

Child Care Facility Handbook



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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-22.001, Florida Administrative Code.

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1 Introduction

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.

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 signifying 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.

“**Before-School and After-School site**” refers to a program, regardless of location, that provides child care for children who are at least 5 years old and are enrolled in and attend a kindergarten program or grades one and above during a school district’s academic calendar year. This is limited to programs that provide care only before and after the recognized hours of a district’s school day and on teacher planning days, holidays, and intercessions that occur during the school district’s official academic calendar year.

“Begin training for child care personnel” refers to a candidate’s commencement of at least one of the child care training courses listed in section 402.305(2)(e)1, F.S. within the first 90 days of employment in the child care industry.

“Birth Through Five Child Care Credential” is equivalent to a child development associate credential, pursuant to 402.305(3)(b), 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. 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.

“Caterer” means a duly-licensed food service business that provides ready-to-be-served meals to a provider. A copy of the license or permit must be in the child care facility and available for review by the licensing authority.

“Classroom/Room/Designated Space” means a learning space or room in which care is provided or classes are held and where learning can take place uninterrupted by outside distractions. The designation of space as a classroom must be reviewed and approved by the licensing authority prior to its use as such. If floor to ceiling walls are not present, the classroom walls must be defined by stable barriers, and must adhere to the requirements for such barriers as outlined in this section.

“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 actively watching and directing children’s activities within the same room or designated outdoor play area, during transportation, any activity outside of the facility, and responding to the needs of each child while in care.

“Director” means “operator” as defined in section 402.302(13), F.S., who is the on-site administrator or individual who has the primary responsibility for the day-to-day operation, supervision, and administration of a child care facility.

“Director Credential” is a Department-approved comprehensive credential that consists of educational and experiential requirements as referenced in section 4.7 of this handbook.

“Disposable” means an article intended by the manufacturers 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.

“Fall/Use zone” means the surface area under and around a piece of playground equipment onto which a child would be expected to land when falling from, or exiting, the playground equipment. The use zone must extend a minimum of 6 feet in all directions from the perimeter of the playground equipment, unless manufacturer specifications for safe usage requires less fall/use zone material.

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

“Food equipment” means all stoves, ranges, crock pots, microwaves, hoods, tables, counters, cabinets, refrigerators, freezers, sinks, dishwashing machines, and other items used in the preparation, reheating, and serving of food, with the exception of utensils.

“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. Foster grandparents are not counted in the staff-to-child ratio. Foster grandparents are required to have 100% attendance of the Department’s following training courses: Child Care Facility Rules and Regulations; Health, Safety, and Nutrition; Identifying and Reporting Child Abuse and Neglect; and Special Needs Appropriate Practices. This requirement can be 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. 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.

“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.

“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, the credential remains eligible for renewal.

“Initial Screening” means a full Level 2 screening which must include, at a minimum, 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 **recognized** by the Department and recognized by licensing authorities in at least five states that incorporates 120 hours of early childhood instruction, and 480 contact hours with children ages birth through eight years, and that 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, D.C. 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 recognized NECC programs may be obtained from the Department’s website at 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 educational 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.

“Potentially hazardous food” means any food that requires time-temperature control (refrigeration or hot holding) and contains ingredients such as milk, milk products, eggs, meat, poultry, fish, shellfish, cooked plant food (rice, beans, vegetables, and baked potatoes), tofu, other soy-protein products, mushrooms, cut melon, cut tomatoes, raw sprouts, and untreated garlic/oil mixtures.

“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.

“Professional contribution,” for the purpose of Director Credential renewal, demonstrates a dedication to early childhood or school-age education outside of the child care program responsibilities by engaging in activities that improve the field of early childhood or school-age education. Examples of such a contribution are: active

participation in an appropriate **professional** organization, publishing an article related to early childhood or school-age education, **presentation in the field of early childhood or school-age education at a conference**, teach courses through an educational institution, participate in an educational research project, completion of initial or renewal of a Florida-recognized accreditation program, serve as a validator or advisor for a Florida-recognized accreditation program, serve as an editor or reviewer for a professional journal or book, or active participation in rule development workshops.

“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.

“Sanitize” means the process of destroying or reducing organisms to a safe level. 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 Care Credential” is equivalent to a child development associate credential, pursuant to 402.305(3)(b), F.S., and offered through one of the following programs: Florida Child Care Professional Credential (FCCPC) and Florida Department of Education School-Age Professional Certificate (SAPC). Issuance of a School-Age Child Care Credential certifies successful completion of a Department-approved training program that consists of a minimum of 120 hours of school-age/early childhood instruction, 480 contact hours with school-age children, and a formal observation. Credentials must be documented on CF-FSP Form 5270, Florida Child Care Professional Credential Certificate. A copy of CF-FSP 5270 may be obtained from the Department’s website at www.myflfamilies.com/childcare. Active credentials are valid for five years from the date of issuance. A list of approved and recognized School-Age Child Care Credential programs may be obtained from the Department’s website at www.myflfamilies.com/childcare.

“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.

“Serving food,” means the provision of meals and snacks to children.

“Single-service articles” means any cups, containers, plates, straws, place mats, napkins, doilies, spoons, stirrers, paddles, knives, forks, wrapping materials and all similar articles that are constructed wholly or in part from paper, paperboard, molded pulp, foil, wood, plastic, synthetic or other readily destructible materials, and which are intended by the manufacturers to be for one-time, one-person use, then to be discarded.

“Sleeping” means the normal night time sleep cycle.

“Stable walls or barriers” refer to the boundaries that define a classroom space. Walls or barriers must be constructed in a sturdy manner and anchored together, or to the floor or walls. Walls or barriers must be stable and secure and must not pose a threat to falling over. The material for the barriers or walls must be non-hazardous and may not be made of materials such as see-thru or plastic curtains, fabric or mesh materials. The stable walls or barriers must be a minimum of 32 inches in height from the floor in classrooms for

children ages birth through 2, and must be a minimum of four (4) feet in height from the floor in classrooms for children ages 3 years and older. All classrooms must continue to meet fire code requirements for entrance(s) and exit(s) of the classroom.

“Tableware” means utensils used for eating, drinking and serving food, including forks, knives, spoons, bowls, and cups and serving dishes. Tableware may be either multi-use or single service.

“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.com.

“Unitary Surfacing Material” is a manufactured material used for protective surfacing in the fall/use zone that may be rubber tiles, mats, or a combination of energy absorbing materials held in place by a binder that may be poured in place in the play area and cures to form a unitary shock absorbing surface.

“Utensils” means pots, pans, ladles, pitchers, cutting boards, knives, or food containers used in the preparation, storage, transportation, or serving of food.

“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” as it relates to the Director Credential, is equivalent to a minimum of 1,040 hours of paid and/or nonpaid documented work experience as a child care facility director, co-director, assistant director, or as a lead teacher in a Head Start Program.

2 General Requirements

2.1 License Application Process 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 case, 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 **complete** 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 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 child care facility must not be used for any business or purpose unrelated to providing child care that can 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. A child care facility that utilizes any area that is subject to use by persons outside of the program must have exclusive control of such area when used by the program and provide effective measures to exclude individuals who do not meet screening and training requirements from that area.

2.2 Minimum Age Requirements

Child care personnel of at least 21 years of age must be in charge of the program and must be on the premises at all times during operating hours.

2.3 Ratios

The staff-to-child ratio, as established in Section 402.305(4), F.S., is based on primary responsibility for the direct supervision of children and applies at all times while children are in care.

2.3.1 Mixed Age Groups

- A. In groups of mixed age ranges, where children under one year of age are included, one **child care personnel** must be responsible for no more than four children of any age group, at all times.
- B. In groups of mixed age ranges, where children one year of age but under two years of age are included, one **child care personnel** must be responsible for no more than six children of any age group, at all times.

2.4 Supervision

2.4.1 General Supervision Requirements

- A. **Child care personnel** must position themselves in the outdoor play area so that all children can be observed and directly supervised.
- B. Child care personnel must be assigned to provide direct supervision to a specific group of children and be with that group of children at all times. Children must never be left **without child care personnel supervision** inside or outside the facility, in a vehicle, or at a field trip location.
- C. Supervision standards apply at all times away from the child care facility, including during field trips, outdoor play, and when picking up or dropping off children at designated locations, such as bus stops, school, or a child's home. For school-age children, personnel must know where the children are and what they are doing at all times and capable of responding to emergencies including when children are separated from their group.
- D. At all times, lighting must allow child care personnel to see and supervise children while in care.
- E. 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. Each child transported must be dropped at the designated

location as agreed upon by the provider and the custodial parent/legal guardian and released to an authorized individual.

- F. No person shall be an operator, owner, or employee of a child care facility while using or under the influence of narcotics, alcohol, or other drugs that impair a person's ability to provide safe care and supervision.
- G. In addition to the number of child care personnel required to meet the staff-to-child ratio, one additional adult must attend field trips away from the child care facility to help provide direct supervision. The individual could be a parent volunteer as long as that person is under direct and constant supervision of a screened and trained child care personnel.
- H. Children must receive supervision and care in accordance with their age and required needs and be accounted for at all times while bathing or toileting.
- I. 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.

2.4.2 Nap time Supervision

During nap time, child care personnel must be within sight and hearing of all the children. All other child care personnel required to meet the staff-to-child ratio must be within the building on the same floor and available to be summoned if needed to ensure the safety of the children. Nap time supervision does not apply to children up to 24 months of age, who must have direct supervision at all times.

2.4.3 Evening Supervision

During evening child care hours, child care personnel must remain awake at all times. While children are awake, direct supervision must be provided.

2.4.4 Meal time Supervision

- A. 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.
- B. Infants must be held for bottle feedings until they are developmentally ready to sit in an age appropriate chair with good head control. Children must not be left in high chairs or other types of feeding chairs other than during feeding times. The use of safety straps is required to prevent children from falling out of the high chair.
- C. There must not be any propped bottles. If a child cannot hold the bottle, child care personnel must hold the bottle during feeding. There must be no automatic feeding devices unless prescribed by a doctor and documentation is available in the child's file.

2.4.5 Water Activity Supervision

If a facility uses a swimming pool on site or during a field trip that is more than three feet deep or uses beach or lake areas for water activities, the following requirements must be met:

- A. There must be at least one certified lifeguard present and on duty. If the lifeguard is hired by the facility, this person is considered child care personnel and can also serve as the additional adult to meet the requirement in 2.4.1(G) above.

B. If the certified lifeguard is hired by the pool/beach/lake area this person is not considered child care personnel and does not count toward the staff-to-child ratio.

C. The following minimum staff-to-child ratios must apply while children are swimming or wading:

Age of child(ren)	Staff: Child Ratio
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

D. Constant and active supervision must be maintained when any child is in or around water. An adult should remain in direct physical contact with an infant at all times during swimming or water activities. During water activities, children ages 1 year up to five years must be within an arm's reach and in the sight of the supervising adult at all times.

E. Providers must ensure that all pools 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.

F. 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.

2.5 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 program, and vehicles used to provide transportation through a contract or agreement with an outside entity.

2.5.1 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;
- B. An annual physical examination which grants medical approval to drive, and valid certificate(s) of course completion for first aid training and pediatric cardiopulmonary resuscitation (CPR) procedures.

2.5.2 Transportation Log

- A. A log must be maintained for all children being transported in a vehicle or on foot away from **and/or to** the premises of the child care facility. The log must be retained on file at the facility for a minimum of 12 months and available for review by the licensing authority. The log must include:
1. Each child's name,
 2. The date and time of departure,
 3. Time of arrival at the destination,
 4. The signature of the driver (or in the case of travelling on foot, the signature of the child care personnel), and
 5. The signature of a second **child care personnel** or person(s) authorized by the provider to verify the transportation log and that all children have arrived safely and left the vehicle (if applicable).

