or spas and hot tubs may be covered with a safety cover that meet the requirements of Section 515.25(1), F.S. at all times when children are in care. The exterior wall of the home with an ingress and egress does not constitute a fence or barrier.
- C. All doors or gates in the fence or barrier shall be locked at all times when children are in care and when the pool is not being used by the children in care.
- D. In addition to the fence, barrier or pool alarm, child care personnel shall ensure that all exterior doors leading to the pool, spa, or hot tub area remain locked at all times while children are in care.
- E. Barriers may be temporary in nature but must be sturdy and meet all the above requirements and be in place during all times when children are in care. The wall of an above-ground swimming pool may be used as its barrier; however, such structure must be at least four feet in height.
- F. Any ladder or steps that are the means of access to an above-ground pool must be removed at all times while children are in care and when the pool is not being used by the children in care.
- G. If a home has a swimming pool and/or spa, it shall be maintained by using chlorine or other suitable chemicals. Water in swimming pools or spas must be maintained at all times to ensure visibility to the bottom. Wading pools, including inflatable water slides with landing area where water collects, are prohibited.
- H. If the home uses a swimming pool that exceeds three feet in depth at the family day care home site, one person who has completed and maintains a current certification from a basic water safety course offered by the American Red Cross, YMCA, or other organization, must be present when children have access to the swimming area.

### **If the home uses swimming pools not at the family day care home site or takes the children to water areas such as a beach or lake for swimming activities:**

- I. The operator must provide one person with a certified lifeguard certificate or equivalent who must be present when children are in the swimming area, unless a certified lifeguard is on duty.

- J. Providers must ensure that all pools and spas have drain covers that are in compliance with the Virginia Graeme Baker Pool and Spa Safety Act, as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education, which is incorporated by in 65C-22.001(7)(v), F.A.C.
- K. Each swimming pool more than six feet in width, length, or diameter must be provided with a ring buoy and rope, a rescue tube, or a throwing line and a shepherd's hook that will not conduct electricity. This equipment must be long enough to reach the center of the pool, kept in good repair, and stored safely and conveniently for immediate access. Child care personnel must be instructed on the proper use of this equipment and documentation of instruction must be maintained in the child care personnel file.

## 7.8 Appropriate, Safe and Sanitary Bedding

- A. A home must include a designated area where each child can sit quietly or lie down to rest or nap. Each child in care must be provided safe and sanitary bedding to be used when napping or sleeping. Linens must be washed at least once a week and more often if soiled or dirty. All bedding and linens must be thoroughly cleaned and sanitized at least once a week and before use by another child. Bedding and linens, when not in use, must be stored in a sanitary manner which prevents the spread of germs or lice from other linens.
- B. All personnel that care for infants must follow safe sleep practices as recommended by the American Academy of Pediatrics (AAP) as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education, which is incorporated by reference in 65C-22.001(7)(v), F.A.C. Cribs, play yards, and playpens used for infants must have tight fitting sheets and no excess bedding, which includes but is not limited to: bumper pads, hanging mobiles, quilts, comforters, receiving blankets, pillows, stuffed animals and cushions.
- C. Before purchase and use, cribs and play yards must be in compliance with regulations as outlined in Title 16, Parts 1219, 1220 & 1221 Code of Federal Regulations, 2014, which is incorporated by reference in 65C-22.001(7)(w), F.A.C.
- D. Children must not be placed in the cribs, playpens, play yards or other sleeping and napping bedding with items that could pose a strangulation or suffocation risk. Cribs, playpens, play yards other napping and sleeping bedding being used by a child must be placed a minimum of 18 inches away from window blinds, draperies or any window treatment/cover that pose a strangulation hazard.
- E. When napping or sleeping, young infants who are not capable of rolling over on their own shall be positioned on their back and on a firm surface to reduce the risk of Sudden Infant Death Syndrome (SIDS), unless an alternative position is authorized in writing by a physician. Sleep sacks that fit according to manufacturer's recommendations, do not restrict the infant's arms, and will not slide up around the infant's face may be used for the comfort of the sleeping infant; however, swaddling shall not be used unless authorized in writing by the child's physician. Written documentation of a physician's authorization shall be maintained in the child's record. Documentation must include the child's name, child's date of birth, description of sleep position required, instructions for the use of any equipment needed, and length of time authorization is valid.
- F. Sleep bedding includes beds, cribs, or mattresses. Nap bedding includes sleep bedding, cots, playpens, play yards or floor mats. Air and foam mattresses are prohibited. Floor mats must be at least one-inch thick, and covered with an impermeable surface.
- G. Bedding must be appropriate for the child's size.