Transportation By Foot

- B. Prior to transporting children **by foot**, the transportation log must be recorded with each child's name, the date and time of departure and initialed by **child care personnel** verifying that all children were accounted for and that the log is complete.
- C. Upon arrival at the destination by foot, the child care personnel must:
1. **Record the date and time the child(ren) arrived at the destination on the transportation log immediately,**
 2. **Conduct roll call, record, date and initial** verifying that all children were accounted for.
 3. The same must occur **prior to leaving that location and immediately upon returning to the facility premises. The first and second child care personnel must sign the log verifying all children are accounted for and log is complete at each destination.**
- D. **Upon arrival at the destination by foot, a second and different child care personnel must:**
1. **Witness roll call to verify all children are accounted for and that the log is complete.**
 2. **Sign and date the transportation log.**

Transportation By Vehicle

- E. **Prior to transporting children by vehicle**, the transportation log must be recorded with each child's name, the date and time of departure and initialed by child care personnel verifying that all children were accounted for and that the log is complete.
- F. Upon arrival at the destination by vehicle, 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 interior 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. Ensure that a second **child care personnel conducts a second visual sweep**, signs and dates the transportation log verifying that all children were accounted for, and that the log is complete.

5. If the provider contracts with an outside entity to provide transportation, then the provider must assign a child care personnel to perform the duties of the driver outlined above in numbers 1-3.

G. Upon arrival at the destination by vehicle, a second and different child care personnel must:

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

2.5.3 Emergency Care Plans

A. 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 child care facility.

B. 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 6.5, I.

C. 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.

D. 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.

E. 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.

2.5.4 Vehicle Requirements

For the purpose of this section, vehicles refer to those owned, operated or regularly used by the child care program, 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.
- C. When transporting children, staff-to-child ratios must be maintained at all times. The driver may be included in the staff-to-child ratio if he or she meets screening and training requirements.
- D. All child care facilities must comply with the insurance requirements found in Section 316.615(4), F.S. Documentation shall be maintained at the facility.
- E. The interior of vehicles, when being used to transport children, must 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.

2.5.5 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). Child safety restraint 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 restraints after a crash, 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.

- 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.
- E. 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.

2.6 Planned Activities

Each group or class must have a written and followed plan of scheduled activities posted in an easily seen location accessible to parents/guardians. The written plan must meet the needs of the children being served and must include alternate activities in case of bad weather. 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 also must include scheduled activities that:

- A. Promote emotional, social, intellectual, and physical growth;

- B. Do not have children left in confining devices such as car seats as an alternative to active play or adult/child interaction, supervision, or discipline;
- C. 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.
- D. Include both active and quiet play. Active play includes outdoor activities a minimum of twice per day, weather permitting.
- E. Include meals, snacks, and nap times, if appropriate for the age and the times children are in care.
- 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. An appropriate daily schedule provides flexibility and contains transition periods that help children move smoothly from one activity to another.
- H. Providers are encouraged to inform parents and legal guardians of their child's activities on a daily basis.
- I. Providers must implement program practices that promote consistency and continuity of care for infants and toddlers. Early care and education programs must 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.
- J. The program must make reasonable accommodations to the environment, planned activities and schedule so that children with special needs may participate.

2.7 Field Trip Activities

- A. Parents/guardians must be advised in advance of each field trip activity.
- B. The date, time, and location of the field trip must be posted in an easily seen location at least two working days prior to each field trip.
- C. Written parental permission must be obtained in the form of a general or event-specific permission slip.
- D. If special circumstances arise where notification of an event cannot be posted for two working days, individual permission slips must be obtained from the custodial parent or legal guardian for each child participating on the field trip.
- E. Emergency contact information for each child on the field trip, including walking field trips, must be in the possession of a child care personnel on the field trip.
- F. A telephone or other means of instant communication must be available to child care personnel responsible for children during all field trips, including walking field trips. Cellular phones, two-way radio devices, citizen band radios, and other means of instant communications are acceptable.
- G. Documentation of parental permission for field trips must be on file and maintained for at least 12 months from the date of the field trip.

2.8 Child Discipline

- A. The child care facility 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. The child care facility operators, employees, and volunteers must comply with written disciplinary and expulsion policies.
- C. Verification that the child care facility has provided the parent or guardian a written copy of the disciplinary and expulsion policies used by the program 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 left in the front office 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 **current** 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 child care facility:
 1. The use of corporal punishment/including, but not limited to:
 - a) Hitting, spanking, shaking, slapping, twisting, pulling, squeezing, or biting;
 - b) Demanding excessive physical exercise, excessive rest, or strenuous or bizarre postures;
 - c) Compelling a child to eat or have in his/her mouth soap, food, spices, or foreign substances;
 - d) Exposing a child to extremes temperature;
 - e) 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 restrict 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. **All programs 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 4.2.3.**

3 Physical Environment

Children are much more susceptible to the adverse effects of environmental factors, materials and toxicants. It is imperative that the child care environment is conducive to the healthy development of children.

3.1 General Health and Safety Requirements

- A. All child care facilities must be clean, in good repair, free from health and safety hazards and from evidence of, or presence of, vermin infestation. Indoor play areas must be inspected daily for basic health and safety and documented on a daily inspection log. Outdoor play areas must be inspected daily for basic health and safety. Any problems must be corrected before the play area is used by children. Documentation of the indoor play area inspection must be maintained for 12 months.
- B. It is the responsibility of the director/operator to ensure all areas and equipment of the facility are free from fire hazards, such as lint build up in heating and air vents, filters, exhaust fans, ceiling fans, and dryer vents. This includes grease build-up in ovens, stoves and food equipment.
- C. Animals must be properly vaccinated (if a vaccination is available for the specific animal), free from disease, and clean. Animals that are poisonous, venomous, aggressive, or pose a potential threat of harm to children in care are prohibited. Parents/guardians must be informed in writing of all animals on the premises. Notice may be provided by a conspicuously posted notice or bulletin, policy handbook, parent flier, or a statement included on the enrollment form. Current vaccinations records must be available for review by the licensing authority. No animal may freely roam the indoor/outdoor premises. Animals are prohibited in areas where food is prepared, stored, or served. If animals or birds are kept in classrooms, they shall be caged and cages must be kept clean.
- D. Strangulation hazards, strings, and cords long enough to encircle a child's neck such as those on toys and window coverings must not be accessible to children in care.
- E. Pursuant to Chapter 386.204, F.S., smoking is prohibited within the child care facility and in vehicles when being used to transport children. Smoking is prohibited in all outdoor areas, including on field trips, while children are in care. Owners/operators are to notify custodial parents and legal guardians, in writing, that smoking, including e-cigarettes and vaping, is prohibited on the premises of the child care facility.
- F. Design and construction of a new child care facility or modifications to an existing facility must meet the requirements of the applicable local governing body. The facility must provide current written approval from the local governing body to verify compliance with building requirements, which include construction of a new building; renovation of an older building; or after a natural disaster to properly evaluate and where necessary, remediate or avoid sites where's children's health could be compromised. The written approval must include assessments of:
 1. Potential air, soil, and water contamination on facility site and outdoor play areas;
 2. Potential toxic or hazardous materials in building construction, such as lead and asbestos; and
 3. Potential safety hazards in the community surrounding the site.
- G. 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,

- or sweeping. This does not include cleaning with hazardous materials or any cleaning which poses a risk of slipping or falling.
- H. Pest control must not take place while rooms are occupied by children. Child care providers 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.
 - I. 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.
 - J. Guardrails or protective barriers, such as baby gates, must 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.
 - K. 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.
 - L. Carbon monoxide detector(s) must be installed if 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.

3.2 Toxic/Hazardous Material/Firearms/Weapons

- A. All areas and surfaces accessible to children must be free from toxic substances, bio contaminants, and hazardous materials/equipment/tools, including power tools, plastic bags, matches, candles, lighters, etc.
- 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. These items, as well as knives, sharp tools, and other potentially dangerous hazards, must be stored in a locked area or must be inaccessible and out of a child’s reach at all times.
- C. Firearms and weapons, as defined in section 790.001, F.S., are prohibited within any building or upon any person located on the premises, excluding federal, state or local law enforcement officers.
- D. Narcotics, alcohol, or other impairing drugs/paraphernalia must not be present on the premises or in vehicles used by child care facility.

3.3 Rooms Occupied by Children

3.3.1 Lighting

- A. All areas of the facility must have lighting that provides adequate illumination and comfort for facility activities, a minimum of 20 foot-candles of lighting is required. Lighting must be sufficient to allow for adequate supervision and safe entering and exiting of the room.
- B. For reading, homework, painting and other close work areas, 50 foot-candles at the work surface is required.
- C. During naptime, lighting must allow child care personnel to visually observe and supervise children.

3.3.2 Windows and Screens

When the windows or doors are open for more than entering/exiting purposes, all buildings must have and maintain screens to prevent entrance of any insects or rodents. Screens are not required for open-air classrooms and picnic areas.

3.3.3 Temperature and Ventilation

- A. An inside temperature of 65 to 82 degrees Fahrenheit must be maintained at all times.
- B. Adequate ventilation must be maintained in all areas of the facility, in particular in areas where arts and crafts are conducted, and during any cleaning, sanitizing, or disinfecting procedure, to prevent children and child care personnel from inhaling harmful or potentially toxic fumes.

3.4 Licensed Capacity

3.4.1 Licensed Capacity

- A. The capacity, as calculated by the licensing authority, must be posted in a conspicuous location within each room.
- B. The licensed capacity of a child care program is determined by the following factors:
 - 1. Indoor floor space
 - 2. Outdoor square footage
 - 3. Sewer/septic capacity (as determined by Environmental Health)
 - 4. Number of toilets/wash basinsLicensed capacity is determined by the most restrictive of these factors.
- C. The total number of children in care on-site and while on field trips may never exceed the facility's licensed capacity.

3.4.2 Indoor Square Footage/Usable Floor Space

- A. A child care that had a valid license on October 1, 1992 must have a minimum of 20 square feet of usable indoor floor space for each child. This provision is not affected by a change of ownership as long as the program remains continuously licensed at the original site. A child care facility that did not hold a valid license on October 1, 1992 and seeks approval to operate as a child care facility must have a minimum of 35 square feet for each child.
- B. Usable indoor floor space refers to space available for indoor play, classroom, work area, or nap area.
- C. To determine overall facility capacity, 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 and designated food preparation areas, 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 facility capacity.
- D. Each room routinely used as a classroom must provide the minimum 35 square footage of usable indoor floor space per child.
- E. Shelves or storage for toys and other materials will be considered as usable indoor floor space if accessible to children.
- F. Where infants are in care, they must have open indoor floor space outside of cribs and playpens. The space used for play may be the same space used for

cribs and play pens, if the cribs and play pens can be moved to allow for open floor space.

3.4.3 Multipurpose Rooms

- A. Space that is used as a common dining area or for large group assemblies/activities is included in the usable indoor floor space for purposes of determining overall facility capacity.
- B. Common area (i.e., multiple purpose rooms or dining rooms) square footage may not be counted in such a manner as to expand the capacity of individual rooms in the facility.
- C. Square footage per child and room capacity are determined on a room-by-room basis.
- D. While a common area is being used for dining or specific large group assemblies/activities (special events), the applicable 20- or 35- square foot requirement of usable indoor floor space does not apply, although supervision and ratios must still be maintained. This means that for special events, the overall room capacity may be greater than it would be under normal use; however, the facility must maintain minimum square footage per child in accordance with the local fire authority requirements.
- E. Common area square footage may not be counted toward the facility's overall capacity unless the space is used regularly, and other classroom capacity requirements are not exceeded.

3.4.4 Outdoor Square Footage

The play area must be sufficient and safe to allow freedom of movement without collisions among active children. Children benefit from being outside as much as possible, and it is important to provide sufficient outdoor space to accommodate them.