- H. Nap bedding is not required for school-age children; however, the family day care home provider shall provide an area as described below for those children choosing to rest.
- I. Children one year of age or older may nap or sleep on beds used by the family, provided individual linens are provided for each child. Each child shall have a separate bed, cot, crib, and playpen, play yard mattress or floor mat, except that two sibling preschool children may share a double bed.
- J. The operator must prepare a written plan outlining the sleeping arrangements of the children in care to be provided to the licensing counselor upon request.
- K. If the children are sleeping overnight, the operator must ensure accepted bedtime routines, such as brushing teeth and washing face and hands, are followed. Toothbrushes, towels and wash cloths may not be shared.
- L. Napping spaces shall not be in kitchens, bathrooms, utility rooms, or garages.
- M. Napping spaces shall not be under furniture, against furniture that may create a hazard, or blocking exit routes. A minimum distance of 18 inches must be maintained around individual napping spaces, except a maximum of two sides of a napping space may be against a solid barrier, such as a wall. The solid side of a crib does not meet the requirement of a solid barrier.

## **7.9 Vermin/Pest Control**

Rodents and vermin must be exterminated. Pest control shall not take place while rooms are occupied by children. A home must adopt an integrated pest management program to ensure long-term, environmentally sound pest suppression through a range of practices including pest exclusion, sanitation and clutter control, and elimination of conditions that are conducive to pest infestations.

## **7.10 Toys, Furnishings, Equipment and Plumbing**

- A. All parts of the home, both indoors and outdoors; including the furnishings, equipment, toys and plumbing shall be kept clean, and sanitary, free from hazards, in an orderly condition and in good repair at all times. Provider should monitor the Consumer Product Safety Commission (CPSC) recommendations for use of equipment.
- B. The operator shall make available toys, equipment and furnishings suitable to each child's age and development and of a quantity suitable for each child to be involved in activities.
- C. Toys, equipment, and furnishings must be safe and maintained in a sanitary condition. The program must follow a routine schedule of cleaning, sanitizing and disinfecting toys, equipment, and furnishings. These items must be cleaned and sanitized or disinfected immediately or prior to another child's use if exposed to bodily fluids, such as saliva. Homes must have a written routine schedule for cleaning, sanitizing and disinfecting equipment, materials, furnishings, and play areas. This schedule must include items to be cleaned, sanitized or disinfected on a daily or weekly basis. Daily indoor equipment items include but are not limited to: counter/table tops, toys, floors, diaper pails, toilets, and sinks. Weekly indoor equipment items include but are not limited to: linens, machine washable cloth toys, play activity centers, dress-up clothes, cribs, mats, and cots.

## **7.11 Fire Safety**

- A. It is the responsibility of the operator to ensure all areas of the home are free from fire hazards such as lint and dust build up in heating and air vents, filters, exhaust fans, ceiling fans, and dryer vents.

- B. The home shall have an operable smoke detector(s) and fire extinguisher with a current certificate.

### **Large Family Child Care Home Fire Safety Requirements**

In addition to the requirements above:

- C. Large family child care homes shall conform to state standards adopted by the State Fire Marshal, Chapter 69A-36, F.A.C., Uniform Fire Safety Standards for Child Care Facilities.
- D. A copy of the current and approved annual fire inspection report completed by a certified fire inspector must be on file with the licensing authority.

## **7.12 Telephone, Lighting, Temperature and Ventilation**

- A. The home shall have at least one operable corded telephone.
- B. At all times and appropriate for the activity, lighting in family day care homes must be sufficient enough to allow for safe movement and egress, and permit child care personnel to visually observe and supervise children in care.
- C. The home must have proper ventilation, and the temperature must be maintained between 65 and 82 degrees Fahrenheit.

## **7.13 Food Preparation/Storage**

Proper storage of food is essential to prevent food contamination, as well as, insect and rodent infestation. Correct handling and storage of all food is a key component in preventing food-borne illnesses. To prevent bacteria growth, cold food must be kept at or below 41 degrees Fahrenheit and hot foods at or above 135 degrees Fahrenheit.

- A. Poisonous/toxic chemicals or cleaning products must be stored separately from food. Products must not be stored on shelves above food preparation areas and/or food products intended for human consumption, unless placed in bins that are impermeable.
- B. Food containers, such as cans, plastic containers, boxes and bags must be stored above the floor on clean surfaces protected from splash and other contamination.
- C. Opened packages of dried goods and perishable or leftover food items must be properly covered/sealed in containers or bags and stored to prevent contamination.
- D. Refrigerators/freezers must have accurate food grade thermometers designed to measure cold storage temperature and these must be placed inside each refrigeration and freezer unit. Thermometers in refrigerators must show a reading of 41 degrees Fahrenheit or below, and thermometers in freezers must show a reading of 0 degrees Fahrenheit or below. The thermometer must be located in the center of the unit and be readily accessible. Thermometer temperature readings higher than specified above require further temperature testing of food samples stored in the unit using a probe type thermometer; and adjustments to the unit setting to reach and maintain the required readings must be made.
- E. A food preparation area shall be clean and free of dust, dirt, food particles, and grease deposits.
- F. Food provided by parents/guardians must be stored and handled in a sanitary manner at all times to prevent contamination or spoilage. If food is supposed to be kept cold, the food must be stored in a refrigerator until eaten, or parents/guardians must include ice packs to keep food cold.

## **7.14 Food and Nutrition**

- A. Handling of food in a safe and careful manner prevents the spread of bacteria, viruses and fungi. Outbreaks of foodborne illnesses have occurred in many settings, including

- child care facilities. Children are at a higher risk for contracting food-borne illness, as their bodies are in the process of growing, developing, and building adequate immune systems to fight illness. While some food-borne illnesses originate at farms or food manufacturing plants, the majority are the result of poor food handling practices. Child care personnel, while working in the food preparation area, must use clean disposable gloves, utensils, or similar items in the food preparation area to prevent contact with ready-to-eat foods. If the operator chooses to supply food, the operator shall provide nutritious meals and snacks of a quantity and quality to meet the daily nutritional needs of the children. Weekly meal and snack menus shall be planned and written and must be available for review by licensing authority. Meals and snacks must contain, at a minimum, the meal and snack patterns shown for infants and children in the Child Care Food Program (CCFP) guidelines, incorporated by reference in 65C-22.001(7)(r) and (s), F.A.C.
- B. Breakfast shall consist of at least three different food groups; lunch and dinner shall consist of at least four different food groups, and snacks shall consist of at least two different food groups. The USDA MyPlate is to be used to determine which food groups to serve at each meal or snack serving size and age appropriateness of the selected foods for children. The USDA MyPlate dieting guidelines are incorporated by reference in 65C-22.001(7)(t), F.A.C.
  - C. If a special diet is required for a child by a physician, a copy of the physician's order, a copy of the diet and a sample meal plan for the special diet shall be maintained in the child's file for as long as the child is in care. If the custodial parent or legal guardian notifies the family day care home of any known food allergies, written documentation must be maintained in the child's file.
  - D. Daily meal and snack menus shall be maintained for a minimum of 12 months for licensing purposes. Operators who participate in the USDA Food Program shall provide nutritious meals and snacks and must keep menus in accordance with the Department of Health and the USDA requirements.
  - E. Clean, sanitary drinking water shall be readily accessible in indoor and outdoor areas, throughout the day for all children. On hot days, bottle fed infants may be given additional breastmilk or formula provided by their parent/ legal guardian. Infants should not be given plain water in the first six months of life unless directed to by the child's pediatrician. Homes that have a well system must maintain current written records indicating the well system meets the requirements of the Department of Health on an annual basis.
  - F. Foods that are associated with young children's choking incidents must not be served to children under 4 years of age, such as, but not limited to, whole/round hot dogs, popcorn, chips, pretzel nuggets, whole grapes, nuts, cheese cubes/sticks and any food that is of similar shape and size of the trachea. Food for infants must be cut into pieces  $\frac{1}{4}$  inch or smaller, food for toddlers must be cut into pieces  $\frac{1}{2}$  inch or smaller to prevent choking. This applies to all food, even food provided by parents/guardians.
  - G. Due to the extreme risk of choking, solid foods, including cereal, may not be given in bottles or with infant feeders to children with normal feeding habits unless authorized by a physician. Solid foods may not be fed to an infant younger than 4 months of age unless directed by a physician. Solid foods must be of a safe consistency and must be developmentally appropriate for the age and developmental ability of the infant.
  - H. Breastmilk and formula must be handled in a sanitary manner at all times and according to manufacturer's instructions and instructions by parents/guardians. Prepared bottles must be placed in the refrigerator immediately and used within 24 hours. If instructions are not readily available, child care personnel must obtain information from the World Health Organization's Safe Preparation, Storage and



Handling of Powdered Infant Formula Guidelines, as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education, which is incorporated by reference in 65C-22.001(7)(v), F.A.C.

- I. Bottled breast milk, infant bottles, and formula must not be heated in the microwave. Heated bottles and foods must be tested before feeding to ensure heat is evenly distributed and to prevent injury to children. A bottle can only be warmed once. A warmed bottle cannot be returned to the refrigerator or re-warmed. All breastmilk and infant formula left in bottles after feedings must be discarded within one hour after serving an infant. Unused breastmilk may be returned to the parent/guardian in the bottle or container.
- J. Breastmilk or infant formula provided for a specific infant by a parent or guardian must not be fed to other children. In the event that the wrong breastmilk or formula is given to an infant in care, the provider must immediately inform the child's parent or legal guardian of the incident, as well as the parent or legal guardian of the infant that the formula or breastmilk was intended for. These incidents must be documented as an accident/incident.
- K. Previously opened baby food jars must not be accepted. If food is fed directly from the jar by the caregiver, the jar can be used for only one feeding and the remainder discarded.
- L. Providers shall develop and follow procedures for the preparation and storage of expressed breastmilk that ensures the health and safety of all infants, as outlined by the Academy of Breastfeeding Medicine Protocol, and prohibits the use of infant formula for a breastfed infant without parental consent, as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education, which is incorporated by in 65C-22.001(7)(v), F.A.C.
- M. Each child's food allergies shall be posted prominently in the kitchen or wherever food is served with permission of the parent/guardian and shared with child care personnel working in the home.