- A. There must be a minimum of 45 square feet of usable, safe, and sanitary outdoor play area per child, one year of age and older. At a minimum, the outside play area must be able to accommodate one-half of the licensed capacity of the program.
- B. For the purposes of a licensed urban child care facility, an additional minimum of 45 square feet of usable indoor play space for 25% of the licensed capacity shall be substituted for outdoor play space. The urban child care facility must provide this additional indoor space with equipment that provides physical activity appropriate to the age of the children.
- C. Based on the outdoor square footage, the total number of children using the play area may not exceed the outdoor capacity.
- D. For Indoor Recreational Facilities or facilities that provide only evening child care, outdoor play space is not required provided an open area within the existing indoor space is designated and available for play that promotes the development of gross motor skills.

3.5 Outdoor Play Area

- A. The outdoor play area must be clean and free from litter, nails, glass and other hazards.
- B. The outdoor area must be designed to allow child care personnel to clearly see children while playing on all equipment.
- C. The outdoor play area must provide shade. Shade may be provided by trees, buildings, or structures.

- D. Children must not come into contact with any surface or equipment which poses a burn risk.
- E. The facility's outdoor play area must be fenced as required by local ordinances to prevent access by children to all water hazards within or adjacent to outdoor play areas, such as pools, ditches, retention ponds, and fish ponds.
- F. The outdoor play area must have adequate fencing or walls a minimum of 4 feet in height. Fencing, including gates, must be continuous and must not have gaps or opening larger than 3 ½ inches that would allow children to exit the outdoor play area. The base of the fence must remain at ground level and be free from erosion or build-up to prevent inside and outside access by children or animals. These areas must have at least two exits, with at least one being remote from the buildings. 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.

3.6 Napping/Sleeping Requirements

For the purposes of these requirements, "sleeping" refers to the normal night-time sleep cycle, while "napping" refers to a brief period of rest during daylight or early evening hours.

3.6.1 Bedding and Linens

Each child in care must be provided safe and sanitary bedding to be used when napping or sleeping. Nap bedding is not required for school-age children; however, the program must provide an area for children that choose to rest.

- A. Sleep bedding includes beds, cribs, or mattresses. Air and foam mattresses are prohibited.
- B. If children are sleeping overnight in the facility, child care personnel must ensure accepted bedtime routines are practiced, such as brushing teeth and washing face and hands.
 - 1. Toothbrushes, towels, and wash cloths may not be shared.
 - 2. Toothbrushes must be stored so that they cannot touch each other.
- C. Nap bedding includes sleep bedding, cots, playpens, play yards or floor mats. Air and foam mattresses are prohibited.
- D. Floor mats must be at least one-inch thick and covered with an impermeable surface.
- E. Bedding must be appropriate for the child's size.
- F. Linens, if used, must be washed at least once a week and more often if soiled or dirty. Linens used by more than one child must be washed in between usage. Linens must be provided when children are sleeping, and pillows and blankets must be available. For children under the age of one, please follow the requirements outlined in section 3.6.4.
- G. 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. All bedding and linens must be thoroughly cleaned and sanitized at least once a week, and before use by another child.
- H. Bedding and linens shall not be stored in the bathroom, unless stored in cabinets.
- I. No double or multi-deck cribs, cots, or beds may be used.

3.6.2 Nap/Sleep Space

- A. Each child care program must include a designated area where each child can sit quietly or lie down to rest or nap.
- B. When not in use, napping space and indoor floor space may be used interchangeably as indoor floor space.
- C. A minimum of 18 inches must be maintained around individual napping and sleeping spaces. A maximum of two sides of a napping or sleeping space may be against a solid barrier, such as the wall. The solid side of a crib does not meet the requirements for a solid barrier.
- D. Napping and sleeping spaces must not be under furniture or against furniture that creates a hazard.
- E. Napping and sleeping areas must not be in exit areas. All exits must remain clear in accordance with fire safety requirements.

3.6.3 Crib Requirements

Children up to one year of age must be in a crib or playpen/play yard with sides for napping. Crib sides must be secured while there is an infant in the crib. Bar spacing must not exceed two and three-eighths inches. Cribs or playpen/play yards must meet the 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.

3.6.4 Safe Sleep

- A. 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 or playpens/play yards **used for infants** must have tight fitted 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.
- B. When napping or sleeping, young infants who are not able to roll over must be positioned on their backs and on a firm surface to reduce the risk of Sudden Infant Death Syndrome, unless an alternate position is authorized 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 must be on file at the facility. 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.
- C. 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.

3.7 Restrooms and Bath Facilities

- A. Each child care facility must provide and maintain bathroom facilities that are easily accessible, and at a height usable by the children. Platforms may be used if they are safely constructed and have an impervious surface that can be easily cleaned and sanitized.
- B. Facilities must have a sufficient number of toilets and sinks for the number of children being served. For facilities having from one to fifteen children, there must be at least one toilet and one sink. There must be at least one additional toilet and sink for every 30 children thereafter. For design and construction of a new child care facility or modification to an existing facility, the program must submit copies of permits obtained to do the work or proof that the permit was satisfied according to the city/county local jurisdiction.
- C. If only diapered infants are in care at the facility, then one toilet and two sinks per 30 infants is required.
- D. Potty chairs, if used, shall be in addition to the toilet requirements, and must be cleaned and sanitized or disinfected after each use.
- E. Bathrooms must not open directly into an area where food is prepared. A toilet facility may open directly into an area used by children where food is served, such as into a classroom where tables/chairs have multiple uses.
- F. Children must receive supervision and assistance as required by their age and **developmental** needs. They must be accounted for at all times while bathing and toileting.
- G. Every facility must have at least one portable or permanent bath facility available for bathing children. The bath facility must be in good operation, clean and must be sanitized or disinfected after each use.
- H. Running water, soap, trash receptacles, toilet paper, and disposable towels or hand-drying machines that are properly installed and maintained must be available and within reach of children using the bathroom.
- I. Each toilet and sink must be maintained in good operating condition, cleaned and sanitized or disinfected as needed, but at least once per day. **Sinks utilized for teeth brushing activities/procedures by the children must be sanitized prior to the activity occurring.**

3.8 Fire Safety and Emergency Preparedness

To ensure the safety of children in care, facilities are required to receive yearly fire inspections by a certified fire inspector, and they must perform monthly drills/exercises to practice fire, inclement weather and lockdown procedures. Frequent practice of emergency procedures will facilitate a calm and competent reaction in response to an actual emergency, should it occur.

3.8.1 Operable Phone

There must be at least one operable corded telephone that is neither locked nor located at a pay station that is available to all child care personnel at all times during the hours of operation.

3.8.2 Fire Safety

- A. Unless statutorily exempted, all child care facilities must conform to state standards adopted by the State Fire Marshal, Chapter 69A-36, F.A.C., Uniform Standards for Life Safety and Fire Prevention in Child Care Facilities. 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. If the program

is granted a fire inspection exemption by the local fire inspection office, the exemption must be documented and maintained on file at the program.

- B. Fire extinguishers with a minimum rating of 2A:10BC must be properly installed, serviced and maintained with current inspection tags at all times.
- C. The distance to the nearest extinguisher shall not be more than 75 feet from rooms occupied by children. A fire extinguisher must be present in **vehicles used to transport children and** areas where food is prepared.
- D. Automatic range-top fire suppression systems are required in the kitchen for facilities that deep fry food. Suppression hood systems must be maintained and inspected by a certified inspector. A copy of the current and approved annual inspection notating compliance with the Florida Fire Prevention Code as adopted in Chapter 69A-60, F.A.C, must be on file with the licensing authority.

3.8.3 Exit Areas

The exits must be clearly marked, identifying the path to safety in case of an emergency, at all times during the operation of the child care facility. The exits must not be blocked at any time.

3.8.4 Fire Drills

- A. During the facility's license year, fire drills utilizing the alarm system, **approved by the local fire authority**, must be conducted monthly at various dates and times when children are in care.
- B. When the facility's approved fire alarm alert system is activated or initiated, all adults and children must evacuate the facility.
- C. A current attendance record **and parent contact information** must accompany **child care personnel** out of the building 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 using an alternate evacuation route,
 - 2. One fire drill during napping/sleeping times, and
 - 3. One fire drill in the presence and at the request of the licensing authority. This drill will be coordinated with the operator or designee.

3.8.5 Emergency Preparedness

- A. The operator must develop a written emergency preparedness plan that includes, at a minimum, procedures to be taken by the facility during a fire, evacuation, relocation, shelter in place, lockdown, and inclement weather (for example: hurricanes, tropical storms or tornadoes), and to facilitate parent/guardian reunification onsite and offsite. The plan must describe how the facility will notify and update parents/guardians, as well as, meet the needs of all children, including children with special needs or chronic medical conditions, during and following an emergency event. A current attendance record/classroom rosters **and parent contact information** must accompany **child care personnel** during the drill or actual emergency and must be used to account for all children. Daily classroom attendance rosters must be used to

account for all children once gathered in a safe space after exit and upon return to the program.

- B. Lockdown and inclement weather drills shall be conducted a minimum of one time each per operating year when children are in care and the documentation of these drills must be maintained for 12 months from the date of the drill. A lockdown or inclement weather drill may substitute for one monthly fire drill. Substitutions for fire drills may not occur more than three times within the licensure year. Documentation of this substitution must be maintained for 12 months from the date of the drill.
- C. The operator must maintain and post in an easily seen location a written record of emergency preparedness drills showing the type of drill, date conducted, number of children and child care personnel in attendance, and time taken for all individuals to complete the drill.
- D. Documentation of conducted fire and emergency preparedness drills must be available at the time of inspection. Documentation produced after the inspection will not be used to meet the licensing standard or corrective action requirements.
- E. The operator must prepare and post an emergency evacuation plan in each room of the facility, excluding restrooms, including a diagram of safe routes by which the personnel and children may exit in the event of fire or other emergency requiring evacuation.
- F. A facility that chooses to operate using an alternate power source, such as a generator, must have the power source 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 facility must install and maintain a carbon monoxide detector.

3.8.6 After a Fire, Man-made, or Natural Disaster

After a fire, man-made, or natural disaster, the operator must notify the licensing authority within 24 hours of operational status in order for the licensing authority to ensure health standards are being met for continued operation.

3.8.7 Emergency Procedures

Facilities must have a procedure for responding to situations when an immediate emergency response is required. A contingency plan for emergency or disaster situations needs to be in place when it may not be possible to follow standard emergency procedures. Emergency procedures must be posted and readily available. All providers and child care personnel must be trained to manage in an emergency.

A. The facility 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 facility.

3.9 Food Preparation/Food Service

3.9.1 Food Preparation Area

A food preparation area is a designated room, such as a kitchen, or a designated space in a facility not normally used or accessible to the children in daily operations for indoor play, classroom, work or nap spaces, and not included when calculating usable indoor floor space.