## 7.15 Hygiene and Sanitation

- A. Soiled items shall immediately be placed in plastic lined, securely covered containers that are not accessible to children. The container shall be emptied, cleaned and sanitized or disinfected daily. Children's wet or soiled clothing and crib sheets shall be changed.
- B. Potty chairs, if used, shall be cleaned and sanitized or disinfected after each use.
- C. The operator shall provide and maintain toilet and bath facilities that are easily accessible and at a height usable by the children. Platforms or stools are acceptable when they are safely constructed, with impervious surfaces, and can be easily cleaned and sanitized or disinfected.
- D. Running water, soap, trash receptacles, toilet paper and individual towels/disposable towels shall be available and within reach of children using the toileting home.
- E. Single service paper or plastic plates, utensils, and cups shall not be reused.
- F. Plates, utensils, cups, bottles and sippy cups provided by the family day care home that are not disposable shall be washed, rinsed, and sanitized between uses.
- G. All bottles and sippy cups prepared and used continuously throughout the day shall be individually labeled with the child's first and last name. This does not limit any type of identification system in addition to names. Sippy cups or bottles brought from home shall be individually labeled with the child's first and last name and returned to the custodial parent or legal guardian daily.

## 7.16 Hand Hygiene

Child care personnel and children shall wash their hands with soap and running water, dry thoroughly, and follow personal hygiene procedures for themselves or while assisting others, and immediately after outdoor play. Situations or times that children and child care personnel must perform hand hygiene should be posted in all food preparation, diapering and toileting areas.

The operator, substitutes, employees, volunteers and children shall abide by the Centers for Disease Control guidelines for handwashing incorporated by reference in 65C-22.001(7)(u), F.A.C. Copies of the Center for Disease Control Guidelines may be obtained at [www.cdc.gov](http://www.cdc.gov). Hands must be washed:

- A. Upon arrival for the day, after breaks, or when moving from one group to another.
- B. Before and after the following activities:
  - 1. Preparing food or beverages;
  - 2. Eating, handling food, or feeding a child;
  - 3. Brushing or helping brush a child's teeth;
  - 4. Giving medication or applying a medical ointment or cream in which a break in the skin (e.g., sores, cuts, or scrapes) may be encountered;
  - 5. Playing in water (including swimming) that is used by more than one person; and
  - 6. Diapering.
- C. After the following activities:
  - 1. Using the toilet or helping a child use a toilet;
  - 2. Handling bodily fluid (mucus, blood, vomit);
  - 3. Handling animals or cleaning up animal waste;
  - 4. Playing in sand, on wooden play sets, and outdoors; and
  - 5. Cleaning or handling the garbage.

## 7.17 Individually Labeled Towels and Wash Cloths

Each child shall have his own individually labeled towel or wash cloth. If disposable towels are used, they shall be discarded after each use. Individually labeled towels and wash cloths must be washed at least once a week and stored in a sanitary manner which prevents the spread of germs.

## 7.18 Diapering Area Cleanliness/Sanitization

When children in diapers are in care, there shall be a diaper changing area with an impermeable surface that is cleaned and sanitized or disinfected after each use.

- A. The diaper changing area shall be located separate from the food preparation, food service and feeding area.
- B. Items unrelated to diaper changing shall not be stored in the diaper changing area nor shall they be placed on the diaper changing table.

## 7.19 First Aid Kit

At least one first aid kit must be maintained on the premises of the home at all times and on activities away from the home. The first aid kit shall be kept out of the reach of children and must be accessible to child care personnel. First aid kits or supplies must be restocked after each use. The kit must be clearly labeled "First Aid" and must, at a minimum, include:

- A. Soap and hand sanitizer (to be used with supervision if hands are not visibly soiled and if no water is present),

- B. Adhesive bandages,
- C. Disposable non-porous gloves,
- D. Cotton balls or applicators,
- E. Sterile gauze pads or rolls,
- F. Adhesive tape,
- G. Digital thermometer,
- H. Tweezers,
- I. Pre-moistened wipes,
- J. Scissors,
- K. Bottled water (for cleaning wounds or eyes), and
- L. A current resource guide on first aid and CPR procedures.

## 7.20 Emergency Procedures and Notification

The operator shall have a procedure for responding when an immediate emergency medical response is required. Emergency procedures must be posted and readily accessible. The operator shall develop contingency plans for emergencies or disaster situations when it may not be possible to follow standard emergency procedures. All child care personnel must be trained to manage in an emergency.

- A. Emergency telephone numbers (including ambulance, fire, police, poison control center, Florida Abuse Hotline, the county public health unit); the home's address, and directions to the home (including major intersections and local landmarks) must be posted on or near all telephones and shall be used to protect the health, safety and well-being of any child in care.
- B. To meet the immediate needs of the child, child care personnel shall call 911 or other emergency numbers in the event of an emergency.
- C. Custodial parents or legal guardian shall be notified immediately in the event of any serious illness, accident, injury or emergency involving their child and their specific instructions regarding action to be taken under such circumstances shall be obtained and followed. If the custodial parent or legal guardian cannot be reached, child care personnel must contact those persons designated by the custodial parent or legal guardian to be contacted under these circumstances and shall follow the written instructions provided by the custodial parent or legal guardian.
- D. All accidents, incidents or unusual occurrences that are threatening to the health, safety, or welfare of a child, and observed health related signs and symptoms, which occur at a home, on field trips or during transportation, must be documented on the day they occur. Documentation shall include the name of the affected party, date and time of occurrence, description of occurrence, actions taken, and signature of operator and custodial parent or legal guardian. This documentation must be shared with the custodial parent or legal guardian on the date of occurrence.
- E. Records of accidents, incidents, and observed health related signs and symptoms must be maintained for 12 months.
- F. If the parent or legal guardian does not pick up the child on the date of occurrence of the accident or incident, the individual authorized to pick up the child must sign and be provided a copy of the accident/incident form.
- G. After the occurrence of an incident that involved the serious injury or death of a child, the operator must notify the licensing authority immediately in order for the licensing authority to ensure health standards are met for continued operation as a family day care home.
- H. The home must have a written plan for reporting and managing any incident or unusual occurrence that is threatening to the health, safety, or welfare of the children or child

care personnel to the licensing authority. The following types of incidents must be addressed:

1. Lost or missing child;
2. Suspected maltreatment of a child;
3. Injuries or illness requiring hospitalization or emergency treatment;
4. Death of child or child care personnel;
5. Presence of a threatening individual who attempts or succeeds in gaining entrance to the home.

## **7.21 Fire Drills**

- A. During the home's licensure year, fire drills utilizing the smoke detector(s) must be conducted monthly at various dates and times when children are in care.
- B. When the home's smoke detectors(s) is/are activated or initiated, all adults and children must evacuate the home.
- C. The smoke detector(s) must be operable at all times.
- D. A current attendance record and parent/guardian contact information must accompany child care personnel out of the home during a drill or actual evacuation, and be used to account for all children. The operator must maintain a written record of the fire drills showing the date, number of children and child care personnel in attendance, evacuation route used, and time taken for all individuals to evacuate the premises. Each fire drill record must be maintained for a minimum of 12 months from the date of the fire drill. The fire drills conducted must include, at a minimum:
  1. One fire drill during the established napping/sleeping times,
  2. One fire drill using an alternate evacuation route, and
  3. One fire drill in the presence and at the request of the licensing authority in coordination with the operator or designee.

## **7.22 Emergency Preparedness**

- A. The operator shall develop a written emergency preparedness plan to include, at a minimum, procedures to be taken by the family day care home during a fire, evacuation, relocation, shelter in place, lockdown, and inclement weather (tornadoes). The plan must describe how the home will notify and update parents/guardians. Daily attendance rosters must be used to account for all children once gathered in a safe space after exit and upon return to the home.
- B. Emergency preparedness drills shall be conducted when children are in care. Each drill, excluding the fire drills, outlined in the emergency preparedness plan must be practiced a minimum of one time per year.
- C. A current attendance record and parent/guardian contact information must accompany the child care personnel during the drill or actual emergency and must be used to account for all children.
- D. The operator shall maintain a written record of the emergency preparedness drills showing the type of drill, date conducted, number of children in attendance, and time taken for all individuals to complete the drill. Documentation of all drills must be maintained for a minimum of 12 months.
- E. Documentation of conducted fire and emergency preparedness drills must be available at the time of the inspection. Documentation produced after the inspection shall not meet the licensing standard or corrective action requirements.
- F. A home that chooses to operate using an alternate power source, such as a generator, must be permanently installed and maintained in accordance with the manufacturer's recommendations and comply with the Florida Building Code and the Florida Fire Prevention Code 69A-60, F.A.C. The alternate power source and fuel supply shall be

located in an area that is not subject to flooding or damage from storm surge. Additionally, if the generator is gas powered, the home must install and maintain a carbon monoxide detector.

### **Large Family Child Care Home Emergency Preparedness**

In addition to the requirements above:

- G. The operator shall prepare an emergency evacuation plan including a diagram of safe routes by which the child care personnel and children may exit each area of the home in the event of fire or other emergency requiring evacuation.
- H. This plan shall be posted and shared with the employees, substitutes, custodial parents, and/or legal guardians.