- A. A food preparation area is required for facilities that choose to prepare food in a manner consistent with the definition of “preparation of food”. Specific requirements for the food preparation area include:
 1. Ventilation provided either by mechanical or natural means to provide fresh air and control of unpleasant odors, such as a fan, vent, or open window with a screen.
 2. Smooth, nonabsorbent food contact surfaces with no unsealed cracks or seams. Food-contact surfaces are surfaces of equipment, countertops, utensils, etc., that food comes into contact with during food preparation.
 3. Food equipment maintained and stored in a sanitary manner and out of the reach of children.
 4. Shielded lighting.
 5. Nonabsorbent and easily-cleaned walls, flooring, and floor covering.
 6. Easily cleanable and replaceable ceiling in the event of water and other damage, mildew or mold.
 7. A separate handwashing station with hot running water, a minimum of 100 degrees Fahrenheit. The handwashing station must include a sink with running water and drainage, soap, trash can, and disposable towels or hand-drying machines that are properly installed and maintained. A handwashing sink shall not be used for any purpose other than handwashing. Handwashing stations must include posted signs visible to **child care personnel** and children demonstrating proper handwashing technique. Portable sinks may not be used for dishwashing or food preparation. If a portable sink is used for handwashing in the food preparation area, hot water must be provided.
 8. Leak-proof, non-absorbent containers covered with a tight-fitting lid for all food waste stored inside the facility. The container must be emptied, cleaned, and sanitized or disinfected daily.
 9. A food preparation area shall be clean and free of dust, dirt, food particles, and grease deposits.
- B. **Child care personnel**, while working in the food preparation area, must wear proper head covering, such as a hair net or hat. To prevent contact with ready-to-eat foods, **child care personnel** must use clean disposable gloves, utensils, or similar items in the food preparation area.
- C. For safety, children must not be present in the food preparation area when meals and snacks are prepared unless being supervised or participating in a cooking activity.

3.9.2 Food 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.

Facilities choosing to prepare food must have a designated space for food storage within the designated food preparation area or in a room not calculated as part of indoor floor space, and in an area not used for diapering. Off-site food storage is permissible only if the site of storage is a licensed child care facility under the same ownership that includes a food preparation area that meets licensing standards.

- A. 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.
- B. Stored food must be consumed or discarded on or before the expiration dates listed by the manufacturer.
- C. 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.
- D. Opened packages of perishable or leftover food items must be properly covered or sealed in containers or bags, labeled with the date, and properly stored and discarded within seven calendar days.
- E. Opened packages of dried goods must be properly covered/sealed, properly stored, and discarded according to the manufacturer's recommended date or if the quality of the food has been compromised.
- F. Refrigerators/freezers:
 - 1. An accurate thermometer designed to measure cold storage temperature 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.
 - 2. Food may be frozen prior to the expiration date, but when thawed, it must be labeled with the date it was removed from the freezer and discarded within seven calendar days.
 - 3. Frozen food must be labeled by date and type noted below and stored according to the following table:

Food Item	Months
Bacon and sausage	1 to 2 months
Casseroles	2 to 3 months
Frozen dinner and entrees	3 to 4 months
Ham, hot dogs, lunch meats	1 to 2 months
Meat, uncooked	4 to 12 months
Meat, uncooked ground	3 to 4 months
Meat, cooked	2 to 3 months
Poultry, cooked	4 months

3.9.3 Food Safety

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.

- A. 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.
- B. If a child care facility provides food to children in care, it must provide nutritious meals and snacks of a quantity and quality to help meet the daily nutritional needs of the children. 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. Copies of the USDA MyPlate dieting guidelines, incorporated by reference in 65C-22.001(7)(t), F.A.C. In addition, meals and snacks must contain at a minimum the meal and snack patterns shown for infants and children in the Child Care Food Program Meal Patterns which are incorporated by reference in 65C-22.001(7)(r) and (s), F.A.C.
- C. 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/windpipe. Food for infants must be cut into pieces ¼ inch or smaller, food for toddlers must be cut into pieces ½ inch or smaller to prevent choking. This applies to all food, even food provided by parents/guardians.
- D. If a facility chooses to provide food to children directly or by contract with an outside source, such as a caterer, the food must be free from spoilage and handled in a sanitary manner at all times. The facility must have adequate equipment available to maintain food safety.
 - 1. Meat, poultry, fish, dairy products, and processed foods must have been inspected under the United States Department of Agriculture requirements.
 - 2. No raw milk or unpasteurized juice may be served without the written consent of the parent or legal guardian.
 - 3. No home-canned food may be served.
 - 4. No homegrown eggs may be served.
 - 5. Recalled food items must be discarded and removed from the facility.
 - 6. All raw fruits and vegetables must be washed thoroughly before being served or cooked.
 - 7. To prevent food from becoming potentially hazardous, hot foods must be maintained at a temperature of 135 degrees Fahrenheit or above, and cold foods must be maintained at temperature of 41 degrees Fahrenheit, or below.
 - 8. Foods that comprise meals included on a facility's menu may not be prepared or partially prepared outside of the facility unless prepared by a caterer or a licensed child care facility under the same ownership that includes a food preparation area that meets licensing standards.

9. Food must be thoroughly cooked and/or reheated according to the following table:

Food	Minimum Internal Temperature
Fruits, Vegetables, Grains, and Legumes	135° F
Roasts (Fresh Beef, Pork and Lamb)	145° F (with a 3-minute rest time)
Fish	145° F
Eggs	Cook until yolk and white are firm
Egg dishes	160° F
Ground meats (beef, pork, and lamb) and fresh ham (raw)	160° F
Poultry- whole, parts, or ground	165° F
Leftovers	165° F
Foods cooked in microwave	165° F
Sauces, gravy, soups, casseroles	165° F

- E. If a facility chooses to provide or make available food to children in care from an outside source, such as a caterer, or a licensed child care facility under the same ownership that includes a food preparation area that meets licensing standards, or as the result of a learning activity provided by a child care program, such as a garden, it is the responsibility of the provider to ensure all food intended for consumption by a child in care is free from spoilage and contamination and safe for human consumption.
1. A log must be maintained for all prepared meals being transported into the facility. The log must be retained for a minimum of 12 months. The log must include the delivery date, time of arrival, quantity and types of food, verification by the recipient of adequate temperatures of food, and the name and signature of the recipient. The facility shall not accept food that is not at the appropriate holding temperature.
 2. If food delivered by an outside source does not meet licensing standards, the facility must have an alternate plan for meals.
 3. Parents and legal guardians must be advised in advance of each food-related activity, such as special occasions and learning activities that include food consumption. Written parental permission may be obtained in the form of a general or specific permission slip. Documentation of parent permission for food activities must be maintained for a minimum of 12 months from the date of each activity.
- F. If a facility chooses not to provide meals and snacks, arrangements must be made with the custodial parent or legal guardian to provide nutritional food for the child. In the event that a child's parent fails to provide nutritious meals/snacks, the program must provide supplemental food items to complete the child's meal.
- G. 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 must be maintained in the child's file and followed. If the custodial parent or legal guardian notifies the program of any known food allergies, written

documentation must be maintained in the child's file for as long as the child is in care. Special food restrictions must be shared with **child care personnel** posted in an easily seen location **that is not readily visible by parents or non-child care personnel** and followed.

- H. Meal and snack menus must be planned, written, dated, and posted at the beginning of each week in an easily seen place, accessible to the parents/**guardians**. Any menu substitutions must be noted on the menu. A generalized menu of possible snack choices for programs that receive food donations is acceptable. All meals and snacks prepared outside of the facility's kitchen or designated food preparation area, such as catered food, must be listed along with the source. Daily meal and snack menus must be maintained for a minimum of **12** months for licensing purposes. Operators who participate in the USDA Food Program must keep menus in accordance with the Department of Health and USDA requirements.

3.9.4 Dishwashing and Sanitization

For facilities that prepare food, non-disposable food equipment, tableware, and utensils utilized for food preparation must be properly cleaned by pre-rinsing or scraping, washing, rinsing, sanitizing, and air drying. If the child care facility lacks adequate dishwashing and sanitation described in this section for dishes, equipment and utensils, only disposable single-use items may be used. All single service items must be discarded after each use. Food equipment, tableware and utensils used to prepare food must be washed and sanitized on-site except when a caterer is used, and the caterer is responsible for dishwashing as evidenced by a written agreement. Dishwashing and sanitization must be accomplished by one of the following:

- A. A dishwasher with a sanitizing cycle.
 - 1. The dishwasher must use heat or chemical injection for sanitization.
 - 2. If chemical sanitization is used, the wash water temperature must be set at a minimum of 120 degrees Fahrenheit, and the rinse water must be maintained at 75 degrees Fahrenheit.
 - 3. Automatic sanitizing dispenser must be properly installed and maintained.
 - 4. A test kit or other device that accurately measures the concentration of the sanitizing solution must be available and used to confirm appropriate concentration of solution during one full cycle per day.
 - 5. If hot water is used for sanitization, the dishwasher must achieve a temperature of 160 degrees Fahrenheit on the surface of the equipment/dishes/utensils being washed.
 - 6. The facility must have a means for measuring the required temperature either by an irreversible registering temperature indicator (heat strip) or an external temperature display built into the machine.
- B. An installed three compartment sink, or an installed two-compartment sink with a non-stationary or portable compartment receptacle.
 - 1. Installed compartment sinks may be used to wash produce and to fill cooking pots and pans with water when not in use for dishwashing.
 - 2. Sinks must be sanitized before and after each use.
 - 3. The first compartment must be used for washing; the second compartment must be used for rinsing; and the third compartment must be used for sanitizing.

4. If only an installed two-compartment sink is available, the second compartment must be used for rinsing and a non-stationary or portable compartment receptacle must be available and used to sanitize.
- C. Chemical Sanitization.
1. If chemical sanitization is used, an exposure time of at least 7 seconds is required for a chlorine solution of 50 mg/L that has a pH of 10 or less and a temperature of at least 75 degrees Fahrenheit.
 2. If other sanitizers are used, the manufacturer instructions must be strictly followed.
 3. A test kit or other device that accurately measures the concentration of the sanitizing solution must be available and used to confirm appropriate concentration of solution during each use.
- D. Hot water sanitization.
- If hot water is used for sanitizing, equipment/dishes/utensils must be immersed for a period of at least one-half minute in hot water at a temperature of 170 degrees Fahrenheit or above. A thermometer designed to measure the water temperature must be available and used to confirm the appropriate temperature of the hot water during each use.

3.9.5 Food Handling

- A. Bottles and sippy cups provided by the facility must be washed, rinsed, and sanitized between each use and do not have to be labeled.
- B. Bottles and sippy cups brought from home shall be individually labeled with the child's first and last name and shall be returned to the custodial parent or legal guardian daily.
- C. Milk and food must not sit out for longer than 15 minutes prior to the beginning of the meal to avoid contamination and spoilage. Food must not be served to children at more than 110 degrees Fahrenheit. Allow time for food to cool before serving to children that does not exceed 15 minutes.
- D. Child care personnel, while distributing snacks and serving food, must use disposable gloves, utensils, or similar items to prevent skin contact with food.
- E. Food provided by parents/guardians must be properly 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.

3.9.6 Breastmilk, Infant Formula, and Food

- A. Breastmilk and formula must be handled in a sanitary manner at all times and according to manufacturer's instructions and instructions by parents/guardians. 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 in 65C-22.001(7)(v), F.A.C.
- B. The provider must make sure all formula and food brought from home are labeled with the child's first and last name. The provider is responsible for the label; therefore, if the label is not completed by the parent, child care personnel must put the label on when the formula or food is received.
- C. Breastmilk or infant formula provided for a specific infant by a parent or guardian should 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.

- D. Prepared bottles must be placed in the refrigerator immediately and used within 24 hours.
- E. Previously opened baby food jars must not be accepted at the center. If food is fed directly from the jar by the caregiver, the jar can be used for only one feeding and the remainder discarded.
- F. Providers must 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.
- 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.

3.9.7 Bottle Warming

For optimum digestion, breastmilk and infant formula should be served at body temperature.

- A. Bottle warming devices and crock pots, including cords, must be kept inaccessible to children at all times.
- B. Devices must be maintained on the lowest possible temperature setting and must be secured in such a way as to prevent them from tipping over, splashing, or spilling.
- C. Any bottle warming device that has a water reservoir must be emptied, washed, and refilled each day.
- D. Bottled breast milk, infant bottles, and formula must not be heated in the microwave.
- E. Heated bottles and foods must be tested before feeding to ensure heat is evenly distributed and to prevent injury to children.
- F. A bottle can only be warmed once. A warmed bottle cannot be returned to the refrigerator or re-warmed.
- G. 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 in the bottle or container provided.

3.9.8 Drinking Water

- A. Clean, sanitary drinking water shall be readily accessible in indoor and outdoor areas, throughout the day. On hot days, bottle fed infants may be given additional breastmilk or formula mixed with water 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 physician. For the purposes of providing clean, sanitary drinking water, sink/water fountain combinations are prohibited if the

handwashing sink is used for hygiene procedures after toileting or diaper changing.

- B. A licensed child care facility with a sink/water fountain combination in existence on September 16, 2019, will be allowed to continue to use the sink as long as the child care facility remains continuously licensed at the site occupied, notifies the Department within 90 days of the date stated above of the sink usage and acknowledges by signing a statement that they are aware of the dangers of contamination and if it is proven by the Department of Health or other non-Department expert that contamination of the combination sink or a component of the combination sink caused illness/sickness and/or death of a child, they will be subject to relevant violations, up to and including a Class 1 violation, and all corresponding enforcement action(s). The usage of the sink/water fountain combination shall not be affected by any change in the ownership of the site. If the provider seeks to replace the sink, the provider will be required to replace it with a non-combination sink.

3.10 Sanitation

3.10.1 Handwashing

Child care personnel and children must wash their hands thoroughly with soap and running water, dry, and follow personal hygiene procedures for themselves and while assisting others. Examples of activities when handwashing is required include but are not limited to: before and after eating, immediately following outdoor play, after toileting, following the use of any cleaners or toxic chemicals, before and after administering medication, and during food preparation and snack distribution.

- A. **Child care personnel** and children must follow the Centers for Disease Control guidelines for handwashing incorporated by reference in 65C-22.001(7)(u), F.A.C.
- B. The use of hand sanitizers does not substitute for handwashing. However, in areas away from the facility where no running water is available, hand sanitizers may be used. Examples of such places are field trips, nature trails or picnic areas where running water is not readily available.
- C. **Child care personnel** with open wounds and/or injury that inhibits handwashing, such as casts, bandages, or braces, must not prepare food.
- D. Situations or times that children, **child care personnel**, and/or **volunteers** must perform hand hygiene must be posted in all food preparation, diapering, and toileting areas.

3.10.2 Diapering Requirements

- A. When children in diapers are in care, a hand-washing station that includes a sink with running water, soap, trash receptacle, and disposable towels or hand drying machines that are properly installed and maintained shall be provided in the room or in an adjoining area which opens into the room.
- B. Hands must be washed and dried thoroughly after each diapering or toileting procedure, and all surfaces that have been touched must be cleaned and sanitized or disinfected to prevent the spread of germs.
- C. Handwashing sinks must not be used for food service preparation, dishwashing, or food clean up.

- D. The diaper changing area must be physically separated from the food preparation, food service, and feeding area.
- E. When children in diapers are in care, there must be a diaper changing area with an impermeable surface that is cleaned and sanitized or disinfected after each use.
- F. Children must be directly attended at all times when being diapered or when changing clothes. Child care personnel must not leave children unattended on a table or countertop. A safety strap or harness must not be used on the diaper changing table/surface.
- G. Items unrelated to diaper changing shall not be stored in the diaper changing area nor shall they be placed on the diaper changing table.
- H. There must be a supply of clean diapers, clothing, and linens at all times.
- I. When diapers, clothing or linens that are being used become soiled or wet, they are to be changed immediately, and properly disposed.
- J. Soiled or wet disposable diapers must be disposed of in a plastic lined, securely covered container that is not accessible to the children. The container must be emptied, cleaned and sanitized or disinfected, at least, daily.
- K. Soiled cloth diapers must be emptied of feces in the toilet and soiled or wet cloth diapers shall be placed in a securely covered container that is not accessible to the children. The container must be emptied, cleaned and sanitized or disinfected, at least, daily.
- L. Diaper changing procedure must be posted in the changing area and followed to protect the health and safety of children and child care personnel.

3.11 Indoor Equipment

Equipment, materials, furnishings, and play areas should be sturdy, safe, and in good repair. Provider should monitor the Consumer Product Safety Commission (CPSC) recommendations for use of equipment. Walls, ceilings, floors, furnishings, equipment, toys, and other surfaces should be suitable to the location and the users. They should be maintained in good repair, free from visible soil and clean. Equipment and furnishings must be arranged to allow direct supervision of children by child care personnel from all areas within a room/play area. Bookshelves, televisions, and other heavy furnishings must be stable and secured as to not pose a threat of falling over. In efforts to prevent children from climbing to dangerous heights or enabling them to reach hazardous items, chairs and other furnishings must be placed away from cabinets and shelves. The program should make accommodations to the program environment and schedule so that children with special needs may participate.

- A. A child care facility must make available toys, equipment, and furnishings suitable to each child's age and development and of a quantity for each to be involved in activities.
- B. Toys, equipment, and furnishings must be safe and maintained in a sanitary condition following a routine schedule of cleaning, sanitizing and disinfecting. 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. Facilities 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, drinking fountains, 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.

- C. Facilities must provide age appropriate seating for the number of children eating meals and snack at one time.
- D. Moveable or non-stationary indoor climbing structures require padding for landing. Permanent or stationary playground equipment installed indoors must meet the same requirements for installation and use as outlined in the Outdoor Equipment section 3.12 B, C, D, E, F and I.
- E. Bath tubs, buckets, diaper pails, and other open containers of water must be emptied immediately after use.

3.12 Outdoor Equipment

- A. A child care facility 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.
- B. All playground equipment must be securely anchored, unless portable or stationary by design, in good repair, maintained in safe and sanitary condition, and placed to ensure safe use by the children. Maintenance must include inspections conducted every month of all supports above and below the ground and of all connectors and moving parts. Documentation of maintenance inspections must be maintained for 12 months.
- C. All equipment, fences, and objects on the facility's premises shall be free from sharp, broken and jagged edges, and properly placed to prevent overcrowding or safety hazards in any one area.
- D. Permanent or stationary playground equipment must have a fall/use zone that extends a minimum of 6 feet in all directions from the perimeter of the equipment. All types of ground cover must be maintained to provide resilience and reduce the incidence of injuries to children in the event of falls.
 1. If the ground cover in place is loose ground cover (such as, but not limited to: mulch, shredded rubber chips, or sand) a minimum of 6 inches in depth is required in the use zone. Asphalt, concrete, hard packed dirt, hay, grass or leaves are unsuitable for use in the use zone area.
 2. If the ground cover in place is a unitary playground surface, then the unitary surfacing materials must be installed, maintained, or replaced according to manufacturer's instructions. Unitary surfaces must be tested to and comply with ASTM F1292; documentation of test data must be retained at the facility and available for licensing to review.
 3. If the play area was approved by the Department prior to January 1, 2020 and does not meet the 6-foot fall/use zone requirement, then the facility must submit a written notification, including photographs and layout of the play area, to the Department prior to or on April 1, 2020, notifying its intention to continue to operate using the prior approved play area. However, if the permanent or stationary playground equipment is moved or replaced then the standard would apply, and 6 feet of use zone must be provided. Any new equipment added would be required to have the 6 feet of use zone in all directions from the perimeter of the equipment.
- E. Equipment used for climbing should not be placed over, or immediately next to, hard surfaces such as asphalt, concrete, dirt, grass, or flooring covered by carpet or gym mats not intended for use as surfacing for climbing equipment.
- F. All equipment used in the outdoor play area must be constructed and maintained according to manufacturer's recommendations and allow for water drainage. Any open containers with water must be emptied immediately after use, i.e. pots, toys, or other equipment that collects water.
- G. Sandboxes must be covered at the end of each day. The covering used must prevent access to the sandbox by animals.

- H. Wading pools, including inflatable water slides with a landing area where water collects, are prohibited.
- I. The provider shall maintain manufacturer's instructions on file electronically or in paper format for outdoor playground equipment purchased or installed on or after January 1, 2020, and/or have available for licensing to review upon request.

4 Training

Training requirements of this section do not apply to child care personnel who do not work directly with the children such as cooks, book keepers, and janitors who are considered "other personnel". If at any time "other personnel" fill in for classroom **child care personnel** and are in direct care of the children, training is required.

Child care personnel in compliance with the school-age requirements shall be considered in compliance with the child care personnel training requirements.

4.1 Beginning Training

Child care personnel including volunteers who work 10 hours or more per month must begin training within 90 days of employment in the child care industry and successfully complete Department's training within 12 months from the date training begins. **Training taken prior to employment in the child care industry does not constitute "begin training". The "begin training" timeframes begin at the time of employment in the child care industry.** Training completion may not exceed 15 months from the date of employment in the child care industry in any licensed Florida child care facility. 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. The child care program is responsible for obtaining training documentation from child care personnel.

4.2 Training Requirements

4.2.1 Mandated Introductory Training

Child care personnel must successfully complete 40 hours of child care training as evidenced by successful completion of competency examinations offered by the Department or its designated representative with a weighted score of 70 or better. Child care personnel who successfully completed the mandatory 40-hour Introductory Child Care Training prior to January 1, 2004 are not required to fulfill the competency examination requirement.

A. Part I Courses (30 Hours)

Child care personnel must complete all of the following:

- ✓ Child Care Facility Rules and Regulations
- ✓ Health, Safety and Nutrition
- ✓ Identifying and Reporting Child Abuse and Neglect
- ✓ Child Growth and Development

- ✓ Behavioral Observation and Screening

B. Part II Courses (10 Hours)

Child care personnel must also complete 10 hours of the following Part II courses:

- ✓ Special Needs Appropriate Practices (10 hours), or
- ✓ Understanding Developmentally Appropriate Practices (5 hours) and one of the following courses:
 1. Infant and Toddler Appropriate Practices (5 hours)
 2. Preschool Appropriate Practices (5 hours)
 3. School- Age Appropriate Practices (5 hours)

4.2.2 Early Literacy Training

Pursuant to Section 402.305(2)(e)5., F.S., all child care personnel must 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. Early literacy training must be completed within 12 months of date of employment in the child care industry. Proof of completion may be documented on a certificate of course completion, classroom transcript, or diploma. Child care personnel must complete one of the following:

- A. One of the Department's online literacy courses available on the Department's website.
- B. One of the Department's approved literacy courses. A list of these courses can be obtained from the Department's website. (No additional courses will be approved by the Department.)
- C. One college level early literacy course (for credit or non-credit) if taken within the last five years.

4.2.3 Safe Sleep/ Shaken Baby Syndrome Training

All child care personnel who work in a facility 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 facility. For child care personnel to satisfy this requirement the training must be accomplished through one of following methods: Department's Health Safety and Nutrition course, Safe Sleep course, or the Early Learning Florida's Safe Sleep Practices. Documentation of training must be maintained on the Department's training transcript in the child care personnel record.

4.2.4 First Aid and Cardiopulmonary Resuscitation (CPR)

- A. One child care personnel with current and valid certificate(s) of course completion for first aid training and one child care personnel with current and valid certificate of course completion for pediatric cardiopulmonary resuscitation (CPR) procedures must be present at all times that children are in care. The same child care personnel may satisfy both requirements. Documentation of first aid training must be kept on file and available for

licensing to review.

- B. By December 31, 2021, the facility shall maintain the following number of child care personnel with the CPR certification and first aid training that are on site at the facility at all times children are in care. For child care personnel to count to meet requirement in the below chart, they shall be child care personnel assigned to provide direct supervision of children in care:

Total number of child care personnel in direct supervision of children to meet staff to child operating ratios:	Total minimum number of child care personnel with Pediatric CPR certification on site when children are present:	Total minimum number of child care personnel with first aid training on site when children are present:
0-25	3	3
26-50	4	4
51-75	5	5
76-100	6	6
101+	7	7

A Director, on site when children are present, with pediatric CPR certification and first aid training may qualify as one of the child care personnel for purposes of meeting the above requirements.