After a fire or natural disaster, the operator must notify the licensing authority within 24 hours as to their operational status in order for the licensing authority to ensure health standards are met for continued operation as a home child care.

## **7.23 Communicable Disease Control**

There are three common modes of transmission for the spread of microorganisms in child care settings: contact, droplet, and airborne. Many common infections encountered in the child care setting are transmitted by direct or indirect contact. Child care providers shall develop a written exposure plan regarding universal safety precautions, recommended by the Centers for Disease Control and Prevention (CDC), to follow in the event there is exposure to blood and potentially infectious fluids. Personnel are required to be educated on the home's exposure plan regarding standard precautions before beginning to work and annually thereafter. Written documentation that child care personnel have participated in the home's annual refresher education for the exposure plan, and understand the proper procedures in the event there is exposure to blood and potentially infectious fluids must be retained for 12 months and be available for licensing to review.

- A. Children in care shall be observed on a daily basis for signs of communicable disease. Signs and symptoms of a suspected communicable disease include the following:
  - 1. Severe coughing, causing the child to become red or blue in the face or to make a whooping sound;
  - 2. Difficult or rapid breathing;
  - 3. Stiff neck;
  - 4. Diarrhea (more than one abnormally loose stool within a 24-hour period);
  - 5. Temperature of 101 degrees Fahrenheit or higher when in conjunction with any other signs of illness (Any infant younger than 2 months of age with fever should get immediate medical attention);
  - 6. Pink Eye;
  - 7. Exposed, open skin lesions;
  - 8. Unusually dark urine and/or gray or white stool;
  - 9. Yellowish skin or eyes; or
  - 10. Any other unusual sign or symptom of illness.
- B. The operator shall have a designated isolation area for a child who becomes ill. The child's condition shall be closely observed. Any child who is suspected of having a communicable disease or who has a fever of 101 degrees Fahrenheit or higher, in conjunction with any of the signs and symptoms listed above shall be placed in the isolation area. Linens and disposable items shall be changed after each use. For

- children whose symptoms do not require exclusion, verbal or written notification to the parent/guardian at the end of the day is acceptable.
- C. The condition shall be reported to the custodial parent or legal guardian and the child shall be removed from the home. Such children shall not return to the home without medical authorization, or until the signs and symptoms of the disease are no longer present.
1. A child identified as having head lice shall not be permitted to return until the following day and only provided that treatment has occurred and been verified. Verification of treatment may include a product box, box top, empty bottle, or signed statement by a custodial parent or legal guardian that treatment has occurred. The operator must also treat areas, equipment, toys, and furnishings, with which the child has been in contact.
  2. An operator, substitute, employee, volunteer, or household member who develops signs and symptoms of a communicable disease or who has a fever of 101 degrees Fahrenheit or higher, in conjunction with any of the signs and symptoms listed above shall leave the areas of the home occupied by the children and shall not return without medical authorization, or until the signs and symptoms are no longer present. If it is the operator who is ill, the substitute must assume the operator's responsibilities.
  3. If the local health department official or primary health care provider suspects that a child, household member or child care personnel is contributing to transmission of the illness, is not adequately immunized when there is an outbreak of a vaccine-preventable disease, or the circulating pathogen poses an increased risk to the individual. The child or child care personnel should not return until the health department or primary health care provider determines the risk of transmission is no longer present.

#### **Communicable Disease Outbreaks**

Operators are required to notify the local county health department immediately upon any suspected outbreak of communicable disease and follow the health department's direction. A suspected outbreak occurs when two or more children or adults have the onset of similar signs or symptoms, within a 72-hour period or when a case of a serious or reportable communicable disease is diagnosed or suspected in a child or employee. Some examples include shigella, salmonella, chicken pox, measles, pertussis, and hand, foot and mouth disease. Contact your local health department for a determination of whether reporting is required.

## **7.24 Medication**

The family day care home or large family child care home is not required to give medication; however, if they choose to do so, the following shall apply:

- A. The operator must have written authorization from the custodial parent or legal guardian to dispense prescription and non-prescription medications. This authorization must be dated and signed by the custodial parent or legal guardian and must contain the child's name; the name of the medication to be dispensed; and the date, time and amount of dosage to be given. This record shall be initialed or signed by the child care personnel who gave the medication. Prescription and non-prescription medications that are used on an "as needed" basis require the parent/ legal guardian to provide additional documentation on the authorization form to describe symptoms that would require the medication to be given. The child care personnel must never administer a medication that is prescribed for one child to another child.