Documentation of pediatric cardiopulmonary resuscitation (CPR) certification and first aid training must be kept on file and available for licensing to review. Child care personnel satisfying the certification and training requirements shall be present at all times that children are in care at the facility, and at least one child care personnel with the CPR certification and first aid training on field trips which includes all activities away from the program, and during all transportation activities.

- C. Removed.
- D. Certificates of course completion are valid based on the time frames established by each first aid training and CPR certification program, not to exceed three years.
- E. CPR courses must include on-site, instructor- based skill assessments by a certified CPR instructor. Documentation of completion of the online course and on-site assessment must be maintained at the facility and available for review by the licensing authority.

4.2.5 Fire Extinguisher Training

All child care personnel shall be trained in the use and operation of a fire extinguisher, at each facility they are employed, within 30 days of date of hire. The facility must maintain documentation that all child care personnel have completed training.

4.2.6 Transportation Training

All child care personnel participating in the transportation of children must have training regarding guidance on safe transportation practices prior to participating in transportation of children. For child care personnel to satisfy this requirement the training must be accomplished through the Department’s Transportation Safety course or the Early Learning Florida’s Precautions in Transporting Children course. Child care personnel working at a facility currently providing transportation must

complete training by April 1, 2020. Documentation of training must be maintained on the training transcript in the child care personnel file.

4.2.7 Annual In-Service Training

Upon successful completion of the 40-hour introductory training requirements, child care personnel must complete a minimum of 10 clock-hours or one CEU of in-service training annually during the state's fiscal year beginning July 1 and ending June 30.

- A. The annual 10 clock-hours or one CEU of in-service training concentration on children ages birth through 12 must be completed in one or more of the following areas (college level courses will be accepted):
1. Health and safety, including universal precautions, prevention of infectious diseases, sudden infant death syndrome, emergencies due to food and allergic reactions, shaken baby syndrome, use of safe sleep practices, administration of medicine, emergency preparedness, and handling of hazardous materials;
 2. Pediatric CPR;
 3. First Aid (may be taken to meet the in-service requirement only once every two years);
 4. Nutrition;
 5. Child development - typical and atypical;
 6. Child transportation and safety;
 7. Behavior management;
 8. Working with families;
 9. Design and use of child-oriented space;
 10. Community, health and social service resources;
 11. Child abuse;
 12. Child care for multilingual children;
 13. Working with children with disabilities in child care;
 14. Safety in outdoor play;
 15. Literacy;
 16. Guidance and discipline;
 17. Computer technology;
 18. Leadership development/program management and child care personnel supervision;
 19. Age-appropriate lesson planning;
 20. Homework assistance for school-age care;
 21. Food safety training;
 22. Developing special interest centers/spaces and environments;
 23. Other course areas relating to child care or child care management;
 24. Any of the online courses offered through the Department's child care website.
- B. Documentation of the in-service training requirement must be recorded on CF-FSP Form 5268, Child Care In-Service Training Record, which is incorporated by reference in 65C-22.001(7)(i), F.A.C., and included in the child care facility's personnel records. CF-FSP Form 5268 may be obtained from the Department's website at www.myflfamilies.com/childcare. A new in-service training record is required each fiscal year. The in-service training records for the previous two fiscal years must also be maintained at the child care facility for review by the licensing authority.

- C. All child care personnel employed in the industry beyond 15 months, who change employment from one child care program to another during the fiscal year must complete the annual in-service training requirement.
- D. Child care personnel not in compliance with the annual in-service training requirement described in this section must complete the remaining in-service training requirement 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.

4.3 Break in Service

- A. In the event an individual leaves the child care industry in compliance with training requirements and returns to the industry either at the same or a different child care facility, he or she will be given 90 days to comply with any new training requirements established during the gap in employment in the child care industry.
- B. In the event an individual leaves the child care industry not in compliance with the training requirements and returns to the industry either at the same or a different child care facility, he or she must comply with the training requirements described in this section, as well as any new training requirements that may have been added during the gap in employment in the child care industry prior to re-employment.

4.4 Training Exemptions

4.4.1 Competency Examination Exemptions

Child care personnel have one opportunity, if they choose, to exempt from one or more of the Department's Introductory Child Care Training courses prior to attending training by achieving a weighted score of 70 or better on the corresponding competency examination(s).

4.4.2 Educational Exemptions

- 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 educational qualifications:
 1. Associate 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 6th 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.

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

4.4.3 Part II Exemption

Child care personnel employed at the same child care facility prior to October 1, 1992, with no break in employment with the same employer, are exempt from completing Part II of the child care training.

4.5 Documentation of Training

The Department's training transcript is the only acceptable verification of successful completion of the Department's training, **early literacy courses and school-age training documentation.**

- A. A copy of the Department's training transcript may be obtained from the Department's website at www.myflfamilies.com/childcare.
- B. A copy of the training transcript must be included in each **child care personnel's** record maintained at the child care facility.
- C. **Early literacy courses and school-age training documentation must be uploaded into the Florida Pathways (Registry), which may be accessed from the Department's website at www.myflfamilies.com/childcare.**
- D. 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, child care facilities will be out of compliance for the mandatory training standard.

4.6 Staff Credentials

Pursuant to Section 402.305(3), F.S. a licensed child care facility must have a minimum of one credentialed **child care personnel** for every 20 children.

- A. A credentialed **child care personnel** is defined as a child care professional who has been issued a Staff Credential Verification documented on the individual's Training Transcript. 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. 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. 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. A School-Age FCCPC will not be accepted to meet the minimum staff credential requirements for Voluntary Pre-Kindergarten (VPK).

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.

4.6.1 Calculating Number of Credentialed Personnel Necessary

- A. Child care facilities with 19 or fewer children or that operate less than eight hours per week are not subject to the staff credential requirement.
- B. For every 20 children, a child care facility must have one child care personnel who meets the staff credential requirement. Based on this formula, child care facilities with 20-39 children must have one credentialed **child care personnel**, facilities with 40-59 children must have two credentialed **child care personnel**, and so on. The licensing authority will calculate the number of credentialed personnel required based on daily attendance.
- C. Child care personnel meeting the staff credential requirement must work at the facility a minimum of 20 hours per week, excluding naptime. A credentialed **child care personnel** must be on-site during all operational hours for those facilities that operate 20 hours or less per week.
- D. Volunteers who work at the facility a minimum of 20 hours per week and meet the credential requirement may be included in calculating the credential ratio.
- E. Children who are five years old, and who are enrolled in and attend a kindergarten program or grades one and above are excluded from the credential ratio.
- F. An individual with an inactive credential is ineligible to be counted as a credentialed **child care personnel** until the credential is renewed or the individual meets one of the qualifications listed in above.

4.6.2 Training Documentation

A copy of the Training Transcript for each credentialed **child care personnel** must be maintained on-site at the child care facility, in the employee personnel file **and available** for review by child care licensing staff. Child care facilities must maintain written documentation of credentialed personnel's work schedules for a period of **12** months. Examples of written documentation are employee time sheets, personnel work schedules, and employment records.

4.6.3 Staff Credential Renewal

- A. 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.

- B. A staff credential awarded for formal education qualifications is always active and does not need to be renewed.
- C. 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.
- D. A staff credential awarded for Employment History Recognition Exemption is always active and does not need to be renewed.

4.7 Director Credential

Section 402.305(2)(g), F.S., requires a child care facility to have a credentialed director. Every applicant for a license to operate a child care facility or a license for a change of ownership of a child care facility must document that the facility director has an active Director Credential prior to issuance of the license.

An applicant for the Director Credential must meet the requirements referenced in CF-FSP Form 5290, Florida Child Care and Education Program Director Credential and Renewal Application, which is incorporated by reference in 65C-22.001(7)(k), F.A.C. CF-FSP Form 5290 may be obtained from the Department's website at www.myflfamilies.com/childcare. All applications and documentation will be verified, and, if complete, the credential will be issued by the Department or its designated representative on CF-FSP Form 5252, Florida Child Care and Education Program Director Credential, which is incorporated by reference in 65C-22.001(7)(g), F.A.C.

- A. Each child care facility must have a credentialed director who is on-site a majority of hours, excluding weekends and evening hours that the facility is in operation. Documentation of majority of hours must be maintained and available for review by the licensing authority.
- B. CF-FSP Form 5252, Florida Child Care and Education Program Director Credential, must be maintained at the facility for review by the licensing authority. A Director Credential, as documented on CF-FSP Form 5252, Florida Child Care and Education Program Director Credential, is active for five years from the date of issuance.
- C. An individual may not be the director of child care facilities that overlap in the hours of operation.
- D. An individual with an inactive Director Credential is ineligible to be the director of a child care facility.
- E. Every applicant for a license to operate a child care facility or a license for a change of ownership of a child care facility must document that the facility director has an active Director Credential prior to issuance of the license.
- F. Child care facility owners must notify the licensing authority within five working days of when the facility loses a credentialed director or when there is a change of director.
 1. The licensing authority will then issue a provisional license for a period not to exceed six months for any facility without a credentialed director.
 2. The provisional license will have an effective date of the first day the facility was without a credentialed director.

4.7.1 Director Credential Requirements for Before-School and/or After-School Sites Only

- A. A credentialed director may supervise multiple before-school and after-school sites for a single organization as follows:
 - 1. Three sites regardless of the number of children enrolled, or
 - 2. More than three sites if the combined total number of children enrolled at the sites does not exceed 350. In calculating the total number of children enrolled, the number of children in the before-school and after-school program shall be calculated and viewed as separate programs.
 - 3. In counties where the public school district has included four-year old children in public before-school and after-school programs, the school district may participate in the multi-site supervision option. Public school districts which serve four-year-old children in the before-school and after-school programs are required to have a credentialed **child care personnel** pursuant to the credentialing requirements in order to accommodate the four-year-old children.
- B. When a credentialed director is supervising multiple sites, the individual left in charge of the site during the director's absence must meet the following requirements:
 - 1. Be at least 21 years of age;
 - 2. Have completed the approved 40 clock-hour Introductory Child Care Training approved by the Department; and
 - 3. Have completed the Department's Part II specialized training course, Special Needs Appropriate Practices, or completed a minimum of eight hours of in-service training in serving children with disabilities; or
 - 4. Have completed the Department's 10-hour School-Age Appropriate Practices specialized training module or the 5-hour Understanding Developmentally Appropriate Practices course and the 5-hour School-Age Appropriate Practices course.

4.7.2 Director Credential Renewal

- A. To maintain an active Director Credential at either level, candidates must complete the renewal section of the CF-FSP Form 5290, Florida Child Care **and Education Program** Director Credential and Renewal Application, which may be obtained from the Department's website at www.myflfamilies.com/childcare.
- B. A Director Credential renewal, as documented on the Department's training transcript is active for five years from the date of issuance. The completed renewal application, including all required documentation, may be submitted to the Department for review and issuance of **a Florida Child Care and Education Program Director Credential** no earlier than one year prior to the end of the active period of the Director Credential. The Director Credential renewal date is determined by the end date of the active period.
- C. If a renewal application is received after the end of the active period for the Director Credential, the **Florida Child Care and Education Program** Director Credential **and** Renewal 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.

4.8 Training Providers

4.8.1 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.

4.8.2 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.

- A. The operational status of a training provider that has been approved to 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. Compliant 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 “Compliant/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-compliant 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.

4.8.3 Director Credential Training Providers

The Department is responsible for ensuring the approved “Overview of Child Care Management” courses offered through accredited vocational-technical schools, community colleges, colleges, and universities meet the requirements for the Director Credential coursework. A list of approved “Overview of Child Care

Management” courses may be obtained from the Department’s website at www.myflfamilies.com/childcare.

- A. Currently approved vocational-technical schools, community colleges, colleges and universities offering “Overview of Child Care Management” courses must submit an annual attestation for Director Credential coursework by September 30 to the Department or its designated representative. Failure to submit a completed annual attestation shall result in revocation of course approval. Compliant “Overview of Child Care Management” training providers must ensure availability of all training program files to the Department upon request and be subject to both informal and formal audits. Upon receipt of each provider’s proof of compliance, the Department will designate a program as one of the following:
 1. Compliant, if the approved program has met the requirements and is currently accepting students.
 2. Compliant/Non-Operational, if the program has met the requirements but is not currently accepting students.
 3. Noncompliant, if the program has failed to maintain the requirements or has voluntarily decided to no longer accept students. Noncompliant training providers of Overview of Child Management courses will not be accepted by the Department and will be removed from the approved list.
- B. The Department will accept a Director/Administrator Credential/Certificate that has been issued by another state agency which authorizes an individual to be a director of a child care facility in that state, subject to approval by the Department of Children and Families. Third party issuances of such credentials/certificates will not be accepted.
- C. Applications for “Overview of Child Care Management” course approval will no longer be accepted by the Department. Child care program administration courses offered for college credit may be reviewed for acceptance to meet the Overview of Child Care Management requirement.

5 Background Screening

5.1 Initial Screening

A screening must be conducted as a condition of employment. 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.
- 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 through the Clearinghouse upon completion of searches and results from other states, if applicable.
 - D. The employer/owner/operator must conduct employment history checks, 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.
 - E. The employer/owner/operator must send a request for a search of each state's criminal records if the individual has lived outside the state of Florida in the preceding five years. Visit www.myflfamilies.com/backgroundscreening, click on the National Records Request link to obtain instructions and forms to complete to submit a request for the 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. Once results are received, they must be forwarded to DCF Background Screening unit for review. The results may be faxed to: (850) 922-2895, emailed to: Background.screening@myflfamilies.com or mailed to: Department of Children and Families Background Screening Unit 1317 Winewood Boulevard, Building 6 Floor 3, Tallahassee, Florida 32399-0700. **If the previous state of residence participates in the National Fingerprint File (NFF) 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>.**
 - F. 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, 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.
 - G. 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, 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.
 - H. 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.
 - I. 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.
- J. 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.
- K. The employer/owner/operator must add child care personnel to their Employee/Contractor Roster in the Clearinghouse **within 10 days of** when the individual has received a child care eligible result and has been hired at the facility. Employer/owner/operator must add an end date for individuals on the Employee/Contractor Roster in the Clearinghouse within 10 days of the employment termination.
- L. The employer/owner/operator will receive an email notification if any employee on the Employee/Contractor Roster is arrested for a disqualifying offense. The employer/owner/operator is required to take appropriate action if an employee becomes disqualified from employment pursuant to s. 435.06, Florida Statutes.
- M. **If the facility is located in or adjacent to the home of the operator, then background screening documentation must be maintained for all household members. Household members aged 12 to 17 years must complete a Juvenile Records Check with FDLE.**

5.2 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 all child care personnel.
- 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. Child care personnel must be re-screened following a break in employment in the child care industry 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>]

6 Health Requirements

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 facilities 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 facility's exposure plan** regarding standard precautions before beginning to work and annually thereafter. Written documentation that **child care personnel have participated in the facility'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.**

6.1 Communicable Disease Control

- A. Children in care must be observed on a daily basis for signs of communicable disease.
- B. Any child, **child care personnel**, or other person in the child care facility suspected of having a communicable disease must be removed from the program or placed in an isolation area until removed. Such person may not return without medical authorization, or until the signs and symptoms of the disease are no longer present. If the local health department official or primary health care provider suspects that a child or child care personnel are contributing to the transmission of the illness, are 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 must not return until the health department or primary health care provider determines the risk of transmission is no longer present. Child care personnel who work in the food preparation area may not return until the signs and symptoms of the disease have not been present for 48 hours.
- C. A child's condition must be reported to the custodial parent or legal guardian. For children whose symptoms do not require exclusion, verbal or written notification to the parent/guardian at the end of the day is acceptable.
- D. Signs and symptoms of suspected communicable disease include:
 - 1. Severe coughing, causing a 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 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 communicable disease symptoms.
- E. A child identified as having head lice must not be permitted to return until the following day, and then only if treatment has occurred and been verified. Verification of treatment may include a product box, box top, empty bottle, or signed statement by a parent that treatment has occurred. The child care facility must treat areas, equipment, toys, and furnishings with which the child has been in contact.

6.1.1 Isolation Area

- A. Each facility must have a designated isolation area for a child who becomes ill while in care.
- B. Such space must be adequately ventilated, cooled, heated, and equipped with a bed, mat, or cot, and materials that can be cleaned and sanitized or disinfected easily.
- C. Linens are to be changed after each use and used linens must be kept in a closed container in the isolation area until cleaned.
- D. Disposable items must be kept in a closed container in the isolation area until thrown away.
- E. The isolated child must be within sight and hearing of **child care personnel** at all times. The child must be carefully observed at all times for worsening conditions.

6.1.2 Outbreaks

- A. Operators are required to notify the local county health department immediately upon any suspected outbreak of communicable disease and must follow the health department's direction.
- B. A suspected outbreak occurs when two or more children or **child care personnel** 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.

6.2 First Aid Kit Minimum Requirements

- A. At least one first aid kit must be maintained on the premises at all times. The kit(s) must be accessible to the child care **personnel** at all times and kept out of the reach of children. If the first aid kit is stored in the food preparation area, it must be stored in a manner to prevent contamination of food, food contact surfaces, or first aid supplies. First aid kits or supplies must be restocked after each use.
- B. A first aid kit must be accessible and available to child care **personnel** when children are participating on field trips, during transporting, and other activities away from the facility.
- C. Each kit must be kept in a closed container and labeled "First Aid" and must, at a minimum, include:
 - 1. Soap and hand sanitizer (to be used with supervision if hands are not visibly soiled and if no water is present),
 - 2. Adhesive bandages,
 - 3. Disposable, non-porous gloves,
 - 4. Cotton balls or applicators,
 - 5. Sterile gauze pads or rolls,
 - 6. Adhesive tape,
 - 7. Digital thermometer,
 - 8. Tweezers,
 - 9. Pre-moistened wipes,
 - 10. Scissors,
 - 11. Bottled water (for cleaning wounds or eyes), and
 - 12. A current resource guide on first aid and CPR procedures.

6.3 Emergency Telephone Numbers

- A. Emergency service telephone numbers must be posted on or near all telephones, including 911, ambulance, fire, police, poison control center, Florida Abuse Hotline, and the county public health department. Additionally, the address and directions to the facility must be posted with descriptions of major intersections and local landmarks.
- B. For life threatening injuries, the provider shall call 911 and then notify the parent.
- C. Custodial parents or legal guardians must be notified immediately if the event of any serious illness, accident, injury or emergency to their child, and their specific instructions regarding action to be taken under such circumstances must be obtained and followed.
- D. If the custodial parent or legal guardian cannot be reached, the facility owner or director will contact those persons designated by the custodial parent or legal guardian to be contacted under those circumstances and must follow any written instructions provided by the custodial parent or legal guardian on the enrollment form.

6.4 Accident/Incident Notification

- A. All accidents and incidents or unusual occurrences that are threatening to the health, safety, or welfare of a child that occur while the child is in care must be documented on the same day they occur.
- B. This documentation must be shared with the custodial parent or legal guardian on the date of occurrence.
- C. Documentation must include the name of the affected party, date and time of the occurrence, description of the occurrence, actions taken and by whom, and appropriate signatures of program child care personnel and the custodial parent or legal guardian. Program child care personnel signatures may include the director/child care personnel that witnessed the incident, who were involved in the incident, and/or responded to the child's needs.
- D. The documentation must be maintained for 12 months. 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.
- E. In the event of serious injury or death, the incident must immediately be reported to the licensing authority.

6.5 Medication

Child care programs are not required to give medication; however, if a program chooses to do so, it must comply with the following requirements:

- A. The child care program must have written authorization from the custodial parent or legal guardian to give prescription and non-prescription medications. This authorization must be dated and signed by the custodial parent or legal guardian and contain the child's name; the name of the medication to be given; and date, time and amount of the correct dosage to be given. 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 provider 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, shared with child care personnel and posted with the child's stored medication.

- C. Prescription and non-prescription medication brought to the child care facility by the custodial parent or legal guardian must be in the original container. Prescription medication must have a label stating the name and contact information of the physician and/or pharmacy, child's name, name of the medication, and medication directions. All prescription and non-prescription medication must be dispensed according to written directions on the prescription label or printed manufacturer's label and maintained at the appropriate temperature.
- D. In the event of an emergency, non-prescription medication that is not brought in by the parent or legal guardian can be dispensed only if the program has written permission from the parent or legal guardian to do so.
- E. Any medication given 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.
- F. The facility must maintain a record for each child receiving any medications that documents the full name of the child, the name of the medication, the date and time the medication was given, the amount and dosage, and the name and signature of the person who gave the medication. This record must be initialed or signed by the program personnel who gave the medication. The record must be maintained for a minimum of 12 months after the last day the child received the dosage.
- G. All medication must have child resistant caps, if applicable, and must either be stored in a locked area or must be out of any child's reach. If medication is stored in the food preparation area, it must be stored in a manner to prevent contamination of food, food contact surfaces, or medication.
- H. Medication that has expired or that is no longer being dispensed must be returned to the custodial parent or legal guardian or discarded.
- I. 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.
- J. Child care personnel must ensure sun safety for themselves and children under their supervision. It is recommended that infants younger than six months of age are kept out of direct sunlight, limiting sun exposure when ultraviolet rays are strongest. Sunscreen may only be utilized with written permission from parents/guardians. Manufacturer instructions must be followed.
- K. Use of diaper creams and insect repellent may only be utilized with written permission from parents/guardians. Manufacturer instructions must be followed.
- L. Sunscreen, diaper cream, and insect repellent do not need to be documented on the medication log unless prescribed by a physician.

7 Record Keeping

Each of the records described in this section must be maintained at the program location and must be available during the hours of operation for review by the licensing authority:

- A. A copy of all background screening clearance documents for the director and owner must be provided to the Department to be included in the Department's official licensing file.
- B. The following is a list of documentation that is required to be at the facility for review by the licensing authority:
 1. Transportation log must be retained for a minimum of 12 months.

2. Documentation of parental permission for field trips and food activities/special occasions must be retained for a minimum of 12 months.
3. Facility's written discipline and expulsion policies.
4. Daily attendance of children records must be maintained for a minimum of 12 months.
5. Written record of fire drills must be maintained for a minimum of 12 months.
6. Documentation of child care personnel that have met the first aid and pediatric and child cardiopulmonary resuscitation (CPR) certification requirement.
7. Posted emergency telephone numbers, the facility address, and directions to the facility.
8. Documentation of accidents/incidents must be maintained for 12 months from the date of the accident/incident.
9. Documentation of emergency preparedness plan drills must be maintained for 12 months from each drill.
10. Record for each child receiving medication must be maintained for a minimum of 12 months after the last day the child received the dosage.
11. Any child requiring a special diet shall have a copy of the physician's order, a copy of the diet, and a sample meal plan for the special diet as documentation in the child's file for as long as the child is in care. Documentation of physician prescribed automatic feeding device must be in the child's file for as long as the child is in care. Documentation of a physician's authorization permitting solid food to be fed to an infant younger than 4 months or in bottles or infant feeders to children with normal feeding habits must be maintained in the child's file for as long as the child is in care.
12. Documentation of known food allergies (if applicable) must be maintained for as long as the child is in care.
13. Daily meal and snack menus, including meal substitutions must be maintained for a minimum of 12 months.
14. Food Acceptance Log must be maintained for a minimum of 12 months.
15. Copy of license or permit for caterers.
16. If a caterer is used and is responsible for dishwashing food equipment, tableware and utensils used to prepare food, a written agreement must be available for licensing to review.
17. Documentation of emergency care plan, if applicable, must be maintained for as long as the child is in care.
18. Daily indoor inspection log must be maintained for a minimum of 12 months.
19. Documentation of monthly maintenance inspections for all supports above and below the ground, connectors and moving parts of playground equipment.
20. Documentation of carbon monoxide detector maintenance and testing, if applicable, must be maintained for a minimum of 12 months.
21. Any child requiring an alternate sleep position shall have documentation of a physician's authorization for an alternate napping/sleeping position and/or swaddling must be maintained in the child's file for as long as the child is in care.
22. Documentation of unitary surface materials tested to and complying with ASTM F1292, if applicable.
23. Documentation of fire extinguisher training for all child care personnel.
24. The Department's Training Transcript for each child care personnel as documentation of completion of introductory training, early literacy training (if applicable), school-age training (if applicable), safe sleep training (if applicable), and transportation training (if applicable).