- B. Any known allergies to medication or special restrictions must also be documented, maintained in the child's file, and posted with stored medication.
- C. Prescription and non-prescription medication brought to the home by the custodial parent or legal guardian must be in the original container.
- D. Prescription medication must have a label stating the name of the physician and/or pharmacy and contact information, child's name, name of the medication, and medication directions.
- E. All prescription and non-prescription medication shall be dispensed according to written directions on the prescription label or printed manufacturer's label and maintained at the appropriate temperature.
- F. In the event of an emergency, non-prescription medication that is not brought in by the custodial parent or legal guardian can be dispensed only if the operator has written authorization from the custodial parent or legal guardian to do so. Any medication dispensed under these conditions must be documented in the child's file and the custodial parent or legal guardian must be notified on the day of occurrence.
- G. The operator must maintain a record for each child receiving medications that documents the full name of the child, the name of medication, the date and time the medication was dispensed, the amount and dosage, and the name of the person who dispensed the medication. The record shall be maintained for a minimum of 12 months after the last day the child received the dosage.
- H. All medicine must have child resistant caps, if applicable, and shall either be stored in a locked area or must be inaccessible and out of a child's reach.
- I. Medication which has expired or is no longer being administered shall be returned to the custodial parent or legal guardian or discarded if the child is no longer enrolled in care at the home.
- J. Prior to administering medication to children, child care personnel responsible for administering medication must be educated on proper administration procedures. Written documentation must be maintained in the personnel file that child care personnel administering medication have been educated on proper administration procedures.
- K. Child care personnel should ensure sun safety for themselves and children under their supervision by keeping infants younger than six months out of direct sunlight, limiting sun exposure when ultraviolet rays are strongest and applying sunscreen with written permission of parents/guardians. Manufacturer instructions should be followed.
- L. Use of diaper creams and insect repellent may only be utilized with written permission from parents/guardians. Manufacturer instructions should be followed.
- M. Sunscreen, diaper cream, and insect repellent do not need to be documented on the medication log unless prescribed by a physician.

## **8 Children's Records**

### **8.1 Health/Immunization Records**

- A. The operator is responsible for obtaining for each child in care a current, complete and properly executed Florida Certification of Immunization form, Parts A-1, B, and/or C, DH 680 (July 2010), or the Religious Exemption from Immunization form, DH 681 (July 2008), which are incorporated herein by reference in 65C-22.001(7)(o) and (p), F.A.C., from the custodial parent or legal guardian, within 30 days of enrollment. DH Form 680 and DH Form 681 may be obtained from the local health department. The parent/guardian of a child who has not received the age-appropriate immunizations

- prior to enrollment and who does not have documented medical or religious exemptions from routine childhood immunizations should provide documentation of a scheduled appointment or arrangement to receive immunizations. Providers must include a general statement in parent handbook/policies to inform parents/guardians, at time of enrollment, that some children in care may not have current immunizations.
- B. If the custodial parents or legal guardians fail to provide the above required documentation within 30 days of enrollment, the home shall not allow the child to remain in the program.
  - C. Immunizations received out-of-state are acceptable; however, immunizations must be documented on the Florida Certification of Immunization form and must be signed by a physician practicing in the State of Florida.
  - D. Providers may receive additional information on immunization requirements by obtaining the most current edition of the “Immunization Guidelines – Florida Schools, Child Care Facilities and Family Day Care Homes” as referenced in Rule 64D-3.011, F.A.C.
  - E. It is recommended that child care personnel are current with all immunizations routinely recommended for adults by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC), as referenced in Caring for Our Children Basics Health and Safety Foundations for Early Care and Education, which is incorporated by reference in 65C-22.001(7)(v), F.A.C.

## **8.2 Student Health Records**

- A. The operator is responsible for obtaining for each child in care a current, complete and properly executed DH 3040, Student Health Examination form, incorporated by reference in 65C-22.001(7)(q), F.A.C. and may be obtained from the local county health department, or a signed statement by an authorized professional that indicates the results of the components of the form are included in the health examination from the custodial parent or legal guardian, within 30 days of enrollment.
- B. The Student Health Examination shall be completed by a person given statutory authority to perform health examinations.
- C. The Student Health Examination form or signed statement is valid for two years from the date the physical was performed and must be on file as long as the child is in care.
- D. If the custodial parents or legal guardians fail to provide the above required documentation within 30 days of enrollment, the home shall not allow the child to remain in the program.
- E. School-aged children attending public or nonpublic schools are not required to have student health examination and immunization records on file at the home as such records are on file at the school where the child is enrolled.
- F. If the custodial parents or legal guardians need assistance concerning these requirements, the home shall refer them to the Department of Health or to the child's physician.
- G. Medical records in this section are the property of the custodial parent or legal guardian and must be returned when the child is no longer in care. The medical records are transferable if the child is placed in a different child care.
- H. Any child who has or is at an increased risk for a chronic physical, developmental, behavioral or emotional condition and require additional services must have a current Emergency Care Plan, prepared by the parent/guardian or physician, included in the child's file and readily accessible for those caring for the child. Child care personnel caring for a child with an Emergency Care Plan must be trained to recognize and respond appropriately to a medical emergency.