25. Annual in-service training documented on CF-FSP Form 5268, Child Care In-Service Training Record for all child care personnel.
26. Documentation of medication administration training, if applicable.
27. Documentation of training on water safety devices (a ring buoy and rope, a rescue tube, or a throwing line and a shepherd's hook), if applicable.
28. Florida Certification of Immunization form or the Religious Exemption from Immunization form for each child in care.
29. A Student Health Examination form for each child in care.
30. A written exposure plan regarding universal safety precautions and documentation that child care personnel have been educated before beginning to work and/or participated in the facility's annual refresher education for the exposure plan.
31. Documentation of an annual vehicle inspection by a mechanic for any vehicle used to transport children in care, if applicable.
32. Documentation of insurance for vehicles used by the facility to transport children in care.
33. Documentation of credentialed personnel's work schedules for a period of 12 months.
34. If the facility provides transportation, the driver's personnel file must have documentation of driver's license and physical examination granting medical approval to operate a vehicle.
35. Documentation of each volunteer's hours must be maintained for a minimum of 12 months.
36. Documentation of background screening for all child care personnel, and household members, if applicable, must be on-site and available for review.
37. A complete employment application for each child care personnel employed at the facility.
38. A current child care application for enrollment, CF-FSP Form 5219 or equivalent, for each child enrolled at the facility.
39. Documentation from parent/guardian for receipt of Know Your Child Care Facility brochure, food and nutrition polices, Influenza Virus Guide to Parents brochure, and Distracted Adult brochure.
40. Written policy and procedures to identify and prevent shaken baby syndrome and abusive head trauma, if applicable.
41. 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.
42. A written emergency preparedness plan that includes procedures to be taken by the facility during a fire, evacuation, relocation, shelter in place, lockdown, and inclement weather; facilitating parent/guardian reunification onsite and offsite; notifying and updating parents/guardians; and meeting the needs of all children during and following an emergency event.
43. Written routine schedule for cleaning, sanitizing, and disinfecting equipment, materials, furnishings and play areas.
44. Documentation of the director working the majority of hours on-site at the facility.
45. Prescription and non-prescription medications that are used on an "as needed" basis require documentation on the authorization form to describe symptoms that would require the medication to be given.
46. A written plan of scheduled activities must be posted.
47. Written approval from the local governing body to verify compliance with building requirements, if applicable.

- 48. Written permission from parent or guardian authorizing child care personnel to administer medication, diaper cream, sunscreen, or insect repellent, if applicable.
- 49. Current vaccination records for any animals at the facility, if applicable.
- C. Copies of required records are acceptable for documentation. Original documents are the property of the party providing the information. Electronic records are acceptable for documentation as long as the records are available and accessible for review by licensing authority during an inspection.

7.1 Immunization Records

The child care facility is responsible for obtaining for each child in care a current, complete and properly executed Florida Certification of Immunization form Part A-1, B, or C, DH 680, which is incorporated by reference in 65C-22.001(7)(o), F.A.C., or the Religious Exemption from Immunization form, DH 681, which is incorporated by reference in 65C-22.001(7)(p), F.A.C., from the custodial parent or legal guardian. DH Form 680 and DH Form 681 may be obtained from the local county health department. Specific immunization requirements are included and detailed in the most current edition of the “Immunization Guidelines-Florida Schools, Child Care Facilities and Family Day Care Homes” as promulgated by the Florida Department of Health.

- A. 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.
- B. If the custodial parents or legal guardians fail to provide the documentation required above within 30 days of enrollment, the facility shall not allow the child to remain in the program. 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 must 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.
- C. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility as such records are on file at the school where the child is enrolled.
- D. If the custodial parents or legal guardians need assistance concerning these requirements, the facility shall refer them to the Department of Health or to the child’s physician.
- E. Medical records in this section are the property of the custodial parent or legal guardian and must be returned to them when the child withdraws from the facility. The medical records are transferable if the child attends another facility.
- F. 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 in 65C-22.001(7)(v), F.A.C.

7.2 Student Health Records

The child care facility is responsible for obtaining for each child in care a current, complete and properly executed Student Health Examination form DH 3040, which is incorporated by reference in 65C-22.001(7)(q), F.A.C. and may be obtained from the local county health department, the parent or legal guardian, or a signed statement by authorized

professionals that indicate the results of the components of the Student Health Examination form are included in the health examination.

- A. The Student Health Examination shall be completed by a person given statutory authority to perform health examinations.
- B. The Student Health Examination or the signed statement is valid for two years from the date the physical was performed. An up-to-date version must be on file for as long as the child is enrolled at the facility.
- C. If the custodial parents or legal guardians fail to provide the documentation required above within 30 days of enrollment, the facility shall not allow the child to remain in the program.
- D. School-aged children attending public or non-public schools are not required to have student health examination and immunization records on file at the child care facility as such records are on file at the school where the child is enrolled.
- E. If the custodial parents or legal guardians need assistance concerning these requirements, the facility shall refer them to the Department of Health or to the child's physician.
- F. Medical records in this section are the property of the custodial parent or legal guardian and must be returned to them when the child withdraws from the facility. The medical records are transferable if the child attends another facility.
- G. Any child who has or is at an increased risk for a chronic physical, developmental, behavioral or emotional condition and requires 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.

7.3 Enrollment Information

The facility operator shall obtain enrollment information from the child's custodial parent or legal guardian prior to accepting a child in 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 form that contains all the information required by the Department on CF-FSP Form 5219. CF-FSP Form 5219 may be obtained from the licensing authority or on the Department's website at www.myflfamilies.com/childcare.

- A. Enrollment information shall be kept on file, current and available for review by the licensing authority.
- B. The enrollment information shall include, in writing, permission for the facility 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.
- C. There shall be signed statements from the custodial parents or legal guardian that the child care facility has provided them with the following information:
 - 1. The Department's child care facility brochure, CF/PI 175-24, Know Your Child Care Facility, which is incorporated by reference in 65C-22.001(7)(m), F.A.C. This brochure may be obtained from the Department's website at www.myflfamilies.com/childcare. Local licensing agencies may use an equivalent brochure approved by the Department.
 - 2. The child care facility's written disciplinary and expulsion policies.
 - 3. The child care facility's food and nutrition policies that includes language on food safety and food allergens.

4. Annually, during the months of August and September, the child care facility must provide parents/guardians of children enrolled in the facility with information detailing the causes, symptoms, and transmission of the influenza virus. To assist providers, the Department developed a brochure, CF/PI 175-70, Influenza Virus, Guide to Parents, which is incorporated by reference in 65C-22.001(7)(n), F.A.C. and may be obtained from the Department's website at www.myflfamilies.com/childcare.
 5. Annually, in the months of April and September, the child care facility must provide parents/guardians of the children enrolled in the facility with information regarding the potential for distracted adults to fail to drop off a child at the facility 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.
- D. Enrollment information shall include parental/guardian consent for child care personnel to have access to child's records.

7.4 Personnel Records

Records must be maintained and kept current on all child care personnel, as defined by Section 402.302(3), F.S. These records shall be on-site, available for review by the licensing authority and must include:

- A. A complete employment application with the required statement pursuant to Section 402.3055(1)(b), F.S.
- B. Documentation of position and date of employment.
- C. CF-FSP Form 5337, Child Abuse & Neglect Reporting Requirements, which is incorporated by reference in 65C-22.001(7)(l), F.A.C., must be signed on or before hire date and annually thereafter by all child care personnel.
- D. Copies of training information and credentials as applicable.
- E. For the driver only: Florida driver's license and driver physical examination documentation. A copy of the driver's license and the physician certification, or another form containing the same elements of the physician certification, granting medical approval to operate the vehicle, and valid certificate(s) of course completion for first aid training, pediatric cardiopulmonary resuscitation (CPR) procedures, and background screening must also be maintained in the driver's personnel file.
- F. Prior to beginning volunteering in a child care facility, a CF-FSP 5217, Volunteer Acknowledgment which is incorporated by reference in 65C-22.001(7)(e), F.A.C., and may be obtained from the Department's website www.myflfamilies.com/childcare, must be completed and on file at the child care facility for the volunteer. Written documentation of volunteer hours must be maintained at the facility for a minimum of 12 months and available for review by the licensing authority.

7.4.1 Background Screening Documents

Background screening documentation must be maintained for all child care personnel as defined by Section 402.302(3), F.S., which includes household members if the facility is located in or adjacent to the home of the operator. Background screening documentation must be on-site and available for the licensing authority to review.

- A. Each personnel record must have a completed CF-FSP Form 5131, Background Screening and Personnel File Requirements, which is incorporated by reference in paragraph 65C-22.001(7)(b), F.A.C.

- B. 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 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.
- C. A copy of the eligible results, for the Level 2 screening, 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 1st and December 15th of 2016.
- E. A copy of each request made to out of state child abuse and neglect registries for individuals who 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 who lived outside the state of Florida in the preceding five years.
- G. A copy of all background screening clearance documents for the director and owner must be included in the Department's official licensing file or in accordance with the appropriate local licensing agency requirements.
- H. **A copy of the Juvenile Records Check with FDLE for any household members aged 12 to 17 years, if facility is located in or adjacent to home of the operator.**

7.5 Daily Attendance

Daily attendance of children must be taken and recorded accurately by the child care personnel, documenting the time when each child enters and departs the program.

- A. **Attendance devices used for the purposes of tracking attendance may be used, but personnel must ensure the accuracy of the documented attendance. Each classroom must have an attendance sheet/class roster for the group of children occupying that space. Attendance sheet/class roster must accompany the child care personnel and the group of children throughout the day should they leave the classroom.**
- B. The custodial parent or guardian may document the time when his/her child enters and departs the child care facility or program. However, child care facility personnel are responsible for ensuring that attendance records are complete and accurate.
- C. **REMOVED.**
- D. Attendance records must be maintained for a minimum of **12** months.
- E. Attendance records for Voluntary Pre-Kindergarten or School Readiness may be used, if applicable.

8 Access/Child Safety

8.1 Access

- A. A child care facility must provide the custodial parent or legal guardian access, in person and by telephone, to the child care facility during the facility's normal hours of operation or during the time the child is in care.
- B. The child care facility must not interfere with or prevent the licensing authority from copying records, photographing or recording a location or activity on the premises as documentation for the inspection.

8.2 Child Safety

- A. Acts or omissions that meet the definition of child abuse or neglect provided in Chapter 39, F.S. or Chapter 827, F.S., constitute a violation of the standards in section 402.301-.319, F.S., and will support imposition of a sanction, as provided in Section 402.310, F.S.
- B. Failure to perform the duties of a mandatory reporter pursuant to Section 39.201, F.S., constitutes a violation of the standards in Section 402.301-.319, F.S.
- C. 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.