### 8.3 Enrollment Information

- A. The operator shall obtain enrollment information from the child's custodial parent or legal guardian prior to accepting the child into care. This information shall be documented on CF-FSP Form 5219, Child Care Application for Enrollment, which is incorporated by reference in 65C-22.001(7)(f), F.A.C., or an equivalent that contains all the information required by the Department's form. CF-FSP Form 5219 may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).
- B. Enrollment information shall be kept current and on file for each child in care and available for licensing to review.
- C. The enrollment information shall include, in writing, permission for the home to release the child to any person(s) authorized or in the manner authorized by the custodial parent or legal guardians. The name, address and phone number of authorized persons must be in the enrollment information.
- D. There shall be signed statements from the custodial parents or legal guardian that the family day care home or large family child care home has provided them with the following information: The Department of Children and Families' family day care home brochure, CF/PI 175-28, September 2007, Selecting a Family Day Care Home Provider, which is incorporated by reference in 65C-20.008(7)(b), F.A.C. This brochure may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).
- E. Annually, during the months of August and September, the home must provide parents/guardians with information detailing the causes, symptoms, and transmission of the influenza virus. To assist providers, the Department developed a brochure, CF 175-70, June 2009, Influenza Virus, Guide to Parents, incorporated by reference in 65C-22.001(7)(n), F.A.C., which may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).
- F. Enrollment information shall include parental/guardian consent for child care personnel to have access to child's records.
- G. Annually, during the months of April and September, the operator must provide parents with information regarding the potential for distracted parents to fail to drop off a child at the family day care home or the large family child care home and instead leave them in the adult's vehicle upon arrival at the adult's destination. CF/PI 175-12, brochure, which is incorporated by reference in 65C-22.001(7)(x), F.A.C. and may be obtained from the Department's website at [www.myflfamilies.com/childcare](http://www.myflfamilies.com/childcare).

### 8.4 Daily Attendance

- A. Daily attendance of children must be taken and recorded by child care personnel, documenting the time when each child enters and departs the home.
- B. The custodial parent or guardian may document the time when his/her child enters and departs the family day care home. However, the operator is responsible for ensuring that attendance records are complete and accurate.
- C. If a child does not arrive to the home or the agreed upon designated pick-up location, and the home has an arrangement/agreement in place to provide transportation or accept the child from other means of transportation, such as but not limited to, school district buses, contracted transportation services, city buses, or if the child is walking to the home on their own, the child care personnel must communicate immediately with the custodial parent/legal guardian; if there was no prior communication from the custodial parent/legal guardian of the child's absence. If the child care personnel is unable to reach or leave a message with the child's parent/guardian, emergency contacts must be notified. All attempts to contact the parent/guardian and emergency contacts must be documented on the attendance roster.

- D. Attendance records must be maintained for a minimum of 12 months and available for licensing to review.
- E. Attendance records for Voluntary Pre-Kindergarten or School Readiness may be used, if applicable.

## **9 Access and Child Safety**

### **9.1 Access to the Premises/Misrepresentation**

- A. Child care personnel must allow access to the entire premises of the home to inspect for compliance with family day care home and large family child care home minimum standards pursuant to s. 402.311, Florida Statute. Child care personnel must not interfere with or prevent the licensing authority from copying records, photographing or recording a location/activity on the premises as documentation for the inspection.
- B. Access to the home also includes access by the parent, legal guardian, and/or custodian, to their child(ren) while in care.
- C. Pursuant to s. 402.319, Florida Statute, it is a first-degree misdemeanor to make any misrepresentation, by act or omission, regarding the licensure or operation of a family day care home or large family child care home to a parent or guardian who has a child placed in the home, or is inquiring as to placing a child in the home, or to a representative of the licensing authority, or to a representative of a law enforcement agency, including, but not limited to, any misrepresentation as to:
  - 1. The number of children at the family day care home or large family child care home;
  - 2. The part of the family day care home or large family child care home designated for child care;
  - 3. The qualifications or credentials of child care personnel;
  - 4. Whether a family day care home or large family child care home complies with the screening requirements of s. 402.305, F.S.; or
  - 5. Whether child care personnel have the training as required by s. 402.305, F.S.

### **9.2 Child Safety**

- A. Acts or omissions that meet the definition of child abuse or neglect provided in Chapter 39.201, F.S. or Chapter 827, F.S., constitute a violation of the standards in Sections 402.301-.319, F.S. Failure to perform the duties of a mandatory reporter pursuant to Section 39.201, F.S., constitutes a violation of the standards in Sections 402.301-.319, F.S.
- B. Child care personnel must appropriately interact with children to foster a healthy, safe environment that will encourage the child's physical, intellectual, motor, and social development. Interactions with children that are aggressive, demeaning or intimidating in nature are strictly prohibited.